Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) checklist

Section/topic	#	Checklist item	Reported on page #
TITLE			
Title	1	Identify the report as a systematic review, meta-analysis, or both.	1
ABSTRACT			
Structured summary	2	Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; limitations; conclusions and implications of key findings; systematic review registration number.	4
INTRODUCTION			
Rationale	3	Describe the rationale for the review in the context of what is already known.	5
Objectives	4	Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design (PICOS).	5, supplement
METHODS			
Protocol and registration	5	Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and, if available, provide registration information including registration number.	5-6
Eligibility criteria	6	Specify study characteristics (e.g., PICOS, length of follow-up) and report characteristics (e.g., years considered, language, publication status) used as criteria for eligibility, giving rationale.	6, supplement
Information sources	7	Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched.	6, supplement
Search	8	Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated.	supplement
Study selection	9	State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if applicable, included in the meta-analysis).	6
Data collection process	10	Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any processes for obtaining and confirming data from investigators.	7
Data items	11	List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made.	7, supplement

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Risk of bias in individual studies	12	Describe methods used for assessing risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis.	7-8
Summary measures	13	State the principal summary measures (e.g., risk ratio, difference in means).	8
Synthesis of results	14	Describe the methods of handling data and combining results of studies, if done, including measures of consistency (e.g., I²) for each meta-analysis.	8
Risk of bias across studies	15	Specify any assessment of risk of bias that may affect the cumulative evidence (e.g., publication bias, selective reporting within studies).	8
Additional analyses	16	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were pre-specified.	8
RESULTS	•		:
Study selection	17	Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally with a flow diagram.	Figure 1
Study characteristics	18	For each study, present characteristics for which data were extracted (e.g., study size, PICOS, follow-up period) and provide the citations.	Supplemental Table 2
Risk of bias within studies	19	Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12).	Supplemental Table 5
Results of individual studies	20	For all outcomes considered (benefits or harms), present, for each study: (a) simple summary data for each intervention group (b) effect estimates and confidence intervals, ideally with a forest plot.	Figure 2, Supplemental Figures 1-3
Synthesis of results	21	Present results of each meta-analysis done, including confidence intervals and measures of consistency.	9-10, Table 1
Risk of bias across studies	22	Present results of any assessment of risk of bias across studies (see Item 15).	9, Supplemental Figure 4
Additional analysis	23	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see Item 16]).	9-10, Table 1, Figure 3, Supplemental Figure 5
DISCUSSION			

Summary of evidence	24	Summarize the main findings including the strength of evidence for each main outcome; consider their relevance to key groups (e.g., healthcare providers, users, and policy makers).	11-12	
Section/topic	#	Checklist item	Reported on page #	
Limitations	25	Discuss limitations at study and outcome level (e.g., risk of bias), and at review-level (e.g., incomplete retrieval of identified research, reporting bias).	12-13	
Conclusions	26	Provide a general interpretation of the results in the context of other evidence, and implications for future research.	13	
FUNDING				
Funding	27	Describe sources of funding for the systematic review and other support (e.g., supply of data); role of funders for the systematic review.	3	

From: Moher D, Liberati A, Tetzlaff J, Altman DG, The PRISMA Group (2009). Preferred Reporting Items for Systematic Reviews and Meta-Analyses: The PRISMA Statement. PLoS Med 6(7): e1000097. doi:10.1371/journal.pmed1000097

Meta-analysis of Observational Studies in Epidemiology (MOOSE) checklist

Item No	Recommendation	Reported on Page No			
Reporting of	Reporting of background should include				
1	Problem definition	5			
2	Hypothesis statement	5			
3	Description of study outcome(s)	5			
4	Type of exposure or intervention used	6			
5	Type of study designs used	6			
6	Study population	6			
Reporting of	of search strategy should include				
7	Qualifications of searchers (eg, librarians and investigators)	1-2, 6			
8	Search strategy, including time period included in the synthesis and key words	6, supplement			
9	Effort to include all available studies, including contact with authors	6			
10	Databases and registries searched	6			
11	Search software used, name and version, including special features used (eg, explosion)	supplement			
12	Use of hand searching (eg, reference lists of obtained articles)	6, supplement			
13	List of citations located and those excluded, including justification	Supplemental Table 1			
14	Method of addressing articles published in languages other than English	6			
15	Method of handling abstracts and unpublished studies	6, supplement			
16	Description of any contact with authors	6-7			
Reporting of methods should include					
17	Description of relevance or appropriateness of studies assembled for assessing the hypothesis to be tested	6			
18	Rationale for the selection and coding of data (eg, sound clinical principles or convenience)	7, supplement			
19	Documentation of how data were classified and coded (eg, multiple raters, blinding and interrater reliability)	7, supplement			
20	Assessment of confounding (eg, comparability of cases and controls in studies where appropriate)	7-8			
21	Assessment of study quality, including blinding of quality assessors, stratification or regression on possible predictors of study results	7-8			
22	Assessment of heterogeneity	8			
23	Description of statistical methods (eg, complete description of fixed or random effects models, justification of whether the chosen models account for predictors of study results, dose-response models, or cumulative meta-analysis) in sufficient detail to be replicated	8			
24	Provision of appropriate tables and graphics	9-10, supplement			

Reporting of results should include					
25	Graphic summarizing individual study estimates and overall estimate	Figure 2, Supplemental Figure 1			
Item No	Recommendation	Reported on Page No			
26	Table giving descriptive information for each study included	Supplemental Table 2			
27	Results of sensitivity testing (eg, subgroup analysis)	10, Table 1			
28	Indication of statistical uncertainty of findings	10, Table 1			
Reporting of discussion should include					
29	Quantitative assessment of bias (eg, publication bias)	11-12, Supplemental Figure 4			
30	Justification for exclusion (eg, exclusion of non-English language citations)	11-12			
31	Assessment of quality of included studies	11-12			
Reporting of	Reporting of conclusions should include				
32	Consideration of alternative explanations for observed results	11			
33	Generalization of the conclusions (ie, appropriate for the data presented and within the domain of the literature review)	10-12			
34	Guidelines for future research	11-12			
35	Disclosure of funding source	3			

From: Stroup DF, Berlin JA, Morton SC, et al, for the Meta-Analysis of Observational Studies in Epidemiology (MOOSE) Group. Meta-analysis of Observational Studies in Epidemiology. A Proposal for Reporting. *JAMA*. 2000;283(15):2008-2012. doi: 10.1001/jama.283.15.2008. Transcribed from the original paper within the NEUROSURGERY® Editorial Office, Atlanta, GA, United Sates. August 2012.