



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

Section/Topic	Item No	Checklist item	Reported on Page Number/Line Number	Reported on Section/Paragraph
Title and abstract				
	1a	Identification as a randomised trial in the title	Page 1 /line 2	Title/Paragraph 1
	1b	Structured summary of trial design, methods, results, and conclusions (for specific guidance see Table 2)	Page 2 /line 35-40	Abstract/Paragraph 1-4
Introduction				
Background and objectives	2a	Scientific background and explanation of rationale	Page 3 /line 55-70	Introduction / Paragraph 1
	2b	Specific objectives or hypotheses	Page 3 /line 71-78	Introduction / Paragraph 1
Methods				
Trial design	3a	Description of trial design (such as parallel, factorial) including allocation ratio	Page 4 /line 85-88	Method /Paragraph 1
	3b	Important changes to methods after trial commencement (such as eligibility criteria), with reasons	Page 4 /line 101-103	Method /Paragraph 1
Participants	4a	Eligibility criteria for participants	Page 4 /line 84-89	Method /Paragraph 1
	4b	Settings and locations where the data were collected	Page 7 /line 150-153	Method /Paragraph 5
Interventions	5	The interventions for each group with sufficient details to allow replication, including how and when they were actually administered	Page 5-6/line 118-136	Method /Paragraph 3-5
Outcomes	6a	Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed	Page 6-7 /line 143-152	Method /Paragraph 4
	6b	Any changes to trial outcomes after the trial commenced, with reasons	Page 6-7 /line 143-152	Method /Paragraph 4
Sample size	7a	How sample size was determined	Page 4/line 85-86	Method /Paragraph 1
	7b	When applicable, explanation of any interim analyses and stopping guidelines	N/A	not suitable.
Randomisation:				
Sequence generation	8a	Method used to generate the random allocation sequence	Page 4 -5 /line 99-103	Method /Paragraph 2
	8b	Type of randomisation; details of any restriction (such as blocking and block size)	Page 4-5/line 97-103	Method /Paragraph 2
Allocation concealment mechanism	9	Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned	Page 4 /line 88-89	Method /Paragraph 1

Implementation	10	Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions	Page 4 /line 88-89	Method /Paragraph 1
Blinding	11a	If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how	N/A	It's not double blind
	11b	If relevant, description of the similarity of interventions	N/A	It's not double blind
Statistical methods	12a	Statistical methods used to compare groups for primary and secondary outcomes	Page 6-7 /line 169-175	Method /Paragraph 9
	12b	Methods for additional analyses, such as subgroup analyses and adjusted analyses	Page 6-7/line 169-175	Method /Paragraph 9
Results				
Participant flow (a diagram is strongly recommended)	13a	For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome	Page 8/line 180-191	Results/Paragraph 1
	13b	For each group, losses and exclusions after randomisation, together with reasons	Page 8/line 187-191	Results /Paragraph 1
Recruitment	14a	Dates defining the periods of recruitment and follow-up	Page 8/line 180-191	Results /Paragraph 1
	14b	Why the trial ended or was stopped	N/A	not suitable
Baseline data	15	A table showing baseline demographic and clinical characteristics for each group	Page 8 /Table 1	Results/Table 1
Numbers analysed	16	For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups	Page 8/line 180-191	Methods/Paragraph 1
Outcomes and estimation	17a	For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)	Page 8-10 /line 192-225	Results /Paragraph 2-5
	17b	For binary outcomes, presentation of both absolute and relative effect sizes is recommended	N/A	not suitable
Ancillary analyses	18	Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory	Page 8-10/line 192-225	Results /Paragraph 2-5
Harms	19	All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)	Page 8 /line 180-191	Results /Paragraph 1
Discussion				
Limitations	20	Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses	Page 14/line 320-330	Discussion /Paragraph 7
Generalisability	21	Generalisability (external validity, applicability) of the trial findings	Page 15 /line 332-342	Discussion /Paragraph 8
Interpretation	22	Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence	Page 10-14 /line 234-319	Discussion/Paragraph 2-6
Other information				
Registration	23	Registration number and name of trial registry	Page 4 /line 91-92	Discussion /Paragraph 1

Protocol	24	Where the full trial protocol can be accessed, if available	Page 3 /line 106-107	Introduction /Paragraph 2
Funding	25	Sources of funding and other support (such as supply of drugs), role of funders	Page 16/line 355-357	Footnotes /Paragraph 1

*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.

Table 2 Items to include when reporting a randomized trial in a journal or conference abstract

Item	Description	Reported on Page Number/Line Number	Reported on Section/Paragraph
Title	Identification of the study as randomized	Page 1 /line 3	Title/Paragraph 1
Authors *	Contact details for the corresponding author	Page 1 /line 5	Title/Paragraph 1
Trial design	Description of the trial design (e.g. parallel, cluster, non-inferiority)	Page 1 /line 4	Title/Paragraph 1
Methods			
Participants	Eligibility criteria for participants and the settings where the data were collected	Page 4 /line 80-88	Method /Paragraph 1
Interventions	Interventions intended for each group	Page 4-7 /line 91-164	Method /Paragraph 1
Objective	Specific objective or hypothesis	Page 4-7 /line 91-164	Method /Paragraph 1
Outcome	Clearly defined primary outcome for this report	Page 4-7 /line 91-164	Method /Paragraph 1
Randomization	How participants were allocated to interventions	Page 4/line 96-97	Method /Paragraph 1
Blinding (masking)	Whether or not participants, care givers, and those assessing the outcomes were blinded to group assignment	Page 4-5 /line 96-97	Method /Paragraph 1
Results			
Numbers randomized	Number of participants randomized to each group	Page 8 /line 175-186	Results /Paragraph 1-3
Recruitment	Trial status	Page 8 /line 175-186	Results /Paragraph 1-3
Numbers analysed	Number of participants analysed in each group	Page 8 /line 175-178	Results /Paragraph 1
Outcome	For the primary outcome, a result for each group and the estimated effect size and its precision	Page 9-10 /line 187-220	Results /Paragraph 2-5
Harms	Important adverse events or side effects	not suitable	had no side effects

Conclusions	General interpretation of the results	Page 15-16 /line 327-346	Conclusion/Paragraph 1
Trial registration	Registration number and name of trial register	Page 16/line 369-372	Footnotes /Paragraph 3
Funding	Source of funding	Page 16/line 355-357	Footnotes /Paragraph 1

** this item is specific to conference abstracts*

From: Hopewell S, Clarke M, Moher D, et al. CONSORT for reporting randomized controlled trials in journal and conference abstracts: explanation and elaboration. PLoS Med. 2008;5(1):e20

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*As the checklist was provided upon initial submission, the page number/line number reported may be changed due to copyediting and may not be referable in the published version. In this case, the section/paragraph may be used as an alternative reference.