| Data Sharing Statement | | |
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| Article Info | https://dx.doi.org/10.21037/atm-22-881 | |
| 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? | Clinical characteristics, values of CT-FFR and FFR of the study population. |
| 4 | Any other documents will be shared? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code. | Study protocol and statistical analysis. |
| 5 | When will data availability begin? | After the publication of this article. |
| 6 | When will data availability end? | Permanently available. |
| 7 | To whom will you share the data? | Clinicians who are interested in studies of CT-FFR. |
| 8 | For what type of analysis or purpose? | Diagnostic performance of CT-FFR. |
| 9 | How or where can the data/documents be obtained? | Email: shouxiling@163.com. |
| 10 | Any other restrictions? | We may balance the potential benefits and risks for each request and then provide the data that could be shared. |