

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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.

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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) Pia 2. Surname (Last Name) Eiken 3. Date 05-June-2020

4. Are you the corresponding author? Yes No Corresponding Author's Name
Maria Elisabeth Lendorf

5. Manuscript Title
Characteristics and early outcomes of patients hospitalized for Coronavirus Disease 2019 (COVID19) in the North Zealand Region of Denmark

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.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Advisory board member for Amgen and Eli Lilly	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Speakers' bureau for Amgen, Eli Lilly and AstraZenica	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Own shares in Novo Nordisk A/S	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

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

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Dr. Eiken reports personal fees from Advisory board member for Amgen and Eli Lilly, personal fees from Speakers' bureau for Amgen, Eli Lilly and AstraZenica, other from Own shares in Novo Nordisk A/S, 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) Birgitte	2. Surname (Last Name) Lindegard	3. Date 06-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Lendorf M
5. Manuscript Title Characteristics and early outcomes of patients hospitalized for Coronavirus Disease 2019 (COVID19) in the North Zealand Region of Denmark		
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Dr. Lindegaard has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Ellen

2. Surname (Last Name)
Løkkegaard

3. Date
07-June-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Characteristics and early outcomes of patients hospitalized for Coronavirus Disease 2019 (COVID19) in the North Zealand Region of Denmark

6. Manuscript Identifying Number (if you know it)

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Dr. Løkkegaard has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Louise

2. Surname (Last Name)
Brinth

3. Date
06-May-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Maria Elisabeth Lendorf

5. Manuscript Title
Characteristics and early outcomes of patients hospitalized for Coronavirus Disease 2019 (COVID19) in the North Zealand Region of Denmark

6. Manuscript Identifying Number (if you know it)

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Morten

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Bestle

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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)

Lisbet

2. Surname (Last Name)

Brandi

3. Date

04-June-2020

4. Are you the corresponding author?

Yes

No

Corresponding Author's Name

Maria Lendorf

5. Manuscript Title

Characteristics and early outcomes of patients hospitalized for Coronavirus Disease 2019 (COVID19) in the North Zealand Region of Denmark

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

Section 4. Intellectual Property -- Patents & Copyrights

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

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Dr. has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Sebastian	2. Surname (Last Name) Krog	3. Date 05-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Maria Elisabeth Lendorf
5. Manuscript Title Characteristics and early outcomes of patients hospitalized for Coronavirus Disease 2019 (COVID19) in the North Zealand Region of Denmark		
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Dr. Krog has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Peter Lommer

2. Surname (Last Name)
Kristensen

3. Date
04-June-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Maria Lendorf

5. Manuscript Title
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Thea K

2. Surname (Last Name)
Fischer

3. Date
04-June-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Maria Lendorf

5. Manuscript Title
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Section 1. Identifying Information

1. Given Name (First Name) Mogens	2. Surname (Last Name) Boisen	3. Date 05-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Maria Lendorf
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Ulrik	2. Surname (Last Name) Pedersen-Bjergaard	3. Date 04-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Lendorf M
5. Manuscript Title Characteristics and early outcomes of patients hospitalized for Coronavirus Disease 2019 (COVID19) in the North Zealand Region of Denmark		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Camilla

2. Surname (Last Name)
Koch Rysrø

3. Date
06-April-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Maria Elisabeth Lendorf

5. Manuscript Title
Characteristics and early outcomes of patients hospitalized for Coronavirus Disease 2019 (COVID19) in the North Zealand Region of Denmark

6. Manuscript Identifying Number (if you know it)

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Section 1. Identifying Information

1. Given Name (First Name) Inger Merete	2. Surname (Last Name) Jørgensen	3. Date 04-June-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Maria Lendorf
5. Manuscript Title Characteristics and early outcomes of patients hospitalized for Coronavirus Disease 2019 (COVID19) in the North Zealand Region of Denmark		
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Section 2. The Work Under Consideration for Publication

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Maria Elisabeth

2. Surname (Last Name)

Lendorf

3. Date

07-June-2020

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Characteristics and early outcomes of patients hospitalized for Coronavirus Disease 2019 (COVID19) in the North Zealand Region of Denmark

6. Manuscript Identifying Number (if you know it)

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1. Given Name (First Name)

Thomas Broe

2. Surname (Last Name)

Christensen

3. Date

06-June-2020

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Yes No

Corresponding Author's Name

Maria Elisabeth Lendorf

5. Manuscript Title

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RUNA LOUISE M.

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NOLSFØE

3. Date

2020-06-04

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