# Data Sharing Statement

| 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?                                 | The clinical endpoint of both groups post-LAAO. |
| 4    | Any other documents will be share? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code. | Statistical analysis plan and clinical study report will also be shared on request. |
| 5    | When will data availability begin?                                      | From the publication date.                      |
| 6    | When will data availability end?                                        | One year within the publication date since the technique and clinical outcomes might be updated in the long term. |
| 7    | To whom will you share the data?                                       | Cardiologists who were interested in the anticoagulation usage during LAAO. |
| 8    | For what type of analysis or purpose?                                   | For analysis to evaluate the safety of bivalirudin usage during LAAO. |
| 9    | How or where can the data/documents be obtained?                       | Emails could be sent to the address below to obtain the shared data: zhou.daxin@outlook.com |
| 10   | Any other restrictions?                                                 | We may balance the potential benefits and risks for each request before providing the data and hence our resource will be shared only on reasonable request. |