STROBE Statement—checklist of items that should be included in reports of observational studies

	Item No	Recommendation
Title and abstract	1	(*a*) Indicate the study's design with a commonly used term in the title or the abstract [Abstract and title contain "observational case series".]
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found [See Abstract, which contains a summary of methods, results, and interpreataion.]
Introduction		
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported [Background pages 1-2.]
Objectives	3	State specific objectives, including any prespecified hypotheses [to explore "trends in exposures, populations, causes of exposures, and clinical outcomes within a rapidly changing use environment and the Canadian context" using poison centre data page 2.]
Methods		
Study design	4	Present key elements of study design early in the paper [Described in Methods pages 2-3.]
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection [Under Methods, page 2.]
Participants	6	Give the eligibility criteria, and the sources and methods of selection of participants. [Under Methods, page 2.]
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable [Described in Methods, pages 2-3.]
Data sources/ measurement	8*	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 [All variables were taken from the BC Drug and Poison Information Centre records. The methods of assessment are described under Methods on page 2.]
Bias	9	Describe any efforts to address potential sources of bias [Limitations on page 5-6 describe issues with how data may impact findings.]
Study size	10	Explain how the study size was arrived at [NA, the data represents all calls to the Drug and Poison Information Centre from 2012-2017, and not a sample of calls.]
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why [Methods, pages 2-3.]
Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding [Under "Statistical Analysis", page 3.]
		(*b*) Describe any methods used to examine subgroups and interactions [Stratification described under "Statistical Analysis", page 3.]
		(*c*) Explain how missing data were addressed [Described in Results under "Missing information and absent fields".]
		(*d*) *Cross-sectional study*—If applicable, describe analytical methods taking account of sampling strategy [NA]
		(*e*) Describe any sensitivity analyses [NA]

Continued on next page

Results		
Participants	13*	(a) 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 [Beginning of results, page 3.]
		(b) Give reasons for non-participation at each stage [NA]
		(c) Consider use of a flow diagram [NA]
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders [Described in Table 1.]
		(b) Indicate number of participants with missing data for each variable of interest [Reported throughout tables.]
Outcome data	15*	*Cross-sectional study*—Report numbers of outcome events or summary measures [Presented in tables.]
Main results	16	(*a*) 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 [NA]
		(*b*) Report category boundaries when continuous variables were categorized [Ages and nicotine concentration cutoffs reported in tables.]
		(*c*) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period [NA]
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses [Results pages 3-4]
Discussion		
Key results	18	Summarise key results with reference to study objectives [Under Discussion, page 5.]
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 [Under Limitations, pages5-6.]
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence [Discussion, page 5.]
Generalisability	21	Discuss the generalisability (external validity) of the study results [Discussed in Discussion and Conclusion, pages 5-6.]
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 [NA, internal funding.]

*Give information separately for cases and controls in case-control studies and, if applicable, for exposed and unexposed groups in cohort and cross-sectional studies.

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 www.strobe-statement.org.