# Data Sharing Statement

| 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? | The data are still under analysis; data need to be further processed to remove subject identifications. |
| 3    | What data in particular will be shared? | Data with ID information removed to be shared upon the request made to the corresponding authors. |
| 4    | Any other documents will be shared? Such as study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code. | Yes, the questionnaire, study protocol, and consent form could be shared. |
| 5    | When will data availability begin? | - |
| 6    | When will data availability end? | - |
| 7    | To whom will you share the data? | The public. |
| 8    | For what type of analysis or purpose? | Scientific research. |
| 9    | How or where can the data/documents be obtained? | Contact with the corresponding author. |
| 10   | Any other restrictions? | The original data shall not be disclosed without the consent with the corresponding author. |