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Date: 15. november:	2023	
Your name: Mariam Nersesjan		
Manuscript title: Behandling af kvalme hos akut indlagte patienter		
Manuscript number (if known): UFL-07-23-0441		

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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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item.		
1	All support for the present manuscript (e.g., funding,	whom you have this relationship or indicate none (add rows as needed) frame: Since the initial planning of the work All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this

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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).		
3	Royalties or licenses	None	

4	Consulting fees	⊠ None
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None
	educational events	
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	Name .
7	Participation on a Data Safety Monitoring Board or Advisory Board	None Non
10		None Non
	role in other board, society, committee or	
	advocacy group, paid or unpaid	
11	Stock or stock options	None
12	2 Receipt of equipment, materials, drugs, medical writing, gifts or other services	None
13	Other financial or non-	M None
13	financial interests	None Non

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Date: 23	3. november 2023		
Your nam	Your name: Simon Carstensen Nersesjan		
Manuscript title: Behandling af kvalme hos akut indlagte patienter			
Manuscript number (if known): UFL-07-23-0441			

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The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

Tim	e frame: Since the initial plar	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)
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	

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Tim	Time frame: past 36 months			
2	Grants or contracts from	None Non		
	any entity (if not indicated			
	in item #1 above).			
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	⊠ None
	meetings and/or travel	
8	Patents planned, issued or pending	None
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None
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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
10	Description to the state of the	
12	Receipt of equipment, materials, drugs, medical	⊠ None
	writing, gifts or other	
	services	
13	Other financial or non-	⊠ None
	financial interests	

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Yo	our name: Lars Pede	rsen	
M	anuscript title:	Behandling af kvalme hos akut ind	dlagte patienter
М	anuscript number (if k	nown): UFL-07-23-0441	
are thir con	related to the content d parties whose interes nmitment to transparer	of your manuscript. "Related" sts may be affected by the cor	Il relationships/activities/interests listed below that means any relation with for-profit or not-for-profit or not-for-
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pert	tains to the epidemiolo	gy of hypertension, you shoul	defined broadly. For example, if your manuscript d declare all relationships with manufacturers of not mentioned in the manuscript.
		I support for the work reporte e for disclosure is the past 36	ed 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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	manuscript (e.g., fundi provision of study materials, medical writ article processing charge	ing,	
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Tim	ne frame: past 36 months		
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2	Grants or contracts from		

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

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Date	e: 22. november 2023				
You	r name: Mikkel Bring Ch	ristensen			
Mar	Manuscript title: Behandling af kvalme hos akut indlagte patienter				
Mar	nuscript number (if known)): UFL-07-23-0441			
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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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Time	e frame: past 36 months				
2	Grants or contracts from	None Non			
	any entity (if not indicated				
	in item #1 above).				
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
13	Other financial or non- financial interests	None

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