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 form - please 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

Your name *
First Last
Primary Affiliation (short), City, Country *
University of Toronto, Toronto, Canada
Your e-mail address *
abc@gmail.com
Title of your manuscript *
Provide the (draft) title of your manuscript.
/
Article Preparation Status/Stage *
At which stage in your article preparation are you currently (at the time you fill in this form)
onot submitted yet - in early draft status
onot submitted yet - in late draft status, just before submission
submitted to a journal but not reviewed yet
submitted to a journal and after receiving initial reviewer comments
submitted to a journal and accepted, but not published yet
published
Other:
Journal *
If you already know where you will submit this paper (or if it is already submitted), please provide the journal
name (if it is not JMIR, provide the journal name under "other")
onot submitted yet / unclear where I will submit this
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Other:

Manuscript tracking number *

If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of each published article in JMIR)

Other:
TITLE AND ABSTRACT
1a) TITLE: Identification as a randomized trial in the title
1a) Does your paper address CONSORT item 1a? * I.e does the title contain the phrase "Randomized Controlled Trial"? (if not, explain the reason under "other")
O yes
Other:
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.
subitem not at all important O O 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
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 O O O O 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
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
1 2 3 4 5
subitem not at all important O O O O essential
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
not in the ms, or briefly explain why the item is not applicable/relevant for your study
1b) ABSTRACT: Structured summary of trial design,
methods, results, and conclusions
NPT extension: Description of experimental treatment, comparator, care providers, centers, and
blinding status.
1h i) Voy footures /functionalities/someones of the intervention and someones in the
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)

1 2 3 4 5

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

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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)	access" (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reportin
	If this information is missing from the main body of text, consider adding it)
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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
//
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)
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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
1h w CONCLUCIONS/DISCUSSION in abstract for pagative trials
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)
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Does your paper address subitem 1b-v?

INTRODUCTION
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
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 appropriate), 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.
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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
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
METHODS
WILTHOUS
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

3b) Important changes to methods after trial

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 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]. 1 2 3 4 5 subitem not at all important 🔘 🔘 🔘 🔘 essential 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

commencement (such as eligibility criteria), with reasons

4a) Eligibility criteria for participants

Does your paper address CONSORT subitem 4a? *

4a-i) Computer / Internet literacy
Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.
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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
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 measure
(e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.
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Does your paper address subitem 4a-ii? *

for the state of t	
4a-iii) Information giving during recruitment Information given during recruitment. Specify how participants were briefed for informed consent procedures (e.g., publish the informed consent documentation X26), as this information may have an effect on user self-selection, user expect results.	on as appendix, see also item
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Does your paper address subitem 4a-iii?	
Copy and paste relevant sections from the manuscript (include quotes in quota indicate direct quotes from your manuscript), or elaborate on this item by provious not in the ms, or briefly explain why the item is not applicable/relevant for your sections.	ding additional information
4	
4b) Settings and locations where the data v	were collected
Does your paper address CONSORT subitem 4b? *	
Copy and paste relevant sections from the manuscript (include quotes in quota indicate direct quotes from your manuscript), or elaborate on this item by proving not in the ms, or briefly explain why the item is not applicable/relevant for your sections.	ding additional information
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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.

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

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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).

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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
1
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.
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subitem not at all important 🔘 🔘 🔘 🔘 essential
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
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).
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пости ато того, от втого, от реали титу сто тест аррисальто, тего тего усал сталу	
fi.	
5-iv) Quality assurance methods Provide information on quality assurance methods to ensure accuracy and quality of information provides information and quality assurance methods.	idad
Provide information on quality assurance methods to ensure accuracy and quality of information provi [1], if applicable.	ueu
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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 informa not in the ms, or briefly explain why the item is not applicable/relevant for your study	
not in the ms, or briefly explain why the item is not applicable/relevant for your study	
5-v) Ensure replicability by publishing the source code, and/or providing screenshots/screen- capture 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 prince be able to replicate the study) is a hallmark of scientific reporting.	ciple
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Does your paper address subitem 5-v?

