ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Liu
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Bei
2. Surname (Last Name)  Liu
3. Date  29-January-2022

4. Are you the corresponding author?  Yes  No

5. Manuscript Title
Del(5q) and inv(3) in myelodysplastic syndrome: a rare case report and review of the literature

6. Manuscript Identifying Number (if you know it)
73844

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Section 6. Disclosure Statement

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Dr. Liu has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)  
Haiping

2. Surname (Last Name)  
Liang

3. Date  
29-January-2022

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

Corresponding Author’s Name  
Bei Liu

5. Manuscript Title  
Del(5q) and inv(3) in myelodysplastic syndrome: a rare case report and review of the literature

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Dr. Liang has nothing to disclose.

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1. Given Name (First Name) Xingchun
2. Surname (Last Name) Luo
3. Date 29-January-2022
4. Are you the corresponding author? ☐ Yes ☑ No

Corresponding Author's Name
Beil Liu

5. Manuscript Title
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1. Given Name (First Name) Yali
2. Surname (Last Name) Zhang
3. Date 29-January-2022

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Bei Liu

5. Manuscript Title
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