CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating webbased and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 - description of the intervention) may also be applicable for other study designs.

The goal of the CONSORT EHEALTH checklist and guideline is to be

- a) a guide for reporting for authors of RCTs,
- b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the checklist.

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (non-pharmacologic treatment) items.

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE OF THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red *.

In the textboxes, either copy & paste the relevant sections from your manuscript into this formplease include any quotes from your manuscript in QUOTATION MARKS,

or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED).

Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF _AND_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE !!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the caption):

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and Mobile Health Interventions

J Med Internet Res 2011;13(4):e126 URL: http://www.jmir.org/2011/4/e126/

doi: 10.2196/jmir.1923 PMID: 22209829

*Obrigatório

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Your e-mail address	*
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drgaucho@yahoo.co	m
Title of your manusc	erint *
Provide the (draft) title	•
"InsuOnline, an Elect	tronic Game for Medical Education on Insulin Therapy: rolled Trial with Primary Care Physicians"
Article Preparation S	
,	article preparation are you currently (at the time you fill in this form)
not submitted yet - i	·
,	in late draft status, just before submission
	nal but not reviewed yet
submitted to a journ	nal and after receiving initial reviewer comments
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	/
	/ not (yet) submitted to / published in JMIR

1a) TITLE: Identification as a randomized trial in the title

1a) Does your paper address CONSORT item 1a? *

3	CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form
	I.e does the title contain the phrase "Randomized Controlled Trial"? (if not, explain the reason under "other")
	yes
	Outro:
	1a-i) Identify the mode of delivery in the title
	Identify the mode of delivery. Preferably use "web-based" and/or "mobile" and/or "electronic game" in the title Avoid ambiguous terms like "online", "virtual", "interactive". Use "Internet-based" only if Intervention includes non-web-based Internet components (e.g. email), use "computer-based" or "electronic" only if offline products are used. Use "virtual" only in the context of "virtual reality" (3-D worlds). Use "online" only in the context of "online support groups". Complement or substitute product names with broader terms for the class of products (such as "mobile" or "smart phone" instead of "iphone"), especially if the application runs on different platforms.
	1 2 3 4 5
	subitem not at all important O O essential
	Does your paper address subitem 1a-i? *
	Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study
	"InsuOnline, an Electronic Game for Medical Education on Insulin Therapy: A Randomized Controlled Trial with Primary Care Physicians" (title) - The term "electronic" in the title indicates that the game was used as an offline installed app in players' own equipment
	1a-ii) Non-web-based components or important co-interventions in title
	Mention non-web-based components or important co-interventions in title, if any (e.g., "with telephone support").
	1 2 3 4 5
	subitem not at all important 🔘 💿 🔾 🔘 essential
	Does your paper address subitem 1a-ii? Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not
	in the ms, or briefly explain why the item is not applicable/relevant for your study
	The game was compared to a standard onsite CME activity, just like most CME activities are performed worldwide, so authors think it is not relevant to indicate the type of control (comparator) activity in the title because it is just like anything that is currently done for CME (and it would make the title painfully longer)

1a-iii) Primary condition or target group in the title

Mention primary condition or target group in the title, if any (e.g., "for children with Type I Diabetes") Example: A Web-based and Mobile Intervention with Telephone Support for Children with Type I Diabetes: Randomized Controlled Trial

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subitem not at all important O O			essential
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Does your paper address subitem 1a-iii? *

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"InsuOnline, an Electronic Game for Medical Education on Insulin Therapy: A Randomized Controlled Trial with Primary Care Physicians" - target group is in the title

1b) ABSTRACT: Structured summary of trial design, methods, results, and conclusions

NPT extension: Description of experimental treatment, comparator, care providers, centers, and blinding status.

1b-i) Key features/functionalities/components of the intervention and comparator in the METHODS section of the ABSTRACT

Mention key features/functionalities/components of the intervention and comparator in the abstract. If possible, also mention theories and principles used for designing the site. Keep in mind the needs of systematic reviewers and indexers by including important synonyms. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

Does your paper address subitem 1b-i? *

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"the game InsuOnLine, installed as an app in their own computers, in the time of their choice"

"a traditional CME session, composed by onsite lectures and cases discussion"

"Both interventions had the same content and duration (~4 hours)"

1b-ii) Level of human involvement in the METHODS section of the ABSTRACT

Clarify the level of human involvement in the abstract, e.g., use phrases like "fully automated" vs. "therapist/nurse/care provider/physician-assisted" (mention number and expertise of providers involved, if any). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

Does your paper address subitem 1b-ii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"play the game InsuOnLine, installed as an app in their own computers, in the time of their choice, with minimal or no external guidance,"

1b-iii) Open vs. closed, web-based (self-assessment) vs. face-to-face assessments in the METHODS section of the ABSTRACT

Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic or a closed online user group (closed usergroup trial), and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment). Clearly say if outcomes were self-assessed through questionnaires (as common in web-based trials). Note: In traditional offline trials, an open trial (open-label trial) is a type of clinical trial in which both the researchers and participants know which treatment is being administered. To avoid confusion, use "blinded" or "unblinded" to indicated the level of blinding instead of "open", as "open" in web-based trials usually refers to "open access" (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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subitem not at all important \bigcirc \bigcirc \bigcirc \bigcirc essential

Does your paper address subitem 1b-iii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Primary care physicians (PCPs) from South of Brazil were invited by phone or email to participate in an unblinded randomized controlled trial" "Insulin-prescribing competence (factual knowledge, problem-solving skills, and attitudes) was self-assessed through a questionnaire applied before, immediately after, and 3 months after the interventions."

1b-iv) RESULTS section in abstract must contain use data

Report number of participants enrolled/assessed in each group, the use/uptake of the intervention (e.g., attrition/adherence metrics, use over time, number of logins etc.), in addition to primary/secondary outcomes. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

Does your paper address subitem 1b-iv?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"In game group, 69 of 88 (78%) completed the intervention, compared to 65 of 73 (89%) in control group, with no diference in applicability"

1b-v) CONCLUSIONS/DISCUSSION in abstract for negative trials

Conclusions/Discussions in abstract for negative trials: Discuss the primary outcome - if the trial is negative (primary outcome not changed), and the intervention was not used, discuss whether negative results are attributable to lack of uptake and discuss reasons. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)



Does your paper address subitem 1b-v?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The game InsuOnLine was applicable, very well accepted, and extremely effective for medical education on insulin therapy"

INTRODUCTION

2a) In INTRODUCTION: Scientific background and explanation of rationale

2a-i) Problem and the type of system/solution

Describe the problem and the type of system/solution that is object of the study: intended as stand-alone intervention vs. incorporated in broader health care program? Intended for a particular patient population? Goals of the intervention, e.g., being more cost-effective to other interventions, replace or complement other solutions? (Note: Details about the intervention are provided in "Methods" under 5)

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Does your paper address subitem 2a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

reasons may be PCPs' lack of knowledge and confidence on several aspects of DM management [5], specially regarding insulin use [6]" "Continuing medical education (CME) on DM and insulin is often advocated as a solution to optimize the knowledge and the practice of PCPs [11]; however, traditional CME activities (such as lectures and group discussions) have small and short-lasting efficacy [12]. Thus, new educational methods are urgently required. "

2a-ii) Scientific background, rationale: What is known about the (type of) system

Scientific background, rationale: What is known about the (type of) system that is the object of the study (be sure to discuss the use of similar systems for other conditions/diagnoses, if appropiate), motivation for the study, i.e. what are the reasons for and what is the context for this specific study, from which stakeholder viewpoint is the study performed, potential impact of findings [2]. Briefly justify the choice of the comparator.

Does your paper address subitem 2a-ii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

a tool for medical education on insulin therapy, in what we called the "real-world conditions" for self-directed distance learning activities: as a stand-alone resource, played in learners' own equipment, in learner's own flexible time schedule, with minimal or no external guidance [30, 31].

Our next step in the process of educational validation of InsuOnline is the assessment of its effectiveness to improve the competence of PCPs for treating DM with insulin."

2b) In INTRODUCTION: Specific objectives or hypotheses

Does your paper address CONSORT subitem 2b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Thus, the objectives of this study were to assess applicability, user acceptance, and effectiveness of InsuOnLine for education of PCPs on insulin therapy for diabetes, as compared with a traditional onsite CME session with the same content and duration."

METHODS

3a) Description of trial design (such as parallel, factorial) including allocation ratio

Does your paper address CONSORT subitem 3a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

insulin therapy for diabetes, as compared to a "traditional" onsite educational activity with the same content and the same duration." "Those who agreed to participate received a consent form (Appendix A) and were allocated to groups by simple randomization using a random number generator. Due to our expectancy of a higher dropout rate in the game group, allocation was made at a 2:1 ratio (if the randomly generated number was 1 to 6, subject was allocated to game group, and if it was 7 to 9, to control group). "

3b) Important changes to methods after trial commencement (such as eligibility criteria), with reasons

Does your paper address CONSORT subitem 3b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

There were no changes to methods after trial commencement							
	_						

3b-i) Bug fixes, Downtimes, Content Changes

Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].

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Does your paper address subitem 3b-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The version used in this study was a code release (version 1.6.1);"

"development was frozen during the trial"

In Results session, some technical issues were reported: "some criticisms were reported, related to game content (some repetitive or too extensive dialogues, soundtrack too loud) or to the software itself (some "freezes" when the player clicks too fast, incompatibility with some antivirus softwares)."

