

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.

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Pending: The patent has been filed but not issued **Issued:** The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether

earning royalties or not

Kvindebjerg Christophersen 1



Section 1. Identifying Inform	nation		
Given Name (First Name) Anette	2. Surname (Last Name) Kvindebjerg Christopher		Date 2-April-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Espen Jimenez-Solem	
5. Manuscript Title An Adverse Drug Event Manager facilit	ates spontaneous reporting	g of adverse drug reactions	
6. Manuscript Identifying Number (if you k	now it)		
		-	
Section 2. The Work Under C	onsideration for Public	ation	
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, da		
Section 3. Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should re Are there any relevant conflicts of inter-	ibed in the instructions. Us port relationships that wer	e one line for each entity; add	l as many lines as you need by
Section 4. Intellectual Prope	rty Patents & Copyrig	hts	
Do you have any patents, whether plan	ned, pending or issued, bro	oadly relevant to the work?	Yes 🗸 No



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Dr. Kvindebjerg Christophersen has nothing to disclose.

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Section 1.	dentifying Inform	ation	
1. Given Name (First Catrine	Name)	2. Surname (Last Name) Christensen	3. Date 18-April-2016
4. Are you the corres	ponding author?	Yes ✓ No	Corresponding Author's Name Espen Jimenez-Solem
5. Manuscript Title An Adverse Drug Ev	vent Manager facilita	tes spontaneous reportin	g of adverse drug reactions
6. Manuscript Identif	ying Number (if you kn	ow it)	
Section 2. T	he Work Under Co	onsideration for Public	cation
any aspect of the subs statistical analysis, etc	mitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3. R	elevant financial a	activities outside the s	submitted work.
Place a check in the of compensation) w clicking the "Add +'	e appropriate boxes in vith entities as descril	n the table to indicate who bed in the instructions. Us ort relationships that wer	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.	ntellectual Proper	ty Patents & Copyric	ghts
Do you have any pa	atents, whether planr	ned, pending or issued, br	oadly relevant to the work? Yes V No



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Dr. Christensen has nothing to disclose.

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Borgeskov 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi Hanne Baekke	rst Name)	2. Surname (Last Name) Borgeskov	3. Date 12-April-2016
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Espen Jimenez-Solem
5. Manuscript Title An Adverse Drug		ates spontaneous reportin	g of adverse drug reactions
6. Manuscript lder	ntifying Number (if you kr	now it)	
			-
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of compensation clicking the "Add	the appropriate boxes i) with entities as descri	in the table to indicate who ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se present during the 36 months prior to publication.
Section 4.	Intellectual Proper	rty Patents & Copyri <u>c</u>	hts
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?

Borgeskov 2



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Borgeskov 3



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Harboe 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fire Kirstine Moll	st Name)	2. Surname (Last Name) Harboe	3. Date 25-April-2016
4. Are you the corr	esponding author?	☐ Yes ✓ No	Corresponding Author's Name Espen Jimenez-Solem
5. Manuscript Title An Adverse Drug	Event Manager facilita	ates spontaneous reportin	g of adverse drug reactions
6. Manuscript Iden	tifying Number (if you kr	now it)	
			_
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Are there any rele	evant conflicts of intere	est? Yes ✓ No	
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Harboe 2



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Hansen 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Melissa Voigt	2. Surname (Last Name) Hansen	3. Date 12-April-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Espen Jimenez-Solem
5. Manuscript Title An Adverse Drug Event Manager facilit	ates spontaneous reportin	g of adverse drug reactions
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Halladin 1



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Did you or your institution at any time rece	eive payment or services from g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,	
Section 3. Relevant financial	activities outside the s	ubmitted 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 Prope	rty Patents & Copyrig	yhts	
Do you have any patents, whether plar	nned, pending or issued, br	oadly relevant to the work? Yes V No	

Halladin 2



Section 5. Relationships not covered above
Relationships not covered above
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Dr. Halladin has nothing to disclose.

