

Data Sharing Statement

Article Info	https://dx.doi.org/10.21037/jhmhp-21-48	
Item	Question	Authors' Response (place "-" if not applicable)
1	Would you like to share data collected for your study to others?	No
2	If not, would you like to share the reason for your decision?	There is protected health information in these files and we do not have consent of our institution to share
3	What data in particular will be shared?	NA
4	Any other documents will be shared? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code.	No
5	When will data availability begin?	NA
6	When will data availability end?	NA
7	To whom will you share the data?	NA
8	For what type of analysis or purpose?	NA
9	How or where can the data/documents be obtained?	NA
10	Any other restrictions?	NA