Synthesis Without Meta-analysis (SWiM) reporting items

SWiM is intended to complement and be used as an extension to PRISMA						
SWiM reporting	Item description	Page in manuscript	Other*			
item		where item is reported				
Methods						
1 Grouping	The studies will be grouped into two; studies that report cost and studies that report on forms of	Page 7				
studies for	critical care. For the studies that report costs of critical care, the synthesis will be by level of health					
synthesis	facility/hospital, health services offered, type of costs reported, data sources, study designs,					
	geographical location (rural and urban). The forms of critical care will be synthesized by level of					
	health facility. The rationale for this analysis is that cost and forms of critical care vary between the					
	subgroups mentioned above.					
2 Describe the	The costs will be presented in two currencies that is, the USD and TZS. All extracted costs will be	Page 7				
standardised	adjusted to the 2019 value of USD and TZS using the World Bank GDP deflators. The GDP deflator					
metric and	method is explained by Chowdhury ¹ .					
transformation						
methods used						
3 Describe the	Collection and reported of cost data are usually heterogenous making it difficult to have reliable and	Page 7				
synthesis	representative findings after pooling the reported costs from different papers. In order to synthesize					
methods	results in this study, we plan to categorize costs according to source of the costs, type of costs					
	reported and costs per services offered. This will give us a summative understanding of the results.					
	For forms of critical care, we are planning to synthesize this data by categorizing it by level of health					
	facility/hospital because different levels of health facilities have different amount of resources to					
	deliver critical care thereby delivering varied critical care services.					
4 Criteria used	The criteria used to prioritise results will be based on the objectives that this study sets up to	Page 5 and Appendix 1				
to prioritise	achieve which rotate around forms of critical care and cost of critical care which includes resources					

results for	used. Studies will be included in this study using the inclusion and exclusion criteria available in the		
summary and	appendix.		
synthesis			
5 Investigation	Heterogeneity of the costs will be investigated using the appraisal checklist.	Page 7	
of	Theterogeneity of the costs will be investigated using the appraisal checklist.	rage /	
heterogeneity in			
reported effects			
6 Certainty of	In order to assess certainty of evidence, we plan to use the Reference Case for Estimating the Costs	Page 7	
evidence	of Global Health Services and Interventions ²⁵ to identify likely bias in the reported findings of		
	included studies. In addition, for studies that do not report costs, we will use the Newcastle Ottawa		
	Scale to assess bias. Any study that scores less than 5 will be excluded.		
7 Data	We will use tables to describe the study characteristics and costs. The table of characteristics will	Page 7	
presentation	contain the details of studies like author, year of publication, study design, intervention, health		
methods	facility level among others). The costs will be presented in different tables by category of the cost		
	e.g equipment, services, human resources, diagnosis.		
	In addition, the forms of critical care will be presented using a figure showing the different formats		
	of critical care at the different levels of the health system.		
Results			
8 Reporting	N/A (This will be reported on after the data extraction is done)	N/A	
results			
Discussion			
9 Limitations of	N/A (This will be responded to after the synthesis is done)	N/A	
the synthesis			

Supplemental material

Source: Campbell M, McKenzie JE, Sowden A, Katikireddi SV, Brennan SE, Ellis S, Hartmann-Boyce J, Ryan R, Shepperd S, Thomas J, Welch V, Thomson H. Synthesis without meta-analysis (SWiM) in systematic reviews: reporting guideline BMJ 2020;368:16890 http://dx.doi.org/10.1136/bmj.16890