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/

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doi: 10.2196/jmir.1923 PMID: 22209829

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Title of your manuscript *

Provide the (draft) title of your manuscript.

Effectiveness of distance technology on promoting physical activity in cardiovascular disease rehabilitation: Cluster Randomized Controlled Trial, a pilot study

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.

Fitbit Charge HR Activity Monitor & Movendos



Evaluated Version (if any) e.g. "V1", "Release 2017-03-01", "Version 2.0.27913" Oma vastauksesi
Language(s) * What language is the intervention/app in? If multiple languages are available, separate by comma (e.g. "English, French") Finnish
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. https://movendos.com/en/movendos-health-platform-2/mcoach/
URL of an image/screenshot (optional) Oma vastauksesi
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 Muu:

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)"
Cardiovascular disease
Primary Outcomes measured in trial * comma-separated list of primary outcomes reported in the trial
Steps per day, Light Physical Activity, Moderate
Secondary/other outcomes Are there any other outcomes the intervention is expected to affect?
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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"
Muu:

Approx. Percentage of Users (starters) still using the app as recommended after 3 months *
unknown / not evaluated
0-10%
O 11-20%
21-30%
31-40%
41-50%
51-60%
61-70%
71%-80%
81-90%
91-100%
Muu:
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
outcomes potentially harmful: control was significantly better than intervention in one or more
inconclusive: more research is needed
O Muu:

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
O published
Muu:
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
onot submitted yet / unclear where I will submit this Journal of Medical Internet Research (JMIR)
Journal of Medical Internet Research (JMIR)
Journal of Medical Internet Research (JMIR)JMIR mHealth and UHealth
 Journal of Medical Internet Research (JMIR) JMIR mHealth and UHealth JMIR Serious Games
 Journal of Medical Internet Research (JMIR) JMIR mHealth and UHealth JMIR Serious Games JMIR Mental Health
 Journal of Medical Internet Research (JMIR) JMIR mHealth and UHealth JMIR Serious Games JMIR Mental Health JMIR Public Health

Is this a full powered effectiveness trial or a pilot/feasibility trial? *
Pilot/feasibility
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
Muu: 20299
TITLE AND ABSTRACT
TITLE AND ABSTRACT 1a) TITLE: Identification as a randomized trial in the title
1a) TITLE: Identification as a randomized trial in the title
 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
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")

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

We use "distance technology" to describe the use of technology in outpatient treatment. Distance technology contains internet software and activity monitor.

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").

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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

Non-web-based components (activity monitor) are included in "distance technology".

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

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

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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

"In cardiovascular disease rehabilitation"

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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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

"whether additional distance technology intervention is more effective on promoting physical activity than non-technology-based treatment in 12-month cardiac rehabilitation"

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

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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

Oma vastauksesi

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

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

subitem not at all important essential

Does your paper address subitem 1b-iii?

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

"Participants were recruited from among cardiac patients who attended the rehabilitation program, and were cluster-randomized into unblinded groups", "Physical activity outcomes were measured using the Fitbit Zip accelerometer and the International physical activity questionnaire (IPAQ)"

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

"During the first 6 months, the experimental group (n=29) engaged in light physical activity more often than the control group (n=30)", adherence to the treatment was not measured precisely enough to be reported in the abstract.

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?

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

The trial was not negative.

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

"The aim of this pilot study was to investigate in the individual participant level, whether internet software and activity monitoring in addition to 12-months usual cardiovascular distance rehabilitation is effective on promoting moderate to vigorous or light physical activity or increase steps per day, compared to similar rehabilitation regimes without distance technology. "

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.

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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

"Home-based CVD rehabilitation has been found to be as effective as center-based rehabilitation in improving clinical and health-related quality of life outcomes", "Technologybased physical activity-promoting distance interventions have been shown to be as effective as comparable interventions delivered conventionally, in which paper-based materials or face-to-face meetings have been used instead of technology. Compared to usual care, technology-based distance interventions are more effective in increasing physical activity, especially among patients with medical diagnoses. Our earlier preliminary systematic review studies showed that technology may be a promising tool for promoting physical activity in CR. However, there is still insufficient evidence on the additional value of distance technology for CVD in interventions promoting physical activity."

