

Table 1 CONSORT 2010 checklist of information to include when reporting a pilot or feasibility trial*

Section/Topic	ltem No	Checklist item	Reported on Page Number/Line Number	Reported on Section/Paragraph
Title and abstract				
	1a	Identification as a pilot or feasibility randomised trial in the title		
	1b	Structured summary of pilot trial design, methods, results, and conclusions (for specific guidance see Table 2)		
Introduction				
Background and objectives	2a	Scientific background and explanation of rationale for future definitive trial, and reasons for randomised pilot trial		
	2b	Specific objectives or research questions for pilot trial		
Methods	•			
Trial design	3a	Description of pilot trial design (such as parallel, factorial) including allocation ratio		
	3b	Important changes to methods after pilot trial commencement (such as eligibility criteria), with reasons		
Participants	4a	Eligibility criteria for participants		
	4b	Settings and locations where the data were collected		
	4c	How participants were identified and consented		
Interventions	5	The interventions for each group with sufficient details to allow replication, including how and when they were actually administered		
Outcomes	6a	Completely defined prespecified assessments or measurements to address each pilot trial objective specified in 2b, including how and when they were assessed		
	6b	Any changes to pilot trial assessments or measurements after the pilot trial commenced, with reasons		
	6c	If applicable, prespecified criteria used to judge whether, or how, to proceed with future definitive trial		

Sample size	7a	Rationale for numbers in the pilot trial	
	7b	When applicable, explanation of any interim analyses and stopping guidelines	
Randomisation:			
Sequence	8a	Method used to generate the random allocation sequence	
generation	8b	Type of randomisation(s); details of any restriction (such as blocking and block size)	
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	
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 assessing outcomes) and how	
	11b	If relevant, description of the similarity of interventions	
Statistical methods	12	Methods used to address each pilot trial objective whether qualitative or quantitative	
Results			
Participant flow (a diagram is strongly	13a	For each group, the numbers of participants who were approached and/or assessed for eligibility, randomly assigned, received intended treatment, and were assessed for each objective	
recommended)	13b	For each group, losses and exclusions after randomisation, together with reasons	
Recruitment	14a	Dates defining the periods of recruitment and follow-up	
	14b	Why the pilot trial ended or was stopped	
Baseline data	15	A table showing baseline demographic and clinical characteristics for each group	
Numbers analysed	16	For each objective, number of participants (denominator) included in each analysis. If relevant, these numbers	
		should be by randomised group	
Outcomes and estimation	17	For each objective, results including expressions of uncertainty (such as 95% confidence interval) for any estimates. If relevant, these results should be by randomised group	
Ancillary analyses	18	Results of any other analyses performed that could be used to inform the future definitive trial	

Harms	19	All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)		
	19a	If relevant, other important unintended consequences		
Discussion	Discussion			
Limitations	20	Pilot trial limitations, addressing sources of potential bias and remaining uncertainty about feasibility		
Generalisability	21	Generalisability (applicability) of pilot trial methods and findings to future definitive trial and other studies		
Interpretation	22a	Interpretation consistent with pilot trial objectives and findings, balancing potential benefits and harms, and considering other relevant evidence		
	22b	Implications for progression from pilot to future definitive trial, including any proposed amendments		
Other information	Other information			
Registration	23	Registration number for pilot trial and name of trial registry		
Protocol	24	Where the pilot trial protocol can be accessed, if available		
Funding	25	Sources of funding and other support (such as supply of drugs), role of funders		
	26	Ethical approval or approval by research review committee, confirmed with reference number		
· · · · · · · · · · · · · · · · · · ·				

Citation: Eldridge SM, Chan CL, Campbell MJ, Bond CM, Hopewell S, Thabane L, et al. CONSORT 2010 statement: extension to randomised pilot and feasibility trials. BMJ. 2016;355.

* We strongly recommend reading this statement in conjunction with the CONSORT 2010, extension to randomised pilot and feasibility trials, 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 CONSORT 2010 checklist of information to include when reporting a pilot or feasibility randomized trial in a journal or conference abstract

Item	Description	Reported on Page Number/Line Number	Reported on Section/Paragraph
Title	Identification of study as randomised pilot or feasibility trial		
Authors *	Contact details for the corresponding author		
Trial design	Description of pilot trial design (eg, parallel, cluster)		
Methods		,	
Participants	Eligibility criteria for participants and the settings where the pilot trial was conducted		
Interventions	Interventions intended for each group		
Objective	Specific objectives of the pilot trial		
Outcome	Prespecified assessment or measurement to address the pilot trial objectives**		
Randomization	How participants were allocated to interventions		
Blinding (masking)	Whether or not participants, care givers, and those assessing the outcomes were blinded to group assignment		
Results		1	1
Numbers randomized	Number of participants screened and randomised to each group for the pilot trial objectives**		
Recruitment	Trial status†		
Numbers analysed	Number of participants analysed in each group for the pilot objectives**		
Outcome	Results for the pilot objectives, including any expressions of uncertainty**		
Harms	Important adverse events or side effects		

Conclusions	General interpretation of the results of pilot trial and their implications for the future definitive trial		
Trial registration	Registration number for pilot trial and name of trial register		
Funding	Source of funding for pilot trial		

Citation: Eldridge SM, Chan CL, Campbell MJ, Bond CM, Hopewell S, Thabane L, et al. CONSORT 2010 statement: extension to randomised pilot and feasibility trials. BMJ. 2016;355.

* this item is specific to conference abstracts

** Space permitting, list all pilot trial objectives and give the results for each. Otherwise, report those that are a priori agreed as the most important to the decision to proceed with the future definitive RCT.

† For conference abstracts.