Does your paper address subitem 5-iii?

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.
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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
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).
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Does your paper address subitem 5-vii? *

10
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].
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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
5-ix) Describe use parameters
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?

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 wel 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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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
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).
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Does your paper address subitem 5-xi? *
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to

	<u>/</u>
5-xii) Describe any co-interventions (incl. training/support)	
Describe any co-interventions (incl. training/support): Clearly state any intervention to the targeted eHealth intervention, as ehealth intervention may not intervention. This includes training sessions and support [1]. It may be necesslevel of training required for the trial, and the level of training for a routine appositing (discuss under item 21 – generalizability.	be designed as stand-alone sary to distinguish between the
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Does your paper address subitem 5-xii? *	tation manula "lika thia" to
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not in the ms, or briefly explain why the item is not applicable/relevant for you	ır study
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6a) Completely defined pre-specified prim	
secondary outcome measures, including h	now and when
they were assessed	
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Does your paper address CONSORT subitem 6a? * Copy and paste relevant sections from the manuscript (include quotes in quo indicate direct quotes from your manuscript), or elaborate on this item by pro	viding additional information
not in the ms, or briefly explain why the item is not applicable/relevant for you	ır study
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5a-ii) Describe whet defined/measured/r		ow "	use"	(inc	cluding int	ensity o	of use/d	osage) was		
Describe whether and logins, logfile analysise eported in any ehealt	how "use" s, etc.). Use										
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5a-iii) Describe whe	her. how.	and	whe	n aı	ualitative f	eedbacl	k from ı	partici	pants v	was obta	ined
Describe whether, how eedback forms, interv	, and when	n qua	alitati	ve fe			-				
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Does your paper address subitem 6a-iii?

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
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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Does your paper address subitem 7a-i?
Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to

Copy and paste relevant sections from manuscript text

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
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
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
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
10
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

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

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participants [1, 3] (this shou	nd wl	no w	asr arly	ı't. L ack	Jsu (no	wasn't ually, in web-based trials it is not possible to blind the owledged), but it may be possible to blind outcome assessors, ing co-interventions (if any).
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indicate direct quotes from	ction your	s fro mar	m t	he r	maı t), c	nuscript (include quotes in quotation marks "like this" to or elaborate on this item by providing additional information on applicable/relevant for your study
interest" and which one value on the interest and which one value on the interest and the i	vas t es (4 erver	he " a-ii)	cor car wa	npa n cre as th	rate eate ne "	e biases and certain expectations - discuss e.g., whether "intervention of interest" and which one was the "comparator".
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Does your paper address Copy and paste relevant se indicate direct quotes from	subi ction your	i tem s fro mar	n 11 om t	a-ii the recripe	? mai	inuscript (include quotes in quotation marks "like this" to or elaborate on this item by providing additional information is not applicable/relevant for your study

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
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
12a-i) 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]).
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not in the ms, or briefly explain why the item is not applicable/relevant for your study
66
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
//
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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Does your paper address subitem X26-i?
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to

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

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.
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subitem not at all important \(\cappa \capp
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
VOC :::\ Cofety and accomity myseedows
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

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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 freated 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
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
13b-i) Attrition diagram Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the
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.

