

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.

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

Andreassen 1



Section 1. Identifying Inform	nation				
1. Given Name (First Name) Pernille	2. Surname (Last Name) Andreassen	3. Date 19-December-2017			
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Anita Ulvsgaard Sørensen			
5. Manuscript Title How the youngest doctors perceive th	e Danish formal, education	al advisory program: A SWOT-analysis			
6. Manuscript Identifying Number (if you k	now it)				
Section 2. The Work Under C	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 inter	rest?				
Section 2					
Section 3. Relevant financial	activities outside the s	submitted work.			
of compensation) with entities as descri	ribed 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 re present during the 36 months prior to publication.			
Are there any relevant conflicts of inter	rest?				
Section 4. Intellectual Prope	rty Patents & Copyric	ghts			
Do you have any patents, whether plar	nned, pending or issued, br	roadly relevant to the work? Yes V No			

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Section 5. 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				
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Section 6. Disclosure Statement				
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.				
Dr. Andreassen has nothing to disclose.				

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

Sørensen 1



Section 1.	Identifying Inform	ation				
1. Given Name (Fi Anita	rst Name)	2. Surname (Last Name Sørensen	ı		3. Date 15-December-2017	
4. Are you the cor	responding author?	√ Yes No				
5. Manuscript Title How the younge	est doctors perceive the	Danish formal, educati	onal advisory į	orogram: A SW	OT-analysis	
6. Manuscript Ider	ntifying Number (if you kn	ow it)				
Section 2.	The Work Under Co	onsideration for Pub	lication			
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	but not limited to grants, st? Yes No rmation below. If you h	data monitoring	g board, study d	esign, manuscript preparati esign, manuscript preparati ess the "ADD" button to a	ion,
Name of Institut	ion/Company	Grant? Personal Fees?	Ion-Financial Support	Other? Co	mments	
Central Denmark Reg	ion	V V				
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Section 3.	Relevant financial a	activities outside th	e submitted	work.		
of compensation clicking the "Add Are there any rel) with entities as descril	oed in the instructions. Fort relationships that v	Use one line fo vere present d	or each entity;	lationships (regardless of add as many lines as you nonths prior to publica	need by
Section 4.	Intellectual Proper	ty Patents & Copy	rights			
Do you have any	patents, whether planr	ned, pending or issued,	broadly releva	ant to the work	? Yes Vo	

Sørensen 2



Section 5. Polationships not sovered above
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Section 6. Disclosure Statement
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Dr. Sørensen reports grants and personal fees from Central Denmark Region.

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Mølller 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fii Marianne Kleis	rst Name)	2. Surname (Last Name) Mølller	3. Date 11-January-2018
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Anita Ulvsgaard Sørensen
5. Manuscript Title How the younge		Danish formal, education	al advisory program: A SWOT-analysis
6. Manuscript Ider	ntifying Number (if you kr	now it)	
Section 2.	The Work Under Co	onsideration for Public	tation
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	bed 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 Proper	ty Patents & Copyric	yhts
Do you have any	•		oadly relevant to the work? Yes V No

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Malling 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fi Bente	rst Name)	2. Surname (Last Name) Malling		3. Date 17-January	y-2018
4. Are you the cor	responding author?	Yes 🗸 No	Corresponding Author's Name Anita Ulvsgaard Sørensen		
5. Manuscript Title How the younge		Danish formal, educatio	nal advisory pro	gram: A SWOT-analysis	
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any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	but not limited to grants, of st? Yes No ormation below. If you have	lata monitoring b	overnment, commercial, pri oard, study design, manuso ne entity press the "ADD	cript preparation,
Name of Institut	ion/Company	Grant? Personal No	on-Financial Support?	comments	
Central Denmark Reg	ion	✓			
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Section 3.	Relevant financial a	activities outside the	submitted wo	ork.	
of compensation clicking the "Add Are there any rel) with entities as describ	bed in the instructions. Uport relationships that we	Jse one line for e	e financial relationships (each entity; add as many ing the 36 months prio	lines as you need by
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