

Data Sharing Statement

Article Info	http://dx.doi.org/10.21037/atm-21-669	
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 postoperative complications related data will be shared.
4	Any other documents will be shared? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code.	We will also share these documents if requested.
5	When will data availability begin?	From the publication date.
6	When will data availability end?	Without limited time.
7	To whom will you share the data?	Who are interested in this topic.
8	For what type of analysis or purpose?	Promotion this manuscript or as a reference in related paper.
9	How or where can the data/documents be obtained?	E-mail: jerryfang81@hotmail.com.
10	Any other restrictions?	-