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Your Name: Yiyang Liu

Manuscript Title:Surgical treatment of recurrent acute lymphoblastic leukemia with humeral osteomyelitis as the first

symptom: a case report and literature review

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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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	None None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
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	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		
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There is no any conflict of interest.		

Date:2021-3-9	1

Your Name: Chun Zhang

Manuscript Title:Surgical treatment of recurrent acute lymphoblastic leukemia with humeral osteomyelitis as the first

symptom: a case report and literature review

Manuscript number (if known):_____

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	financial interests		
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There is no any conflict of interest.		

Date	. 20	111	2 0
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Your Name: Lifeng Shen

Manuscript Title:Surgical treatment of recurrent acute lymphoblastic leukemia with humeral osteomyelitis as the first

symptom: a case report and literature review

Manuscript number (if known):_____

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There is no any conflict of interest.		

Date	. 20	111	2 0
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Your Name: Haiyong Ren

Manuscript Title:Surgical treatment of recurrent acute lymphoblastic leukemia with humeral osteomyelitis as the first

symptom: a case report and literature review

Manuscript number (if known):______

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	testimony		
7	Support for attending meetings and/or travel	None	
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There is no any conflict of interest.		

Date: 2021-3-9									
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Your Name: Yangjun Lao

Manuscript Title:Surgical treatment of recurrent acute lymphoblastic leukemia with humeral osteomyelitis as the first

symptom: a case report and literature review

Manuscript number (if known):_____

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	financial interests		
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There is no any conflict of interest.		

Date	ഹ	121	2 0
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Your Name: Meng Zhou

Manuscript Title:Surgical treatment of recurrent acute lymphoblastic leukemia with humeral osteomyelitis as the first

symptom: a case report and literature review

Manuscript number (if known):_____

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	financial interests		
Dla	ase summarize the above o	anflict of interest in the	following hov:

There is no any conflict of interest.		

Date	. 20	111	2 0
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Your Name: Huifang Jiang

Manuscript Title:Surgical treatment of recurrent acute lymphoblastic leukemia with humeral osteomyelitis as the first

symptom: a case report and literature review

Manuscript number (if known):_____

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11	group, paid or unpaid Stock or stock options	None	
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12	Receipt of equipment,	None	
	materials, drugs, medical	Tronc	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
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Ple	ease summarize the above c	onflict of interest in the	following box:

There is no any conflict of interest.				

Date	· 7ſ	171	_2_Q
Date	.ZL	,_,	-3-3

Your Name: Bingyuan Lin

Manuscript Title:Surgical treatment of recurrent acute lymphoblastic leukemia with humeral osteomyelitis as the first

symptom: a case report and literature review

Manuscript number (if known):_____

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