Date: 27/10/23

Your Name: Mohammad R Ashraghi

Manuscript Title: A case of myasthenia gravis, pure red cell aplasia and thymoma, but not in the order one might

expect

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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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
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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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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

Date: 27/10/23

Your Name: Mary Quirke

Manuscript Title: A case of myasthenia gravis, pure red cell aplasia and thymoma, but not in the order one might

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Manuscript number (if known):

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

Date: 27/10/23

Your Name: Radu Mihai

Manuscript Title: A case of myasthenia gravis, pure red cell aplasia and thymoma, but not in the order one might

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	any entity (if not indicated		
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X None	
,	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
	g ,		
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Receipt of equipment,	X None	
12	materials, drugs, medical writing, gifts or other services		
13	Other financial or non-	X_None	
	financial interests		
Plea	ase summarize the above co	nflict of interest in the f	ollowing box:
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Date: 27/10/23

Your Name: Daniel Ajzensztejn

Manuscript Title: A case of myasthenia gravis, pure red cell aplasia and thymoma, but not in the order one might

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4	Consulting fees	XNone	

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,	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
	g ,		
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Receipt of equipment,	X None	
12	materials, drugs, medical writing, gifts or other services		
13	Other financial or non-	X_None	
	financial interests		
Plea	ase summarize the above co	nflict of interest in the f	ollowing box:
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Date: 27/10/23

Your Name: Robert Stuart

Manuscript Title: A case of myasthenia gravis, pure red cell aplasia and thymoma, but not in the order one might

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6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
	g ,		
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society, committee or advocacy		
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11	Stock or stock options	_XNone	
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12	materials, drugs, medical writing, gifts or other services		
13	Other financial or non-	X_None	
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Plea	ase summarize the above co	nflict of interest in the f	ollowing box:
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Date: 27/10/23

Your Name: Mark McCole

Manuscript Title: A case of myasthenia gravis, pure red cell aplasia and thymoma, but not in the order one might

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4	Consulting fees	XNone	

5	Payment or honoraria for	X None	
,	lectures, presentations,		
	speakers bureaus,		
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6	Payment for expert testimony	XNone	
	testimony		
7	Support for attending meetings and/or travel	_XNone	
	g ,		
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_XNone	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_XNone	
12	Receipt of equipment,	X None	
12	materials, drugs, medical writing, gifts or other services		
13	Other financial or non-	X_None	
	financial interests		
Plea	ase summarize the above co	nflict of interest in the f	ollowing box:
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Date: 27/10/23

Your Name: Louise Fryearson

Manuscript Title: A case of myasthenia gravis, pure red cell aplasia and thymoma, but not in the order one might

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

Date: 27/10/23

Your Name: Camilla Buckley

Manuscript Title: A case of myasthenia gravis, pure red cell aplasia and thymoma, but not in the order one might

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4	Consulting fees	XNone	

5	Payment or honoraria for	X None		
3	lectures, presentations,	XNone		
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7	Support for attending meetings and/or travel	_XNone		
8	Patents planned, issued or	_XNone		
	pending			
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13	Other financial or non- financial interests	X_None		
Plea	Please summarize the above conflict of interest in the following box:			

Date: 27/10/23

Your Name: Maria I Leite

Manuscript Title: A case of myasthenia gravis, pure red cell aplasia and thymoma, but not in the order one might

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3	Royalties or licenses	XNone	
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5	Payment or honoraria for	X None		
3	lectures, presentations,	XNone		
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7	Support for attending meetings and/or travel	_XNone		
8	Patents planned, issued or	_XNone		
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