Cochrane
Consumers and Communication

Intervention Cochrane Review: Checklist for authors

This checklist is designed to help you (the authors) complete your Cochrane Review to an acceptable standard before you submit it for editorial and peer review. **Please complete each item in the checklist before submitting your Cochrane Review for editorial review, and email or fax the completed checklist to the Review Group's Managing Editor.** The editorial team will return your Cochrane Review to you if the form is incomplete or not received. There is a 'Notes' section at the end of the form to alert the editorial team to the reason for any incomplete checks.

Cochrane Review title:

Contact person:

Date:

1. General

1.1 ☐ All the authors listed on the Cochrane Review have seen and approved this version of the Cochrane Review, and take full responsibility for the accuracy of its contents.

1.2 ☐ Incorporated any standard text provided by the Cochrane Consumers and Communication Review Group.

1.3 ☐ Activated the relevant headings in RevMan and completed each section.

1.4 ☐ Completed a validation check in RevMan (File menu > Reports > Validation report), and made corrections where possible.

1.5 ☐ Completed a spell check in RevMan (Tools menu > Check spelling).

1.6 ☐ The text is clearly written and all technical and medical terms are explained for non-expert readers.

2. Title and review information

(see Cochrane Handbook Section 4.2)

2.1 ☐ Title is the same as the published Cochrane Protocol, unless a change has been agreed with the Cochrane Review Group (CRG).

2.2 ☐ Authors are listed in the correct order and have agreed to the order in which they are listed.

2.3 ☐ Names and details of all authors and the contact person appear correctly, or the CRG has been notified of any necessary corrections.

2.4 ☐ Entered the date on which the draft was completed (usually the date of submission to the CRG, and within six months of your literature search) in the 'Assessed as Up-to-date' field.

2.5 ☐ Entered the last date on which every component of your search was up-to-date in the 'Date of search' field. If your sources were searched on several different dates, entered the earliest date.

2.6 ☐ Completed the 'Next stage expected' field, estimating when you will update the Cochrane Review (usually after two years).

3. Abstract

(see Cochrane Handbook Section 11.8)

3.1 ☐ Included 1000 words or fewer (ideally, less than 700 words).

Abstract / Background

3.2 ☐ Explained the context or elaborated on the purpose and rationale of the review.

Abstract / Objectives

3.3 ☐ Expressed in the form 'To assess the effects of [intervention and comparison] for [health problem] for/in [types of people, disease or problem and setting if specified]', and is the same as in the main text.

Abstract / Search methods

3.4 ☐ Listed the sources (including search platforms) and the dates (month and year) of the last search (range of dates if appropriate), for each source. The date should reflect the date of the most recent set of searches from which all records have been screened for relevance and studies have been included/excluded.

Abstract / Selection criteria

3.5 ☐ Expressed in the form '[Type of study] of [type of intervention and comparison] in [disease, problem or type of people]'. Mention any extensions to eligibility criteria to address adverse effects, economic issues or qualitative research.

Abstract / Data collection and analysis

3.6 ☐ Stated any noteworthy methods for selecting studies, collecting data, evaluating risk of bias and synthesizing findings. Refer to use of standard Cochrane methods if appropriate.

3.7 ☐ Stated whether data extraction and assessments of risk of bias were done by more than one person.

3.8 ☐ Stated the steps, if any, that were taken to identify adverse effects.

Abstract / Main results

3.9 ☐ Included the total number of included studies and participants (usually the number analysed rather than recruited).

3.10 ☐ Included brief details on key characteristics that will determine the applicability of the results (e.g. age, setting, study duration).

3.11 ☐ Included brief details on the risk of bias assessment.

3.12 ☐ Reported on all primary outcomes and adverse effects, even if the results were not statistically significant or no results were found. These outcomes must be the same as those presented in the 'Summary of findings' table.

3.13 ☐ Included the same summary statistics as those in the review and 'Summary of findings' table, and presented statistics in a standard way (e.g. 'odds ratio 2.31 [95% confidence interval 1.13 to 3.45]').

3.14 ☐ Included risks of events (percentage) or averages (for continuous data) for both comparison groups.

