

Data Sharing Statement

| | | |
|---------------------|--|---|
| Article Info | https://dx.doi.org/10.21037/ajo-21-6 | |
| 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 |
| 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? | Publication date |
| 6 | When will data availability end? | 2 years from publication date |
| 7 | To whom will you share the data? | Head and neck surgeons |
| 8 | For what type of analysis or purpose? | For purposes of wider/systematic review |
| 9 | How or where can the data/documents be obtained? | Email to corresponding author Campbell.Schmidt@health.qld.gov.au |
| 10 | Any other restrictions? | - |