

Section 1. Identifying Inform	nation	
Given Name (First Name) Kirsten	2. Surname (Last Name) Skamstrup Hansen	3. Date 06-July-2020
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Han-Jørgen Malling
5. Manuscript Title Anafylaksi hos børn og voksne		
6. Manuscript Identifying Number (if you k UfL-05-20-0361	now it)	
Section 2. The Week Under C		
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 inter	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work.
of compensation) with entities as descr	ribed in the instructions. Use port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyric	yhts was a samula s
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? Yes Ves Vo

Skamstrup Hansen 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
At the time of ma On occasion, jou	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
Section 6.	
	Disclosure Statement
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Skamstrup H	ansen has nothing to disclose.

Evaluation and Feedback

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

Skamstrup Hansen 3



Section 1. Identifying Inform	mation	
Given Name (First Name) Lene Heise	2. Surname (Last Name) Garvey	3. Date 06-July-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Hans Jørgen Malling
5. Manuscript Title Anafylaksi hos børn og voksne		
6. Manuscript Identifying Number (if you k UFL-05-20-0361	(now it)	
Section 2. The Work Under C	Consideration for Public	cation
Did you or your institution at any time reco any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for taken monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work.
of compensation) with entitles as desc	ribed in the instructions. Use port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyrig	uhts
Do you have any patents, whether plan		

Garvey 2



Section 5. Relationships not covered above
Are there 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?
Yes, the following relationships/conditions/circumstances are present (explain below):
No other relationships/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
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Garvey has nothing to disclose.

Evaluation and Feedback

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

Garvey 3



Section 1. Identifying Info	rmation	C Marie Sons	TYPE WILLIAM STATE
Given Name (First Name) Carsten	2. Surname (Last Name) Bindslev-Jensen		3. Date 02-July-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Nam Hans-Jørgen Malling	ne
5. Manuscript Title Anafylaksi hos børn og voksne			
6. Manuscript Identifying Number (if you UFL-05-20-0361	know it)		
Section 2. The Week Under	Consideration for Publi		
Did you or your institution at any time re any aspect of the submitted work (includi statistical analysis, etc.)? Are there any relevant conflicts of into	ing but not limited to grants, da	a third party (government, com ta monitoring board, study des	nmercial, private foundation, etc.) for ign, manuscript preparation,
Section 3. Relevant financia	al activities outside the s	submitted work.	
Place a check in the appropriate boxe of compensation) with entities as des clicking the "Add +" box. You should Are there any relevant conflicts of intelligence of the second s	cribed in the instructions. Us report relationships that we erest?	se one line for each entity; ac	dd as many lines as you need by
Name of Entity	Grant	n-Financial Other Com	ments
Allakos	✓		
Aimmune			
Hal Allergy			
Termofischer			
Allergy Therapeutics			

Bindslev-Jensen 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
Section 5. Relationships not covered above
Are there 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?
Yes, the following relationships/conditions/circumstances are present (explain below):
No other relationships/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
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Bindslev-Jensen reports grants from Allakos, grants from Aimmune, grants from Hal Allergy, grants from Termofischer, from Allergy Therapeutics, outside the submitted work;

Evaluation and Feedback

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



Section 1. Identifying Infor		
Identifying Infor	mation	
Given Name (First Name) Susanne	2. Surname (Last Name) Halken	3. Date 06-July-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Hans-Jørgen Malling
5. Manuscript Title Anafylaksi hos børn og voksne		
6. Manuscript Identifying Number (if you UFL-05-20-0361	know it)	
Section 2. The Work Under	Consideration for Public	cation
Did you or your institution at any time recany aspect of the submitted work (includir statistical analysis, etc.)? Are there any relevant conflicts of inte	ng but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financia	l activities outside the s	submitted work.
Place a check in the appropriate boxes of compensation) with entities as desc	s in the table to indicate wh cribed in the instructions. Us eport relationships that we	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication .
Section 4. Intellectual Prope	erty Patents & Copyrig	ghts
Do you have any patents, whether pla		

Halken 2



Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, 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
At the time of ma On occasion, jou	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals 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. Halken has n	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.

Halken 3



Section 1. Identifying Inform	nation		
Given Name (First Name) Marianne	2. Surname (Last Name) Sjølin Frederiksen	3. Date 13-July-2020	
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Hans-Jørgen Malling	
5. Manuscript Title Anafylaksi hos børn og voksne			
6. Manuscript Identifying Number (if you k UfL-05-20-0361	now it)		
Section 2. The Work Under C	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 inter	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) ata monitoring board, study design, manuscript preparation,	for
Section 3. Relevant financial	activities outside the	submitted work.	
of compensation) with entities as descr	ribed in the instructions. Use port relationships that we	ether you have financial relationships (regardless of amous se one line for each entity; add as many lines as you need b re present during the 36 months prior to publication .	nt iy
Section 4			
Section 4. Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any patents, whether plan	nned, pending or issued, bi	roadly relevant to the work? Yes Vo	

Sjølin Frederiksen 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
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
Section 6.	
Section 6.	Disclosure Statement
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Sjølin Freder	iksen has nothing to disclose.