4a) Eligibility criteria for participants

Does your paper address CONSORT subitem 4a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not

in the ms, or briefly explain why the item is not applicable/relevant for your study

Subjects were eligible if they were medical doctors with an active register at a regional Council of Medicine in Brazil, were not specialists in Endocrinology or diabetes, were currently working at a public health care unit as a primary care physician (PCP), and were directly involved in the treatment of patients with diabetes in those facilities, with any degree of computer or gaming literacy.

4a-i) Computer / Internet literacy

Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.

Does your paper address subitem 4a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Inclusion criteria: "with any degree of computer or gaming literacy" - just like in the real world (to allow for generalisation of our results)

4a-ii) Open vs. closed, web-based vs. face-to-face assessments:

Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.

Does your paper address subitem 4a-ii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The researchers have contacted the local public health authorities of cities from the states of Paraná (Londrina and its metropolitan area, Curitiba and São José dos Pinhais) and Santa Catarina (Blumenau), who agreed to help with recruitment. Those authorities have enlisted PCPs in their area to attend a training session about diabetes, and then we contacted those PCPs via phone, mail or email to invite them to participate in the study. Those who agreed to participate received a consent form"

4a-iii) Information giving during recruitment

Information given during recruitment. Specify how participants were briefed for recruitment and in the informed consent procedures (e.g., publish the informed consent documentation as appendix, see also item

X26), as this information may have an effect on user self-selection, user expectation and may also bias results.

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Does your paper address subitem 4a-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study crues from the states of Parana (Longfina and its metropolitan area,

Curitiba and São José dos Pinhais) and Santa Catarina (Blumenau), who agreed to help with recruitment. Those authorities have enlisted PCPs in their area to attend a training session about diabetes, and then we contacted those PCPs via phone, mail or email to invite them to participate in the study. Those who agreed to participate received a consent form"

The consent form is available as an Appendix.

"all subjects filled an informed consent form (Appendix A)"

4b) Settings and locations where the data were collected

Does your paper address CONSORT subitem 4b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"After filling the informed consent form, participants were informed of which group they were allocated to, and received an email with a link to the baseline questionnaire (stored on Google Drive). Also, participants allocated to control group received by email information about the time and location of their scheduled onsite learning activity. A printed questionnaire was applied to those participants of the onsite learning activity immediately after its ending.

Participants allocated to game group received an email with instructions

4b-i) Report if outcomes were (self-)assessed through online questionnaires

Clearly report if outcomes were (self-)assessed through online questionnaires (as common in web-based trials) or otherwise.

Does your paper address subitem 4b-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the me, or briefly explain why the item is not applicable relevant for your study.

in the ms, or briefly explain why the item is not applicable/relevant for your study Participants allocated to game group received an email with instructions on how to download and install the game, after filling this initial questionnaire. After this, they were contacted (repeteadly, if needed) to check if they have finalized the game, and then they were sent another online questionnaire stored on Google Drive.

After 3 months, a link to another online questionnaire was sent to participants of both groups."

"Outcomes were self-assessed using questionnaires which were applied to the participants of both groups at the time points:..."

4b-ii) Report how institutional affiliations are displayed

Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer rates, use, and reactions with regards to an intervention. (Not a required item – describe only if this may bias results)

Does your paper address subitem 4b-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We think this is not relevant for this study. Invitation for potential participants was intermediated by local public health authorities from the cities where PCPs worked.

5) The interventions for each group with sufficient details to allow replication, including how and when they were actually administered

5-i) Mention names, credential, affiliations of the developers, sponsors, and owners

Mention names, credential, affiliations of the developers, sponsors, and owners [6] (if authors/evaluators are owners or developer of the software, this needs to be declared in a "Conflict of interest" section or mentioned elsewhere in the manuscript).

Does your paper address subitem 5-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Conflicts of interest are shown at the proper session: "InsuOnline is a copyrighted game. Its design and development was entirely founded by personal resources from the authors LAD and PAG, and from Oniria Software Industry, who are copyright holders. All authors contribute to design and evaluation of the game."

5-ii) Describe the history/development process

Describe the history/development process of the application and previous formative evaluations (e.g., focus groups, usability testing), as these will have an impact on adoption/use rates and help with interpreting results.

Does your paper address subitem 5-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"real-world conditions" for self-directed distance learning activities: as a stand-alone resource, played in learners' own equipment, in learner's own flexible time schedule, with minimal or no external guidance [30. 311."

"Usability, playability, and preliminary educational effectiveness of previous versions of the game were previously assessed and reported [30.31]"

5-iii) Revisions and updating

Revisions and updating. Clearly mention the date and/or version number of the application/intervention (and comparator, if applicable) evaluated, or describe whether the intervention underwent major changes during the evaluation process, or whether the development and/or content was "frozen" during the trial. Describe dynamic components such as news feeds or changing content which may have an impact on the replicability of the intervention (for unexpected events see item 3b).

