

Instructions

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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.

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

Smed Iversen 1



Section 1. Identifying Inform	nation	
Given Name (First Name) Ditte	2. Surname (Last Name) Smed Iversen	3. Date 18-June-2020
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Diabetisk gastroenteropati		
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under C	Consideration for Publication	
any aspect of the submitted work (including statistical analysis, etc.)?	g but not limited to grants, data monitori	cy (government, commercial, private foundation, etc.) for ng board, study design, manuscript preparation,
Are there any relevant conflicts of inter	rest?	
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Section 3. Relevant financial	activities outside the submitte	d work.
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Are there any relevant conflicts of inter	rest? Yes 📝 No	
Section 4. Intellectual Prope	erty Patents & Copyrights	
Do you have any patents, whether plan	nned, pending or issued, broadly rele	vant to the work? Yes No

Smed Iversen 2



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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Section 6.	Disclosure Statement	B
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box	
Dr. Smed Iverse	n has nothing to disclose.	mana pay yan yan akii dan
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Smed Iversen 3



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earning royalties or not

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

patent

Fassov



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Janne	2. Surname (Last Name) Fassov		3. Date 16-June-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Na Ditte Iversen	ime
5. Manuscript Title Diabetisk Gastroenteropati			
6. Manuscript Identifying Number (if you kn	now it)		
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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	ata monitoring board, study d	
Section 3. Relevant financial	activities outside the	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 intere	bed in the instructions. Us port relationships that we	se one line for each entity;	add as many lines as you need by
Section 4. Intellectual Proper	ty Patents & Copyri	ghts	
Do you have any patents, whether plani			? ☑ Yes 🗸 No

Fassov



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	Yes, the following relationships/conditions/circumstances are present (explain below):			
✓ No other rela	tionships/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.				
Section 6.	Disclosure Statement			
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Dr. Fassov has no	othing to disclose.			

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Fassov 3



Section 1. Identifying Inform	nation	
Given Name (First Name) Mette	2. Surname (Last Name) Klinge	3. Date 16-June-2020
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name
5. Manuscript Title Diabetisk Gastroparese		
6. Manuscript Identifying Number (if you k UFL-04-20-0246	now it)	
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Do you have any patents, whether plan	nned, pending or issued, bi	roadly relevant to the work? Yes No

Klinge 2



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Dr. Klinge has nothing to disclose.
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Bjerregaard 1



Costion 1		
Section 1. Identifying Inform	nation	
Given Name (First Name) Niels Christian	2. Surname (Last Name) Bjerregaard	3. Date 15-June-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Ditte Smed Iversen
5. Manuscript Title Diabetisk Gastroenteropati		
6. Manuscript Identifying Number (if you k UFL-04-20-0246	now it)	
Section 2. The Work Under C	onsideration for Public	cation
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Intellectual Proper	rty Patents & Copyrig	hts
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Bjerregaard 2



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BROCK 1



Section 1. Identifying Inforn	nation	
1. Given Name (First Name) CHRISTINA	2. Surname (Last Name) BROCK	3. Date
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name
5. Manuscript Title IDiabetisk enteropati		
6. Manuscript Identifying Number (if you ki UFL-04-20-0246	now it)	_
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		n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of inter	est? Yes V No	
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BROCK



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patent

Drewes 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Asbjørn	2. Surname (Last Name) Drewes		3. Date 02-June-2020
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Na Klaus Krogh	ame
5. Manuscript Title Diabetisk enteropati			
6. Manuscript Identifying Number (if you kr	now it)	_	
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Section 4. Intellectual Proper	rty Patents & Copyric	ghts	
Do you have any patents, whether plan			? ☑ Yes 🗸 No

Drewes



Section 5.	
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Dr. Drewes has r	nothing to disclose.

Evaluation and Feedback

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Drewes 3



Section 1 Identifying Inform	nation			
Given Name (First Name) Sten	2. Surname (Last Name) Lund	3. Date 16-June-2020		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name		
5. Manuscript Title Diabetisk Gastroenteropati				
6. Manuscript Identifying Number (if you know it) UFL-04-20-0246				
Section 2. The Work Under Co	onsideration for Public	ation		
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Lund 2



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Dr. Lund has nothing to disclose.
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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".

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	nation			
1. Given Name (First Name) Klaus	2. Surname (Last Name) Krogh		3. Date 19-June-2020	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Na Ditte Smed Iversen	ime	
5. Manuscript Title Diabetisk gastroenteropati				
6. Manuscript Identifying Number (if you kr	now it)			
		_		
Section 2. The Work Under Co	onsideration for Publi	cation		
Did you or your institution at any time rece 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	submitted work.		
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo				
Section 4. Intellectual Proper	rty Patents & Copyri	ghts		
Do you have any patents, whether plan			? ☑ Yes 🗸 No	

Krogh



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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 statement Irnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Krogh has no	othing to disclose.

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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