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### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Thomas

2. **Surname (Last Name)**
   - Benfield

3. **Date**
   - 11-August-2020

4. **Are you the corresponding author?**
   - Yes ☑️

5. **Manuscript Title**
   - Face mask for the protection against COVID-19 - a randomized controlled trial (DANMASK-19)

### 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

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If yes, please fill out the appropriate information below.

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Section 4. Intellectual Property -- Patents & Copyrights

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

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Section 6. Disclosure Statement

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Dr. Benfield reports grants from Pfizer, grants from Novo Nordisk Foundation, grants from Simonsen Foundation, grants and personal fees from GSK, grants and personal fees from Pfizer, personal fees from Boehringer Ingelheim, grants and personal fees from Gilead, personal fees from MSD, grants from Lundbeck Foundation, grants from Kai Hansen Foundation, outside the submitted work.
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Friis Mariager
## Section 1. Identifying Information

1. **Given Name (First Name)**
   - Anton

2. **Surname (Last Name)**
   - Friis Mariager

3. **Date**
   - 18-May-2020

4. **Are you the corresponding author?**
   - Yes ☑ No

   **Corresponding Author’s Name**
   - Henning Bundgaard

5. **Manuscript Title**
   - Face mask for the protection against COVID-19 - a randomized controlled trial (DANMASK-19)

6. **Manuscript Identifying Number (if you know it)**
   - 

## Section 2. The Work Under Consideration for Publication

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  ☐ Yes ☑ No
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Dr. Friis Mariager has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Christian
2. Surname (Last Name) von Buchwald
3. Date 03-May-2020
4. Are you the corresponding author? ☑ Yes ☐ No

5. Manuscript Title
Face mask for the protection against COVID-19 - a randomized controlled trial (DANMASK-19)

6. Manuscript Identifying Number (if you know it)

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<td>Iversen</td>
<td>18-May-2020</td>
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</table>

4. Are you the corresponding author? [ ] Yes [x] No

Corresponding Author's Name: Bundgaard

5. Manuscript Title
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6. Manuscript Identifying Number (if you know it)

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Dr. Iversen has nothing to disclose.

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1. Given Name (First Name)  
   Daniel Emil

2. Surname (Last Name)  
   Raaschou-Pedersen

3. Date  
   18-May-2020

4. Are you the corresponding author?  
   - [ ] Yes  
   - [x] No

   Corresponding Author’s Name  
   Henning Bundgaard

5. Manuscript Title  
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Are there any relevant conflicts of interest?  
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- [x] No

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Are there any relevant conflicts of interest?  
- [ ] Yes  
- [x] No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
- [ ] Yes  
- [x] No
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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) Henrik
2. Surname (Last Name) Ullum
3. Date 20-May-2020
4. Are you the corresponding author? Yes No
   Corresponding Author’s Name Henning Bundgaard
5. Manuscript Title
   Face mask for the protection against COVID-19 - a randomized controlled trial (DANMASK-19)
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Dr. Ullum has nothing to disclose.

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Skovgaard
### Section 1. Identifying Information

<table>
<thead>
<tr>
<th>1. Given Name (First Name)</th>
<th>2. Surname (Last Name)</th>
<th>3. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kerstin</td>
<td>Skovgaard</td>
<td>18-May-2020</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? □ Yes ✔ No

Corresponding Author’s Name
Henning Bundgaard

5. Manuscript Title
Face mask for the protection against COVID-19 - a randomized controlled trial (DANMASK-19)

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. Given Name (First Name)  
   Mikkel Porsborg

2. Surname (Last Name)  
   Andersen

3. Date  
   18-May-2020

4. Are you the corresponding author?  
   Yes [ ]  No [X]

   Corresponding Author’s Name  
   Henning Bundgaard

5. Manuscript Title  
   Face mask for the protection against COVID-19 - a randomized controlled trial (DANMASK-19)

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## 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 [X]

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Dr. Andersen has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Natasja
2. Surname (Last Name)  Schytte
3. Date  20-May-2020

4. Are you the corresponding author?  Yes ☐ No ☑

Corresponding Author’s Name  Kasper Iversen

5. Manuscript Title
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Todsen
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Tobias
2. Surname (Last Name) Todsen
3. Date 18-May-2020

4. Are you the corresponding author? [ ] Yes [ ] No

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Section 1. Identifying Information

1. Given Name (First Name)  Christian
2. Surname (Last Name)  Torp-Pedersen
3. Date  13-August-2020
4. Are you the corresponding author?  Yes  ❑  No
   Corresponding Author’s Name
   Henning Bundgaard

5. Manuscript Title
   Face mask for the protection against COVID-19 - a randomized controlled trial (DANMASK-19) - Protocol article

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

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If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
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<th>Non-Financial Support?</th>
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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. Torp-Pedersen reports grants from Bayer, grants from Novo Nordisk, outside the submitted work.

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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) Ramona
2. Surname (Last Name) Trebbien
3. Date 12-August-2020
4. Are you the corresponding author? ☑ Yes ☐ No
   Corresponding Author’s Name Henning Bundgaard
5. Manuscript Title
   Face mask for the protection against COVID-19 - a randomized controlled trial (DANMASK-19)
6. Manuscript Identifying Number (if you know it)
   UFL-05-20-0363

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Dr. Trebbien has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

<table>
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<th>1. Given Name (First Name)</th>
<th>Henning</th>
</tr>
</thead>
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<tr>
<td>2. Surname (Last Name)</td>
<td>Bundgaard</td>
</tr>
<tr>
<td>3. Date</td>
<td>17-May-2020</td>
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4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Face mask for the protection against COVID-19 - a randomized controlled trial (DANMASK-19)

6. Manuscript Identifying Number (if you know it)

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## Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Bundgaard has nothing to disclose.

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Section 1.  Identifying Information

1. Given Name (First Name)  Johan
2. Surname (Last Name)  Bundgaard
3. Date  17-May-2020

4. Are you the corresponding author?  
   Yes  [ ]  No  [X]

   Corresponding Author's Name  Henning Bundgaard

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