CONSORT 2010 checklist of information to include when reporting a randomised trial

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| **Section/Topic** | **Item No** | **Checklist item** | **Section & paragraph #** |
| **Title and abstract** | 1a | Title  Identification as a randomised trial in the title  Abstract |  |
|  | 1b | Structured summary of trial design, methods, results, and conclusions (for specific guidance see CONSORT for abstracts) |  |
| **Introduction**  Background and | 2a | Introduction, paragraphs 1-4  Scientific background and explanation of rationale  Introduction, paragraph 4 |  |
| objectives | 2b | Specific objectives or hypotheses  Methods, paragraphs 1-3, |  |
| **Methods**  Trial design | 3a | Description of trial design (such as parallel, factorial) including allocation ratio | NA |
|  | 3b | Important changes to methods after trial commencement (such as eligibility criteria), with reasons  Methods, Participants, paragraph 1 |  |
| Participants | 4a | Eligibility criteria for participants  Methods, Procedures, paragraph 3, |  |
|  | 4b | Settings and locations where the data were collected |  |
| Interventions | 5 | The interventions for each group with sufficient details to allow replication, including how and when they were  Methods, Procedures, paragraphs 1-2 |  |
|  |  | actually administered  Methods, Outcomes, paragraph 1 |  |
| Outcomes | 6a | Completely defined pre-specified primary and secondary outcome measures, including how and when they |  |
|  |  | were assessed | NA |
|  | 6b | Any changes to trial outcomes after the trial commenced, with reasons  Methods, Statistical analysis, paragraph 1  , |  |
| Sample size | 7a | How sample size was determined | NA |
|  | 7b | When applicable, explanation of any interim analyses and stopping guidelines  Methods, Randomization, paragraph 1 |  |
| Randomisation: |  |  |  |
| Sequence | 8a | Method used to generate the random allocation sequence |  |
| generation | 8b | Type of randomisation; details of any restriction (such as blocking and block size) |  |
| Allocation | 9 | Mechanism used to implement the random allocation sequence (such as sequentially numbered containers),  Methods, Randomization, paragraph 1 |  |
| concealment |  | describing any steps taken to conceal the sequence until interventions were assigned |  |
| mechanism |  | Methods, Randomization, paragraph 1 |  |
| Implementation | 10 | Who generated the random allocation sequence, who enrolled participants, and who assigned participants to |  |
|  |  | Interventions |  |
| Blinding | 11a | If done, who was blinded after assignment to interventions (for example, participants, care providers, those |  |

Methods, Randomization,

paragraph 1

Methods, Randomization, paragraph 1,

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|  |  | assessing outcomes) and how  Methods, Procedures, paragraphs 1-2 |  |
|  | 11b | If relevant, description of the similarity of interventions  Methods, Statistical analysis, paragraph 1 |  |
| Statistical methods | 12a | Statistical methods used to compare groups for primary and secondary outcomes  Methods, Statistical analysis, paragraph 1 |  |
|  | 12b | Methods for additional analyses, such as subgroup analyses and adjusted analyses |  |
| **Results**  Participant flow (a | 13a | For each group, the numbers of participants who were randomly assigned, received intended treatment, and  Figure 1 |  |
| diagram is strongly |  | were analysed for the primary outcome  Figure 1 |  |
| recommended) | 13b | For each group, losses and exclusions after randomisation, together with reasons |  |
| Recruitment | 14a | Dates defining the periods of recruitment and follow-up  Results, paragraph 1  Results,  paragraph 4, |  |
|  | 14b | Why the trial ended or was stopped  Table 1 |  |
| Baseline data | 15 | A table showing baseline demographic and clinical characteristics for each group |  |
| Numbers analysed | 16 | For each group, number of participants (denominator) included in each analysis and whether the analysis was  Table 2 |  |
|  |  | by original assigned groups |  |
| Outcomes and | 17a | For each primary and secondary outcome, results for each group, and the estimated effect size and its  Table 2 |  |
| estimation |  | precision (such as 95% confidence interval)  S10 Table |  |
|  | 17b | For binary outcomes, presentation of both absolute and relative effect sizes is recommended |  |
| Ancillary analyses | 18 | Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing  S3 Figure |  |
|  |  | pre-specified from exploratory  Table 3 |  |
| Harms | 19 | All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)  Discussion, paragraph 8 |  |
| **Discussion**  Limitations | 20 | Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses  Discussion, paragraph 1 |  |
| Generalisability | 21 | Generalisability (external validity, applicability) of the trial findings  Discussion, paragraphs 1-8 |  |
| Interpretation | 22 | Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence |  |
| **Other information**  Registration | 23 | Registration number and name of trial registry |  |
| Protocol | 24 | Where the full trial protocol can be accessed, if available  Funding |  |
| Funding | 25 | Sources of funding and other support (such as supply of drugs), role of funders |  |

Methods, Participants, paragraph 1

Methods, Statistical analysis, paragraph 4

\*We strongly recommend reading this statement in conjunction with the CONSORT 2010 Explanation and Elaboration for important clarifications on all the items. If relevant, we also recommend reading CONSORT extensions for cluster randomised trials, non-inferiority and equivalence trials, non-pharmacological treatments, herbal interventions, and pragmatic trials. Additional extensions are forthcoming: for those and for up to date references relevant to this checklist, see [www.consort-statement.org.](http://www.consort-statement.org/)