

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.

The work under consideration for publication.

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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.

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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.

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

Aggerholm 1



| Section 1. | Identifying Inform | ation | | | | |
|--|---|---|----------------------------------|--|--|--|
| 1. Given Name (Fir Birgitte Skjærbæ | • | 2. Surname (Last Name) Aggerholm | 3. Date 02-July-2018 | | | |
| 4. Are you the corresponding author? | | ✓ Yes No | | | | |
| • | 5. Manuscript Title Hidrosadenitis suppurativa – 42-årig kvinde opereret for abscesser mere end 69 gange på 5 år | | | | | |
| 6. Manuscript Identifying Number (if you know it) UFL-03-18-0232 | | | | | | |
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| Section 2. | The Work Under Co | onsideration for Publication | | | | |
| any aspect of the su statistical analysis, | ubmitted work (including | ve payment or services from a third party (government, cobut not limited to grants, data monitoring board, study dost? | | | | |
| Section 3. | Relevant financial | activities outside the submitted work. | | | | |
| of compensation clicking the "Add |) with entities as descri | n the table to indicate whether you have financial rebed in the instructions. Use one line for each entity; port relationships that were present during the 36 st? Yes V | add as many lines as you need by | | | |
| Soction 4 | | | | | | |
| Section 4. | Intellectual Proper | ty Patents & Copyrights | | | | |
| Do you have any | patents, whether plant | ned, pending or issued, broadly relevant to the work | x? ☐ Yes ✓ No | | | |

Aggerholm 2



| Section 5. | | | | | |
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| Section 5. | Relationships not covered above | | | | |
| | relationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work? | | | | |
| Yes, the following relationships/conditions/circumstances are present (explain below): | | | | | |
| ✓ No other rela | ationships/conditions/circumstances that present a potential conflict of interest | | | | |
| | anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements Irnals may ask authors to disclose further information about reported relationships. | | | | |
| Section 6. | Disclosure Statement | | | | |
| Based on the abo | ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box | | | | |
| Dr. Aggerholm h | nas 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.

Aggerholm 3



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Rasmussen 1



| Section 1. Identifying Inform | | | | | | |
|---|--|--------------------------|--|-----------|--|-------|
| Identifying Information | | | | | | |
| Given Name (First Name) Mads Kirchheiner | 2. Surname (Rasmussen | Last Name) | | | 3. Date 02-July-2018 | |
| 4. Are you the corresponding author? | Yes | ✓ No | Corresponding Author's Name Birgitte Skjærbæk Aggerholm | | | |
| 5. Manuscript Title Hidrosadenitis suppurativa – 42-årig kvi | nde opereret | for abscess | er mere end (| 69 gange | på 5 | |
| 6. Manuscript Identifying Number (if you kn UFL-03-18-0232 | ow it) | | | | | |
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| Section 2. The Work Under Co | onsideratio | n for Publi | cation | | | |
| Did you or your institution at any time receing any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere | but not limited | | | | |) for |
| Section 3. Relevant financial a | activities ou | ıtside the | submitted | work. | | |
| Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should repare there any relevant conflicts of interesting the same of | bed in the insport relationships st? Yes | tructions. Unips that we | se one line fo | r each er | ntity; add as many lines as you need l | |
| Name of Entity | Grant? Pe | rsonal No | n-Financial Support | Other? | Comments | |
| Abbvie | | ✓ | | | Advisory board or paid speaker | |
| lanssen Cilag | | ✓ | | | Advisory board or paid speaker | |
| Almirall | | ✓ | | | Advisory board or paid speaker | |
| Eli Lilly | | ✓ | | | Advisory board or paid speaker | |
| eo Pharma | | ✓ | | | Advisory board or paid speaker | |
| Novartis | | ✓ | | | Advisory board or paid speaker | |

Rasmussen 2



| Section 4. Intellectual Property Patents & Copyrights | | | |
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| Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo | | | |
| Section 5. Relationships not covered above | | | |
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| Dr. Rasmussen reports personal fees from Abbvie, personal fees from Janssen Cilag, personal fees from Almirall, personal fees from Eli Lilly, personal fees from Leo Pharma, personal fees from Novartis, outside the submitted work; . | | | |

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Meinert 1



| Section 1. | Identifying Inform | nation | |
|--|----------------------------|---|--|
| 1. Given Name (Fi Mette | rst Name) | 2. Surname (Last Name) Meinert | 3. Date 02-July-2018 |
| 4. Are you the corresponding author? | | Yes ✓ No | Corresponding Author's Name Birgitte Skjærbæk Aggerholm |
| 5. Manuscript Title Titel: Hidrosadenitis suppurativa – 42-årig kvinde opereret for abscesser mere end 69 gange på 5 år | | | |
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| any aspect of the s statistical analysis, | ubmitted work (including | g but not limited to grants, da | a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation, |
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| 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 Prope | rty Patents & Copyric | ghts |
| Do you have any | patents, whether plan | ned, pending or issued, br | oadly relevant to the work? Yes V No |

Meinert 2



| Section 5. Relationships not sovered above |
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| Dr. Meinert has nothing to disclose. |

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Meinert 3