3.15 ☐ Expressed results narratively as well as quantitatively if the numerical results are not clear or intuitive (such as those from a standardised mean differences analysis), and ensured that the results are presented in the same way in the main text of the review.

3.16 ☐ If overall results are not calculated, included a qualitative assessment or a description of the range and pattern of the results.

3.17 ☐ Added no information that is not in the main text of the Cochrane Review, the Plain Language Summary and the 'Summary of findings' table.

Abstract / Authors' conclusions

3.18 ☐ Included a succinct conclusion drawn directly from the findings of the review which is consistent with conclusions in the main text of the Cochrane Review

3.19 ☐ Avoided giving advice or recommendations.

3.20 ☐ Included any important limitations of data and analyses.

4. Plain Language Summary

(see Cochrane Handbook Section 11.9)

- 4.1 ☐ The Plain Language Summary title is the same as the Cochrane Review title, or restates the title using plain language terms.
- 4.2 ☐ Included 400 words or fewer.
- 4.3 ☐ Used sections with headings to aid readability
- 4.4 ☐ Included a statement about why the review is important (e.g. a plain language definition of and background to the healthcare problem, signs and symptoms, prevalence, description of the intervention and comparison and the way they are used, and the questions to be answered by the review).
- 4.5 ☐ Stated the search date.
- 4.6 ☐ Reported key characteristics of the included studies, including their funding sources.
- 4.7 ☐ Included the total number of studies and participants.
- 4.8 ☐ Included the main findings of the review (e.g. numerical summaries in a general and easily understood format), including the primary outcome and key secondary outcomes and adverse effects, even if the results were not statistically significant or no results were found. The word 'risk' has been avoided when reporting harms.
- 4.9 ☐ Described the overall quality of the evidence for each key outcome primary outcome reported, based on the GRADE considerations, and described any factors that could affect the confidence in the results (e.g. uncertainty, design, or variation between study results).
- 4.10 ☐ The results and conclusions are consistent with those in Cochrane Review text, abstract and 'Summary of findings' table.
- 4.11 ☐ Added no information that is not in the Cochrane Review main text or abstract.

5. Background, Objectives and Methods

(see Cochrane Handbook Section 4.5)

- 5.1 ☐ All sections are the same as those in the published Cochrane Protocol, or any substantive changes have been noted in the 'Differences between protocol and review' section, including new methods added and planned methods that could not be implemented (e.g. due to lack of data).
- 5.2 ☐ Changed the text referring to the methods of the Cochrane Review from the future tense to the past tense.
- 5.3 ☐ Consulted the CRG Trials Search Co-ordinator regarding implementation of the search strategy.
- 5.4 ☐ In the 'Search methods for identification of studies' section, reported all databases (including platform/provider name), trials registers, websites (including full name and URL) and grey literature searched, the date range for which each source was searched, and the dates on which each search was conducted.
- 5.5 ☐ In the 'Search methods for identification of studies' section, included a link to the Appendix/Appendices containing the complete set of search terms used in each electronic database.
- 5.6 ☐ In the 'Data collection and analysis' section, cited the protocol for the review.

6. Results

(see Cochrane Handbook Section 4.5)

6.1 Description of studies

- 6.1.1 ☐ Described the study selection process.
- 6.1.2 ☐ Reported the outcomes of the search, including the total number of hits found from electronic databases, the number of potentially relevant studies found from other sources, the number of records remaining after duplicates were removed, the number of papers retrieved in full text, the number of papers excluded at each stage with the reasons for exclusion, and the final number of included studies (including details of multiple references for the same study).
- 6.1.3 ☐ Inserted as a 'Figure' a PRISMA flow chart linked to this section.

6.1.4 ☐ Included links to the 'Characteristics of included studies', 'Characteristics of excluded studies' and, if appropriate, 'Characteristics of studies awaiting classification' and 'Characteristics of ongoing studies' tables.

6.1.5 ☐ If (as should be the case) contact with the authors of any included studies was attempted, reported how many were contacted and what responses were received.

6.1.6 ☐ Given a brief overview of the studies included in the Cochrane Review, including the number of participants, and the comparability of their populations, settings and interventions, comparators and funding sources.

6.1.7 ☐ Not reported results from studies in this section.

