

Data Sharing Statement

Article Info	http://dx.doi.org/10.21037/jhmhp-20-51	
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?	All patient-reported outcomes data will be shared
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, informed consent form and clinical study report will all be shared if requested
5	When will data availability begin?	From publication date
6	When will data availability end?	Indefinitely
7	To whom will you share the data?	Orthopedic surgeons or hospital administrators interested in HCAHPS and patient-reported outcomes in the musculoskeletal patient population
8	For what type of analysis or purpose?	For analysis to evaluate impact of HCAHPS survey in musculoskeletal patient population
9	How or where can the data/documents be obtained?	Requests can be made by emailing the following email address: amchamberlain@wustl.edu
10	Any other restrictions?	No