Data Sharing Statement		
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Item	Question	Authors' Response (place "-" if not applicable)
1	Would you like to share data collected for your study to others?	Yes.
2	If not, would you like to share the reason for your decision?	
3	What data in particular will be shared?	All data except patient privacy.
4	Any other documents will be share? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code.	Yes.
5	When will data availability begin?	After the article is published.
6	When will data availability end?	This data can always be shared.
7	To whom will you share the data?	I would like to share this data with all the doctors and nurses.
8	For what type of analysis or purpose?	The data from this study can be used by others for continuing studies and clinical applications, but it must be stated that the data from this study were used.
9	How or where can the data/documents be obtained?	The corresponding author can be reached by Email or telephone.
10	Any other restrictions?	No.