Data Sharing Statement		
Article Info	http://dx.doi.org/10.21037/atm-21-1495	
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?	Outcome of the surgery
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?	After publication
6	When will data availability end?	
7	To whom will you share the data?	The medical researchers
8	For what type of analysis or purpose?	Clinical research
9	How or where can the data/documents be obtained?	Email contact
10	Any other restrictions?	No