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

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating web-based 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

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Title of your manuscript *

Provide the (draft) title of your manuscript.

Usability Evaluation of Food Size Aids in Mobile Dietary Reporting Applications for Young Adults: Randomized Control Trials

Name of your App/Software/Intervention *

If there is a short and a long/alternate name, write the short name first and add the long name in brackets.

KBA (Key-in-based aid), PBA (Photo-base

Evaluated Version (if any)

e.g. "V1", "Release 2017-03-01", "Version 2.0.27913"

prototype

Language(s) *

What language is the intervention/app in? If multiple languages are available, separate by comma (e.g. "English, French")

URL of your Intervention Website or App

e.g. a direct link to the mobile app on app in appstore (itunes, Google Play), or URL of the website. If the intervention is a DVD or hardware, you can also link to an Amazon page.

http://www.isrctn.com/ISRCTN3671075

| URL of an image/screenshot (optional) |
|---|
| 您的回答 |
| Accessibility * Can an enduser access the intervention presently? |
| access is free and open |
| access only for special usergroups, not open |
| access is open to everyone, but requires payment/subscription/in-app purchases |
| app/intervention no longer accessible |
| ○ 其他: |
| Primary Medical Indication/Disease/Condition * e.g. "Stress", "Diabetes", or define the target group in brackets after the condition, e.g. "Autism (Parents of children with)", "Alzheimers (Informal Caregivers of)" |
| assess the accuracy, efficiency of three a |
| Primary Outcomes measured in trial * comma-separated list of primary outcomes reported in the trial |
| accuracy and response time |

Secondary/other outcomes

Are there any other outcomes the intervention is expected to affect?

| Recommended "Dose" * What do the instructions for users say on how often the app should be used? | |
|--|--|
| Approximately Daily | |
| Approximately Weekly | |
| Approximately Monthly | |
| Approximately Yearly | |
| "as needed" | |
| ○ 其他: | |
| Approx. Percentage of Users (starters) still using the app as recommended after 3 months * | |
| unknown / not evaluated | |
| O-10% | |
| O 11-20% | |
| 21-30% | |
| 31-40% | |
| 41-50% | |
| 51-60% | |
| O 61-70% | |
| 71%-80% | |
| 81-90% | |
| 91-100% | |
| | |

| Overall, was the app/intervention effective? * |
|--|
| yes: all primary outcomes were significantly better in intervention group vs control |
| partly: SOME primary outcomes were significantly better in intervention group vs control |
| on statistically significant difference between control and intervention |
| or more outcomes |
| inconclusive: more research is needed |
| ● 其他: Experimental results of young adults using three prominent aids sho |
| |
| Article Preparation Status/Stage * At which stage in your article preparation are you currently (at the time you fill in this form) |
| · |
| At which stage in your article preparation are you currently (at the time you fill in this form) |
| At which stage in your article preparation are you currently (at the time you fill in this form) not submitted yet - in early draft status |
| At which stage in your article preparation are you currently (at the time you fill in this form) not submitted yet - in early draft status not submitted yet - in late draft status, just before submission |
| At which stage in your article preparation are you currently (at the time you fill in this form) not submitted yet - in early draft status not submitted yet - in late draft status, just before submission submitted to a journal but not reviewed yet |
| 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 not 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 |
| At which stage in your article preparation are you currently (at the time you fill in this form) not submitted yet - in early draft status not 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 |

| 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 |
| Journal of Medical Internet Research (JMIR) |
| JMIR mHealth and UHealth |
| JMIR Serious Games |
| JMIR Mental Health |
| JMIR Public Health |
| JMIR Formative Research |
| Other JMIR sister journal |
| ○ 其他: |
| Is this a full powered effectiveness trial or a pilot/feasibility trial? |
| Pilot/feasibility |
| C Fully powered |
| 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) on ms number (yet) / not (yet) submitted to / published in JMIR |
| ● 其他: JMU ms#14543 |

你的回應内容過多,請設法讓作答內容更簡短。

TITI E AND ARCTDACT

| 1a |) TITLE: | Identification | n 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")

yes

○ 其他:

