



## 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
<b>Title and abstract</b>				
	1a	Identification as a randomised trial in the title	P1/L4	title
	1b	Structured summary of trial design, methods, results, and conclusions (for specific guidance see Table 2)	P1-2/L19-51	abstract
<b>Introduction</b>				
Background and objectives	2a	Scientific background and explanation of rationale	P3/L55-83	Introduction
	2b	Specific objectives or hypotheses	P3/L84-88	Introduction
<b>Methods</b>				
Trial design	3a	Description of trial design (such as parallel, factorial) including allocation ratio	P4/L100-102	Methods/1
	3b	Important changes to methods after trial commencement (such as eligibility criteria), with reasons	N/A	N/A
Participants	4a	Eligibility criteria for participants	P4/L91-100	Methods/1
	4b	Settings and locations where the data were collected	P4/L100-104	Methods/1
Interventions	5	The interventions for each group with sufficient details to allow replication, including how and when they were actually administered	P4-5/L106-129	Methods/2
Outcomes	6a	Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed	P6-7/L130-163	Methods/3-6
	6b	Any changes to trial outcomes after the trial commenced, with reasons	N/A	N/A
Sample size	7a	How sample size was determined	N/A	N/A
	7b	When applicable, explanation of any interim analyses and stopping guidelines	N/A	N/A
Randomisation:				
Sequence generation	8a	Method used to generate the random allocation sequence	P5/L143	Methods/1
	8b	Type of randomisation; details of any restriction (such as blocking and block size)	P5/L143	Methods/1
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	N/A	N/A

Implementation	10	Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions	N/A	N/A
Blinding	11a	If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how	N/A	N/A
	11b	If relevant, description of the similarity of interventions	N/A	N/A
Statistical methods	12a	Statistical methods used to compare groups for primary and secondary outcomes	P7/L165-169	Methods/7
	12b	Methods for additional analyses, such as subgroup analyses and adjusted analyses	N/A	N/A
<b>Results</b>				
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	P8-10/L183-222	Results/2-6
	13b	For each group, losses and exclusions after randomisation, together with reasons	P8/L171-172	Results/1
Recruitment	14a	Dates defining the periods of recruitment and follow-up	P8/L172-175	Results/1
	14b	Why the trial ended or was stopped	N/A	N/A
Baseline data	15	A table showing baseline demographic and clinical characteristics for each group	Table 1	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	P8/L172-175	Results/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)	P8-10/L183-222	Results/2-6
	17b	For binary outcomes, presentation of both absolute and relative effect sizes is recommended	N/A	N/A
Ancillary analyses	18	Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory	N/A	N/A
Harms	19	All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)	P8/L183-188	Results/2
<b>Discussion</b>				
Limitations	20	Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses	P12-13/L293-297	Discussion/4
Generalisability	21	Generalisability (external validity, applicability) of the trial findings	P11-12/L266-271	Discussion/2
Interpretation	22	Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence	P12/L272-287	Discussion/3
<b>Other information</b>				
Registration	23	Registration number and name of trial registry	P2/L23	Abstract/Paragraph 5

Protocol	24	Where the full trial protocol can be accessed, if available	P13/L16	Footnote/Paragraph 1
Funding	25	Sources of funding and other support (such as supply of drugs), role of funders	P1/L11-12	Sources of Funding

\*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).

**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	P1/L4	title
Authors *	Contact details for the corresponding author	P1/L7-9	Corresponding author
Trial design	Description of the trial design (e.g. parallel, cluster, non-inferiority)	N/A	N/A
<b>Methods</b>			
Participants	Eligibility criteria for participants and the settings where the data were collected	P2/L24-25	abstract/2
Interventions	Interventions intended for each group	P2/L27-31	abstract/2
Objective	Specific objective or hypothesis	P1/L19-23	abstract/1
Outcome	Clearly defined primary outcome for this report	P2/L31	abstract/2
Randomization	How participants were allocated to interventions	P2/L26	abstract/2
Blinding (masking)	Whether or not participants, care givers, and those assessing the outcomes were blinded to group assignment	N/A	N/A
<b>Results</b>			
Numbers randomized	Number of participants randomized to each group	P2/L26	abstract/2
Recruitment	Trial status	N/A	N/A
Numbers analysed	Number of participants analysed in each group	N/A	N/A
Outcome	For the primary outcome, a result for each group and the estimated effect size and its precision	P2/L32-48	abstract/3
Harms	Important adverse events or side effects	N/A	N/A

Conclusions	General interpretation of the results	P3/L49-51	abstract/4
Trial registration	Registration number and name of trial register	P1/L17	Trial registration
Funding	Source of funding	P1/L11-12	Sources of Funding

*\* this item is specific to conference abstracts*

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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.