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Date: 01022025

Your name: Anne Mette Sørensen

Manuscript title: Implementation, completeness and data validity of the Danish Amputation Database (DanAmp).

Manuscript number (if known):

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.

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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)**
Time frame: Since the initial planning of the work			
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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**	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☒ **None**	
6	Payment for expert testimony	☒ **None**	
7	Support for attending meetings and/or travel	☒ **None**	
8	Patents planned, issued or pending	☒ **None**	
9	Participation on a Data Safety Monitoring Board or Advisory Board	☐ **None**	
		Member of educational board under Danish Orthopedic Society	Member of Educational Board "Uddannelsesudvalget" under the Danish Ortopedic Society
			Unpaid
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☒ **None**	
11	Stock or stock options	☒ **None**	
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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Date: 23. januar 2025

Your name: Christen Ravn

Manuscript title: Implementation, completeness and data validity of the Danish Amputation Database (DanAmp).

Manuscript number (if known):

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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**	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☐ **None**	
		Course director honoraria from the Danish Health Authority	Educational course of 'infectious surgery and amputation' for residents in orthopaedic surgery

6	Payment for expert testimony	☒ **None**	

7	Support for attending meetings and/or travel	☒ **None**	

8	Patents planned, issued or pending	☒ **None**	

9	Participation on a Data Safety Monitoring Board or Advisory Board	☒ **None**	

10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☒ **None**	

11	Stock or stock options	☒ **None**	

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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Please save/export the filled in **form as PDF** before submitting it to Ugeskrift for Læger or Danish Medical Journal.

Date: 4. februar 2025

Your name: Morten Tange Kristensen

Manuscript title: Implementation, completeness and data validity of the Danish Amputation Database (DanAmp).

Manuscript number (if known):

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.

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1	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**	
			The present manuscript has received funding from "Danmarks frie forskningsfond" men uden på nogen måde at have haft indflydelse på dataindsamling, analyser og indhold i manuskript. Funding er givet til Bispebjerg Hospital, der administrerer midlerne jf. ansøgnings budget.

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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**	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☒ **None**	

6	Payment for expert testimony	☒ **None**	

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13	Other financial or non-financial interests	☒ **None**	

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Date: 3. februar 2025

Your name: Dea Krogh Larsen

Manuscript title: Implementation, completeness and data validity of the Danish Amputation Database (DanAmp).

Manuscript number (if known):

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Time frame: past 36 months

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6	Payment for expert testimony	☒ **None**	
7	Support for attending meetings and/or travel	☒ **None**	
8	Patents planned, issued or pending	☒ **None**	
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Please save/export the filled in **form as PDF** before submitting it to Ugeskrift for Læger or Danish Medical Journal.

Date: 20. januar 2025

Your name: Per Hviid Gundtoft

Manuscript title: Implementation, completeness and data validity of the Danish Amputation Database (DanAmp).

Manuscript number (if known):

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Date: 4. februar 2025

Your name: Poul Pedersen

Manuscript title: Implementation, completeness and data validity of the Danish Amputation Database (DanAmp).

Manuscript number (if known):

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Date: 14. januar 2025

Your name: Rehne Lessmann Hansen

Manuscript title: Implementation, completeness and data validity of the Danish Amputation Database (DanAmp).

Manuscript number (if known):

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Date: 14. december 2024

Your name: Signe Hulsbæk

Manuscript title: Implementation, completeness and data validity of the Danish Amputation Database

Manuscript number (if known):

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3	Royalties or licenses	☒ **None**	

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8	Patents planned, issued or pending	☒ **None**	
9	Participation on a Data Safety Monitoring Board or Advisory Board	☒ **None**	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☒ **None**	
11	Stock or stock options	☒ **None**	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	
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Date: 17012025

Your name: Ulla Riis Madsen

Manuscript title: Implementation, completeness and data validity of the Danish Amputation Database (DanAmp).

Manuscript number (if known):

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.

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Time frame: past 36 months

2	Grants or contracts from any entity (if not indicated in item #1 above).	☐ **None**	
		Research Grant from Steno Diabetes Center Sjaelland 2021	Payment to my institution

3	Royalties or licenses	☒ **None**	

4	Consulting fees	☒ **None**	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☒ **None**	

6	Payment for expert testimony	☒ **None**	

7	Support for attending meetings and/or travel	☐ **None**	
		European Wound Management Association, EWMA	Invited speaker at EWMA conference 2023 + 2024, participation, travel and accommodation supported.

8	Patents planned, issued or pending	☒ **None**	

9	Participation on a Data Safety Monitoring Board or Advisory Board	☒ **None**	

10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☐ **None**	
		Amputation Rehabilitation Denmark, ARD	Vice-chairman of this Professional society

11	Stock or stock options	☒ **None**	

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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Date: 28. januar 2025

Your name: Veronica Leeberg

Manuscript title: Implementation, completeness and data validity of the Danish Amputation Database (DanAmp).

Manuscript number (if known):

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