1a-i) Identify the mode of delivery in the title

Identify the mode of delivery. Preferably use <code>[web-based]</code> and/or <code>[mobile]</code> and/or <code>[electronic game]</code> in the title. Avoid ambiguous terms like <code>[online]</code>, <code>[virtual]</code>, <code>[interactive]</code>. Use <code>[Internet-based]</code> only if <code>Intervention</code> includes non-web-based <code>Internet</code> components (e.g. email), use <code>[computer-based]</code> or <code>[electronic]</code> only if offline products are used. Use <code>[virtual]</code> only in the context of <code>[virtual reality]</code> (3-D worlds). Use <code>[online]</code> only in the context of <code>[online support groups]</code>. Complement or substitute product names with broader terms for the class of products (such as <code>[mobile]</code> or <code>[smart phone]</code> instead of <code>[iphone]</code>), especially if the application runs on different platforms.

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

Food Size Aids in Mobile Dietary Reporting Applications (direct quotes from our manuscript title)

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., \lceil with telephone support \rfloor).

1 2 3 4 5

subitem not at all important

0 0

0

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

Mobile Dietary Reporting Applications (direct quotes from our manuscript



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 | 0 | 0 | 0 | 0 | • | 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

Young Adults (direct quotes from our manuscript 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)

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|------------------------------|---|---------|---|---|----------|-----------|
| subitem not at all important | 0 | \circ | 0 | 0 | O | essential |

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

Field

user experience testing was conducted under actual meal conditions to assess the accuracy, efficiency, the subjective reaction of three food portion measurement methods embedded in a developed mobile app. (from



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)

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|------------------------------|---------|---------|---|---|----------|----------|
| subitem not at all important | \circ | \circ | 0 | 0 | O | essentia |

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

Α

group of 124 young adults aged 19-26 were recruited for a head-to-head randomized comparison, and divided into three equal groups: a KBA (n=42) control group, and PBA (n=41) and GBA (n=41) experimental groups. (from



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 <code>[blinded]</code> or <code>[unblinded]</code> to indicated the level of blinding instead of <code>[open]</code>, as <code>[open]</code> in web-based trials usually refers to <code>[open access]</code> (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)

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

A group of 124 young adults aged 19-26 were recruited for a head-to-head randomized comparison, and divided into three equal groups (direct

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

Among

the twenty-five food dishes and drinks provided in the cafeteria, participants in the KBA provided the highest accuracy in hash brown weight (p=0.0039), and also outperformed PBA or GBA for many soft drinks in cups. PBA had the best results for a cylindrical hot dog

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

Experimental

results show that each aid had some distinguishing advantages. Our findings on the use of the portion size aid are based on realistic and



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 standalone 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 <code>[Methods]</code> under 5)

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

Young adults are increasingly concerned with healthy eating habits [1-3]. (from our manuscript introduction)

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.

subitem not at all important O O essential

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

Little

research has examined the effectiveness and user acceptance of such applications [13]. A better understanding of users of mobile health apps



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

This

study investigates the effectiveness, limits, and extents of three food size measurement methods in a dietary intake reporting app. (direct



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

The

study was designed as follows: single-site, assessor-masked, three-armed parallel-group RCT with a 1:1:1 allocation ratio.



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

none

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].

5 subitem not at all essential important

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

none

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

Eligible participants were (1) university students aged between 19 and 25 years, (direct quotes from our manuscript methods)

4a-i) Computer / Internet literacy

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

5 subitem not at all essential important

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

ΑII

participant used 4.7-inch Android smartphones for the test, and all participant trials were conducted on a single day. (direct quotes from



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.

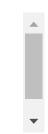
| | 1 | 2 | 3 | 4 | 5 | |
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| subitem not at all important | 0 | \circ | \circ | 0 | • | essentia |

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

Respondents

were first recruited from among the student population of Chang Gung University and Chang Gung University of Science and Technology, both in Taoyuan, Taiwan. Each participant was required to use the developed app for dietary reporting of breakfast, lunch, and dinner in a single day.



