

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.

1. Identifying information.

2. The work under consideration for publication.

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3. Relevant financial activities outside the submitted work.

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4. Intellectual Property.

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

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



| Information | |
|-----------------------------------|--------------------------|
| 2. Surname (Last Name) Hansen | 3. Date 27-March-2016 |
| or? 🖌 Yes 🗌 No | |
| ter opereret for kolorektalcancer | |
| | Hansen |

UFL-06-15-0556

Section 2. The Work Under Consideration for Publication

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

Are there any relevant conflicts of interest? Yes

✓ No

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Are there any relevant conflicts of interest? Yes 🗸 No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? 🗌 Yes 🖌 No



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Section 6. Disclosure Statement

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Dr. Hansen has nothing to disclose.

Evaluation and Feedback

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| Section 1. | Identifying Infor | mation | |
|---|---------------------------|----------------------------------|---|
| 1. Given Name (Fir Mads Radmer | rst Name) | 2. Surname (Last Name) Jensen | 3. Date 31-March-2016 |
| 4. Are you the cor | responding author? | Yes 🖌 No | Corresponding Author's Name Anne Fogh Hansen |
| 5. Manuscript Title PET/CT i opfølgn | | ereret for kolorektalcancer | |
| 6. Manuscript Ider UFL-06-15-0556 | ntifying Number (if you l | know it) | |

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|---|-----|
|---|-----|

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|--|---|--------------|-----|------|
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| Section 1. | Identifying Information | | |
|--|-------------------------|---|---|
| 1. Given Name (Fi Andreas | irst Name) | 2. Surname (Last Name Nordholm-Carstense | |
| 4. Are you the co | rresponding author? | Yes 🖌 No | Corresponding Author's Name Anne Fogh Hansen |
| 5. Manuscript Titl PET/CT i opfølgr | | pereret for kolorektalcanc | er |
| 6. Manuscript Ide UFL-06-15-0556 | ntifying Number (if you | know it) | |

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