

ICMJE DISCLOSURE FORM

Date: 2022/11/04
 Your Name: Ruihua Mi
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
 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.

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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.

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Time frame: past 36 months			
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4	Consulting fees	<u> X </u> None	

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 2022/11/04
 Your Name: Lin Chen
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
 Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/11/04
 Your Name: Xiaojiao Wang
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
 Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/11/04
 Your Name: Qingsong Yin
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
 Manuscript number (if known): _____

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Date: 2022/11/04
 Your Name: Zhanfang Wang
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
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ICMJE DISCLOSURE FORM

Date: 2022/11/04
 Your Name: Xiaomiao Ma
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
 Manuscript number (if known): _____

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Date: 2022/11/04

Your Name: Yulin Xu

Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study

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Date: 2022/11/04
 Your Name: Shuxia Chen
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
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Date: 2022/11/04
 Your Name: Genjie Wang
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
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Date: 2022/11/04
 Your Name: Haiping Yang
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
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Date: 2022/11/04
 Your Name: Zhichun Li
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3	Royalties or licenses	<input checked="" type="checkbox"/> None	
4	Consulting fees	<input checked="" type="checkbox"/> None	

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 2022/11/04
 Your Name: Huirui Wang
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
 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.

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ICMJE DISCLOSURE FORM

Date: 2022/11/04
 Your Name: Shuli Guo
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
 Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/11/04
 Your Name: Hongmian Zhao
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
 Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/11/04

Your Name: Qinglin Song

Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/11/04
 Your Name: Wenyong Li
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
 Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/11/04
 Your Name: Jingdong Li
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
 Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/11/04
 Your Name: Xudong Wei
 Manuscript Title: Combined recombinant human interferon- α -1b, interleukin-2, and thalidomide for the treatment of acute myeloid leukemia in various disease states: a retrospective study
 Manuscript number (if known): _____

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