

# ICMJE DISCLOSURE FORM

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**Date:** 24. februar 2024

**Your name:** Kathrine Bang Madsen

**Manuscript title:** Geographic variation of recorded neurodevelopmental disorders in children and adult

**Manuscript number (if known):**

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		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)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  <b>No time limit for this item.</b>	<input checked="" type="checkbox"/> <b>None</b>	

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## Time frame: past 36 months

2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> <b>None</b>	
3	Royalties or licenses	<input checked="" type="checkbox"/> <b>None</b>	

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

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**Date:** 12. februar 2024

**Your name:** Henriette Thisted Horsdal

**Manuscript title:** Geographic variation of recorded neurodevelopmental disorders in children and adult

**Manuscript number** (if known):

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**Date:** 19. februar 2024

**Your name:** Carsten Bøcker Pedersen

**Manuscript title:** Geographic variation of recorded neurodevelopmental disorders in children and adult

**Manuscript number (if known):**

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**Date:** 19. februar 2021

**Your name:** Wesley Thompson

**Manuscript title:** Geographic variation of recorded neurodevelopmental disorders in children and adult

**Manuscript number (if known):**

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Date: 19/2 2024

Your name: Sussie Antonsen

Manuscript title: Geographic variation of recorded neurodevelopmental disorders in children and adult

Manuscript number (if known):

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**Date:** 21. februar 2024

**Your name:** Chun Chieh Fan

**Manuscript title:** Geographic variation of recorded neurodevelopmental disorders in children and adult

**Manuscript number (if known):**

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		NIMH	R01 grants for studying brain development among adolescents
3	Royalties or licenses	<input checked="" type="checkbox"/> <b>None</b>	

4	Consulting fees	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
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**Date:** 9. februar 2024

**Your name:** Per Hove Thomsen

**Manuscript title:** Geographic variation of recorded neurodevelopmental disorders in children and adult

**Manuscript number (if known):**

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3	Royalties or licenses	<input type="checkbox"/> <b>None</b>	
		Royalties from books on ADHD from Danish Psychol Publ	

4	Consulting fees	<input type="checkbox"/> <b>None</b>	
		Speakers fee from Takeda and Medice	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> <b>None</b>	
		Speakers fee from Takeda and Medice	
6	Payment for expert testimony	<input checked="" type="checkbox"/> <b>None</b>	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> <b>None</b>	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> <b>None</b>	
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**Date:** 9. februar 2024

**Your name:** Rikke Wesselhoeft

**Manuscript title:** Geographic variation of recorded neurodevelopmental disorders in children and adult

**Manuscript number (if known):**

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**Date:** 20. februar 2024

**Your name:** Preben Bo Mortensen

**Manuscript title:** Geographic variation of recorded neurodevelopmental disorders in children and adult

**Manuscript number (if known):**

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