

# ICMJE DISCLOSURE FORM

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**Date:** 6. april 2021

**Your name:** Aleksander Krag

**Manuscript title:** Redaktør

**Manuscript number** (if known):

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.

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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.

		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)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  <b>No time limit for this item.</b>	<input checked="" type="checkbox"/> <b>None</b>	

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<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input type="checkbox"/> <b>None</b>	
		EU Horizon 2020	Coordinator of Galaxy, EU funded under grant agreement No 668031
		EU Horizon 2020	PI in LiverScreen, EU funded under grant agreement No 847989
		EU Horizon 2020	PI in MicrobPredict, EU funded under grant agreement No 825694.
		EU Horizon 2020	PI in IHMCSA, EU funded under grant agreement No 964590

		Novo Nordisk Foundation	PI in MicrobLiver, A Challenge Grant, grant number NNF15OC0016692 from the Novo Nordisk Foundation
		Innovationsfonden	Research funding, Innoexplorer
		Danmarks Grundforskningsfond	PI in ATLAS, Grundforskningscenter
		Region Syddanmark	Center grant for Elite Research Centre FLASH

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

4	Consulting fees	<input checked="" type="checkbox"/> <b>None</b>	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> <b>None</b>	
		Norgine	Lectures
		Siemens	lectures, speaker's bureau

6	Payment for expert testimony	<input checked="" type="checkbox"/> <b>None</b>	

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

8	Patents planned, issued or pending	<input checked="" type="checkbox"/> <b>None</b>	

9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> <b>None</b>	

10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> <b>None</b>	

11	Stock or stock options	<input checked="" type="checkbox"/> <b>None</b>	

12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input type="checkbox"/> <b>None</b>	
		Norgine	Rifaximin for an investigator initiated study, Galaxy EU funded under grant agreement No 847989
		Siemens	ELF test for an investigator initiated study

		Echosence	Fibroscan for an investigator initiated study, LiverScreen EU funded under grant agreement No 847989
13	Other financial or non- financial interests	<input checked="" type="checkbox"/> <b>None</b>	

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.

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