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

"The aim of this pilot study was to investigate in the individual participant level"

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 12 months CR program was executed in groups of rehabilitees, 10 participants in each, which is standard practice in that rehabilitation centre. Sample size was defined by the rehabilitation groups that began the rehabilitation during the years 2015-16." "Participants had been allocated into 6 groups, by officers of Social Insurance Institution of Finland, who also scheduled the inpatient periods for each group. "

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

Does your paper address CONSORT subitem 3b? *

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

No changes in methods during the intervention.

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

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

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Does your paper address subitem 3b-i?

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

No such event occurred during the intervention.

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

"The eligibility criterion of the participants was age (18 years or older), diagnozed cardiovascular risk factors or angina pectoris with physical working capacity limitation or myocardial infarction or coronary artery bypass graft surgery or coronary angioplasty. Exclusion criteria included musculoskeletal disorders, cognitive or memory impairment, or if the independent use of computer or remote technology application was not possible. "

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

"Exclusion [...] or if the independent use of computer or remote technology application was not possible."

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 webbased 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.

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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

"Participants were recruited from among CVD patients who attended the CR program in a rehabilitation center in Finland. ", "A12-month rehabilitation course, that both groups attended, consisted of three five-day inpatient face-to-face rehabilitation periods in the rehabilitation center (at the beginning of the study, at month 6 and at month 12)". "Between the inpatient periods, participants followed their exercise programs. "

4a-iii) Information giving during recruitment

Information given during recruitment. Specify how participants were briefed for recruitment and in the informed consent procedures (e.g., publish the informed consent documentation as appendix, see also item X26), as this information may have an effect on user self-selection, user expectation and may also bias results.

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Does your paper address subitem 4a-iii?

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

"After randomization, participants were individually enrolled by the staff of the rehabilitation center and provided written consent for their participation in the intervention.". Participants were informed about the technologies that will be used along the intervention.

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

"the courses were held in and the data were collected from one rehabilitation center"

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.

subitem not at all important 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

Outcomes contained also self-assessment, but majority of the outcomes were assessed objectively; "Subjective MVPA was measured using the IPAQ-questionnaire"

4b-ii) Report how institutional affiliations are displayed	lb-ii) Rep	ort how ins	stitutional	affiliations	are di	splay	'ed
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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)

subitem not at all important

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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

"The study was supported by the Social Insurance Institution of Finland.", "The authors declare no financial relationships with any organizations that might have an interest in the submitted work in the previous three years and no other relationships or activities that could appear to have influenced the submitted work. The study sponsor did not have any role in the study design, collection, analysis or interpretation of data, writing the report, or the decision to submit the report for publication. No financial disclosures or potential conflicts of interest were reported by the authors."

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.

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

"Problems with accuracy of Fitbit Zip has been mainly with more intensive activities, which subacute phase cardiac rehabilitees are not normally engaging in, and with resting time, which was not investigated in this study. During normal walking, accuracy of Fitbit Zip has been found greater when placed in torso. In this study, Fitbit Zip was placed on hip; although wrist-worn accelerometers have been found to be more comfortable to wear, the long durations of the self-exercising periods require devices with greater memory capacities, which hip-worn accelerometers have. "

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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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

No changing components in the intervention. Versions of Fit Bit Charge HR and Movendos mCoach remained the same for the intervention period. Rapid acceleration of technology makes exact replication of this pilot study not reasonable.

5-iv) Quality assurance methods

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

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Does your paper address subitem 5-iv?

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

Interventions were comparable; "Participants in the conventional cardiac rehabilitation control group (the control group for short) received the usual rehabilitation program, which is identical to the experimental treatment but did not contain technology."

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5-v) Ensure replicability by pu screenshots/screen-capture v used	ŭ						
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.							
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Does your paper address subitem 5-v?

subitem not at all 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

The content of the intervention is carefully described in pages 5 and 6.