6.2 Risk of bias of included studies

6.2.1 ☐ Given a concise summary of general risk of bias across domains for each key outcome for each included study, as well as variability across studies and any important flaws in individual studies.

6.2.2 ☐ The summary of the risk of bias is consistent with the information presented in the 'Risk of bias' tables.

6.2.3 ☐ Included a link to the 'Characteristics of included studies' table.

6.2.4 ☐ If any 'Risk of bias' figures have been created, included a link to these.

6.2.5 ☐ If no eligible studies were identified, stated 'No study met the eligibility criteria'.

6.3 Effects of interventions

6.3.1 ☐ Summarised the results in a structured way (e.g. organised by comparison and then outcome).

6.3.2 ☐ Reported the outcomes in the same order as listed in the 'Types of outcome measures' section, and primary and secondary outcomes are identified.

6.3.3 ☐ Reported the available results for each comparison, outcome and subgroup described in the Cochrane Protocol, including those for which no results were found and those that were not statistically significant.

6.3.4 ☐ Reported the results using the statistics and methods described in the 'Methods' section.

6.3.5 ☐ The numerical results reported are the same as those displayed in the 'Data and analyses' section.

6.3.6 ☐ If data are combined with different scales, ensured that higher scores for continuous outcomes all have the same meaning for any particular outcome; explained the direction of interpretation; and reported when directions were reversed.

6.3.7 ☐ Included links to all analyses, figures, tables, appendices.

6.3.8 ☐ Included no more than 6 essential figures or tables to be displayed within the text of the Cochrane Review, and included links to the 'Data and analyses' section for any analyses not included as Figures.

6.3.9 ☐ Presented the number of studies and participants included, as well as a measure of uncertainty (e.g. 95% confidence interval), for each result.

6.3.10 ☐ If reporting P values, provided exact P values (e.g. $P = 0.08$ rather than $P > 0.05$).

6.3.11 ☐ Conducted sensitivity analyses as described in the Cochrane Protocol, if appropriate, and reported the results.

6.3.12 ☐ Investigated heterogeneity as described in the Cochrane Protocol, if appropriate, and reported the results.

6.3.13 ☐ Investigated the possible impact of bias on results as indicated in the Cochrane Protocol, including possible biases relating to study design and reporting bias.

6.3.14 ☐ Not confused 'no evidence of effect' with 'evidence of no effect'. Interpreted a statistically non-significant P value (e.g. larger than 0.05) as a finding of uncertainty unless confidence intervals are sufficiently narrow to rule out an important magnitude of effect.

6.3.15 ☐ Clearly identified any post-hoc analyses that were not planned at the Cochrane Protocol stage.

6.3.16 ☐ Not included any interpretation of results in this section.

6.3.17 ☐ Referred to the 'Summary of findings' table(s) and included links.

6.3.18 ☐ Ensured that key findings are interpretable, or re-expressed in an interpretable way (e.g. in absolute rather than relative terms; re-expressed SMD in units that are more naturally understood)

6.3.19 ☐ If no eligible studies were identified, stated 'No study met the eligibility criteria'.

6.3.20 ☐ Commented on the potential impact of studies that apparently measured outcomes but did not contribute usable data.

7. Discussion

(see Cochrane Handbook Section 4.5)

7.1 ☐ Briefly summarised the included studies and their results in plain language, including the risk of bias, areas of uncertainty and completeness of the available evidence.

7.2 ☐ Checked that this section does not include any new results not reported in the previous section.

7.3 ☐ Referred to the 'Summary of findings' table(s) and included links.

7.4 ☐ Considered both the statistical significance and clinical or policy implications of the results.

7.5 ☐ Considered the context and applicability and context of the results to different groups (e.g. consumers, carers, policy makers, health professionals, vulnerable/disadvantaged groups).

7.6 ☐ Discussed the strengths and limitations of the Cochrane Review (limitations considered at study and outcome level, and at review level).

7.7 ☐ Discussed the findings in the context of current knowledge, including other reviews in the field.

