Date	<b>e</b> : 10. november 2024		
You	r name: Rasmus Søgaar	d Hansen	
Mar	nuscript title: Antifos	folipid-antistoffer og antifosf	Folipid-syndrom
Mar	nuscript number (if known	): UFL-09-23-0553	
are re third comn list a	elated to the content of yo parties whose interests m nitment to transparency a relationship/activity/intere	ur manuscript. "Related" ay be affected by the cont nd does not necessarily in est, 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.  Discriptions/interests as they relate to the current
perta antih In ite	nins to the epidemiology of ypertensive medication, e	hypertension, you should yen if that medication is n port for the work reported	defined broadly. For example, if your manuscript declare all relationships with manufacturers of ot mentioned in the manuscript.  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 plar	ning of the work	
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	⊠ None	
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Time	e 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	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	None     Non	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	⊠ None	
	pending		
9 Participation on a Data		⊠ None	
	Safety Monitoring Board		
	or Advisory Board		
10	Leadership or fiduciary	□ None	
	role in other board,	Board Member, Danish	
	society, committee or	Society on Thrombosis	
	advocacy group, paid or unpaid	and Haemostasis	
	dipara		
11	Stock or stock options	⊠ None	
''	Stock of Stock options	None	
12	Receipt of equipment,	⊠ None	
12	materials, drugs, medical	M NOTE	
	writing, gifts or other		
	services		
13	Other financial or non-		
	financial interests	EN NOTICE	
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Date: 7. november 2023			
Your name: Anne Voss			
Manuscript title: Antifosfolipid-antistoffer og antifosfolipid-syndrom			
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Tim	Time frame: past 36 months			
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3	Royalties or licenses	None     Non		

4	Consulting fees	⊠ None
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None 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
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None None
11	Stock or stock options	None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None None
13	Other financial or non- financial interests	None

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Ma	Manuscript title: Antifosfolipid-antistoffer og antifosfolipid-syndrom			
Ma	nuscript number (if known	): UFL-09-23-0553		
are r third com	elated to the content of yo parties whose interests m	our manuscript. "Related" ay be affected by the con- nd does not necessarily in	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.	
	following questions apply to uscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>	
perta	ains 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.	
	em #1 below, report all sup r 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)	
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TIM	e frame: past 36 months			
2	Grants or contracts from	None		

any entity (if not indicated

None
 Non

in item #1 above).

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	□ None Lecture honoraria, Bristol-Myers Squibb	Paid to my institution.
	Daymant for ayport	N N	
6	Payment for expert testimony	None     Non	
7	Support for attending meetings and/or travel	☐ None  Travel support for  Nordic Coagulation  Meeting 2021, Bayer	
8	Patents planned, issued or	None     Non	
	pending	2 140110	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None     Non	
10	Leadership or fiduciary	□ None	
10	role in other board, society, committee or advocacy group, paid or unpaid	□ None  Board Member, Danish Society on Thrombosis and Haemostasis	
11	Stock or stock options	⊠ None	
12	Receipt of equipment,	None     Non	
	materials, drugs, medical		
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13	Other financial or non-	None     Non	
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Date: 8. november 2023			
Your name: Pernille Just Vinholt			
Manuscript title: Antifosfolipid-antistoffer og antifosfolipid-syndrom			
Manuscript number (if known): UFL-09-23-0553			
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6	Payment for expert testimony	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 None
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Date: 7. november 2023		
Your name: Anders Abildgaard		
Manuscript title: Antifosfolipid-antistoffer og antifosfolipid-syndrom		
Manuscript number (if known): UFL-09-23-0553		
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3	Royalties or licenses	None     Non					

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 Siemens Healthineers Travel support for Siemens He	mostasis Days, 2022
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 None	
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