

# ICMJE DISCLOSURE FORM

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**Date:** 18. november 2025

**Your name:** Christian Lyngsaa Lang

**Manuscript title:** Arvæv i huden: Udredning og behandling på tværs af sektorer

**Manuscript number (if known):** UFL-06-25-0515

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| 3                          | Royalties or licenses                                                    | <input checked="" type="checkbox"/> None |  |
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| 4  | Consulting fees                                                                                              | <input checked="" type="checkbox"/> None |  |
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| 6  | Payment for expert testimony                                                                                 | <input checked="" type="checkbox"/> None |  |
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| 7  | Support for attending meetings and/or travel                                                                 | <input checked="" type="checkbox"/> None |  |
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| 8  | Patents planned, issued or pending                                                                           | <input checked="" type="checkbox"/> None |  |
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| 9  | Participation on a Data Safety Monitoring Board or Advisory Board                                            | <input checked="" type="checkbox"/> None |  |
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| 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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| 11 | Stock or stock options                                                                                       | <input checked="" type="checkbox"/> None |  |
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| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services                             | <input checked="" type="checkbox"/> None |  |
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| 13 | Other financial or non-financial interests                                                                   | <input checked="" type="checkbox"/> None |  |
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**Date:** 18. november 2025

**Your name:** Laura Hansen

**Manuscript title:** Arvæv i huden: Udredning og behandling på tværs af sektorer

**Manuscript number (if known):** UFL-06-25-0515

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**Date:** 18. november 2025

**Your name:** Misk Ghassan Farik Muhammad

**Manuscript title:** Arvæv i huden: Udredning og behandling på tværs af sektorer

**Manuscript number (if known):** UFL-06-25-0515

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**Date:** 18. november 2025

**Your name:** Peter Stemmann Andersen

**Manuscript title:** Arvæv i huden: Udredning og behandling på tværs af sektorer

**Manuscript number (if known):** UFL-06-25-0515

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| 8  | Patents planned, issued or pending                                                                           | <input checked="" type="checkbox"/> None |  |
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| 11 | Stock or stock options                                                                                       | <input checked="" type="checkbox"/> None |  |
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**Date:** 18. november 2025

**Your name:** Peter Viktor Vester-Glowinski

**Manuscript title:** Arvæv i huden: Udredning og behandling på tværs af sektorer

**Manuscript number (if known):** UFL-06-25-0515

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|    |                                                                                                              |                                          |  |
| 13 | Other financial or non-financial interests                                                                   | <input checked="" type="checkbox"/> None |  |
|    |                                                                                                              |                                          |  |
|    |                                                                                                              |                                          |  |

Please place an "X" next to the following statement to indicate your agreement:

☒ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

**IMPORTANT for Ugeskrift for Læger & Danish Medical Journal**

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

