

## Data Sharing Statement

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| <b>Article Info</b> | <a href="http://dx.doi.org/10.21037/tlcr-20-666">http://dx.doi.org/10.21037/tlcr-20-666</a>  |  |
| <b>Item</b>         | <b>Question</b>  | <b>Authors' Response<br/>(place "-" if not applicable)</b>   |
| 1                   | Would you like to share data collected for your study to others?   | No, I wouldn't.  |
| 2                   | If not, would you like to share the reason for your decision?  | Some data were used in another unpublished article, and the institutional review board of the hospital did not approve the data shering. |
| 3                   | What data in particular will be shared?  | -  |
| 4                   | Any other documents will be share? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code. | -  |
| 5                   | When will data availability begin?   | -  |
| 6                   | When will data availability end?   | -  |
| 7                   | To whom will you share the data?   | -  |
| 8                   | For what type of analysis or purpose?  | -  |
| 9                   | How or where can the data/documents be obtained?   | -  |
| 10                  | Any other restrictions?  | -  |