| Data Sharing Statement | | |
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| Article Info | http://dx.doi.org/10.21037/gs-20-623. | |
| 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? | The appointment time data will be shared if requested, but no patient details that could result in identification. |
| 4 | Any other documents will be share? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code. | No other data to share, but reasonable requests will always be accommodated if possible. |
| 5 | When will data availability begin? | Upon publication date. |
| 6 | When will data availability end? | - |
| 7 | To whom will you share the data? | Clinical researchers and healthcare professionals interested in the data. |
| 8 | For what type of analysis or purpose? | Further analysis of outpatient appointment times. |
| 9 | How or where can the data/documents be obtained? | Please email Dr. Takabe: Kazuaki.takabe@roswellpark.org |
| 10 | Any other restrictions? | We may balance the risks and benefits of each request and then provide the data that could be shared. |