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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subitem not at all important	0	0	0	0	0	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

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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).

subitem not at all important essential

Does your paper address subitem 5-vii? *

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

"Participants in the additional distance technology experimental group (the experimental group for short) received an additional distance technology program, which aimed to promote health and functioning-related lifestyle changes, such as physical activity and healthy nutrition. Participants set and monitored their individual goals and received instructions on how to perform exercises at Movendos mCoach internet software. The experimental group was instructed and motivated to perform physical activity selfmonitoring with a wrist-worn Fitbit Charge HR "

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 computermediated 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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subitem not at all important	0	0	0	0	0	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

"A12-month rehabilitation course, that both groups attended, consisted of three five-day inpatient face-to-face rehabilitation periods in the rehabilitation center (at the beginning of the study, at month 6 and at month 12). The rehabilitation program focused on promoting adaptation to a life with CVD. Promoting physical activity was one part of the content, which aimed to reduce the barriers CVD rehabilitees tend to have to exercising. Participants were encouraged to exercise as much as their condition allowed by providing information on health benefits based on American Heart Association physical activity recommendations. Daily goal for steps per day was set to be 10 000. Individual goal setting of total physical activity followed Specific, Measurable, Achievable, Relevant and Time-bound (SMART) goal setting framework. Between the inpatient periods, participants followed their exercise programs. Participants in the conventional cardiac rehabilitation control group (the control group for short) received the usual rehabilitation program, which is identical to the experimental treatment but did not contain technology. In the control group, the instructions on how to perform exercises were provided on paper, also goal setting and self-monitoring were paper based. Control group set the written goals by using Goal attainment scale (GAS)."

"Participants in the additional distance technology experimental group (the experimental group for short) received an additional distance technology program, which aimed to promote health and functioning-related lifestyle changes, such as physical activity and healthy nutrition. Participants set and monitored their individual goals and received instructions on how to perform exercises at Movendos mCoach internet software. The experimental group was instructed and motivated to perform physical activity selfmonitoring with a wrist-worn Fitbit Charge HR activity monitor. Activity monitor showed steps per day, energy expenditure, heart rate, and the quantity and quality of sleep. The experimental group received a 1.5-hour face-to-face practical social support to the use of application at the beginning of the intervention from an IT specialist, a nurse and a psychologist. Six months later, during the second inpatient period, the participants attended another 30-minute counselling session. In addition, the participants received a tutorial video on how to use activity monitor and internet software. The participants were contacted twice a month through the application. They received one automatic prompt to engage in physical activity, and the second contact was made by a physiotherapist who gave feedback of the activity recorded in the application."

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.

subitem not at all important essential

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

"Participants were encouraged to exercise as much as their condition allowed by providing information on health benefits based on American Heart Association physical activity recommendations. Daily goal for steps per day was set to be 10 000."

5-x) Clarify the level of human involvement

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

subitem not at all important essential

Does your paper address subitem 5-x?

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

"A12-month rehabilitation course, that both groups attended, consisted of three five-day inpatient face-to-face rehabilitation periods in the rehabilitation center (at the beginning of the study, at month 6 and at month 12)."

"The participants (in the experimental group) were contacted twice a month through the application. They received one automatic prompt to engage in physical activity, and the second contact was made by a physiotherapist who gave feedback of the activity recorded in the application."

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).

subitem not at all important 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

"The participants were contacted twice a month through the application. They received one automatic prompt to engage in physical activity, and the second contact was made by a physiotherapist who gave feedback of the activity recorded in the application. "

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.

subitem not at all important

essential

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

"During the course, participants obtained information about CVD, counseling for the management of daily activities with heart illness, group discussions with peers, physiotherapy and aerobic exercise."

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

"Objective physical activity in terms of steps per day, light physical activity (LPA), and moderate to vigorous physical activity (MVPA) were measured individually from each participant using a hip worn Fitbit Zip (San Francisco, CA, USA) accelerometer at outpatient period for one week at 0, 6 and 12 months. Participants were instructed to use the device all the time while awake and not during sleep. The Fitbit Zip device automatically defines thresholds for the outcomes between LPA and MVPA. All the days in which the participant walked 1000 to 30 000 steps per day were included in the analysis. Subjective MVPA was measured using the IPAQ-questionnaire, in which the participants recalled their activity over the last 7 days. During the inpatient periods, participants were asked in cluster level about the possible harms and other problems related to the use of technology and the intervention. "

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

Oma vastauksesi

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

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

2 3

subitem not at all important

essential

Does your paper address subitem 6a-ii?

Copy and paste relevant sections from manuscript text

"Adherence on using internet software was measured with analyzing number of recordings made to the software, and number of messages sent to the care provider during the 12 month intervention."

