Quantifying candidate volume for endovascular therapy for acute ischemic stroke at Health Sciences North: a one-year, retrospective chart review

	Item No	Recommendation
Title and abstract	1 Page	(a) Indicate the study's design with a commonly used term in the title or the
	1	abstract
	Page 2	(b) Provide in the abstract an informative and balanced summary of what was done
		and what was found
Introduction		
Background/rationale	2 Page 3	Explain the scientific background and rationale for the investigation being reported
Objectives	3 Page 4	State specific objectives, including any prespecified hypotheses
Methods		
Study design	4 Page	Present key elements of study design early in the paper
	4	
Setting	5 Page	Describe the setting, locations, and relevant dates, including periods of recruitment,
	4	exposure, follow-up, and data collection
Participants	6 Page	(a) Give the eligibility criteria, and the sources and methods of selection of
	4-6	participants
Variables	7 Page	Clearly define all outcomes, exposures, predictors, potential confounders, and
	5-6	effect modifiers. Give diagnostic criteria, if applicable
Data sources/	8*	For each variable of interest, give sources of data and details of methods of
measurement	Page	assessment (measurement). Describe comparability of assessment methods if there
	6-7	is more than one group
Bias	9 Page	Describe any efforts to address potential sources of bias
	5	
Study size	10	Explain how the study size was arrived at
	Page 4	
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable,
		describe which groupings were chosen and why
Statistical methods	12	(a) Describe all statistical methods, including those used to control for confounding
	Page 6	(b) Describe any methods used to examine subgroups and interactions
		(c) Explain how missing data were addressed
		(d) If applicable, describe analytical methods taking account of sampling strategy
		(e) Describe any sensitivity analyses
Results		
Participants	13*	(a) Report numbers of individuals at each stage of study—eg numbers potentially
	Page	eligible, examined for eligibility, confirmed eligible, included in the study,
	7-9	completing follow-up, and analysed
		(b) Give reasons for non-participation at each stage
		(c) Consider use of a flow diagram
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and
	Page 8	information on exposures and potential confounders
	Page 7	(b) Indicate number of participants with missing data for each variable of interest

STROBE Statement—Checklist of items that should be included in reports of cross-sectional studies

Outcome data	15*	Report numbers of outcome events or summary measures
	Page 7	
Main results	16	(a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and
	Page 7	their precision (eg, 95% confidence interval). Make clear which confounders were
		adjusted for and why they were included
		(b) Report category boundaries when continuous variables were categorized
		(c) If relevant, consider translating estimates of relative risk into absolute risk for a
		meaningfultime period
Otheranalyses	17	Report other analyses done-eg analyses of subgroups and interactions, and
	Page	sensitivity analyses
	10	
Discussion		
Key results	18	Summarise key results with reference to study objectives
	Page	
	12	
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or
	Page	imprecision. Discuss both direction and magnitude of any potential bias
	13	
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations,
	Page	multiplicity of analyses, results from similar studies, and other relevant evidence
	14	
Generalisability	21	Discuss the generalisability (external validity) of the study results
	Page	
	12	
Other information		
Funding	22	Give the source of funding and the role of the funders for the present study and, if
	Title	applicable, for the original study on which the present article is based
	Page	

*Give information separately for exposed and unexposed groups.

Note: An Explanation and Elaboration article discusses each checklist itemand 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 www.strobe-statement.org.