The RECORD statement – checklist of items, extended from the STROBE statement, that should be reported in observational studies using routinely collected health data.

	Item No.	STROBE items	Location in manuscript where items are reported	RECORD items	Location in manuscript where items are reported			
Title and abstrac	Title and abstract							
	1	(a) Indicate the study's design with a commonly used term in the title or the abstract (b) Provide in the abstract an informative and balanced		RECORD 1.1: The type of data used should be specified in the title or abstract. When possible, the name of the databases used should be included.	Abstract, page 3 (Methods paragraph)			
		summary of what was done and what was found		RECORD 1.2: If applicable, the geographic region and timeframe within which the study took place should be reported in the title or abstract.	Abstract, page 3 (Methods paragraph)			
				RECORD 1.3: If linkage between databases was conducted for the study, this should be clearly stated in the title or abstract.	Abstract, page 3 (Methods paragraph)			
Introduction								
Background rationale	2	Explain the scientific background and rationale for the investigation being reported			Introduction, pages 4-5 (paragraphs 1-3)			
Objectives	3	State specific objectives, including any prespecified hypotheses			Introduction, page 5 (paragraph 1)			
Methods								
Study Design	4	Present key elements of study design early in the paper			Methods, page 5 (Study design paragraph)			
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection			Methods, page 5 (Study design paragraph)			
Participants	6	(a) Cohort study - Give the		RECORD 6.1: The methods of study	Methods, page 6			

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Bias	9	Describe any efforts to address		Methods, page 5
		potential sources of bias		(Study design
				paragraph)
				Methods, page 7
				(Outcome
				paragraph)
Study size	10	Explain how the study size was		Methods, page 6
		arrived at		(Cohort
				identification
				paragraph)
Quantitative	11	Explain how quantitative		Methods, page 7
variables		variables were handled in the		(Patient
		analyses. If applicable, describe		characteristics at
		which groupings were chosen,		diagnosis)
		and why		
Statistical	12	(a) Describe all statistical		Methods, page 8
methods		methods, including those used to		(Statistical
		control for confounding		analysis
		(b) Describe any methods used to		paragraph)
		examine subgroups and		
		interactions		Methods, page 8
		(c) Explain how missing data		(Statistical
		were addressed		analysis
		(d) <i>Cohort study</i> - If applicable,		paragraph)
		explain how loss to follow-up		
		was addressed		
		Case-control study - If		
		applicable, explain how matching		
		of cases and controls was		
		addressed		
		Cross-sectional study - If		
		applicable, describe analytical		
		methods taking account of		
		sampling strategy		
		(e) Describe any sensitivity		
		analyses		1
Data access and			RECORD 12.1: Authors should	Methods, pages 5-

cleaning methods			describe the extent to which the investigators had access to the database population used to create the study population.	6 (Data sources paragraph)
			RECORD 12.2: Authors should provide information on the data cleaning methods used in the study.	Methods, page 6 (Cohort identification paragraph)
Linkage			RECORD 12.3: State whether the study included person-level, institutional-level, or other data linkage across two or more databases. The methods of linkage and methods of linkage quality evaluation should be provided.	Methods, pages 5-6 (Data sources paragraph)
Results				
Participants	13	(a) Report the numbers of individuals at each stage of the study (e.g., numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed) (b) Give reasons for non-participation at each stage. (c) Consider use of a flow diagram	RECORD 13.1: Describe in detail the selection of the persons included in the study ( <i>i.e.</i> , study population selection) including filtering based on data quality, data availability and linkage. The selection of included persons can be described in the text and/or by means of the study flow diagram.	Methods, page 5 (Study design paragraph) Results, page 9 (paragraph 1) Supplement 1, page 20
Descriptive data	14	(a) Give characteristics of study participants ( <i>e.g.</i> , demographic, clinical, social) and information on exposures and potential confounders (b) Indicate the number of participants with missing data for each variable of interest (c) <i>Cohort study</i> - summarise follow-up time ( <i>e.g.</i> , average and total amount)		Results, page 9 (paragraph 1) Table 1, page 18  Table 1, page 18

Outcome data	15	Cohort study - Report numbers of outcome events or summary measures over time Case-control study - Report numbers in each exposure category, or summary measures of exposure Cross-sectional study - Report numbers of outcome events or summary measures		Results, page 9 (paragraphs 1-2) Table 1, page 18 Supplement 1, page 20
Main results	16	(a) Give unadjusted estimates and, if applicable, confounderadjusted estimates and their precision (e.g., 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 meaningful time period		Results, page 9 (paragraphs 1-2) Table 1, page 18 Supplement 1, page 20
Other analyses	17	Report other analyses done—e.g., analyses of subgroups and interactions, and sensitivity analyses		Results, pages 9- 10 (Sensitivity analysis paragraph)
Discussion				
Key results	18	Summarise key results with reference to study objectives		Interpretation, page 10, (paragraph 1)
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	RECORD 19.1: Discuss the implications of using data that were not created or collected to answer the specific research question(s). Include discussion of misclassification bias, unmeasured confounding, missing data,	Interpretation, page 13, (paragraph 2)

			and changing eligibility over time, as they pertain to the study being reported.	
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence		Interpretation, pages 13-14, (paragraph 3)
Generalisability	21	Discuss the generalisability (external validity) of the study results		Interpretation, page 13, (paragraph 2)
Other Informatio	n			
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		Title Page, page 2 (Funding Source)
Accessibility of protocol, raw data, and programming code			RECORD 22.1: Authors should provide information on how to access any supplemental information such as the study protocol, raw data, or programming code.	Title Page, page 2 (Author correspondence)

<sup>\*</sup>Reference: Benchimol EI, Smeeth L, Guttmann A, Harron K, Moher D, Petersen I, Sørensen HT, von Elm E, Langan SM, the RECORD Working Committee. The REporting of studies Conducted using Observational Routinely-collected health Data (RECORD) Statement. *PLoS Medicine* 2015; in press.

<sup>\*</sup>Checklist is protected under Creative Commons Attribution (CC BY) license.