

ICMJE DISCLOSURE FORM

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Date: 25. februar 2024

Your name: Jeanette Kaae

Manuscript title: Kutane bivirkninger ved behandling med immunterapi

Manuscript number (if known): UFL-11-23-0725

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Time frame: past 36 months

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3	Royalties or licenses	<input checked="" type="checkbox"/> None	

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 type="checkbox"/> None	
		Advisory board, Almirall.	Advisory board, BMS
		Undervising AbbVie	
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: 10. marts 2024

Your name: Christian Vestergaard

Manuscript title: Kutane bivirkninger ved behandling med immunterapi

Manuscript number (if known): UFL-11-23-0725

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

4	Consulting fees	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		Sanofi, Novartis, Pfizer, Eli Lilly, Almirall, GSK, Astra Zeneca	Lectures
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
		Sanofi, Pfizer	EADV
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
		MEDA	Elidel safety Board
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None	
		Nordic Dermatological Associations	President
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: 10-3-2024

Your Name: Inge Marie Svane

Manuscript: **Kutane bivirkninger ved behandling med immunterapi**

Manuscript number (if known): UFL-11-23-0725

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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input type="checkbox"/> None	
		Evaxion Biotech	To my institution
		Adaptimmune	To my institution
		IO Biotech	To my institution
		Lytix biopharma	To my institution
		TILT Biotherapeutics	To my institution
		Enara Bio	To my institution
	Asgard Biotech	To my institution	
3	Royalties or licenses	<input checked="" type="checkbox"/> None	

4	Consulting fees	<input type="checkbox"/> None MSD personal IO Biotech personal Novartis personal Pierre Fabre personal TILT Biotherapeutics personal 	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None MSD personal Novartis personal Sanofi Aventis personal Pierre Fabre personal BMS personal Novo nordisk personal Takeda personal 	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None 	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None MSD 	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None 	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None Only Academic trial DSMBs 	
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 type="checkbox"/> None IO Biotech personal 	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input type="checkbox"/> None BMS Relatlimab for clinical trial 	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None 	

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Date: 10. marts 2024

Your name: Jesper Andreas Palshof

Manuscript title: Kutane bivirkninger ved behandling med immunterapi

Manuscript number (if known): UFL-11-23-0725

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3	Royalties or licenses	<input checked="" type="checkbox"/> None	

4	Consulting fees	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		MSD	Presentations and lectures
		BMS	Presentations and lectures
		Ipsen	Educational
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
		MSD	ASCO GU 2024
		Ipsen	EIKCS 2024
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
		MSD	Advisory board
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: 13. marts 2024

Your name: Aska Drljevic-Nielsen

Manuscript title: Kutane bivirkninger ved behandling med immunterapi

Manuscript number (if known): UFL-11-23-0725

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Date: 18. marts 2024

Your name: Berit Christina Carlsen

Manuscript title: Kutane bivirkninger ved behandling med immunterapi

Manuscript number (if known): UFL-11-23-0725

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7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
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