Evaluation and Feedback

 $Please\ visit\ \underline{http://www.icm]e.org/cgi-bin/feedback}\ to\ provide\ feedback\ on\ your\ experience\ with\ completing\ this\ form.$

Sjølin Frederiksen 3



Section 1. Identifying Inform	nation	
Given Name (First Name) Torsten	2. Surname (Last Name) Lauritsen	3. Date 01-July-2020
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author's Name Hans-Jørgen Malling
5. Manuscript Title Anafylaksi hos børn og voksne		
6. Manuscript Identifying Number (if you k UFL-05-20-0361	now it)	
Section 2. The Work Under C	onsideration for Public	cation
Did you or your institution at any time receany aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interesting the state of the submitted in the state of the	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri	ribed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication .
Section 4. Intellectual Prope	rty Patents & Copyric	ghts
Do you have any patents, whether plar	nned, pending or issued, br	oadly relevant to the work? Yes Vo

Lauritsen 2



Section 5. Relationships not covered above
Are there 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?
Yes, the following relationships/conditions/circumstances are present (explain below):
No other relationships/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
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Lauritsen has nothing to disclose.

Evaluation and Feedback

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

Lauritsen 3



Section 1. Identifying Inform	nation	
Given Name (First Name) Thomas Houmann	2. Surname (Last Name) Petersen	3. Date 07-July-2020
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Hans-Jørgen Malling
5. Manuscript Title Anafylaksi hos børn og voksne		
6. Manuscript Identifying Number (if you k UFL-05-20-0361	now it)	
Section 2. The Work Under C	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 inter	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Polovont financial	activities outside the	rubmitted 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 Prope	rty Patents & Copyri	ghts
Do you have any patents, whether plan	ned, pending or issued, b	roadly relevant to the work? Yes Vo

Petersen 2



Section 5. Relationships not covered above
Are there 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?
Yes, the following relationships/conditions/circumstances are present (explain below): No other relationships/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
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Petersen has nothing to disclose.

Evaluation and Feedback

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

Petersen 3



Section 1. Identifying Inform	nation	
Given Name (First Name) Johannes	2. Surname (Last Name) Schmid	3. Date
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Hans Joergen Malling
5. Manuscript Title Anafylaksi hos børn og voksne		
6. Manuscript Identifying Number (if you k UFL-05-20-0361	now it)	
Section 2. The Work Under C	Onsideration for Public	cation
Did you or your institution at any time reco any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
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 V		
Section 4. Intellectual Prope	rty Patents & Copyric	ghts
Do you have any patents, whether plar		

Schmid 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 following relationships/conditions/circumstances are present (explain below):		
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest	
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.	
Section 6.	Disclosure Statement	
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box	
Dr. Schmid has r	nothing to disclose.	

Evaluation and Feedback

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

Schmid 3



Section 1. Identifying Inform	mation	
Given Name (First Name) Sandra	2. Surname (Last Name) Viggers	3. Date 06-July-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Hans-Jørgen Malling
5. Manuscript Title Anafylaksi hos børn og voksne		
6. Manuscript Identifying Number (if you k UFL-05-20-0361	know it)	
Section 2. The Week Under C		
The Work Under C	Consideration for Publi	cation
Did you or your institution at any time recany aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	ng but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	l activities outside the	submitted work.
of compensation) with entities as desc	ribed in the instructions. Use port relationships that we	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication .
Section 4. Intellectual Branch		
Intellectual Prope	erty Patents & Copyri	gnes
Do you have any patents, whether plan	nned, pending or issued, bi	roadly relevant to the work? Yes Vo

Viggers 2



Section 5. Relationships not covered above
Are there 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?
Yes, the following relationships/conditions/circumstances are present (explain below):
No other relationships/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
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Viggers has nothing to disclose.

Evaluation and Feedback

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

Viggers 3



Section 1		
Section 1 Identifying Inform	nation	
1. Given Name (First Name) Hans-Jørgen	2. Surname (Last Name) Malling	3. Date 01-July-2020
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Anafylaksi hos børn og voksne		
6. Manuscript Identifying Number (if you k UFL-05-20-0361	(now it)	
Section 2. The Work Under C	Consideration for Publication	
Did you or your institution at any time reco any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, data monitori	ry (government, commercial, private foundation, etc.) for ng board, study design, manuscript preparation,
Section 3. Relevant financial	l activities outside the submitte	d work.
of compensation) with entities as desc	ribed in the instructions. Use one line eport relationships that were present	have financial relationships (regardless of amount for each entity; add as many lines as you need by during the 36 months prior to publication.
Section 4. Intellectual Prope	erty Patents & Copyrights	
Do you have any patents, whether plan		vant to the work? Yes V No

Malling 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
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals 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. Malling has r	nothing to disclose.

Evaluation and Feedback

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

Malling 3