1 2 3 4 5 subitem not at all important O O o essential

Does your paper address subitem 5-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A detailed description of InsuOnline design and development process can be found in [29]. The version used in this study was a code release (version 1.6.1)"

"development was "frozen" during the trial"

5-iv) Quality assurance methods

Provide information on quality assurance methods to ensure accuracy and quality of information provided [1], if applicable.

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Does your paper address subitem 5-iv?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

3	CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form
	Outcomes were mostly self-assessed by participants using online questionnaires (forms) on Google Drive
	5-v) Ensure replicability by publishing the source code, and/or providing screenshots/screencapture video, and/or providing flowcharts of the algorithms used Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used. Replicability (i.e., other researchers should in principle be able to replicate the study) is a hallmark of scientific reporting. 1 2 3 4 5
	subitem not at all important 🔘 🔘 💿 🔘 essential
i	Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to ndicate direct quotes from your manuscript), or elaborate on this item by providing additional information not n the ms, or briefly explain why the item is not applicable/relevant for your study Source code is protected by copyright. Screenshots and a description of the game are provided.
	5-vi) Digital preservation
	Digital preservation: Provide the URL of the application, but as the intervention is likely to change or disappear over the course of the years; also make sure the intervention is archived (Internet Archive, webcitation.org, and/or publishing the source code or screenshots/videos alongside the article). As pages behind login screens cannot be archived, consider creating demo pages which are accessible without login. 1 2 3 4 5
	subitem not at all important 🔘 🔘 💿 🔘 essential
į	Does your paper address subitem 5-vi? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Screenshots and a game description are provided. A demonstration video will be included as supplementary material.

5-vii) Access

Access: Describe how participants accessed the application, in what setting/context, if they had to pay (or were paid) or not, whether they had to be a member of specific group. If known, describe how participants obtained "access to the platform and Internet" [1]. To ensure access for editors/reviewers/readers, consider to provide a "backdoor" login account or demo mode for reviewers/readers to explore the application (also important for archiving purposes, see vi).



Does your paper address subitem 5-vii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Participants allocated to the game group received by email a personal login and password to access a website from where the game could be downloaded and installed in players' own desktops or notebooks with Windows or MacOS, with no cost for study subjects."

5-viii) Mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework

Describe mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description of the content (including where it is coming from and who developed it) [1]," whether [and how] it is tailored to individual circumstances and allows users to track their progress and receive feedback" [6]. This also includes a description of communication delivery channels and - if computer-mediated communication is a component - whether communication was synchronous or asynchronous [6]. It also includes information on presentation strategies [1], including page design principles, average amount of text on pages, presence of hyperlinks to other resources, etc. [1].

1 2 3 4 5 subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 5-viii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

presentations were previously prepared by the main author, and they had the exact same content from the recommendations included in the game. The lectures were given by a clinical endocrinologist not linked to the research team, in order to avoid potential biases; this endocrinologist was previously trained by the main author and was familiarized with the didactic material. Also, the onsite learning activity was designed to have the same time duration of the full game experience (about 4 hours)."

5-ix) Describe use parameters

subiter

Describe use parameters (e.g., intended "doses" and optimal timing for use). Clarify what instructions or recommendations were given to the user, e.g., regarding timing, frequency, heaviness of use, if any, or was the intervention used ad libitum.

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Does your paper address subitem 5-ix?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The software recorded players' progress in the game, so participants could logoff and logon again and continue to play from the point where they stopped. Participants were authorized to play the game in the time schedule of their preference, in how many sessions they wanted. The amount of time necessary in order to finish all 19 game levels is about 4 hours [31]."

5-x) Clarify the level of human involvement

Clarify the level of human involvement (care providers or health professionals, also technical assistance) in the e-intervention or as co-intervention (detail number and expertise of professionals involved, if any, as well as "type of assistance offered, the timing and frequency of the support, how it is initiated, and the medium by which the assistance is delivered". It may be necessary to distinguish between the level of human involvement required for the trial, and the level of human involvement required for a routine application outside of a RCT setting (discuss under item 21 – generalizability).

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subitem not at all important					•	essential

Does your paper address subitem 5-x?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Players were orientated to download and play the game on their own, with minimal instructions for download and installation sent by email (minimal or no external guidance). However, If players had any difficulty or problem during game download, install or play, researchers were available to give remote assistance by email, text message or phone at any moment."

5-xi) Report any prompts/reminders used

Report any prompts/reminders used: Clarify if there were prompts (letters, emails, phone calls, SMS) to use the application, what triggered them, frequency etc. It may be necessary to distinguish between the level of prompts/reminders required for the trial, and the level of prompts/reminders for a routine application outside of a RCT setting (discuss under item 21 – generalizability).