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.

| | 1 | 2 | 3 | 4 | 5 | |
|---------------------------------|---|---------|---------|---------|---|-----------|
| subitem not at all important | 0 | \circ | \circ | \circ | | essential |

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

Each

participant completed a questionnaire to collect background and baseline data, including age, gender, body mass index (BMI), academic department, experience with nutrition education, smartphone usage, usage of related apps, and cooking experience (see Table 1). (direct quotes



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

Each

participant was asked to select intended meal items from a list of 25 food dishes available for consumption in the university cafeteria. (rom



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

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

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essential

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

none

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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subitem not at all essential

Does your paper address subitem 4b-ii?

important

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

none

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 <code>[Conflict of interest]</code> 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

Disclosure: The authors declare no conflicts.

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

Before

this research, we have developed prototypes for dietary reporting [28,29]. The major enhancement in this study is to include various portion size aids to help users to prescribe the amount of food. As users have various customary ways to describe eating in term of portion size [11], they would describe portion size by weight or volume, household measures (e.g., cup, plate, or bowl), commonly used objects (e.g., credit card or deck of card) or hand measures (e.g., fist and

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 <code>[frozen]</code> 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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subitem not at all important

o contact all 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

This study investigated prototypes. No changes were made during the intervention.

5-iv) Quality assurance methods

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

subitem not at all important O O o essential

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

The first outcome (absolute weight difference) was expressed as a percentage of the difference divided by the actual food item's weight. The assessment duration for each participant was automatically collected through the mobile app. (direct quotes from our manuscript methods)

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 principle be able to replicate the study) is a hallmark of scientific reporting.

subitem not at all important O O O essential

Does your paper address subitem 5-v?

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

food portion, drink containers, and dishes selected were consistent with those commonly seen in the participants' campus cafeteria (See

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 O O essential

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

The

application's reporting procedures primarily consist of two parts. The first part identifies the food or beverage item to be consumed, using a set of tree-like scrollable lists (Figs. 1(c),(d)). The second part (see Fig. 1(f)) identifies the portion amount (in terms of portion size or

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 <code>[access to the platform and Internet] [1]</code>. To ensure access for editors/reviewers/readers, consider to provide a <code>[backdoor] login account or demo mode for reviewers/readers to explore the application (also important for archiving purposes, see vi).</code>

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

Supplemental video were provided.

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].

subitem not at all important O O o 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

They

are: Key-in-based aid (KBA), commonly used in many current apps, relies on the user's ability to a key-in unit of measurement for weights, volumes, household utensils, or food items. Photo-based aid (PBA) extends traditional assessment methods [30]. Instead of using life-size papers, the aid allows users to scroll, observe and select a reduced-size image from a set of options. Gesture-based aid (GBA) is a new experimental approach developed based on user finger movements to describe rough food volume [31]. Boundaries of the food cross-section

5-ix) Describe use parameters

Describe use parameters (e.g., intended <code>[doses]</code> 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.

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

Each

dish was assessed by a senior dietician in terms of availability, commonality, preference, and diversity of culinary styles. The food portion, drink containers, and dishes selected were consistent with those commonly seen in the participants' campus cafeteria (See



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 <code>[type of assistance offered, the timing and frequency of the support, how it is initiated, and the medium by which the assistance is delivered]</code>. 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).

subitem not at all important O O 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

Each

participant first watched an instructional video explaining the operation of the mobile app and the measurement method each participant



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).

1 2 3 4 5

subitem not at all important

O O O essential

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

none

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

The

experiment was performed by two research assistants. Each participant first watched an instructional video explaining the operation of the mobile app and the measurement method each participant was assigned to

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

Three

outcome types were assessed to evaluate the effectiveness of using mobile apps for dietary measurements, including accuracy in terms of the absolute difference between the actual food item weight and system-assessed weight, the respondent's total task time and participant perception of efficacy. The first outcome (absolute weight difference) was expressed as a percentage of the difference divided by the actual

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].

subitem not at all important essential

Does your paper address subitem 6a-i?

