

## Data Sharing Statement

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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?	Raw data from the study included clinicopathological information and follow-up survival data.
4	Any other documents will be shared? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code.	There are no other documents that can be further shared.
5	When will data availability begin?	From the publication date.
6	When will data availability end?	One years within the publication date, since the technique or survival date may be updated over time.
7	To whom will you share the data?	Medical oncologists and thoracic surgeons who are interested in our study.
8	For what type of analysis or purpose?	For analysis to evaluate the safety and prognostic value of SLND in NSCLC patients.
9	How or where can the data/documents be obtained?	Emails could be sent to the address below to obtain the shared data: xwkgzy@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.