Does your paper address subitem 5-xi?*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

initial questionnaire. After this, they were contacted (repeteadly, if needed) to check if they have finished the game, and then they were sent another online questionnaire stored on Google Drive. "
"If the participants did not answer to the questionnaire after a few days, reminders were sent at 3- to 7-day intervals (initially by email, then by text message, and finally by phone); if they did not answer after up to 6 consecutive reminders, they were considered as lost of follow-up (non-respondents)."

5-xii) Describe any co-interventions (incl. training/support)

Describe any co-interventions (incl. training/support): Clearly state any interventions that are provided in addition to the targeted eHealth intervention, as ehealth intervention may not be designed as stand-alone intervention. This includes training sessions and support [1]. It may be necessary to distinguish between the level of training required for the trial, and the level of training for a routine application outside of a RCT setting (discuss under item 21 – generalizability.

Does your paper address subitem 5-xii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No co-interventions were provided in this study

6a) Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed

Does your paper address CONSORT subitem 6a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study ______ The primary outcome of this study was the score in the competence _____

subscale in the immediately post-intervention self-assessment.

Secondary outcomes were: score in competence subscale at 3 months post-intervention (ie, the "retention" of learned content); participants' attitudes regarding diabetes and insulin after the interventions; users' acceptance and satisfaction with the learning activities; participants' opinion on the actual impact of the educational activity (game or onsite learning session) on their current professional practice; and applicability of the intervention (game or onsite learning session)."

6a-i) Online questionnaires: describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed

If outcomes were obtained through online questionnaires, describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed [9].

1 2 3 4 5

subitem not at all important O O O essential
Does your paper address subitem 6a-i?
Copy and paste relevant sections from manuscript text
6a-ii) Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored
Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored (logins, logfile analysis, etc.). Use/adoption metrics are important process outcomes that should be reported n any ehealth trial.
1 2 3 4 5
subitem not at all important O O O essential
measure assessed in this study was the time (in number of days) needed for the players to inform us that they have finished the game, after we sent them the instructions for download. "Among the subjects of the game group who did finish playing the game, the mean time required for finishing it after download instructions were sent was 21±12 days (range: 2 to 59 days). "
6a-iii) Describe whether, how, and when qualitative feedback from participants was obtained Describe whether, how, and when qualitative feedback from participants was obtained (e.g., through emails, feedback forms, interviews, focus groups).
1 2 3 4 5
subitem not at all important 🔘 🔘 💿 essential
Does your paper address subitem 6a-iii? Copy and paste relevant sections from manuscript text
In free text items of the subscales of game evaluation, onsite activity evaluation and importance for professional practice. Comments from the study subjects were reviewed by content analysis.

6b) Any changes to trial outcomes after the trial commenced, with reasons

Does your paper address CONSORT subitem 6b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

There were not any changes to trial outcomes after the trial commenced.	

7a) How sample size was determined

NPT: When applicable, details of whether and how the clustering by care provides or centers was addressed

7a-i) Describe whether and how expected attrition was taken into account when calculating the sample size

Describe whether and how expected attrition was taken into account when calculating the sample size.

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subitem not at all important					•	essentia

Does your paper address subitem 7a-i?

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study "In order to detect a minimum standard deviation of 0.5 on the score

(percentage of right answers) in the subscale of competence, with 80% of statistical power at 5% of significance level, we estimated a sample size of 128 subjects (64 in each group). Taking into account an expected attrition rate of 40% in the game group (about the double of the 17% attrition rate observed in the previous pilot study with students and residents [30,31]) and of 20% in the onsite activity group, we decided to enroll at least 90 subjects in the game group and 77 subjects in control group."

7b) When applicable, explanation of any interim analyses and stopping guidelines

Does your paper address CONSORT subitem 7b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Not applicable (short duration)

8a) Method used to generate the random allocation sequence

NPT: When applicable, how care providers were allocated to each trial group

Does your paper address CONSORT subitem 8a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Those who agreed to participate received a consent form (Appendix A) and were allocated to groups by simple randomization using an online random number generator (www.random.org). Due to our expectancy of a higher dropout rate in the game group, allocation was made at a 2:1 ratio (if the randomly generated number was 1 to 6, subject was allocated to game group, and if it was 7 to 9, to control group). "

8b) Type of randomisation; details of any restriction (such as blocking and block size)

Does your paper address CONSORT subitem 8b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

	S	Simp	le rand	lomization	(described	d above)
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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

Does your paper address CONSORT subitem 9? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Those who agreed to participate received a consent form (Appendix A) and were allocated to groups by simple randomization using an online random number generator (www.random.org). Due to our expectancy of a higher dropout rate in the game group, allocation was made at a 2:1 ratio (if the randomly generated number was 1 to 6, subject was allocated to game group, and if it was 7 to 9, to control group). "

10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

Does your paper address CONSORT subitem 10? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Those who agreed to participate received a consent form (Appendix A) and were allocated to groups by simple randomization using an online random number generator (www.random.org) by the first author"

11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how

NPT: Whether or not administering co-interventions were blinded to group assignment

11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).

