

## Data Sharing Statement

<b>Article Info</b>	<a href="http://dx.doi.org/10.21037/atm-20-4703">http://dx.doi.org/10.21037/atm-20-4703</a>	
<b>Item</b>	<b>Question</b>	<b>Authors' Response (place "-" if not applicable)</b>
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?	Low incidence of AMR related complications
4	Any other documents will be share? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code.	Desensitization protocol
5	When will data availability begin?	From the publication date.
6	When will data availability end?	One year within the publication date
7	To whom will you share the data?	Transplant surgeons
8	For what type of analysis or purpose?	For the analysis of incidence of AMR related complications
9	How or where can the data/documents be obtained?	Emails to the correspondence
10	Any other restrictions?	We may balance the potential benefits and risks for each request and then provide the data that could be shared.