

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.

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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

Ring 1



Section 1.	Identifying Inform	nation					
Given Name (Fin Hans Christian	rst Name)	2. Surname (Last Name) Ring	3. Date 16-December-2016				
4. Are you the cor	responding author?	✓ Yes No					
5. Manuscript Title Hidrosadenitis So	e uppurativa - En overset	sygdom					
6. Manuscript Ider	ntifying Number (if you kr	now it)					
Section 2.	The Work Under Co	onsideration 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							
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 publication . Are there any relevant conflicts of interest? Yes Vo							
Section 4.	Intellectual Proper	rty Patents & Copyrights					
Do you have any		ned, pending or issued, broadly relevant to the work	? ☐ Yes ✓ No				

Ring 2



Section 5. Relationships not covered above
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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Ring has nothing to disclose.

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Saunte 1



Section 1. Identifying Inform	ation						
1. Given Name (First Name) Ditte Marie Lindhardt	2. Surname (Last Name) Saunte	3. Date 15-December-2016					
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Hans Christian Ring					
5. Manuscript Title Hidrosadenitis Suppurativa – En overset	t hudsygdom						
6. Manuscript Identifying Number (if you kn	ow it)	-					
Section 2. The Work Under Co							
The Work Officer Co	onsideration for Public	a third party (government, commercial, private foundation, etc.) for					
any aspect of the submitted work (including statistical analysis, etc.)?	but not limited to grants, da	ta monitoring board, study design, manuscript preparation,					
Are there any relevant conflicts of intere	est?						
Section 3. Relevant financial	activities outside the s	ubmitted work.					
of compensation) with entities as descri	bed in the instructions. Us	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by e present during the 36 months prior to publication .					
Are there any relevant conflicts of interest? Ves No							
If yes, please fill out the appropriate info	ormation below.						
Name of Entity	Grant? Personal Nor	o-Financial Other? Comments					
Abbvie		✓ Congress travel grant					
Novartis		✓ Congress travel grant					
Abbvie		Advisory board					
Section 4. Intellectual Proper	ty Patents & Copyrig	phts					
Do you have any patents, whether plant							

Saunte 2



Section 5. Polationships not severed above
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Dr. Saunte reports non-financial support from Abbvie, non-financial support from Novartis, personal fees from Abbvie, outside the submitted work; .

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Theut Riis 1



Section 1.	Identifying Inform	nation					
1. Given Name (First Name) 2. Surname (Last Na Peter Theut Riis			3. Date 09-December-2016				
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Hans Christian Ring				
5. Manuscript Title Hidrosadenitis S	e uppurativa – En overse	t hudsygdom					
6. Manuscript Ide	ntifying Number (if you kr	now it)					
			_				
Section 2.	=1 W 1 U 1 C		**				
		onsideration for Public	a third party (government, commercial, private foundation, etc.) for				
	ubmitted work (including		ita monitoring board, study design, manuscript preparation,				
Are there any rel	Are there any relevant conflicts of interest?						
Section 3.	Relevant financial	activities outside the s	submitted work.				
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Are there any rel	evant conflicts of intere	est? Yes ✓ No					
	ı						
Section 4.	Intellectual Proper	rty Patents & Copyric	phts				
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No				

Theut Riis 2



Section 5. Relationships not severed above
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Dr. Theut Riis has nothing to disclose.

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Thorlacius 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fir Linnea	rst Name)	2. Surname (Last Name) Thorlacius	3. Date 16-December-2016			
4. Are you the corr	responding author?	Yes ✓ No	Corresponding Author's Name Hans Christian Ring			
Hidrosadenitis Su	e uppurativa – En overse uppurativa – En overse ntifying Number (if you kn	t hudsygdom				
	uppurativa – En overse					
Section 2.	The Work Under Co	onsideration for Public	ation			
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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Section 4.	Intellectual Proper	ty Patents & Copyri <u>c</u>	hts			
Do you have any			oadly relevant to the work? Yes V No			

Thorlacius 2



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Esmann 1



Section 1.	Identifying Inform	nation					
1. Given Name (First Name) 2. Surname (Last Name) Solveig Esmann			3. Date 09-December-2016				
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Nam	ne			
5. Manuscript Title Hidrosadenitis S	e uppurativa - En overset	t hudsygdom					
6. Manuscript Ider	ntifying Number (if you kr	now it)					
			_				
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Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work?	Yes ✓ No			

Esmann 2



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Section 1. Identifying Inform	ation					
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