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

essential

Does your paper address subitem 6a-iii?

Copy and paste relevant sections from manuscript text

"During the inpatient periods, participants were asked in cluster level about the possible harms and other problems related to the use of technology and the intervention."

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

No changes in trial outcomes

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.

5

subitem not at all important

essential

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 was defined by the rehabilitation groups that began the rehabilitation during the years 2015-16."

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

Does your paper address CONSORT subitem 7b? *

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

Not relevant for this pilot 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

"Participants had been allocated into 6 groups, by officers of Social Insurance Institution of Finland, who also scheduled the inpatient periods for each group. Officers in charge of the allocation were not informed about the research project. Randomization was designed by three members of the research group (HK, TS and AK), and it was done before the intervention or any of the rehabilitation courses started, by two members of the research group (HK and TS) and one person from outside the research group, who generated the random allocation sequence.

Participants were cluster randomized in cluster pairs (1 and 2, 3 and 4, 5 and 6) by picking up numbered papers (either "A" or "B") that issued to which treatment allocation the group belonged. Pairwise randomization of clusters was chosen to avoid any systematic effect of the time of year when the rehabilitation was conducted. The groups of rehabilitees were randomized to control and experimental clusters, one of both starting in autumn, winter and spring. After randomization, participants were individually enrolled by the staff of the rehabilitation center and provided written consent for their participation in the intervention. Participants were assigned to the interventions by two members of the research group (HK and TS). "

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

"Participants were cluster randomized in cluster pairs"

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

"Participants had been allocated into 6 groups, by officers of Social Insurance Institution of Finland, who also scheduled the inpatient periods for each group. Officers in charge of the allocation were not informed about the research project. Randomization was designed by three members of the research group (HK, TS and AK), and it was done before the intervention or any of the rehabilitation courses started, by two members of the research group (HK and TS) and one person from outside the research group, who generated the random allocation sequence.

Participants were cluster randomized in cluster pairs (1 and 2, 3 and 4, 5 and 6) by picking up numbered papers (either "A" or "B") that issued to which treatment allocation the group belonged. Pairwise randomization of clusters was chosen to avoid any systematic effect of the time of year when the rehabilitation was conducted. The groups of rehabilitees were randomized to control and experimental clusters, one of both starting in autumn, winter and spring. After randomization, participants were individually enrolled by the staff of the rehabilitation center and provided written consent for their participation in the intervention. Participants were assigned to the interventions by two members of the research group (HK and TS). "

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

"Participants had been allocated into 6 groups, by officers of Social Insurance Institution of Finland, who also scheduled the inpatient periods for each group. Officers in charge of the allocation were not informed about the research project. Randomization was designed by three members of the research group (HK, TS and AK), and it was done before the intervention or any of the rehabilitation courses started, by two members of the research group (HK and TS) and one person from outside the research group, who generated the random allocation sequence.

Participants were cluster randomized in cluster pairs (1 and 2, 3 and 4, 5 and 6) by picking up numbered papers (either "A" or "B") that issued to which treatment allocation the group belonged. Pairwise randomization of clusters was chosen to avoid any systematic effect of the time of year when the rehabilitation was conducted. The groups of rehabilitees were randomized to control and experimental clusters, one of both starting in autumn, winter and spring. After randomization, participants were individually enrolled by the staff of the rehabilitation center and provided written consent for their participation in the intervention. Participants were assigned to the interventions by two members of the research group (HK and TS). "

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).

	1	2	3	4	5	
subitem not at all important	0	0	0	0	0	essentia

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

"Outcome analysis was blinded", participants and caregivers were not.

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

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

subitem not at all important

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

Oma vastauksesi

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

"A12-month rehabilitation course, that both groups attended, consisted of three five-day inpatient face-to-face rehabilitation periods in the rehabilitation center (at the beginning of the study, at month 6 and at month 12). The rehabilitation program focused on promoting adaptation to a life with CVD. Promoting physical activity was one part of the content, which aimed to reduce the barriers CVD rehabilitees tend to have to exercising. Participants were encouraged to exercise as much as their condition allowed by providing information on health benefits based on American Heart Association physical activity recommendations. Daily goal for steps per day was set to be 10 000. Individual goal setting of total physical activity followed Specific, Measurable, Achievable, Relevant and Time-bound (SMART) goal setting framework. Between the inpatient periods, participants followed their exercise programs. Participants in the conventional cardiac rehabilitation control group (the control group for short) received the usual rehabilitation program, which is identical to the experimental treatment but did not contain technology."

