

ICMJE DISCLOSURE FORM

Date: 2023-03-30

Your Name: Lei Zhou

Manuscript Title: A bioinformatics analysis and an experimental validation of the hypoxia-related prognostic model

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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13	Other financial or non-financial interests	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:

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Date: 2023-03-30

Your Name: Weigang Zhang

Manuscript Title: A bioinformatics analysis and an experimental validation of the hypoxia-related prognostic model

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Date: 2023-03-30

Your Name: Haoxiang Ni

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Date: 2023-03-30

Your Name: Jin Liu

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Date: 2023-03-30

Your Name: Hui Sun

Manuscript Title: A bioinformatics analysis and an experimental validation of the hypoxia-related prognostic model

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Date: 2023-03-30

Your Name: Zhanwen Liang

Manuscript Title: A bioinformatics analysis and an experimental validation of the hypoxia-related prognostic model

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Date: 2023-03-30

Your Name: Ruoqin Wang

Manuscript Title: A bioinformatics analysis and an experimental validation of the hypoxia-related prognostic model

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Date: 2023-03-30

Your Name: Xiaofeng Xue

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Date: 2023-03-30

Your Name: Kai Chen

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Date: 2023-03-30

Your Name: Wei Li

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