

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.
4	Any other documents will be shared? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code.	Yes.
5	When will data availability begin?	From the publication date.
6	When will data availability end?	No end time.
7	To whom will you share the data?	Anyone.
8	For what type of analysis or purpose?	Improve the rehabilitation of patients.
9	How or where can the data/documents be obtained?	Email to the corresponding autor.
10	Any other restrictions?	No.