

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

Bork 1



Section 1. Identifying Inform	nation		
Given Name (First Name) Christian	2. Surname (Last Name) Bork	3. Date 11-September-2013	
4. Are you the corresponding author?	✓ Yes No		
5. Manuscript Title Middelhavskost og hjerte-kar-sygdom			
6. Manuscript Identifying Number (if you ki	now it)		
Section 2. The Work Under C	onsideration for Publication		
Did you or your institution at any time rece	vive payment or services from a third party (government, co g but not limited to grants, data monitoring board, study d		
Section 3.	and to take a constant of the continuous and a continuous		
Place a check in the appropriate boxes of compensation) with entities as descr	in the table to indicate whether you have financial relibed in the instructions. Use one line for each entity; port relationships that were present during the 36 lest? Yes V No	add as many lines as you need by	
Section 4. Intellectual Prope	rty Patents & Copyrights		
	ned, pending or issued, broadly relevant to the work	☐ Yes ✓ No</th	

Bork 2



Section 5. Relationships not sovered above
Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Stud.med Christian Bork has nothing to disclose.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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Identifying information.

Enter your full name. If you are NOT the corresponding author please check the box "no" and a space to enter the name of the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the manuscript number and enter it.

2. The work under consideration for publication.

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3. Relevant financial activities outside the submitted work.

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4. Other relationships.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Jakobsen 1

Section 1. Identifying Information	mation	
1. Given Name (First Name) Marianne Uhre	2. Surname (Last Name) Jakobsen	3. Effective Date (07-August-2008) 28-August-2013
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Christian Bork
5. Manuscript Title Middelhavskost og hjerte-kar-sygdom		
6. Manuscript Identifying Number (if you k	know it)	

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)?

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

The Work Under Consideration for Publication						
Туре	No	Paid	Money to Your Institution*	Name of Entity	Comments**	

^{*} This means money that your institution received for your efforts on this study.

Section 3.

Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to submission.

Complete each row by checking "No" or providing the requested information. If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.

Relevant financial activities outside the submitted work

Jakobsen 2

^{**} Use this section to provide any needed explanation.



Relevant financial activities outside the submitted work						
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	

^{*} This means money that your institution received for your efforts.

Section 4.	Other relationships		
	elationships or activities that readers could perceive to ncing, what you wrote in the submitted work?	have influenced	, or that give the appearance of
	tionships/conditions/circumstances that present a pot wing relationships/conditions/circumstances are prese		
	nuscript acceptance, journals will ask authors to confi rnals may ask authors to disclose further information a		
	Show All Table Rows	SAVE	I

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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^{**} For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.



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Schmidt 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Erik Berg	rst Name)	2. Surname (Last Name) Schmidt	3. Date 11-September-2013
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name Christian Sørensen Bork
5. Manuscript Title Middelhavskost	e og hjerte-kar-sygdom		
6. Manuscript Ide	ntifying Number (if you kr	now it)	
Section 2.	The Work Under C	onsideration for Public	cation
any aspect of the s statistical analysis,	stitution at any time rece submitted work (including	vive payment or services from g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
of compensation clicking the "Add	the appropriate boxes in with entities as descr	in the table to indicate wh ibed in the instructions. Us port relationships that wei	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copyric	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Schmidt 2



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Dr. Schmidt has nothing to disclose.

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