

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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2. The work under consideration for publication.

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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)

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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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

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Dr. Liu has nothing to disclose.

Evaluation and Feedback

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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

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Dr. Liang has nothing to disclose.

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Xingchun

2. Surname (Last Name)

Luo

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29-January-2022

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☐ Yes

☒ No

Corresponding Author's Name

Bei Liu

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Yali

2. Surname (Last Name)

Zhang

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29-January-2022

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☐ Yes

☒ No

Corresponding Author's Name

Bei Liu

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