Dat	e: 13. januar 2023			
You	our name: Jonas Juel Rasmussen			
Des	Manuscript title: Design of the PAIN trial: Perioperative Anesthesia by local INfiltration following median sternotomy			
Mar	nuscript number (if known)	):		
are re third comr	In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.			
	ollowing questions apply to uscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>	
perta	ins to the epidemiology of	hypertension, you should	defined broadly. For example, if your manuscript declare all relationships with manufacturers of ot mentioned in the manuscript.	
	m #1 below, report all suppritems, the time frame for	•	d in this manuscript without time limit. For all months.	
		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)	
Time	e frame: Since the initial plan			
1	All support for the present	□ None		
	manuscript (e.g., funding, provision of study materials, medical writing,	Dansk Selskab for Anæstesi og Intensiv Medicin	40.000DKK	
	article processing charges, etc.)	Regionernes Medicin og Behandlingspulje 2022	686.710DKK	
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Tim	e frame: past 36 months		Silon (7.12 ii) last row to add onti a rows	
	o mamo, pust so months			
2	Grants or contracts from	None		
	any entity (if not indicated in item #1 above).			

3	Royalties or licenses	⊠ None
4	Consulting fees	
5	Payment or honoraria for	None     Non
	lectures, presentations,	
	speakers bureaus, manuscript writing or	
	educational events	
6	Payment for expert testimony	⊠ None
	testimony	
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7	Support for attending meetings and/or travel	
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8	Patents planned, issued or pending	
	pending	
9	Participation on a Data Safety Monitoring Board	None     Non
	or Advisory Board	
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10	Leadership or fiduciary role in other board,	None     Non
	society, committee or	
	advocacy group, paid or	
	unpaid	
11	Stock or stock options	
	, , , , , , , , , , , , , , , , , , , ,	23 None
12	Receipt of equipment,	⊠ None
-	materials, drugs, medical	ES NOTO
	writing, gifts or other	
	services	
13	Other financial or non-	None
	financial interests	

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Date:	16. januar 2023
Your n	ame: Jannie Bisgaard
	ript title: n of the PAIN trial: Perioperative Anesthesia by local INfiltration following median tomy
Manus	script number (if known):
are rela third pa commit	nterest of transparency, we ask you to disclose all relationships/activities/interests listed below that ted to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit arties whose interests may be affected by the content of the manuscript. Disclosure represents a ment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to lationship/activity/interest, it is preferable that you do so.
	owing questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>ript only</u> .

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Time frame: Since the initial pla	Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)      No time limit for this item.	None	

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Tim	Time frame: past 36 months		
2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ None	
3	Royalties or licenses	⊠ None	

4	Consulting fees	None     Non	
5	Payment or honoraria for	None     Non	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None     Non	
	meetings and/or travel		
8	Patents planned, issued or		
	pending	M NOTE	
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9	Participation on a Data Safety Monitoring Board		
	or Advisory Board		
	,		
10	Leadership or fiduciary		
	role in other board, society, committee or		
	advocacy group, paid or		
	unpaid		
	'		
11	Stock or stock options	None     Non	
12	Receipt of equipment,	None     Non	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None     Non	
	financial interests		