Copy and paste relevant sections from manuscript text

none online questionnaires

6a-ii) Describe whether and how [use] (including intensity of use/dosage) was defined/measured/monitored

Describe whether and how <code>[use]</code> (including intensity of use/dosage) was defined/measured/monitored (logins, logfile analysis, etc.). Use/adoption metrics are important process outcomes that should be reported in any ehealth trial.

subitem not at all important O O O essential

Does your paper address subitem 6a-ii?

Copy and paste relevant sections from manuscript text

In

the Key-in based aid (KBA), the user determines the quantity of the food serving (e.g., "1" piece, "0.5" cup, or "1.5" slices), which then outputs a portion weight in grams (See Multimedia Appendix 1). In PBA, users use a one-to-multiple photo selection design to visualize different food quantities.

Gesture-based aid (GBA) is a new approach that uses on-screen movements

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).

subitem not at all important O O o essential

Does your paper address subitem 6a-iii?

Copy and paste relevant sections from manuscript text

Following

the trial, participants' perceptions of the utility of each app were measured using the System Usability Scale (SUS) [18], (from our

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

none

7a) How sample size was determined



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.

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

Sample

size determination performance was assessed in terms of accuracy and task completion time (in seconds). The required sample size of each group was determined using the method proposed in [29]. A minimal sample size of 40 participants was determined for each group. (direct quotes



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

None. Not applicable

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

Three random number lists were generated by SAS software.

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

The

study was designed as follows: single-site, assessor-masked, three-armed parallel-group RCT with a 1:1:1 allocation ratio.

Respondents were randomly assigned to one of three groups, each using a different measurement function to evaluate and compare their respective

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

Subjects

were randomized into one control group using KBA and two experimental groups respectively using PBA and GBA to record their three meals. Sample size determination performance was assessed in terms of accuracy and task completion time (in seconds). (direct quotes from our

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

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

The assessment duration for each participant was automatically collected

11a-ii) Discuss e.g., whether participants knew which intervention was the <code>[intervention of interest]</code> and which one was the <code>[comparator]</code>

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

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

Respondents

were first recruited from among the student population of Chang Gung University and Chang Gung University of Science and Technology, both in Taoyuan, Taiwan. Each participant was required to use the developed app for dietary reporting of breakfast, lunch, and dinner in a single day.



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

none

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

We

conducted a Chi-square test for participant gender and background characteristics and applied ANOVA for the participant Age and BMI. Using the difference in weight (measured in grams) and response duration (in seconds) as continuous variables, we applied the Kruskal-Wallis test to the three groups and the Mann-Whitney U test for multiple two-group comparisons based on the intention-to-treat principle.All statistical

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]).

subitem not at all important O O essential

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

Subjects not completed for three-meal recording didn't not 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

The

written responses to the open-end question were analyzed by two research assistants by cross-checking the meanings of each participant's response. Items related to usability and design improvement were highlighted and grouped into specific classes. Individual responses in each category were extracted and counted to obtain a cumulative number

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

5

| X26-i) Comment o | n ethics co | mmittee ap | proval |
|------------------|-------------|------------|--------|
|------------------|-------------|------------|--------|

subitem not at all o o 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

The design of this study was proved by the Institutional Review Board (201601817B0), the Ethics Committee of Chang Gung Memorial Hospital.

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.

subitem not at all important O O o essential

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

For those who were willing to participate will be noted on the list.

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)

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 safety concern



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

Α

total of 158 subjects were recruited, and 124 subjects completed the study (a completion rate of 78%), with PBA and GBA groups each having 41 respondents, and the KBA group having 42 respondents (see Table 1). Of the respondents to complete the test, 23% were male, and 38% were aged

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

Α

total of 158 subjects were recruited, and 124 subjects completed the study (a completion rate of 78%), with PBA and GBA groups each having 41

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.

subitem not at all important O O O 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

Α

total of 158 subjects were recruited, and 124 subjects completed the study (a completion rate of 78%), with PBA and GBA groups each having 41 respondents, and the KBA group having 42 respondents (see Table 1).



