

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Jesper

2. Surname (Last Name)

Hallas

3. Date

02-March-2018

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Charlotte Skriver

5. Manuscript Title

Use of Low-Dose Aspirin and Mortality after Prostate Cancer: A Nationwide Cohort Study

6. Manuscript Identifying Number (if you know it)

M17-3085

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Dr. Hallas has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Henrik Toft

2. Surname (Last Name)
Sørensen

3. Date
02-March-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Charlotte Skriver

5. Manuscript Title
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1. Given Name (First Name) Michael	2. Surname (Last Name) Borre	3. Date 02-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Charlotte Skriver
5. Manuscript Title Use of Low-Dose Aspirin and Mortality after Prostate Cancer: A Nationwide Cohort Study		
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1. Given Name (First Name) Christian	2. Surname (Last Name) Dehlendorff	3. Date 02-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name
5. Manuscript Title Use of Low-Dose Aspirin and Mortality after Prostate Cancer: A Nationwide Cohort Study		
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Dr. Dehlendorff has nothing to disclose.

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Anton

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Pottegård

3. Date

01-March-2018

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Corresponding Author's Name

Charlotte Skriver

5. Manuscript Title

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Mette	2. Surname (Last Name) Nørgaard	3. Date 01-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Charlotte Skriver
5. Manuscript Title Use of Low-Dose Aspirin and Mortality after Prostate Cancer: A Nationwide Cohort Study		
6. Manuscript Identifying Number (if you know it) M17-3085		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
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Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Nørgaard has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Søren	2. Surname (Last Name) Friis	3. Date 13-December-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Charlotte Skriver
5. Manuscript Title Use of Low-Dose Aspirin and Mortality after Prostate Cancer Diagnosis: A Nationwide Cohort Study		
6. Manuscript Identifying Number (if you know it) M17-3085		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Friis has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Susanne	2. Surname (Last Name) Dalton	3. Date 11-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Charlotte Skriver
5. Manuscript Title Use of Low-Dose Aspirin and Mortality after Prostate Cancer: A Nationwide Cohort Study		
6. Manuscript Identifying Number (if you know it) M17-3085		

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Charlotte

2. Surname (Last Name)
Skriver

3. Date
13-December-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title

Use of Low-Dose Aspirin and Mortality after Prostate Cancer Diagnosis: A Nationwide Cohort Study

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

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Dr. Skriver has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Klaus	2. Surname (Last Name) Brasso	3. Date 08-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Charlotte Skriver
5. Manuscript Title Use of Low-Dose Aspirin and Mortality after Prostate Cancer: A Nationwide Cohort Study.		
6. Manuscript Identifying Number (if you know it) M17-3085		

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Brasso has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Signe Benzon

2. Surname (Last Name)

Larsen

3. Date

05-March-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Charlotte Skriver

5. Manuscript Title

Use of low-dose aspirin and mortality after prostate cancer: a nationwide study

6. Manuscript Identifying Number (if you know it)

M17-3085

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Dr. Larsen has nothing to disclose.

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