

Data Sharing Statement

Article Info	https://dx.doi.org/10.21037/dmr-21-58	
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?	Deidentified patient data collected for this study may be shared if the IRB agrees.
4	Any other documents will be share? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code.	No
5	When will data availability begin?	Upon publication
6	When will data availability end?	One year after publication
7	To whom will you share the data?	For investigators interested in the study of patients with acute cholecystitis
8	For what type of analysis or purpose?	To contribute to the validation of the APACHE II scoring system for patients who cannot undergo emergent cholecystectomy.
9	How or where can the data/documents be obtained?	Email: wmileski@utmb.edu
10	Any other restrictions?	We may balance the potential benefits and risks foreach request and then provide the data that could be shared.