Data Sharing Statement		
Article Info	https://dx.doi.org/10.21037/pm-21-89	
Item	Question	Authors' Response
1	Would you like to share data collected for your study to others?	(place "-" if not applicable) Yes
2	If not, would you like to share the reason for your decision?	-
3	What data in particular will be shared?	The outcomes data on risk factors for re-admission for repeat phototherapy in particular 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.	Statistical analysis plan and the clinical study report will able to be shared if requested
5	When will data availability begin?	From the publication date
6	When will data availability end?	Two years within the publication date, since additional factors and relationship to risk factors for representation may be updated over time
7	To whom will you share the data?	Hospitalist pediatricians and pediatric emergency physicians who are interested in studies regarding of risk of infants who re-present for unconjugated hyperbilirubinemia
8	For what type of analysis or purpose?	For analysis to evaluate specific cutoff bilirubin levels that could assist with preventing representation to the emergency department for unconjugated hyperbilirubinemia
9	How or where can the data/documents be obtained?	Emails could be sent to the address below to obtain the shared data: andreanne.zizzo@lhsc.on.ca
10	Any other restrictions?	We may balance the potential benefits and risk for each request and then provide the data that could be shared