

STROBE Statement—Checklist of items that should be included in reports of *cohort studies*

| | Item No | Recommendation |
|------------------------------|--------------------|---|
| Title and abstract | 1 | <p>(a) Indicate the study’s design with a commonly used term in the title or the abstract</p> <p>Title: Traumatic brain injury and incarceration in men and women: a population-based cohort study</p> <hr/> <p>(b) Provide in the abstract an informative and balanced summary of what was done and what was found</p> <p style="text-align: center;">Yes, completed</p> |
| Introduction | | |
| Background/rationale | 2 | <p>Explain the scientific background and rationale for the investigation being reported</p> <p style="text-align: center;">Page 1, Lines 11-23</p> |
| Objectives | 3 | <p>State specific objectives, including any prespecified hypotheses</p> <p style="text-align: center;">Page 1: Lines 23-24</p> |
| Methods | | |
| Study design | 4 | <p>Present key elements of study design early in the paper</p> <p style="text-align: center;">Page 2, Lines 28-29</p> |
| Setting | 5 | <p>Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection</p> <p style="text-align: center;">Page 2, Lines 28-43</p> |
| Participants | 6 | <p>(a) Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up</p> <p style="text-align: center;">Page 2-3: Lines 33-43</p> <p>(b) For matched studies, give matching criteria and number of exposed and unexposed</p> |
| Variables | 7 | <p>Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable</p> <p style="text-align: center;">Page 3-4: Lines 57-93</p> |
| Data sources/ measurement | 8* | <p>For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group</p> <p style="text-align: center;">Page 3-4: Lines 57-93</p> |
| Bias | 9 | <p>Describe any efforts to address potential sources of bias</p> <p style="text-align: center;">Page 2, Lines 38-43 Page 3, Lines 52-54 Page 4: Lines 72-76 Page 5: Lines 103-104</p> |
| Study size | 10 | <p>Explain how the study size was arrived at</p> |

Page 2: Lines 33-35

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| Quantitative variables | 11 | Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why |
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Page 4: Line 72

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| Statistical methods | 12 | <i>(a)</i> Describe all statistical methods, including those used to control for confounding <i>(b)</i> Describe any methods used to examine subgroups and interactions <i>(c)</i> Explain how missing data were addressed <i>(d)</i> If applicable, explain how loss to follow-up was addressed <i>(e)</i> Describe any sensitivity analyses |
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Page 5-6: Lines 95-123

Result

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| Participants | 13* | <i>(a)</i> Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed <i>(b)</i> Give reasons for non-participation at each stage <i>(c)</i> Consider use of a flow diagram |
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Page 6, Lines 126-130

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| Descriptive data | 14* | <i>(a)</i> Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders <i>(b)</i> Indicate number of participants with missing data for each variable of interest <i>(c)</i> Summarise follow-up time (eg, average and total amount) |
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Page 6, Lines 126-130**Table 1**

| | | |
|--------------|-----|--|
| Outcome data | 15* | Report numbers of outcome events or summary measures over time |
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Page 6, Lines 132-134; Table 2**Page 7: Lines 141-143, Table 3**

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| Main results | 16 | <i>(a)</i> Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included <i>(b)</i> Report category boundaries when continuous variables were categorized <i>(c)</i> If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period |
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Page 6-7: Lines 132-145**Tables 2,3**

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|----------------|----|--|
| Other analyses | 17 | Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses |
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Page 7-8, Lines 147-153

Table 4

Discussion

Key results 18 Summarise key results with reference to study objectives

Page 7, Lines 156-160

Limitations 19 Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias

Page 9-10, Lines 190-215

Interpretation 20 Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence

Page 8-9, Lines 162-189

Generalisability 21 Discuss the generalisability (external validity) of the study results

Page 9/10, Lines 206-209

Other information

Funding 22 Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based

Cover page

*Give information separately for exposed and unexposed groups.

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at <http://www.plosmedicine.org/>, Annals of Internal Medicine at <http://www.annals.org/>, and Epidemiology at <http://www.epidem.com/>). Information on the STROBE Initiative is available at <http://www.strobe-statement.org>.