8. Authors' conclusions

(see Cochrane Handbook Section 4.5)

8.1 ☐ Implications for practice: Provided a general interpretation of the evidence so that it can inform healthcare or policy decisions

8.2 ☐ Implications for practice: Avoided making recommendations, and limited conclusions to those that can be supported by the findings of the Cochrane Review.

8.3 ☐ Implications for research: If recommending additional research, specific suggestions about how the research should be conducted (e.g. study designs, outcome measurements) as well as what research should be conducted (e.g. different populations, interventions, comparisons) have been made.

9. Acknowledgements

(see Cochrane Handbook Section 4.5)

9.1 ☐ Acknowledged those people who contributed to the Cochrane Review but are not named as authors, and included the reasons for acknowledging each person.

9.2 ☐ Permission has been granted from all the people named to include them in this section.

10. Contributions of authors

(see Cochrane Handbook Section 4.5)

10.1 ☐ Described each author's contribution to the design and development of the Cochrane Protocol and the Cochrane Review.

11. Declarations of interest

(see Cochrane Handbook Section 4.5)

11.1 ☐ Completed for each author, noting present or past affiliations that that may lead to a real or perceived conflict of interest, including whether authors are investigators on studies likely to be included in the review. If no potential conflicts are identified for a particular author, "None known" has been stated.

12. Differences between protocol and review

(see Cochrane Handbook Section 4.5)

12.1 ☐ Reported any changes in the Cochrane Review authorship since the Cochrane Protocol was published.

12.2 ☐ Reported any differences in the methods used between the Cochrane Protocol and the Cochrane Review, including anything that was changed, added or removed from the proposed methods. This should include documentation of aspects of the protocol that were not implemented (e.g. because no or few studies were found).

12.3 ☐ Given a rationale for any differences between the Cochrane Protocol and the Cochrane Review, and the rationale is not driven by the findings of the Cochrane Review.

13. Tables

13.1 Characteristics of included studies

(see Cochrane Handbook Section 11.2)

13.1.1 ☐ The table does not include study results or information that should be included in the 'Risk of bias' assessment.

13.1.2 ☐ Any available information on study funding has been included in an extra row in the table.

13.1.3 ☐ Any declaration of interest among the primary researchers has been included in an extra row in the table.

13.1.4 ☐ Avoided using abbreviations or acronyms and, where used, the full term has been provided in the footnotes.

Methods

13.1.5 ☐ Listed the study design (e.g. "randomised controlled trial"), including whether the study differs from a standard parallel group design (e.g. cross-over or cluster-randomised), and the duration of the study including start and end dates if available. (If dates are not available then this is stated as 'Study dates not reported').

Participants

13.1.6 ☐ Stated the number of participants and described their location, context, health status, age, and sex. Enough information has been provided for users of the Cochrane Review to determine the applicability of the study to their population, and to allow exploration of differences across studies.

Intervention

13.1.7 ☐ Described each intervention group in the study in enough detail for each intervention to be replicated in practice and for users of the Cochrane Review to assess the applicability of the intervention to their own setting, including dose/frequency, core components, mode of administration, and duration of each intervention.

13.1.8 ☐ If the study has multiple arms and the review authors have selected specific arms for inclusion in the review, made clear that the other arms were present in the study.

Outcomes

13.1.9 ☐ Listed either the outcomes from the study that are considered in the Cochrane Review, or all outcomes measured or reported in the study. For each outcome, the time points measured have been described, as well as the tools, units and definitions used to measure the outcome.

13.2 Risk of bias

(see Cochrane Handbook Chapter 8)

13.2.1 ☐ Activated rows in the table to assess sequence generation, allocation concealment, blinding, incomplete outcome data, selective outcome reporting and other issues.

13.2.2 ☐ Judged each parameter of the Risk of Bias table appropriately to indicate whether the study is at high, low or unclear risk of bias.

13.2.3 ☐ In each judgement, the evidence of bias, the likely direction of bias, and the likely magnitude of bias have been taken into consideration, and judgements are consistent with Table 8.5.c of the Handbook.

13.2.4 ☐ Provided detailed, clearly identified quotes from the study text and additional comments where necessary to support each judgement.

13.2.5 ☐ Avoided using abbreviations or acronyms and, where used, provided the full term in the footnotes.

