

## ${\color{blue} \textbf{CONSORT~2010 checklist~of~information~to~include~when~reporting~a~randomised~trial} \\$

Section/Topic	Item No	Checklist item	Reported on page No
Title and abstra	ct		
	1a	Identification as a randomised trial in the title	1
	1b	Structured summary of trial design, methods,	2
		results, and conclusions (for specific guidance see CONSORT for abstracts)	
Introduction			
Background	2a	Scientific background and explanation of	3
and objectives		rationale	·
	2b	Specific objectives or hypotheses	4
Methods			
Trial design	3a	Description of trial design (such as parallel, factorial) including allocation ratio	6
	3b	Important changes to methods after trial	N/A
	00	commencement (such as eligibility criteria), with reasons	IV/A
Participants	4a	Eligibility criteria for participants	6
Ταποιραπισ	4b	Settings and locations where the data were collected	6-7
Interventions	5	The interventions for each group with sufficient	7-8 plus
		details to allow replication, including how and	Using co- design methods to
		when they were actually administered	develop new personalised support for people living with
			Long Covid: The 'LISTEN'
			intervention - Jones - 2024 -
			<u>Health Expectations - Wiley</u> Online Library
Outcomes	6a	Completely defined pre-specified primary and	9
		secondary outcome measures, including how	
		and when they were assessed	
	6b	Any changes to trial outcomes after the trial	N/A
Sample size	7a	commenced, with reasons  How sample size was determined	9
Odmpic Size	7b	When applicable, explanation of any interim	N/A
		analyses and stopping guidelines	·
Randomisation .			
: Sequence	8a	Method used to generate the random allocation	7
generati		sequence	
on	8b	Type of randomisation; details of any restriction (such as blocking and block size)	7
Allocation	9	Mechanism used to implement the random	7
conceal		allocation sequence (such as sequentially	
ment		numbered containers), describing any steps	
mechani sm		taken to conceal the sequence until interventions were assigned	
3111	10	Who generated the random allocation	7
Implementatio	. •	sequence, who enrolled participants, and who	-
n		assigned participants to interventions	
Blinding	11a	If done, who was blinded after assignment to	7
		interventions (for example, participants, care	

