

### 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.

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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.

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Section 1.	Identifying Inform	nation			
1. Given Name (First Name) Pernille Henszelman		2. Surname (Last Name) Jørsboe	3. Date 20-May-2020		
4. Are you the corresponding author?		✓ Yes No			
5. Manuscript Title Traumatisk ruptur af subscapularis med avulsion af tub. minor og bicepssubluksation hos 13-årig.					
6. Manuscript Identifying Number (if you know it)					
Section 2.	The Meyly Linder (	onsidenation for Dublication			
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					
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Section 4.	Intellectual Prope	rty Patents & Copyrights			

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Ves



## Section 5. Relationships not covered above

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Dr. Jørsboe has nothing to disclose.

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1. Given Name (First Name) 2. Surname (Last Name) 3. Date   Kenneth Brian Holtz 20-May-2020   4. Are you the corresponding author? Yes No Corresponding Author's Name   Pernille Henszelman Jørsboe Pernille Henszelman Jørsboe					
5. Manuscript Title					
6. Manuscript Identifying Number (if you know it)					
Continue D					
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1. Given Name (First Name) Bo Sanderhoff		2. Surname (Last Name) Olsen	3. Date 20-May-2020		
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name Pernille Henszelman Jørsboe		
5. Manuscript Title Traumatisk ruptur af subscapularis med avulsion af tub. minor og bicepssubluksation hos 13-årig.					
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