Random sequence generation (selection bias)

13.2.6 ☐ Described the method for generating the allocation of participants to the intervention groups, and whether it was random, quasi-random or non-random.

Allocation concealment (selection bias)

13.2.7 ☐ Described whether the assignment of participants to intervention groups was concealed throughout the recruitment and allocation process (before the interventions began).

Blinding of participants and personnel (performance bias)

13.2.8 ☐ Described who was blinded or masked during the conduct of the trial, including an assessment of the success of blinding.

13.2.9 ☐ Considered the possible impact of blinding for each outcome reported in the Cochrane Review and, if appropriate, created additional rows in the table for outcomes at different levels of risk.

Blinding of outcome assessment (detection bias)

13.2.10 ☐ Described who was blinded or masked during the outcome assessment and analysis of the trial, including an assessment of the success of blinding.

13.2.11 ☐ Considered the possible impact of blinding for each outcome reported in the Cochrane Review and, if appropriate, created additional rows in the table for outcomes at different levels of risk.

Incomplete outcome data (attrition bias)

13.2.12 ☐ Described the completeness of the available data, including information about withdrawals, exclusions, imputation of missing data and 'as treated' analysis.

13.2.13 ☐ Included an assessment of the possible impact of the incomplete data based on the proportion of missing values (dichotomous), the plausible effect size (continuous), the balance of missing data between intervention groups, and the reasons for incompleteness.

13.2.14 ☐ Considered the possible impact of incomplete outcome data for each outcome and time point reported and, if appropriate, created additional rows in the table for outcomes or time points at different levels of risk.

Selective reporting (reporting bias)

13.2.15 ☐ Considered availability of the study protocol, and whether there is any evidence of outcomes added, not reported, reported incompletely, or reported using measures, methods or subsets of data that were not pre-specified.

Other bias

13.2.16 ☐ Described any other concerns about the study (e.g. baseline imbalance, early stopping).

13.2.17 ☐ Have not included issues that do not have direct implications for bias (e.g. sample size, variability and reliability of outcome measures, ethical approval).

13.3 Characteristics of excluded studies

(see Cochrane Handbook Section 4.6.3)

13.3.1 ☐ Listed studies that may appear to meet the eligibility criteria, but which were excluded.

13.3.2 ☐ Given a brief reason why each study was excluded from the Cochrane Review (e.g. inappropriate comparator intervention). If a reason applies to more than one study, it is expressed in the same way each time.

13.3.3 ☐ Further information about the studies (e.g. location or results) has not been included.

13.4 Characteristics of studies awaiting classification

(see Cochrane Handbook Section 4.6.4)

13.4.1 ☐ Provided detailed information, if possible, similar to the Characteristics of included studies table.

13.4.2 ☐ In any blank cells, "Not yet assessed" or "Not known" has been stated as appropriate.

13.5 Characteristics of ongoing studies

(see Cochrane Handbook Section 4.6.5)

13.5.1 ☐ Provided detailed information, if possible, similar to the Characteristics of included studies table.

13.5.2 ☐ In any blank cells, "Not yet assessed" or "Not known" has been stated as appropriate.

13.6 'Summary of findings'

(see Cochrane Handbook Section 11.5 and Section 12.2)

13.6.1 ☐ Included a 'Summary of findings' table in the Cochrane Review. Additional 'Summary of findings' tables

have been included if the Cochrane Review includes more than one major comparison or substantially different populations.

13.6.2 ☐ Briefly described the population, setting and intervention in the studies relevant to each table.

13.6.3 ☐ Selected a maximum of seven important outcomes to be reported in each table, and included these outcomes whether or not data were found in the included studies.

13.6.4 ☐ Included one or more adverse effect outcome in each table.

13.6.5 ☐ Named each outcome in plain language, and clearly described any tools, units and definitions used to measure the outcome, including the direction of benefit and upper and lower limits of any numerical scales.

13.6.6 ☐ Selected a baseline risk for each dichotomous outcome and baseline score for each continuous outcome, based on either the control group risk(s) in the included studies, or an external source (e.g. well-conducted epidemiological study), and have included a footnote explaining the choice.

13.6.7 ☐ Checked that all results appear correctly and are consistent with the results presented in the 'Data and analyses' and 'Results' sections of the Cochrane Review.