	ı	_	3	4	3	
subitem not at all important	0	0	0	0	0	essential

Does your paper address subitem 13b-i?
Copy and paste relevant sections from the manuscript or cite the figure number if applicable (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
applicable/relevant for your study
14a) Dates defining the periods of recruitment and follow-
up
Does your paper address CONSORT subitem 14a? *
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
14a-i) Indicate if critical "secular events" fell into the study period
Indicate if critical "secular events" fell into the study period, e.g., significant changes in Internet resources
available or "changes in computer hardware or Internet delivery resources"
1 2 3 4 5
subitem not at all important OOOO essential
Does your paper address subitem 14a-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

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

Does your paper address CONSORT subitem 14b? *	
Copy and paste relevant sections from the manuscript (include quotes in	
indicate direct quotes from your manuscript), or elaborate on this item b not in the ms, or briefly explain why the item is not applicable/relevant for	
Thot in the ms, or briefly explain why the item is not applicable/relevant it	or your study
	10
15) A table showing baseline demograph	ohic and clinical
,	
characteristics for each group	
NPT: When applicable, a description of care providers (case volume	e, 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	•
indicate direct quotes from your manuscript), or elaborate on this item b not in the ms, or briefly explain why the item is not applicable/relevant for	
The time time, or briefly explain time, the teem to the applicable, reference to	
15-i) Report demographics associated with digital divide issues	
In ehealth trials it is particularly important to report demographics associated with digital divide issues	ciated with digital divide issues
such as age, education, gender, social-economic status, computer/Interr	
participants, if known.	
1 2 3 4 5	
subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential	

Does your paper address subitem 15-i? *

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.
1 2 3 4 5
subitem not at all important O O O O essential
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
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).
1 2 3 4 5
subitem not at all important O O O O essential
Does your paper address subitem 16-ii?

	f ₀
(17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)
I	Does your paper address CONSORT subitem 17a? *
İ	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 in the ms, or briefly explain why the item is not applicable/relevant for your study
	fi.
	17a-i) Presentation of process outcomes such as metrics of use and intensity of use n 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 \(\cap \) \(\cap \) \(\cap \) essential
(Does your paper address subitem 17a-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 in the ms, or briefly explain why the item is not applicable/relevant for your study

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
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? * 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
18-i) Subgroup analysis of comparing only users A subgroup analysis of comparing only users is not uncommon in chealth trials, but if done it must be

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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subitem not at all important	0	0	0	0	0	essentia

Does your paper address subitem 18-i?

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
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].
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subitem not at all important 🔘 🔘 🔘 🔘 essential
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

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

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	nanuscript (include quotes in quotation marks "like this" to), or elaborate on this item by providing additional information is not applicable/relevant for your study
DISCUSSION	
-	stent with results, balancing I considering other relevant
NPT: In addition, take into account the chunequal expertise of care providers or ce	noice of the comparator, lack of or partial blinding, and inters in each group
primary outcomes and process outcome	answers suggested by the data, starting with primary
subitem not at all important \(\cap \)	essential

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

Does your paper address subitem 22-i? *

the developers.

for the state of t
22-ii) Highlight unanswered new questions, suggest future research Highlight unanswered new questions, suggest future research.
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subitem not at all important O O O O essential
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
/2
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.
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subitem not at all important 🔾 🔾 🔾 🔾 essential
Dece your pener address subitem 20 i2 *

Does your paper address subitem 20-i? *

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 O O O O 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
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.
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subitem not at all important O O O O essential

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
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
<i>h</i>
24) Where the full trial protocol can be accomed if
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

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
Thot in the ms, or briefly explain why the item is not applicable/relevant for your study
V27) Conflicte of Interest (not a CONCODT item)
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 identica with the developers/sponsors of the intervention.
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subitem not at all important O O O O essential
Dece your paper address subitom V27 i2
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
About the CONSORT EHEALTH checklist
As a result of using this checklist, did you make changes in your manuscript? *
O yes, major changes
O yes, minor changes
O no

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

How much time did you spend on going manuscript *	g through the checklist INCLU	DING making changes in your
As a result of using this checklist, do y	ou think your manuscript has	improved? *
yes		
Ono		
Other:		
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Would you like to become involved in t		
This would involve for example becoming "Explanation and Elaboration" document	involved in participating in a wor	kshop and writing an
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Other:		
Any other comments or questions on C	CONSORT FHEALTH	
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