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

The study was implemented in the student cafeteria of Chang Gung University, Taoyuan, Taiwan between April 2017 and November 2017. (direct quotes from our manuscript methods)

14a-i) Indicate if critical [secular events] fell into the study period

Indicate if critical <code>[secular events]</code> fell into the study period, e.g., significant changes in Internet resources available or <code>[changes in computer hardware or Internet delivery resources]</code>

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

No secular events concerned in the 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 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 issue concerned in this study.

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

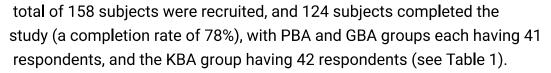


NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and centers (volume) in each group

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

Α





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.

subitem not at all essential important

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

The

baseline information distributions did not reveal significant



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



Report multiple <code>[denominators]</code> and provide definitions: Report N's (and effect sizes) <code>[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 <code>[used] the intervention/comparator at specific pre-defined time points of interest (in absolute and relative numbers per group). Always clearly define <code>[use] of the intervention.</code></code></code>

subitem not at all important









5

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

Α

total of 158 subjects were recruited, and 124 subjects completed the study (a completion rate of 78%), with PBA and GBA groups each having 41 respondents, and the KBA group having 42 respondents (see Table 1).



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).

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

Using

the difference in weight (measured in grams) and response duration (in seconds) as continuous variables, we applied the Kruskal-Wallis test to the three groups and the Mann-Whitney U test for multiple two-group



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

All statistical tests were two-tailed, and p-values less than 0.05 were considered statistically significant.

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 <code>[average session length]</code>. These must be accompanied by a technical description how a metric like a <code>[session]</code> is defined (e.g., timeout after idle time) [1] (report under item 6a).

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

Three

outcome types were assessed to evaluate the effectiveness of using mobile apps for dietary measurements, including accuracy in terms of the absolute difference between the actual food item weight and system-assessed weight, the respondent's total task time and participant



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

we

applied the Kruskal-Wallis test to the three groups and the Mann-Whitney U test for multiple two-group comparisons based on the intention-to-treat principle. We also conducted a Chi-square test to assess the SUS questionnaire to compare the three groups and an independent t-test for the multiple two-group comparisons. All statistical tests were two-tailed, and a p-value below 0.05 indicated



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

Table

4 summarizes the response scores of the three aids. No significant difference was found in the overall scores of the three aids. However, KBA significantly outperformed the other two aids in terms of Usability Score (72.8; p=0.0079). In the two-group comparison, KBA significantly outperformed GBA (P=0.0043). In terms of Learnability Score, no



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).



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

Α

total of 158 subjects were recruited, and 124 subjects completed the study (a completion rate of 78%), with PBA and GBA groups each having 41 respondents, and the KBA group having 42 respondents (see Table 1). Of the respondents to complete the test, 23% were male, and 38% were aged



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 unintended effects were in each group

19-i) Include privacy breaches, technical problems

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

subitem not at all important

1 2 3 4 5

subitem not at all 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

No unintended effects in this 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 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

Figure 6 shows the themes identified from participant evaluations. (from our manuscript results)

DISCUSSION

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

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).

subitem not at all important O O o essential

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

This

research investigated user experiences using the three aids by four metrics: weight error, operation duration, SUS, and open-end questions.



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

Highlight unanswered new questions, suggest future research.

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

Further

tests are required using different target populations (e.g., senior citizens), a wider range of authentic foods, and longer testing periods.



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.

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

Another

limitation is that the experiment did not consider the possibility that users may not finish certain dishes. (direct quotes from our



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

subitem not at all important

1 2 3 4 5

subitem not at all important

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

Experimental

results of young adults using three prominent aids showed various strengths and weakness. KBA was more accurate for common drink



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.

subitem not at all important 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

Further

tests are required using different target populations (e.g., senior citizens), a wider range of authentic foods, and longer testing periods.



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

ISCRTN36710750; http://www.isrctn.com/ISRCTN36710750

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

ISCRTN36710750: http://www.isrctn.com/ISRCTN36710750

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

ISCRTN36710750;

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This work was supported by the Research Fund of Chang Gung Memorial Hospital and Chang Gung University (BMRPD67), and the Ministry of



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.

subitem not at all important O O O essential

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

Disclosure: The authors declare no conflicts.

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