Does your paper address subitem 11a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"We performed an unblinded randomized controlled trial to assess the effectiveness of InsuOnLine as a method for education... "

11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator".

1 2 3 4 5 subitem not at all important O O O essential

Does your paper address subitem 11a-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

It is not explicit in the manuscript, but potential participants were informed this study's objectives were to assess an educational game during the first contacts with the researchers for obtaining their informed consent form.

11b) If relevant, description of the similarity of interventions

(this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

Does your paper address CONSORT subitem 11b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Powerpoint slides for the lectures and printed case presentations were previously prepared by the main author, and they had the exact same content from the recommendations included in the game. The lectures were given by a clinical endocrinologist not linked to the research team, in order to avoid potential biases; this endocrinologist was previously trained by the main author and was familiarized with the didactic material. Also, the onsite learning activity was designed to have the same time duration of the full game experience (about 4 hours)."

12a) Statistical methods used to compare groups for primary and secondary outcomes

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

Does your paper address CONSORT subitem 12a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Fisher exact test. Absolute increase in competence score from baseline to immediately post-intervention and to 3 months post-intervention was estimated on Epi-Info 7. The effect size of the group variable on the competence score was estimated using Cohen's d test on R software. Reliability (internal consistency) of the subscales used in this study was evaluated using Cronbach's alpha. Comments made by subjects in the free text items were reviewed by content analysis. Statistical significance was defined as p<0.05. "

12a-i) Imputation techniques to deal with attrition / missing values

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

Does your paper address subitem 12a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Only subjects who filled the baseline and the immediate post-intervention questionnaires were included in the analysis"

12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

Does your paper address CONSORT subitem 12b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No subgroup analyses were made	
	,

X26) REB/IRB Approval and Ethical Considerations [recommended as subheading under "Methods"] (not a CONSORT item)

X26-i) Comment on ethics committee approval

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subitem not at all important	\bigcirc					essential

Does your paper address subitem X26-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Participation was anonymous and voluntary, and all subjects filled an informed consent form (Appendix A), according to Brazilian Health Ministry 's regulations for research on human beings. The study protocol was previously approved by Londrina State University Research Ethics Committee (UEL, #051/2011 and #051/2012), and by all local public health authorities from the cities where the study was performed."

x26-ii) Outline informed consent procedures

Outline informed consent procedures e.g., if consent was obtained offline or online (how? Checkbox, etc.?), and what information was provided (see 4a-ii). See [6] for some items to be included in informed consent documents.



Does your paper address subitem X26-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Those who agreed to participate were informed of the research procedures and were sent by email a link to an online informed consent form stored on Google Drive (Appendix A). "

X26-iii) Safety and security procedures

Safety and security procedures, incl. privacy considerations, and any steps taken to reduce the likelihood or detection of harm (e.g., education and training, availability of a hotline)

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Does your paper address subitem X26-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"No harms or adverse effects were reported."	

RESULTS

13a) For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome

NPT: The number of care providers or centers performing the intervention in each group and the number of patients treated by each care provider in each center

Does your paper address CONSORT subitem 13a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A total of 257 primary care physicians were contacted and assessed for eligibility during the recruitment period (July 2014 in Curitiba and São José dos Pinhais, Paraná; August 2014 in the cities from the 17th Health Regional of Paraná State except Londrina; September to October 2014 in Londrina, Paraná; and October 2014 in Blumenau, Santa Catarina); 170 were randomized, and 134 were included in the final analysis. "

13b) For each group, losses and exclusions after randomisation, together with reasons

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Figure 3 is the C	CONSORT flow diagra	ım	
			-

13b-i) Attrition diagram

Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the intervention/comparator in each group plotted over time, similar to a survival curve) or other figures or tables demonstrating usage/dose/engagement.

