ICMJE DISCLOSURE FORM

Date:____ Feb. 25th, 2021____
Your Name:___ Honglue Lu___
Manuscript Title: Identification of novel hub genes associated with lymph node metastasis of head and neck squamous cell carcinoma by compleitive bioinformatics analysis
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.

The following questions apply to the author’s relationships/activities/interests as they relate to the current manuscript only.

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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.

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

__X__ 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:______Feb. 25th, 2021____
Your Name:__ Liang Li__
Manuscript Title: Identification of novel hub genes associated with lymph node metastasis of head and neck squamous cell carcinoma by compleitive bioinformatics analysis
Manuscript number (if known):__________________________________________________________________

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Time frame: past 36 months

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Date:____Feb. 25^{th}, 2021____  
Your Name:___Sun Dongnan___  
Manuscript Title: Identification of novel hub genes associated with lymph node metastasis of head and neck squamous cell carcinoma by completive bioinformatics analysis  
Manuscript number (if known):__________________________________________________________________

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ICMJE DISCLOSURE FORM

Date:____Feb. 25th, 2021____
Your Name:___Yuansheng Duan___
Manuscript Title:Identification of novel hub genes associated with lymph node metastasis of head and neck squamous cell carcinoma by compleive bioinformatics analysis
Manuscript number (if known):__________________________________________

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Date: _____ Feb. 25th, 2021 _____
Your Name: Kai Yue
Manuscript Title: Identification of novel hub genes associated with lymph node metastasis of head and neck squamous cell carcinoma by complete bioinformatics analysis
Manuscript number (if known): ........................................................................................................................................

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| 3 | Royalties or licenses                                                                          | _X_ None                                                                          |                                                                                   |
| 4 | Consulting fees                                                                               | _X_ None                                                                          |                                                                                   |
|   | Description                                                                 | Answer   |
|---|-----------------------------------------------------------------------------|----------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | __X__ None |
| 6 | Payment for expert testimony                                                | __X__ None |
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Date: _____ Feb. 25th, 2021 _____
Your Name: ___ Yansheng Wu ___
Manuscript Title: Identification of novel hub genes associated with lymph node metastasis of head and neck squamous cell carcinoma by complective bioinformatics analysis
Manuscript number (if known):  

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|   | _X_ None                                                                                       |                                                                                   |
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**Time frame: past 36 months**

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| 13 | Other financial or non-financial interests | __X__ None |

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Date:____Feb. 25th, 2021____
Your Name:___ Xudong Wang ___
Manuscript Title: Identification of novel hub genes associated with lymph node metastasis of head and neck squamous cell carcinoma by complective bioinformatics analysis
Manuscript number (if known):______________________________________________________________

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| 3 | Royalties or licenses                                                                           | _X_ None                                                                         |
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|   | **Conflict of Interest**                                                                 |
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| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | _X_ None |
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| 7 | Support for attending meetings and/or travel                                               | _X_ None |
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