STROBE Statement—checklist of items that should be included in reports of observational studies

	Item No.	Recommendation	Page No.	Relevant text from manuscript
Title and abstract	1	(*a*) Indicate the study's design with a commonly used term in the title or the abstract	1	Laryngeal Chondrosarcoma Of The Cricoid Cartilage – A Case Series Towards Conservative Management
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found	2	
		Introduction		
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	3	Laryngeal chondrosarcoma is a rare malignancy accounting for 0.2-2% of laryngeal malignancies.
Objectives	3	State specific objectives, including any prespecified hypotheses	4	This study provides an Australian experience advocating for conservative approaches including monitoring to function preserving operations. Given the slow growing nature of the disease and high recurrence rates despite the treatment offered, a laryngectomy should only be reserved for very select cases.
		Methods		
Study design	4	Present key elements of study design early in the paper	5	A retrospective review of

Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	5	patients was carried out between 2011 and 2018 at the Department of Otolaryngology Head and Neck Surgery at Westmead Hospital.
Participants	6	(*a*) *Cohort study*—Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up *Case-control study*—Give the eligibility criteria, and the sources and methods of case ascertainment and control selection. Give the rationale for the choice of cases and controls *Cross-sectional study*—Give the eligibility criteria, and the sources and methods of selection of participants	5	Patients were included if they had biopsy proven LC. Data on patient symptoms, relevant imaging, operative reports and follow up were recorded.
		(*b*) *Cohort study*—For matched studies, give matching criteria and number of exposed and unexposed *Case-control study*—For matched studies, give matching criteria and the number of controls per case	N/A	
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	5	
Data sources/ measurement	8*	For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group	N/A	
Bias	9	Describe any efforts to address potential sources of bias	N/A	
Study size	10	Explain how the study size was arrived at	5	

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Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why		
Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding		
		(*b*) Describe any methods used to examine subgroups and interactions		
		(*c*) Explain how missing data were addressed		
		(*d*) *Cohort study*—If applicable, explain how loss to follow-up was addressed *Case-control study*—If applicable, explain how matching of cases and controls was addressed *Cross-sectional study*—If applicable, describe analytical methods taking account of sampling strategy	N/A	
		(*e*) Describe any sensitivity analyses		
Results				
Participants	13*	(a) Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed	5	A total of six cases were included with a male to female ratio of 5:1, ages ranging from 50-81 years old. The most common symptoms were hoarseness and dysphonia. Four out of six patients were smokers. One patient was immunocompromised with a long-standing kidney transplant
		(b) Give reasons for non-participation at each stage		
		(c) Consider use of a flow diagram		
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	5-6	
		(b) Indicate number of participants with missing data for each variable of interest		
		(c) *Cohort study*—Summarise follow-up time (eg, average and total amount)	6	Median follow time was 48 months. At the time of this writing, all patients were alive with no significant disease progression affecting patient symptomatology. All patient are continuing to be monitored at 6-12 monthly intervals with serial imaging.
Outcome data	15*	*Cohort study*—Report numbers of outcome events or summary measures over time	*6*	
		Case-control study—Report numbers in each exposure category, or summary measures of exposure		

		Cross-sectional study—Report numbers of outcome events or summary measures		
Main results	16	(*a*) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included	6	The tumour sites included 2 patients with posterior cricoid with subglottic extension, 2 patients with left posterior cricoid and 2 with right cricoid cartilage involvement. All tumours were biopsy proven chondrosarcoma (Grade 1-2). Each specimen required a secondary review from the pathology lab.
		(*b*) Report category boundaries when continuous variables were categorized		
		(*c*) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period		

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Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses		
Discussion				
Key results	18	Summarise key results with reference to study objectives	7, 11	All patients in our series required second opinions from pathologists and diagnosis was reached after a multidisciplinary team meeting. Four patients had grade 1 chondrosarcoma, 1 patient had grade 2 and one patient had chondrosarcoma unspecified being reported as “atypical low grade”.
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias	N/A	
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	7	Laryngeal chondrosarcoma is a slow growing tumour with a favorable prognosis. Treatment should focus on laryngeal function preservation and disease monitoring. A total laryngectomy should only be reserved in very select cases.
Generalisability	21	Discuss the generalisability (external validity) of the study results		
Other information				
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based		

*Give information separately for cases and controls in case-control studies and, if applicable, for exposed and unexposed groups in cohort and cross-sectional studies.

Laryngeal Chondrosarcoma Of The Cricoid Cartilage – A Case Series Towards Conservative Management

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at http://www.plosmedicine.org/, Annals of Internal Medicine at http://www.annals.org/, and Epidemiology at http://www.epidem.com/). Information on the STROBE Initiative is available at www.strobe-statement.org.

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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.