

## ICMJE DISCLOSURE FORM

Date: December 1<sup>th</sup>, 2022

Your Name: Feifan Xu

Manuscript Title: The expression and clinical value of peripheral blood B and T lymphocyte attenuator in patients with pulmonary tuberculosis

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.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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Please summarize the above conflict of interest in the following box:

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## ICMJE DISCLOSURE FORM

Date: December 1<sup>th</sup>, 2022

Your Name: Keyun Bian

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## ICMJE DISCLOSURE FORM

Date: December 1<sup>th</sup>, 2022

Your Name: Shouwei Wang

Manuscript Title: The expression and clinical value of peripheral blood B and T lymphocyte attenuator in patients with pulmonary tuberculosis

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## ICMJE DISCLOSURE FORM

Date: December 1<sup>th</sup>, 2022

Your Name: Fan Yao

Manuscript Title: The expression and clinical value of peripheral blood B and T lymphocyte attenuator in patients with pulmonary tuberculosis

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Your Name: Jinling Chen

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