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Date	e: 27. januar 2023				
You	Your name: Jesper Langhoff Hønge				
Des	uscript title: ign of the PAIN trial: Pe notomy	rioperative Anesthesia b	by local INfiltration following median		
	nuscript number (if known)	):			
are re third comn list a	elated to the content of yo parties whose interests ma nitment to transparency ar relationship/activity/intere	ur manuscript. "Related" and be affected by the content does not necessarily incest, it is preferable that yo	relationships/activities/interests listed below that means any relation with for-profit or not-for-profit tent of the manuscript. Disclosure represents a dicate a bias. If you are in doubt about whether to bu do so.  Os/activities/interests as they relate to the current		
perta	ins to the epidemiology of	hypertension, you should	defined broadly. For example, if your manuscript declare all relationships with manufacturers of ot mentioned in the manuscript.		
	m #1 below, report all support	-	d in this manuscript without time limit. For all months.		
		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)		
Time	e frame: Since the initial plan				
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	⊠ None			
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	No time limit for this item.				
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4	Consulting fees	None     Non	
5	Payment or honoraria for	None     Non	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None     Non	
	meetings and/or travel		
8	Patents planned, issued or		
	pending	M NOTE	
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9	Participation on a Data Safety Monitoring Board		
	or Advisory Board		
	,		
10	Leadership or fiduciary		
	role in other board, society, committee or		
	advocacy group, paid or		
	unpaid		
	'		
11	Stock or stock options	None     Non	
12	Receipt of equipment,	None     Non	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None     Non	
	financial interests		

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Date	e: 13. januar 2023				
	Your name: Peter Juhl-Olsen				
Manua Des ster	Manuscript title: Design of the PAIN trial: Perioperative Anesthesia by local INfiltration following median sternotomy				
Mar	nuscript number (if known)	):			
are re third comr list a	In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.				
	ollowing questions apply to uscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>		
The author's relationships/activities/interests should be <u>defined broadly</u> . For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.					
	m #1 below, report all suppritems, the time frame for	•	d in this manuscript without time limit. For all months.		
		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)		
	e frame: Since the initial plan				
1	All support for the present manuscript (e.g., funding,	None     Non			
	provision of study				
	materials, medical writing,				
	article processing charges, etc.)				

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Tim	Time frame: past 36 months			
2	Grants or contracts from	⊠ None		
	any entity (if not indicated in item #1 above).			
	internal above).			
3	Royalties or licenses			

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item.

4	Consulting fees	None     Non	
5	Payment or honoraria for	None     Non	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None     Non	
	meetings and/or travel		
8	Patents planned, issued or		
	pending	M NOTE	
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9	Participation on a Data Safety Monitoring Board		
	or Advisory Board		
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10	Leadership or fiduciary		
	role in other board, society, committee or		
	advocacy group, paid or		
	unpaid		
	'		
11	Stock or stock options	None     Non	
12	Receipt of equipment,	None     Non	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None     Non	
	financial interests		

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Date	e: 16. januar 2023				
You	r name: Ivy S. Modrau				
Des	uscript title: ign of the PAIN trial: Pe notomy nuscript number (if known		by local INfiltration following median		
IVIAI	iuscript number (ii knowii	).	_		
are re third comr	In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to ist a relationship/activity/interest, it is preferable that you do so.				
	ollowing questions apply to uscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>		
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	m #1 below, report all sup items, the time frame for	•	d in this manuscript without time limit. For all months.		
		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)		
Time	e frame: Since the initial plan	ning of the work			
1	All support for the present	☐ None			
	manuscript (e.g., funding, provision of study materials, medical writing,	Dansk Selskab for Anæstesiologi og Intensiv Medicin	40.000,- DKK		
	article processing charges, etc.)	Regionernes Medicin og Behandlingspulje 2022	686.710,- DKK		
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	item.				
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Time	e frame: past 36 months				
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2	Grants or contracts from	□ None	Ladar and art records were 1/A COFT		
	any entity (if not indicated in item #1 above).	Health Research Foundation of Central	Independent research grant (A 3057)		

Denmark Region

3	Royalties or licenses	⊠ None	
4	Consulting fees	⊠ None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None     Non	
6	Payment for expert testimony	None     Non	
7	Support for attending meetings and/or travel	⊠ None	
8	Patents planned, issued or	⊠ None	
	pending		
9	Participation on a Data	⊠ None	
	Safety Monitoring Board or Advisory Board		
of Advisory Board			
10	Leadership or fiduciary	None     Non	
	role in other board,		
	society, committee or advocacy group, paid or		
	unpaid		
11	Stock or stock options	None     Non	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	⊠ None	
13	Other financial or non- financial interests	⊠ None	

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