Statistical nethods used to compare groups for primary and secondary outcomes analyses and adjusted analyses outcomes analyses destination analyses, such as subgroup analyses and adjusted analyses			providers, those assessing outcomes) and how	
Methods   12b		11b	If relevant, description of the similarity of	7-8
Results Participant flow (a diagram is strongly recommended 13b Procommended 13b Passeline data 15 A table showing baseline demographic and clinical characteristics for each group, losses and exclusions after randomisation, together with reasons Possible and the trial ended or was stopped 11 Table 1  Numbers 16 A table showing baseline demographic and clinical characteristics for each group Outcomes and estimation 17a For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups Outcomes and estimation 17a For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups Outcomes and estimation 17a For each group, and the estimated effect size and its precision (such as 95% confidence interval) 17b For binary outcomes, presentation of both absolute and relative effect sizes is recommended Ancillary analyses enclored analyses and adjusted analyses, distinguishing pre-specified from exploratory and precision, and, if relevant, multiplicity of analyses CONSORT for harms)  Discussion Limitations 20 Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses and proup for specific guidance see CONSORT for harms)  Discussion Limitations 20 Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses and adjusted analyses, and considering other relevant evidence  Other Information  Registration 23 Registration number and name of trial registry Where the full trial protocol can be accessed, if available  Table 1  Table 1  Table 4  Table 1  Table 1  Table 1  Table 1  Table 4  Table 4  Table 4  Table 1  Table 1  Table 1  Table 4  Table 4  Table 4  Table 1  Table 1  Table 1  Table 4  Table 4  Table 1  Table 1  Table 1  Table 4  Table 4  Table 4  Table 4  Table 4  Table 4		12a		10-11
Participant (flow (a diagram is strongly recommended (larger) and treatment, and were analysed for the primary outcome recommended (larger) and the process and exclusions after randomisation, together with reasons and exclusions after randomisation, together with reasons and collinical characteristics for each group.  Numbers (larger) 14b (larger) 15b (l		12b		
recommended 13b For each group, losses and exclusions after randomisation, together with reasons Recruitment 14a Dates defining the periods of recruitment and follow-up 14b Why the trial ended or was stopped Baseline data 15 A table showing baseline demographic and clinical characteristics for each group Numbers 16 For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups Outcomes and estimation 17a For each group, and the estimated effect size and its precision (such as 95% confidence interval) 17b For binary outcomes, presentation of both absolute and relative effect sizes is recommended Ancillary 18 Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory Harms 19 All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)  Discussion Limitations 20 Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses Generalisabilit 21 Generalisability (external validity, applicability) of the trial findings Interpretation 23 Registration number and name of trial registry Where the full trial protocol can be accessed, if available  Figure 1  11  Table 1  12 and Table 4  Table 4  Table 4  Table 4  Supplementary materials  Supplementary materials  12 and supplementary materials interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence  Other information  Registration 23  Protocol 24 Registration number and name of trial registry Where the full trial protocol can be accessed, if available  Table 1  12 and Table 1  Table 1  Table 4  Table 1  Table 4  Table 4  Table 1  Table 4  Table 1  Table	Participant flow (a diagram is	13a	were randomly assigned, received intended treatment, and were analysed for the primary	11 and Figure 1
Recruitment		13b	For each group, losses and exclusions after	Figure 1
Baseline data   15	Recruitment	14a	Dates defining the periods of recruitment and	11
Clinical characteristics for each group   For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups   Table 4			Why the trial ended or was stopped	
analysed (denominator) included in each analysis and whether the analysis was by original assigned groups  Outcomes and estimation  17a For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)  17b For binary outcomes, presentation of both absolute and relative effect sizes is recommended  Ancillary analyses Including subgroup analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory analyses and adjusted analyses, distinguishing pre-specified from each group (for specific guidance see CONSORT for harms)  Discussion  Limitations 20 Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses  Generalisabilit y Generalisability (external validity, applicability) of the trial findings  Interpretation 22 Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence  Other information  Registration 23 Registration number and name of trial registry  Protocol 24 Registration number and name of trial registry  Where the full trial protocol can be accessed, if available  Yes the full trial protocol can be accessed, if available available  Table 4  N/A  N/A  Supplementary materials  14-16  14-16  13-16  Supplementary materials  14-16  13-16  Supplementary materials plus Effectiveness of a personalised self-management intervention for living with long COVID: protocof or the LISTEN randomised controlled trial I Trials   Full Text   Trials   Trials   Text   Text   Text			clinical characteristics for each group	
results for each group, and the estimated effect size and its precision (such as 95% confidence interval)  17b For binary outcomes, presentation of both absolute and relative effect sizes is recommended  Ancillary 18 Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory  Harms 19 All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)  Discussion  Limitations 20 Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses  Generalisabilit y Generalisability (external validity, applicability) of the trial findings  Interpretation 22 Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence  Other information  Registration 23 Registration number and name of trial registry  Protocol 24 Where the full trial protocol can be accessed, if available  Registration 17 Supplementary materials plus Effectiveness and cost-effectiveness of a personalised self-management intervention for living with long COVID: protocol for the LISTEN randomised controlled trial 1 Trials   Full Text (bloimedcentral.com)		16	(denominator) included in each analysis and whether the analysis was by original assigned	12 and Table 4
Ancillary analyses		17a	results for each group, and the estimated effect size and its precision (such as 95% confidence	Table 4
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Harms 19 All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)    Discussion		18	including subgroup analyses and adjusted analyses, distinguishing pre-specified from	Supplementary materials
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benefits and harms, and considering other relevant evidence  Other information Registration 23 Registration number and name of trial registry Protocol 24 Where the full trial protocol can be accessed, if available  Supplementary materials plus Effectiveness and cost-effectiveness of a personalised self-management intervention for living with long COVID: protocol for the LISTEN randomised controlled trial   Trials   Full Text (biomedcentral.com)		21		
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available  plus Effectiveness and costeffectiveness of a personalised self-management intervention for living with long COVID: protocol for the LISTEN randomised controlled trial   Trials   Full Text (biomedcentral.com)	•			
	Protocol	24	•	plus Effectiveness and cost- effectiveness of a personalised self-management intervention for living with long COVID: protocol for the LISTEN randomised controlled trial   Trials   Full Text
	Funding	25	Sources of funding and other support (such as	

supply of drugs), role of funders	