

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.

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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

Bakholdt 1



| Section 1. Identifying Inform | nation | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------------------------|----------------------------|--|
| 1. Given Name (First Name) Vivi | 2. Surname (Last Name) Bakholdt | | . Date 4-September-2014 | |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Jens Ahm Sørensen | | |
| 5. Manuscript Title Static suspension for facial paralysis: Us | ing a double layered Palm | aris Longus tendon | | |
| 6. Manuscript Identifying Number (if you kr | now it) | | | |
| | | _ | | |
| Section 2. The Work Under Co | onsideration 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 No | | | | |
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| Relevant financial | activities outside the s | submitted work. | | |
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| | | | | |
| Section 4. Intellectual Proper | rty Patents & Copyri | yhts | | |
| Do you have any patents, whether plan | ned, pending or issued, br | oadly relevant to the work? | Yes ✓ No | |

Bakholdt 2



| Section 5. Polationships not severed above |
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| Dr. Bakholdt has nothing to disclose. |

Evaluation and Feedback

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Sørensen 1



| Section 1. Identifying Inform | nation | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|------------------------------|--|--|
| Given Name (First Name) Jens Ahm | 2. Surname (Last Name) Sørensen | 3. Date 04-September-2014 | | |
| 4. Are you the corresponding author? | ✓ Yes No | | | |
| 5. Manuscript Title Static suspension for facial paralysis: Us | sing a double layered Palmaris Longus tendon | | | |
| 6. Manuscript Identifying Number (if you k | now it) | | | |
| | | | | |
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| Do you have any patents, whether plan | ned, pending or issued, broadly relevant to the work | Yes ✓ No | | |

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Toyserkani 1



| Section 1. Identifying Inform | nation | |
|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Given Name (First Name) Navid | 2. Surname (Last Name) Toyserkani | 3. Date 03-September-2014 |
| 4. Are you the corresponding author? | ☐ Yes ✓ No | Corresponding Author's Name Jens Ahm Sørensen |
| 5. Manuscript Title Static suspension for facial paralysis: Us | ing a double layered Palm | aris Longus tendon |
| 6. Manuscript Identifying Number (if you kr | now it) | _ |
| Section 2 | | |
| Section 2. The Work Under Co | onsideration for Public | ation |
| | 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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| Place a check in the appropriate boxes of compensation) with entities as descr | 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 e present during the 36 months prior to publication . |
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Toyserkani 2



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