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Halladin 3



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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

Darsø 1



Section 1. Identify	ing Information	
1. Given Name (First Name) Perle	2. Surname (Last Name) Darsø	3. Date 13-April-2016
4. Are you the corresponding a	author? Yes V No	Corresponding Author's Name Espen Jimenez-Solem
5. Manuscript Title An Adverse Drug Event Mar	nager facilitates spontaneous report	ing of adverse drug reactions
6. Manuscript Identifying Num	ber (if you know it)	
Section 2. The Wor	k Under Consideration for Pub	lication
	ork (including but not limited to grants,	m a third party (government, commercial, private foundation, etc.) for data monitoring board, study design, manuscript preparation,
Section 3. Relevant	financial activities outside the	submitted work.
of compensation) with entit	ies as described in the instructions. I u should report relationships that w	whether you have financial relationships (regardless of amount Use one line for each entity; add as many lines as you need by ere present during the 36 months prior to publication .
Section 4. Intellect		
Intellect	ual Property Patents & Copyr	rights Transfer of the control of th
Do you have any patents, w	hether planned, pending or issued,	broadly relevant to the work? Yes V No

Darsø 2



Section 5. Relationships not severed 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?
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Disclosure Statement
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Royalties: Funds are coming in to you or your institution due to your patent

Klarskov 1



Section 1. Identifying I	nformation		
1. Given Name (First Name) Pia	2. Surname (Last Name) Klarskov	3. Date 13-April-2016	
4. Are you the corresponding autho	r? Yes ✓ No	Corresponding Author's Name Espen Jimenez-Solem	
5. Manuscript Title An Adverse Drug Event Manager	facilitates spontaneous reportin	g of adverse drug reactions	
6. Manuscript Identifying Number (i	f you know it)		
		_	
Section 2. The Work Un	der Consideration for Public	cation	
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 V			
Section 3. Relevant fina	ancial activities outside the s	submitted work.	
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Section 4. Intellectual P	Property Patents & Copyric	ghts	
Do you have any patents, whether	er planned, pending or issued, br	oadly relevant to the work? Yes V No	

Klarskov 2



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

Vinther 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Siri	rst Name)	2. Surname (Last Name) Vinther	3. Date 27-April-2016
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name
5. Manuscript Title An Adverse Drug		ates spontaneous reportin	g of adverse drug reactions
6. Manuscript Ider	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	stitution at any time rece ubmitted work (including	ive payment or services from 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) with entities as descri	ibed in the instructions. Us port relationships that wer	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 Prope	rty Patents & Copyri	ghts
Do you have any	patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Vinther 2



Section 5. Relationships not severed above
Relationships not covered above
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Royalties: Funds are coming in to you or your institution due to your patent



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Mikkel Bring	2. Surname (Last Name) Christensen	3. Date 27-April-2016
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Espen Jimenez-Solem
5. Manuscript Title An Adverse Drug Event Manager facilita	ates spontaneous reportin	g of adverse drug reactions
6. Manuscript Identifying Number (if you kr	now it)	
		-
Section 2. The Work Under Co	onsideration for Public	ation
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Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No



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Dr. Christensen has nothing to disclose.

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

Lund 1



Section 1. Identifying Inform	mation		
1. Given Name (First Name) Marie	2. Surname (Last Name) Lund	3. Date 21-April-2016	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Espen Jimenez-Solem	
5. Manuscript Title An Adverse Drug Event Manager facilit	ates spontaneous reportin	g of adverse drug reactions	
6. Manuscript Identifying Number (if you k	now it)		
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Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes V No	

Lund 2



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Dr. Lund has nothing to disclose.

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Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

Issued: The patent has been issued by the agency

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

Borck 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Borck	3. Date 27-April-2016
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name
5. Manuscript Title An Adverse Drug		ates spontaneous reportin	g of adverse drug reactions
6. Manuscript Ider	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Public	cation
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.
of compensation clicking the "Add) with entities as descri	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se 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	oadly relevant to the work? Yes V No

Borck 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
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Borck 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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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".

3. 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.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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

Jimenez-Solem 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Espen	2. Surname (Last Name) Jimenez-Solem	3. Date 23-May-2016
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title An Adverse Drug Event Manager facilitates spontaneous reporting of adverse drug reactions		
6. Manuscript Identifying Number (if you know 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. Polovent 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 patents, whether plan	ned, pending or issued, broadly relevant to the work	? ☑ Yes 🗸 No

Jimenez-Solem 2



Section 5. Relationships not covered above
helationships 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
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Dr. Jimenez-Solem 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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