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

"Two researchers (AK and TP) were responsible for statistical analyses, using IBM SPSS Statistics for Windows, Version 25.0. Outcome analysis was blinded, analyzing outcomes from group A and group B. After all the analyses were made, the encrypted treatment allocations of both groups were opened. Absolute scores of outcomes measured with Fitbit Zip and IPAQ were used in analysis of changes in outcomes from zero point to 6 months, and from 6 to 12 months. The effectiveness of the intervention on physical activity outcomes was analysed using linear mixed models. Differences between groups were analyzed using an independent samples t-test or Mann-Whitney U-test. Mean difference (MD) values described the differences between groups' means, whereas positive values favored the experimental group and negative values favored the control group. In-group changes were analyzed based on tests of normality and using a paired samples t-test or Wilcoxon signed-rank test. Confidence intervals were reported with point estimates."

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]).

essential

subitem not at all 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

Imputation techniques were not used in this study.

Does your paper address subitem 12a-i? *

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

"Subjective adherence to the treatment was measured with a separate questionnaire individually (Hakala, S, unpublished data, October 2020). Adherence on using internet software was measured with analyzing number of recordings made to the software, and number of messages sent to the care provider during the 12 month intervention."

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

X26-i) Comment on ethics co	ommitte	ee appro	oval			
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subitem not at all important	0	0	0	0	0	essential
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x26-ii) Outline informed cons Outline informed consent procedures etc.?), and what information was prov consent documents.	e.g., if co	nsent was	obtained		•	
	1	2	3	4	5	
subitem not at all important	0	0	0	0	0	essential
Does your paper address sub Copy and paste relevant sections from indicate direct quotes from your man information not in the ms, or briefly e Oma vastauksesi	n the mar uscript), c	nuscript (in or elaborat	e on this i	tem by pro	viding add	itional

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)

subitem not at all important

essential

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

"The experimental group received a 1.5-hour face-to-face practical social support to the use of application at the beginning of the intervention from an IT specialist, a nurse and a psychologist. Six months later, during the second inpatient period, the participants attended another 30-minute counselling session. In addition, the participants received a tutorial video on how to use activity monitor and internet software. "

RESULTS

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

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

Does your paper address CONSORT subitem 13a? *

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

See "Flowchart of the cardiac rehabilitation intervention"

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

See "Flowchart of the cardiac rehabilitation intervention"

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

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

"During the 12-month intervention, participants in the experimental group made an average of 98 recordings about their physical activity (SD 167, range 0-716) in the Movendos internet software and sent an average of 6.4 messages (SD 6, range 0-26) to the care provider. The results from a subjective questionnaire indicated that on a scale from 1 to 7, in which 1 was "totally agree" and 7 was "totally disagree", the participants almost or somewhat agreed they had actively used the activity monitor (mean 2.4, SD 2.0). Participants somewhat disagreed that they had actively used internet software (mean 4.9, SD 2.2). "

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

"This cluster randomized controlled pilot trial (ISRCTN61225589) assessing the effect of additional distance technology rehabilitation on CVD patients was conducted between 21.9.2015 and 30.11.2017."

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"

5

subitem not at all important

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

Oma vastauksesi

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

The rehabilitation course is determined to last 12 months.

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

See "Baseline characteristics in the conventional cardiac rehabilitation group and the additional distance technology intervention experimental group."

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.

2 3

subitem not at all important essential

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

See "Figure 1. Baseline characteristics in the conventional cardiac rehabilitation group and the additional distance technology intervention experimental group."

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.

subitem not at all important

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

See "Flowchart of the cardiac rehabilitation intervention" and "Multimedia appendix 1. Physical activity changes during the 12 months of cardiac rehabilitation"

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

Oma vastauksesi

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

"Physical activity changes from 0 to 6 months

The minutes per week of LPA measured with the accelerometer increased more in the experimental group than in the control group (MD 324.2 min, 95% CI 77.4 to 571.0, P=.01) (Fig. 3), but there were no statistically significant differences between groups in the minutes per week of MVPA (MD 12.6 min, 95% CI -90.5 to 115.7, P=.82) or in the steps per day (MD 1084.0 steps, 95% CI -585.0 to 2752.9, P=.20) (Fig. 4) or (Fig. 5). There were also no statistically significant differences between groups in the duration of MVPA measured by the IPAQ questionnaire (MD 34.0 min, 95% CI -327.3 to 395.3, P=.85)."