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3 C	CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form
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Does your paper address subite	m 13b-i?
in quotation marks "like this" to indic	om the manuscript or cite the figure number if applicable (include quotes cate direct quotes from your manuscript), or elaborate on this item by in the ms, or briefly explain why the item is not applicable/relevant for you
We think it was not relevant for th	is study
14a) Dates defining	g the periods of recruitment and follow-
up	
Does your paper address CONS	OPT subitem 1/22 *
Copy and paste relevant sections from indicate direct quotes from your ma	om the manuscript (include quotes in quotation marks "like this" to nuscript), or elaborate on this item by providing additional information not item is not applicable/relevant for your study
"After 3 months, a link to another	
	to the questionnaire after a few days,
text message, and finally by phor	ny intervals (initially by email, then by ne); if they did not answer after up to 6 e considered as lost of follow-up (non-
Indicate if critical "secular events" f	er events" fell into the study period fell into the study period, e.g., significant changes in Internet resources ardware or Internet delivery resources"
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	om the manuscript (include quotes in quotation marks "like this" to
	nuscript), or elaborate on this item by providing additional information not item is not applicable/relevant for your study
Not relevant for this study	

Not relevant for this study		

14b) Why the trial ended or was stopped (early)

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indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not
in the ms. or briefly explain why the item is not applicable/relevant for your study

Not applicable	
	2

15) A table showing baseline demographic and clinical characteristics for each group

NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and centers (volume) in each group

Does your paper address CONSORT subitem 15? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms. or briefly explain why the item is not applicable/relevant for your study

in the me, or anony explain may the met applicable, refer and ref	
Table 2 in the manuscript	

15-i) Report demographics associated with digital divide issues

In ehealth trials it is particularly important to report demographics associated with digital divide issues, such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the participants, if known.

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Does your paper address subitem 15-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

It was not assessed in this study, but inclusion criteria were PCPs "with
any degree of computer or gaming literacy" in order to make our sample
comparable with the universe of PCPs in the real world

16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups

16-i) Report multiple "denominators" and provide definitions

Report multiple "denominators" and provide definitions: Report N's (and effect sizes) "across a range of study participation [and use] thresholds" [1], e.g., N exposed, N consented, N used more than x times, N used more than y weeks, N participants "used" the intervention/comparator at specific pre-defined time points of interest (in absolute and relative numbers per group). Always clearly define "use" of the intervention.



Does your paper address subitem 16-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A total of 257 primary care physicians were contacted and assessed for eligibility during the recruitment period ...; 170 were randomized, and 134 were included in the final analysis." - 69 in game group and 65 in control (Table 2)

16-ii) Primary analysis should be intent-to-treat

Primary analysis should be intent-to-treat, secondary analyses could include comparing only "users", with the appropriate caveats that this is no longer a randomized sample (see 18-i).

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subitem not at all important				•		essential

Does your paper address subitem 16-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We think for this study it did not make sense to check if there was any difference in knowledge, skills or attitudes if the subject was not really exposed to the allocated educational intervention, so we did not make an intention-to-treat analysis.

17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)

Does your paper address CONSORT subitem 17a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study
Not reported due to length limitation
17a-i) Presentation of process outcomes such as metrics of use and intensity of use
In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure metrics such as "average session length". These must be accompanied by a technical description how a metric like a "session" is defined (e.g., timeout after idle time) [1] (report under item 6a).
1 2 3 4 5
subitem not at all important O O essential
Does your paper address subitem 17a-i? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Applicability was assessed. Metrics of use were not assessed in this study but they had already been estimated on a previous (pilot) study (Diehl et al., 2015)
17b) For binary outcomes, presentation of both absolute
and relative effect sizes is recommended
Does your paper address CONSORT subitem 17b? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Yes for demographic data (Table 2) and applicability

18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing

pre-specified from exploratory

Does your paper	address	CONSORT	subitem	18? *
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Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to
indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not
in the ms, or briefly explain why the item is not applicable/relevant for your study

Correlation of applicability, competence and attitudes with demographic data was reported	

18-i) Subgroup analysis of comparing only users

A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii).

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Does your paper address subitem 18-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This is an analysis of	fonly users		
			//

19) All important harms or unintended effects in each group

(for specific guidance see CONSORT for harms)

Does your paper address CONSORT subitem 19? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"No harms or adverse effects were reported."	
	,

19-i) Include privacy breaches, technical problems

Include privacy breaches, technical problems. This does not only include physical "harm" to participants, but also incidents such as perceived or real privacy breaches [1], technical problems, and other unexpected/unintended incidents. "Unintended effects" also includes unintended positive effects [2].

Does your paper address subitem 19-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No privacy issues were detected.

Technical problems were reported: "some criticisms were reported, related to game content (some repetitive or too extensive dialogues, soundtrack too loud) or to the software itself (some "freezes" when the player clicks too fast, incompatibility with some antivirus softwares)."

19-ii) Include qualitative feedback from participants or observations from staff/researchers

Include qualitative feedback from participants or observations from staff/researchers, if available, on strengths and shortcomings of the application, especially if they point to unintended/unexpected effects or uses. This includes (if available) reasons for why people did or did not use the application as intended by the developers.

