# Data Sharing Statement

| **Item** | **Question** | **Authors’ Response**<br>*(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? | We would like to share the differences between the digital and analogue suction device groups |
| 4 | Any other documents will be share? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code. | No |
| 5 | When will data availability begin? | From the publication date. |
| 6 | When will data availability end? | One year within the publication date, since further evaluation and analysis may be updated over time. |
| 7 | To whom will you share the data? | Thoracic surgeon, intensivist, traumatologist, nurse and physician assistant, who are interested especially in pneumothorax management with digital suction device. |
| 8 | For what type of analysis or purpose? | For analysis to evaluate the feasibility and effectiveness of such a new device versus the traditional vacuum system for treating patients with pneumothorax. |
| 9 | How or where can the data/documents be obtained? | E-mails could be sent to the corresponding author address below to obtain the shared data: timesgoby@naver.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. |

**Article Info**

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