

ICMJJE Form for Disclosure of Potential Conflicts of Interest

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.

1. 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".

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. 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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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

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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Matilde Jo 2. Surname (Last Name) Allingstrup 3. Date 25-March-2016

4. Are you the corresponding author? Yes No

5. Manuscript Title
 Early Goal-Directed Nutrition in ICU Patients (EAT-ICU) Trial:
 Protocol for a randomised trial comparing the effects of goal-directed nutrition therapy to standard care

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Fresenius Kabi	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Baxter	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Nutricia	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Dr. Allingstrup reports grants from Fresenius Kabi , during the conduct of the study; .

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jens

2. Surname (Last Name)

Kondrup

3. Date

25-March-2016

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Matilde Jo Allingstrup

5. Manuscript Title

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Dr. Kondrup has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Jørgen 2. Surname (Last Name) Wiis 3. Date 25-March-2016

4. Are you the corresponding author? Yes No Corresponding Author's Name Matilde Jo Allingstrup

5. Manuscript Title
Early Goal-Directed Nutrition in ICU Patients (EAT-ICU) Trial: Protocol for a randomised trial comparing the effects of goal-directed nutrition therapy to standard care

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Fresenius Kabi	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Baxter	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Wiis reports grants from Fresenius Kabi, during the conduct of the study; personal fees from Baxter, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) _____ Casper

2. Surname (Last Name) _____ Claudius

3. Date _____ 25-March-2016

4. Are you the corresponding author? Yes No

Corresponding Author's Name _____ Matilde Jo Allingstrup

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1. Given Name (First Name) _____
Ulf

2. Surname (Last Name) _____
Gøttrup Pedersen

3. Date _____
25-March-2016

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Corresponding Author's Name _____
Matilde Jo Allingstrup

5. Manuscript Title
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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Rikke 2. Surname (Last Name) Hein-Rasmussen 3. Date 25-March-2016

4. Are you the corresponding author? Yes No Corresponding Author's Name
Matilde Jo Allingstrup

5. Manuscript Title
Early Goal-Directed Nutrition in ICU Patients (EAT-ICU) Trial:
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Are there any relevant conflicts of interest? Yes No

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Fresenius Kabi	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Hein-Rasmussen reports grants from Fresenius Kabi, during the conduct of the study; .

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Section 1. Identifying Information

1. Given Name (First Name) Tom 2. Surname (Last Name) Hartvig Jensen 3. Date 25-March-2016

4. Are you the corresponding author? Yes No Corresponding Author's Name
Matilde Jo Allingstrup

5. Manuscript Title
Early Goal-Directed Nutrition in ICU Patients (EAT-ICU) Trial:
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Theis

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Lange

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25-March-2016

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Yes No

Corresponding Author's Name
Matilde Jo Allingstrup

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Dr. Lange has nothing to disclose.

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CLS Behring	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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