

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.

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earning royalties or not

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

patent

Christensen 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Jane	2. Surname (Last Name) Christensen	3. Date 18-March-2019
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Agreement between The Danish Cance	r Registry and The Danish Lung Cancer Registry	
6. Manuscript Identifying Number (if you kr	now it)	
Section 2. The Work Under Co	onsideration for Publication	
any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	ive payment or services from a third party (government, cogo but not limited to grants, data monitoring board, study doest? Yes V No	
Section 3. Relevant financial	activities outside the submitted work.	
of compensation) with entities as descri	in the table to indicate whether you have financial relibed in the instructions. Use one line for each entity; port relationships that were present during the 36 lest? Yes Vo	add as many lines as you need by
Section 4. Intellectual Proper	rty Patents & Copyrights	
Do you have any patents, whether plan	ned, pending or issued, broadly relevant to the work	x? ☐ Yes ✓ No

Christensen 2



elationships not covered above			
tionships or activities that readers could perceive to have influenced, or that give the appearance of ing, what you wrote in the submitted work?			
g relationships/conditions/circumstances are present (explain below):			
nships/conditions/circumstances that present a potential conflict of interest			
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.			
isclosure Statement			
disclosures, this form will automatically generate a disclosure statement, which will appear in the box			
nothing to disclose.			

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Christensen 3



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durini strative support, etc.



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Anne Mette Trar		2. Surname (Last Name) Kejs		3. Date 10-April-2019
4. Are you the cor	responding author?	☐ Yes 🗸 No	Corresponding Author's Na Jane Christensen	me
5. Manuscript Title Agreement betv		er Registry and The Danish	Lung Cancer Registry	
6. Manuscript Ide	ntifying Number (if you kr	now it)		
			_	
Section 2.	The Work Under C	onsideration for Public	cation	
any aspect of the s statistical analysis,	submitted work (including	g but not limited to grants, da	a third party (government, co ata monitoring board, study de	mmercial, private foundation, etc.) for esign, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	submitted work.	
of compensatior clicking the "Add	n) with entities as descr	ibed in the instructions. Us port relationships that we	se one line for each entity; a	ationships (regardless of amount add as many lines as you need by nonths prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	Yes ✓ No

Kejs 2



Castians	
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 follo	wing 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 abbelow.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Kejs has notl	ning to disclose.

Evaluation and Feedback

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Kejs 3



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Schmidt 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Lise Kristine Højsgaard	2. Surname (Last Name) Schmidt	3. Date 24-April-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Jane Christensen
5. Manuscript Title Agreement between The Danish Cance	r Registry and The Danish	Lung Cancer Registry
6. Manuscript Identifying Number (if you kr	now it)	
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Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes 🗸 No

Schmidt



Section 5.	Relationships not covered above
	elationships 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 follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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patent

Sogaard



Section 1.	Identifying Inform	mation	
1. Given Name (Fi Jes	rst Name)	2. Surname (Last Name) Sogaard	3. Date 09-April-2019
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Name Jane Christensen
5. Manuscript Title Agreement betv		er Registry and The Danish	Lung Cancer Registry
6. Manuscript Ide	ntifying Number (if you k	know it)	
Section 2.	The Work Under (Consideration for Public	cation
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Sogaard 2



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Rasted 1



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patent

Andersen 1



Section 1.	Identifying Inforn	nation		
1. Given Name (Fii Ole	rst Name)	2. Surname (Last Name) Andersen		3. Date 26-March-2019
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Na Jane Christensen	ame
5. Manuscript Title Agreement betw		er Registry and The Danis	h Lung Cancer Registry	
6. Manuscript lder	ntifying Number (if you kı	now it)		
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Andersen



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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.

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.

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.

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.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

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 **Issued:** The patent has been issued by the agency

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

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Section 1. Identifying Inform	ation		
1. Given Name (First Name) Erik	2. Surname (Last Name) Jakobsen		3. Date 27-March-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Na Jane Christensen	me
5. Manuscript Title Agreement between The Danish Cancel	r Registry and The Danish	Lung Cancer Registry	
6. Manuscript Identifying Number (if you kn	ow it)		
		_	
Section 2. The Work Under Co	onsideration for Public	cation	
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		
Section 3. Relevant financial	activities outside the s	submitted work.	
Place a check in the appropriate boxes in of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of intere	bed in the instructions. Us port relationships that we	se one line for each entity; a	add as many lines as you need by
Section 4. Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any patents, whether plans	ned, pending or issued, bi	oadly relevant to the work	? ☐ Yes 🗸 No

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Section 5.	
Section 5.	Relationships not covered above
	elationships 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 follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Jakobsen ha	s nothing to disclose.
Section 6. Based on the abobelow.	Disclosure Statement ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.

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