"Physical activity changes from 6 to 12 months

No statistically significant differences were observed between the experimental and control groups in the accelerometer-measured LPA minutes per week (MD -87.9 min, 95% CI -379.2 to 203.3, P=.54) (Fig. 3), MVPA minutes per week (MD 70.9 min, 95% CI -75.7 to 217.6, P=.33) or steps per day (MD 867.1 steps, 95% CI -2099.6 to 3833.9, P=.55) (Fig. 4) or (Fig. 5). There were no differences between groups in the MVPA minutes per week measured with the IPAQ questionnaire (MD -292.2 min, 95% CI -755.6 to 171.2, P=.21) "

17a-i) Presentation of process outcomes such as metrics of use and intensity of use

In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure metrics such as "average session length". These must be accompanied by a technical description how a metric like a "session" is defined (e.g., timeout after idle time) [1] (report under item 6a).

	1	2	3	4	5	
subitem not at all important	0	0	0	0	0	essential

Does your paper address subitem 17a-i?

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

"During the 12-month intervention, participants in the experimental group made an average of 98 recordings about their physical activity (SD 167, range 0-716) in the Movendos internet software and sent an average of 6.4 messages (SD 6, range 0-26) to the care provider. The results from a subjective questionnaire indicated that on a scale from 1 to 7, in which 1 was "totally agree" and 7 was "totally disagree", the participants almost or somewhat agreed they had actively used the activity monitor (mean 2.4, SD 2.0). Participants somewhat disagreed that they had actively used internet software (mean 4.9, SD 2.2). "

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

No binary outcomes in this 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

No other analyses performed.

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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).

subitem not at all important

essential

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

Oma vastauksesi

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

"4 participants reported about the eczema caused by the wristband of Fitbit Charge HR. No other harms were reported."

19-i) Include privacy breaches, technical problems

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

5

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

Oma vastauksesi

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.

subitem not at all important

essential

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

Oma vastauksesi

DISCUSSION

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

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

22-i) Restate study questions and summarize the answers suggested by the dat	a,
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

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

Discussion in total contains all the relevant data for this point.

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

Highlight unanswered new questions, suggest future research.

3

subitem not at all important

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

"In the future, more studies are needed first to determine effective methods for promoting physical activity among different populations and then to resolve what kind of technology would serve this purpose best."

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

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

"The limitations of this study relate to the sample size, which could have been larger." "In addition, future studies should investigate whether a more intensive use of technology could promote physical activity at different intensity levels and for longer periods of time. Additionally, the diversity of the participants with regard to technology use and the capability to adapt to new technologies should be taken into account at the individual level"

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

3

subitem not at all important

essential

essential

Does yo	ur paper	address	subitem	21-i?
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Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Oma vastauksesi

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

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

Oma vastauksesi

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

ISRCTN61225589, https://doi.org/10.1186/ISRCTN61225589

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

https://doi.org/10.1186/ISRCTN61225589

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

"The study was supported by the Social Insurance Institution of Finland."

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

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

"The authors declare no financial relationships with any organizations that might have an interest in the submitted work in the previous three years and no other relationships or activities that could appear to have influenced the submitted work. The study sponsor did not have any role in the study design, collection, analysis or interpretation of data, writing the report, or the decision to submit the report for publication."

About the CONSORT EHEALTH checklist

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

yes, major changes

yes, minor changes

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

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How much time did you spend on going through the checklist INCLUDING making changes in your manuscript *
2 hours
As a result of using this checklist, do you think your manuscript has improved? *
O yes
o no
Muu:
Would you like to become involved in the CONSORT EHEALTH group? This would involve for example becoming involved in participating in a workshop and writing an "Explanation and Elaboration" document
O yes
o no
Muu:
Tyhjennä valinta
Any other comments or questions on CONSORT EHEALTH
Oma vastauksesi
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