13.6.8 ☐ Entered a GRADE assessment for each outcome, including footnotes to justify and document all judgements.

13.6.9 ☐ Included comments explaining any additional information required by the reader, including explanations for any outcomes for which results cannot be displayed in the standard format.

13.6.10 ☐ Included explanations of any abbreviations in footnotes.

13.6.11 ☐ Footnotes are referenced in the text using superscript letters (e.g. [a])

13.7 Additional tables

(see Cochrane Handbook Section 4.6.7)

13.7.1 ☐ Given each table a brief and informative heading.

13.7.2 ☐ Cells in the table containing row or column headings are formatted in heading style, by selecting Toggle heading/cell from the Table menu in RevMan.

13.7.3 ☐ Included explanations of any abbreviations in footnotes.

13.7.4 ☐ If footnotes have been used, these are referenced in the text using superscript letters (e.g. [a]).

13.7.5 ☐ Where possible, 'non-essential' tables moved to the 'Appendices'.

14. References

All sources of information in the Cochrane Protocol must be appropriately referenced to prevent plagiarism. All reference citation IDs and references in the reference list must be consistent with the Cochrane Style Guide (http://www.cochrane.org/training/cochrane-style-resource). In particular, please check the following items:

14.1 In the text

14.1.1 ☐ Checked that a link has been created wherever a reference citation ID appears in the text of the Cochrane Review using the Find and Mark Links tool (ctrl-L)

14.1.2 ☐ Grouped reference citation IDs and links in the text consistently in either alphabetical or chronological order, surrounded by round brackets and separated by semi-colons.

14.2 In the reference lists

(see Cochrane Handbook Section 4.7)

14.2.1 ☐ Reference citation IDs are in the correct format (first author or group abbreviation and year of publication, e.g. Smith 1983 or UKPDS 1990)

14.2.2 ☐ Included each journal title in full, with no abbreviations and the first letter of each main word is capitalised.

14.2.3 ☐ Checked how each reference is displayed to remove unnecessary punctuation.

14.2.4 ☐ Where applicable, listed the first six authors before using 'et al.'

14.2.5 ☐ Written the page numbers correctly (e.g. 354-7).

14.2.6 ☐ Included the date accessed in any references to web pages.

References to studies

14.2.7 ☐ Grouped all the references relevant to each study under a single study ID.

14.2.8 ☐ If two or more references are listed under a study ID, one has been nominated as the primary reference.

14.2.9 ☐ Specified whether data for each study includes published, unpublished or both sources, and whether unpublished data were sought.

Additional references

14.2.10 ☐ Included other references cited in the text of the review, aside from studies assessed for inclusion (e.g. cited in the 'Background' or 'Methods' sections).

Other published versions of this review

14.2.11 ☐ Included references to any previous or derivative published versions of this Cochrane Review, including the Protocol.

15. Data and analyses

(see Cochrane Handbook Section 4.8)

15.1 ☐ Undertaken (or displayed) a meta-analysis only if participants, interventions, comparisons and outcomes are judged to be sufficiently similar to ensure an answer that is clinically meaningful.

15.2 ☐ Comparison names are consistent with the 'Objectives', 'Types of Interventions' and 'Effects of interventions' sections.

15.3 ☐ Presented the outcomes in the same order as the 'Types of outcome measures' and 'Effects of interventions' sections.

15.4 ☐ Outcome names are consistent with the 'Types of outcome measures' and 'Effects of interventions' sections.

15.5 ☐ Outcome names include brief information on the tools, units, definitions and timepoints, if appropriate.

15.6 ☐ Changed the 'Group' labels on the forest plots from 'Experimental' and 'Control' to the actual intervention groups used in the comparison.

15.7 ☐ Changed the 'Graph' labels on the forest plots from 'Favours experimental' and 'Favours control' to reflect the actual intervention group names.

15.8 ☐ Checked that the 'Graph' labels indicate the correct direction of effect (for negative outcomes, the left side favours the experimental group; for positive outcomes, the left side favours the control group).

15.9 ☐ Set the scale of each forest plot so the point estimates and confidence intervals can be seen clearly, and if possible so that the plots are consistent between outcomes on similar scales.