Does your paper address subitem 19-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms. or briefly explain why the item is not applicable/relevant for your study

"In the free text field for comments, some subjects expressed their intense satisfaction with the game ("it is always better to learn by playing"), and even physicians who have never played an electronic game before were able to play it and enjoyed the experience. "
"Most comments about the onsite activity were also highly positive ("excellent lecture", "very practical approach", "very dynamic and practical activity"). Criticisms were about the short duration of the activity ("too much information for one session only", "it would be better addressed in two consecutive days"). "

DISCUSSION

22) Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence

NPT: In addition, take into account the choice of the comparator, lack of or partial blinding, and unequal expertise of care providers or centers in each group

22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use)

Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).

Does your paper address subitem 22-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

learning session. InsuOnline was also applicable, with about 80% of subjects with the more varied degrees of computer/gaming literacy being able to finish it. Both interventions were very well-rated by participants, regarding engagement, realism, and perceived educational value. Three months after both interventions, primary health care doctors from both groups said that they were feeling more secure and more prepared to help real patients with diabetes in their daily professional practice, with even better results in the game group. "

22-ii) Highlight unanswered new questions, suggest future research

Highlight unanswered new questions, suggest future research.

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Does your paper address subitem 22-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"However, the real impact of those interventions in professional practice and patients' treatment and levels of glycemic control still have to be determined by future research work."

20) Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses

20-i) Typical limitations in ehealth trials

Typical limitations in ehealth trials: Participants in ehealth trials are rarely blinded. Ehealth trials often look at a multiplicity of outcomes, increasing risk for a Type I error. Discuss biases due to non-use of the intervention/usability issues, biases through informed consent procedures, unexpected events.

1 2 3 4 5
subitem not at all important O O O essential

Does your paper address subitem 20-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not

in the ms, or briefly explain why the item is not applicable/relevant for your study

extensively reviewed by our team of experts in endocrinology and medical education, which warrants their face and content validity, and our subscales have shown acceptable reliability, as measured by their Cronbach's alpha statistics (in the range of 0.7 to 0.8), with the exception of the subscale of attitudes, which had very poor internal consistency. The authors decided to maintain this attitude subscale because it had questions very similar to the ones used in previous surveys [6,53], allowing for their comparison with our results. "

21) Generalisability (external validity, applicability) of the trial findings

NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations

	1	2	3	4	5	
subitem not at all important					•	essential

Does your paper address subitem 21-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

would have a different distribution of computer/gaming literacy from the universe of PCPs as a whole). Also, our game was tested in what we believe to be "real-world conditions" for the use of an electronic game for distance CME: in players' own computers (with a wide range of possible equipment configurations), with very little or no external help from our team, and in their own free time, which makes InsuOnline a very attractive, flexible and scalable option for large-scale distance CME on diabetes and insulin."

21-ii) Discuss if there were elements in the RCT that would be different in a routine application setting

Discuss if there were elements in the RCT that would be different in a routine application setting (e.g., prompts/reminders, more human involvement, training sessions or other co-interventions) and what impact the omission of these elements could have on use, adoption, or outcomes if the intervention is applied outside of a RCT setting.



Does your paper address subitem 21-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Also, our game was tested in what we believe to be "real-world conditions" for the use of an electronic game for distance CME: in players' own computers (with a wide range of possible equipment configurations), with very little or no external help from our team, and in their own free time, "

OTHER INFORMATION

23) Registration number and name of trial registry

Does your paper address CONSORT subitem 23? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Clinicaltrials.gov. NCT01759953."		

24) Where the full trial protocol can be accessed, if available

Does your paper address CONSORT subitem 24? *

Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"We have previously described the process of design and development of InsuOnLine, the first electronic serious game intended for medical education on insulin therapy for diabetes [29], "

25) Sources of funding and other support (such as supply of drugs), role of funders

Does your paper address CONSORT subitem 25? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No funding	

X27) Conflicts of Interest (not a CONSORT item)

X27-i) State the relation of the study team towards the system being evaluated

In addition to the usual declaration of interests (financial or otherwise), also state the relation of the study team towards the system being evaluated, i.e., state if the authors/evaluators are distinct from or identical with the developers/sponsors of the intervention.

Does your paper address subitem X27-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"InsuOnline is a copyrighted game. Its design and development was entirely founded by personal resources from the authors LAD and PAG, and from Oniria Software Industry, who are copyright holders. All authors contribute to design and evaluation of the game."

About the CONSORT EHEALTH checklist

As a result of using this checklist, did you make changes in your manuscript? *

- yes, major changes
- yes, minor changes
- no

What were the most important changes you made as a result of using this checklist?

Reporting self-assessment of outcomes using questionnaires, how questionnaires were applied (online or printed)

How much time did you spend on going through the checklist INCLUDING making changes in your manuscript *

2 hours

As a result of using this checklist, do you thi	ink your manuscript has improved? *
yes	
o no	
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Any other comments or questions on CONS	ORT EHEALTH
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