

#### **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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### 3. Relevant financial activities outside the submitted work.

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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.

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.

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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

Frederiksen 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Kirsten	2. Surname (Last Name) Frederiksen	3. Date 17-December-2015	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Marianne Eg	
5. Manuscript Title Childhood overweight and obesity trea	atment programmes in Da	nish paediatric departments	
6. Manuscript ldentifying Number (if you k	now it)		
Section 2. The Work Under C	onsideration for Public	cation	
Did you or your institution <b>at any time</b> 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	est? Yes ✓ No		
Section 3. Relevant financial	activities outside the	submitted work.	
of compensation) with entities as descr	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	est? Yes V No		
Section 4. Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes V No	

Frederiksen 2



Section 5. Relationships not severed above
Relationships not covered above
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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. Frederiksen has nothing to disclose.

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Frederiksen 3



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

Larsen 1



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Lone Marie	2. Surname (Last Name) Larsen		3. Date 21-December-2015
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nan Marianne Eg	me
5. Manuscript Title Childhood overweight and obesity trea	tment programmes in Da	nish paediatric departments	3
6. Manuscript Identifying Number (if you kn	now it)		
Section 2. The Work Under Co	onsideration for Publi	cation	
Did you or your institution <b>at any time</b> receiving aspect of the submitted work (including statistical analysis, etc.)?  Are there any relevant conflicts of interesting the state of the submitted work (including statistical analysis, etc.)?	but not limited to grants, da		
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of interes	ibed in the instructions. Use port relationships that we	se one line for each entity; a	dd as many lines as you need by
Section 4. Intellectual Proper	rty Patents & Copyri	ahts	
Do you have any patents, whether plan	ned, pending or issued, bi	roadly relevant to the work?	Yes ✓ No

Larsen 2



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Dr. Larsen has nothing to disclose.

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

Eg 1



Section 1. Identifying Inform	nation		
Given Name (First Name)     Marianne	2. Surname (Last Name) Eg	3. Date 22-December-2015	
4. Are you the corresponding author?	✓ Yes No		
5. Manuscript Title Childhood overweight and obesity trea	atment programmes in Danish paediatric departmen	ts	
6. Manuscript Identifying Number (if you k	now it)		
Section 2. The Work Under C	onsideration for Publication		
Did you or your institution <b>at any time</b> 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 No			
Section 3. Relevant financial	activities outside the submitted work.		
of compensation) with entities as descr	in the table to indicate whether you have financial re ribed in the instructions. Use one line for each entity; port relationships that were <b>present during the 36</b> I	add as many lines as you need by	
Are there any relevant conflicts of inter	est? Yes 🗸 No		
Section 4. Intellectual Prope	rty Patents & Copyrights		
Do you have any patents, whether plan	nned, pending or issued, broadly relevant to the work	Yes ✓ No	

Eg 2



Section 5.	Delether delta and a comment also con			
	Relationships not covered above			
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Yes, the followi	ng relationships/conditions/circumstances are present (explain below):			
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Dr. Eg has nothing	to disclose.			

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Eg 3



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Johansen 1



Section 1. Identifying Info	rmation		
1. Given Name (First Name) Anders	2. Surname (Last Name) Johansen	3. Date 13-December-2015	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Marianne Eg	
5. Manuscript Title Childhood overweight and obesity tr	eatment programmes in Da	nish paediatric departments	
6. Manuscript Identifying Number (if you	know it)		
Section 2. The Work Under	Consideration for Public	cation	
Did you or your institution <b>at any time</b> 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			
ŕ			
Section 3. Relevant financia	al activities outside the s	submitted work.	
of compensation) with entities as des	scribed in the instructions. Us report relationships that we	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re <b>present during the 36 months prior to publication</b> .	
Section 4. Intellectual Prop	erty Patents & Copyri	ghts	
Do you have any patents, whether pla	anned, pending or issued, b	roadly relevant to the work? Yes V No	

Johansen 2



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Dr. Johansen has nothing to disclose.

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

Cortes 1



Section 1.	Identifying Inform	nation	
1. Given Name (Fi	rst Name)	2. Surname (Last Name) Cortes	3. Date 14-December-2015
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Marianne Eg
5. Manuscript Title Childhood overv		itment programmes in Dai	nish paediatric departments
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 etc.)?	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Are there any rei	evant conflicts of intere	est?	
Section 3.			
Section 3.	Relevant financial	activities outside the	submitted work.
of compensation clicking the "Add	) with entities as descr I +" box. You should re	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.
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	l		
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

Cortes 2



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

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Other: Anything not covered under the previous three boxes

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

vamosi 1



Section 1. Identifying Inform	nation	
Given Name (First Name)  marianne	2. Surname (Last Name) vamosi	3. Date 14-December-2015
4. Are you the corresponding author?	Yes No	
5. Manuscript Title Childhood overweight and obesity trea	tment programmes in Danish paediatric departmen	ts
6. Manuscript Identifying Number (if you kr	now it)	
Section 2. The Weak Under C		
The Work Under Co	onsideration for Publication	
	ive payment or services from a third party (government, co g but not limited to grants, data monitoring board, study d	
Are there any relevant conflicts of interest?		
Continu 2		
Section 3. Relevant financial	activities outside the submitted work.	
of compensation) with entities as descri	in the table to indicate whether you have financial re ibed in the instructions. Use one line for each entity; port relationships that were <b>present during the 36 r</b>	add as many lines as you need by
Are there any relevant conflicts of interest	est?	
Continue		
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

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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):
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Section 6. Disclosure Statement
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Dr. vamosi has nothing to disclose.

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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.

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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.

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Lorentzen 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Vibeke	2. Surname (Last Name) Lorentzen		3. Date 13-December-2015	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nam Marianne Eg	ne	
5. Manuscript Title Childhood overweight and obesity trea	itment programmes in Dar	nish paediatric departments		
6. Manuscript Identifying Number (if you kr	now it)			
		_		
Section 2. The Work Under Co	onsideration for Public	cation		
Did you or your institution <b>at any time</b> 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 s	submitted work.		
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Sortion A				
Section 4. Intellectual Proper	rty Patents & Copyric	yhts		
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes ✓ No	

Lorentzen 2



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

Holm 1



Section 1. Identifying Information	mation			
1. Given Name (First Name) Jens-Christian	2. Surname (Last Name) Holm	3. Date 04-January-2016		
4. Are you the corresponding author?	Yes Vo	Corresponding Author's Name		
5. Manuscript Title Childhood overweight and obesity tre	atment programmes in Dai	nish paediatric departments		
6. Manuscript Identifying Number (if you I	know it)			
Section 2. The Work Under 0	Consideration for Public	cation		
Did you or your institution <b>at any time</b> 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 financia				
Relevant financia	l activities outside the s	submitted work.		
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Section 4. Intellectual Prope	erty Patents & Copyric	ghts		
Do you have any patents, whether pla	nned, pending or issued, br	oadly relevant to the work? Yes V No		

Holm 2



Section 5. Relationships not sovered above				
Relationships not covered above				
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