Date:Se	p 8 th , 2021
Your Name	e:_Chenglong Li
Manuscrip	ot Title:_Relationship between the absolute lymphocyte count (ALC)/absolute monocyte count (AMC) ratio,
soluble int	terleukin 2 receptor (sIL-2R) level, serum programmed cell death 1 (PD-1) level, and the prognosis of patients
with diffus	se large B-cell lymphoma
Manuscrip	ot 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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		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
	All		planning of the work
1	All support for the present	X_None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.) No time limit for this item.		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	_X_None	
4	Consulting fees	X None	

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	X_None	
	pending		
_	5	V N	
9	Participation on a Data Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
10	in other board, society,	X_None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the fo	llowing box:
	None.		

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

Date:Sep 8 th , 2021
Your Name: Wenxian Li
Manuscript Title:_Relationship between the absolute lymphocyte count (ALC)/absolute monocyte count (AMC) ratio,
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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.	Sichuan Neo-life Stem Cell Biotech INC.	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	_X_None		
5	Payment or honoraria for	_X_None		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or educational events			
6	Payment for expert	X None		
	testimony			
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or	X_None		
	pending			
9	Participation on a Data	X None		
,	Safety Monitoring Board or	None		
	Advisory Board			
10	Leadership or fiduciary role	X_None		
	in other board, society,			
	committee or advocacy group, paid or unpaid			
11	Stock or stock options	X_None		
12	Receipt of equipment,	X None		
12	materials, drugs, medical	X_NOTE		
	writing, gifts or other			
	services			
13	Other financial or non- financial interests	<u>X</u> None		
	illialiciai liiterests			
Ple	Please summarize the above conflict of interest in the following box:			
	The author receives study mate	rials or patients from Sichuan Neo-life Stem Cell Biotech INC.		

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Your Name: Guochao Xu
Manuscript Title: Relationship between the absolute lymphocyte count (ALC)/absolute monocyte count (AMC) ratio,
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3	Royalties or licenses	XNone	

4	Consulting fees	X_None		
5	Payment or honoraria for	X_None		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending	X_None		
	meetings and/or travel			
8	Patents planned, issued or	X None		
J	pending			
	, kea			
9	Participation on a Data	X None		
,	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	X None		
10	in other board, society,	None		
	committee or advocacy			
	group, paid or unpaid			
11	Stock or stock options	X None		
	Steel Steel options	7		
12	Receipt of equipment,	X None		
	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non-	X None		
	financial interests			
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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	<u>X</u> None			
5	5 Payment or honoraria for	X None			
,	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
-	educational events	V. N			
6	Payment for expert testimony	X None			
	testimony				
7	Support for attending	<u>X</u> None			
	meetings and/or travel				
8	Patents planned, issued or	X None			
	pending				
9	Participation on a Data	X_None			
	Safety Monitoring Board or				
10	Advisory Board	V. Nana			
10	Leadership or fiduciary role in other board, society,	X_None			
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	XNone			
12	Descint of aguinment	V. None			
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	X_None			
	services				
13	Other financial or non-	X_None			
	financial interests				
Ple	ease summarize the above co	onflict of interest in the following box:			
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Your Name:_ Wenqiao Wu
Manuscript Title: Relationship between the absolute lymphocyte count (ALC)/absolute monocyte count (AMC) ratio,
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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.	Chengdu Neo-life Hope Medical Laboratory INC.	
	Time frame: past 36 months		
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert	X None	
Ü	testimony	<u></u>	
7	Support for attending meetings and/or travel	XNone	
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8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data Safety Monitoring Board or	XNone	
40	Advisory Board	V N	
10	Leadership or fiduciary role in other board, society, committee or advocacy	X_None	
	group, paid or unpaid		
11	Stock or stock options	X None	
	•		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
4.5	services		
13	Other financial or non-	X_None	
	financial interests		
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The author receives support for statistic analysis of data from Chengdu Neo-life Hope Medical Laboratory INC					

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Your Name:_Ling Kuang
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3	Royalties or licenses	XNone	
4	Consulting fees	_X_None	

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
c		X None	
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending	X None	
′	meetings and/or travel	X_None	
	meetings and/or traver		
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8	Patents planned, issued or	X_None	
	pending		
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9	Participation on a Data	X_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X_None	
	in other board, society,		
	committee or advocacy		
4.4	group, paid or unpaid	V None	
11	Stock or stock options	XNone	
42	D	V N	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
12	Other financial or non-	V None	
13	financial interests	XNone	
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FI	case sammanize the above t	onnice of interest in the lo	nowing box.
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