15.10 ☐ Meta-analysis totals for outcomes or subgroups with only one included study are not displayed.

15.11 ☐ Meta-analysis totals combining more than one measurement from the same individuals in the same study are not displayed.

15.12 ☐ The statistical options used in the forest plots are correct and consistent with the 'Methods' section, including the statistical method (e.g. Peto or inverse variance), analysis model (e.g. fixed effect or random effects), and effect measure (e.g. risk ratio or odds ratio).

15.13 ☐ Checked any outlying or unexpected results for data entry and transcription errors, comparing the magnitude and direction of effects reported by studies with how they are presented in the review.

16. Figures

(see Cochrane Handbook Section 4.9 and the RevMan User Guide for specifications on size and resolution)

16.1 ☐ Permission received to reproduce any figures from external sources included in the Cochrane Review.

16.2 ☐ Each figure has a brief caption describing the purpose of the figure, and acknowledging its source.

16.3 ☐ All figures used are scaled so that a reader can see the complete picture within the RevMan window.

16.4 ☐ All figures are of a sufficient resolution and quality for publication.

17. Sources of support

(see Cochrane Handbook Section 4.10)

17.1 ☐ Listed all sources of funding and in-kind support, including internal sources (e.g. the home institution of any author) and external sources (e.g. grant funding), and described what was supported by each source

18. Appendices

(see Cochrane Handbook Section 4.12)

18.1 ☐ The title of each Appendix is clear and informative.

18.2 ☐ Copied the complete set of search terms used for each electronic database into an Appendix.

19. Style

(see Cochrane Style Guide at http://www.cochrane.org/training/cochrane-style-resource)

19.1 ☐ Removed all highlighting, notes and tracked changes from the Cochrane Review.

19.2 ☐ All text uses the active voice (i.e. "two authors extracted data", not "data were extracted by two authors")

19.3 ☐ Proofread the Cochrane Review carefully in accordance with the Cochrane Style Guide Basics.

19.4 ☐ Explained all acronyms and abbreviations (e.g. World Health Organization (WHO)).

19.5 ☐ If additional subheadings have been added, the appropriate Heading Style has been selected using the drop-down box on the RevMan toolbar.

19.6 ☐ Written numbers up to and including 'nine' as words, and numbers 10 or higher as numerals (excluding those at the start of a sentence and numbers appearing in tables or figures).

19.7 ☐ Included a space before and after all units of measurement and mathematical symbols (e.g. 5 mL, P = 0.03).

19.8 ☐ If reporting P values, P is written in upper case and without a hyphen.

20. Updated Cochrane Reviews

(see Cochrane Handbook Chapter 3)

If you are submitting an update to an already published Cochrane Review, please address these additional checks:

20.1 ☐ Added an event in the 'What's New' section to describe all relevant changes since the last published version of the Cochrane Review, including any changes to the authors, objectives, inclusion criteria, outcome measures, search strategy, and the number of new included studies and participants.

20.2 ☐ In the 'What's New' section, 'Amendment', 'Update' or 'New Citation Version' has been selected, and the selection is consistent with Section 3.2 of the Handbook.

20.3 ☐ If the search has been updated, every source listed in the original Cochrane Review has been updated and the new date range listed in the 'Methods' section, or an explanation given why not.

20.4 ☐ Updated the text of the Cochrane Review to include any new subheadings available in RevMan.

20.5 ☐ Updated the methods of the Cochrane Review to reflect the latest guidance available in the Handbook.

20.6 ☐ Noted any changes to the methods of the Cochrane Review in the 'Changes between the protocol and the review' section.

20.7 ☐ Edited the 'Abstract', and 'Plain Language Summary' sections and the 'Summary of findings' table to reflect changes.

20.8 ☐ If this is a new citation version, a reference to the previous citation version of the Cochrane Review has been included under 'Other published versions of this review'.

20.9	☐	If feedback was received on the Cochrane Review via *The Cochrane Library*, the comments received and the response has been included in the 'Feedback' section.

21. Queries or notes for the editorial team

List here any notes for the editorial team, including difficulties with completing any of the checklist items:

Click here to enter text.