Data Sharing Statement		
Article Info	http://dx.doi.org/10.21037/jss-20-631.	
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?	N/A
3	What data in particular will be shared?	Deidentified data pertaining to the results of our study.
4	Any other documents will be share? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code.	Study protocol, statistical analysis
5	When will data availability begin?	Publication date
6	When will data availability end?	One year after publication date
7	To whom will you share the data?	Neurosurgeons, orthopedic surgeons
8	For what type of analysis or purpose?	Comparative analyses
9	How or where can the data/documents be obtained?	Contact njl2116@cumc.columbia.edu
10	Any other restrictions?	For specific HIPAA-compliant inquiries, please contact the corresponding author