ICMJE DISCLOSURE FORM

Date: 070823
Name: Gudjon Leifur Gunnarsson
Manuscript Title: Breast Reconstruction with Donor Tissue from the Back - An Evolution Towards Customize
Reconstructive Solutions Guided by Innovative Surgery and Patient Wishes
Manuscript number (if known): GS-23-325

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.

		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)
		Time frame: Since the initial	planning of the work
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	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frames need	26 mantha
2		Time frame: past	36 months
2	Grants or contracts from	X_None	
	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	X None	
	,		
4	Consulting fees	X_None	

5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X_None	
	testimony		
7	Support for attending meetings and/or travel	X_None	
8	Patents planned, issued or	X_None	
	pending		
9	Participation on a Data	X_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X_None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X_None	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	X_None	
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Please summarize the above conflict of interest in the following box:

None			

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

X 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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Date: 070823
Name: Caroline Lilja
Manuscript Title: Breast Reconstruction with Donor Tissue from the Back - An Evolution Towards Customize
Reconstructive Solutions Guided by Innovative Surgery and Patient Wishes
Manuscript number (if known): GS-23-325

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ICMJE DISCLOSURE FORM

Date: 070823	
Name: Jørn Bo Thomsen	
Manuscript Title: Breast Reconstruction with Donor Tissue from the Back - An Evolution Towards Custo	mized
Reconstructive Solutions Guided by Innovative Surgery and Patient Wishes	

Manuscript number (if known): GS-23-325

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