CONSORT-EHEALTH (V 1.6.1) -Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating web-based and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 - description of the intervention) may also be applicable for other study designs.

The goal of the CONSORT EHEALTH checklist and guideline is to be

- a) a guide for reporting for authors of RCTs,
- b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the checklist.

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (nonpharmacologic treatment) items.

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE OF THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red *.

In the textboxes, either copy & paste the relevant sections from your manuscript into this form - please include any quotes from your manuscript in QUOTATION MARKS, or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED).

Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF _AND_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE !!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the caption):

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and Mobile Health Interventions

J Med Internet Res 2011;13(4):e126 URL: http://www.jmir.org/2011/4/e126/

doi: 10.2196/jmir.1923

PMID: 22209829

*Obligatorisk

| Your name * | | |
|---|--|--|
| First Last | | |
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| Title of your manuscript * | | |
| Provide the (draft) title of your | manuscript. | 7 |
| | ased feedback with or without telephone lents – a randomized workplace mployees | |
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TITLE AND ABSTRACT

1a) TITLE: Identification as a randomized trial in the title

1a) Does your paper address CONSORT item 1a? *

I.e does the title contain the phrase "Randomized Controlled Trial"? (if not, explain the reason under "other")

yes

Övrigt: It savs "Randomized workpla

1a-i) Identify the mode of delivery in the title

Identify the mode of delivery. Preferably use "web-based" and/or "mobile" and/or "electronic game" in the title. Avoid ambiguous terms like "online", "virtual", "interactive". Use "Internet-based" only if Intervention includes non-web-based Internet components (e.g. email), use "computer-based" or "electronic" only if offline products are used. Use "virtual" only in the context of "virtual reality" (3-D worlds). Use "online" only in the context of "online support groups". Complement or substitute product names with broader terms for the class of products (such as "mobile" or "smart phone" instead of "iphone"), especially if the application runs on different platforms.

1 2 3 4 5

subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 1a-i? *

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The effects of tailored web-based feedback with or without telephone coaching..."

1a-ii) Non-web-based components or important co-interventions in title

Mention non-web-based components or important co-interventions in title, if any (e.g., "with telephone support").

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Does your paper address subitem 1a-ii?

| with or without telephone coaching" |
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1a-iii) Primary condition or target group in the title

Mention primary condition or target group in the title, if any (e.g., "for children with Type I Diabetes") Example: A Web-based and Mobile Intervention with Telephone Support for Children with Type I Diabetes: Randomized Controlled Trial

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Does your paper address subitem 1a-iii? *

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for vour study

| "among railway employees" "The effects of" | | |
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1b) ABSTRACT: Structured summary of trial design, methods, results, and conclusions

NPT extension: Description of experimental treatment, comparator, care providers, centers, and blinding status.

1b-i) Key features/functionalities/components of the intervention and comparator in the **METHODS** section of the ABSTRACT

Mention key features/functionalities/components of the intervention and comparator in the abstract. If possible, also mention theories and principles used for designing the site. Keep in mind the needs of systematic reviewers and indexers by including important synonyms. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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Does your paper address subitem 1b-i? *

your study [BMI], dietary intake, physical activity, stress, sleep, tobaccoand alcohol consumption, history of disease, self-perceived health) as well as motivation to change some health habits! They were randomly assigned either a: A) questionnaire (498)

answered, 40%), or B) questionnaire + tailored web-based health feedback (482 answered, 37%), or C) questionnaire + tailored webbased health feedback + telephone coaching (493 answered, 37%)

1b-ii) Level of human involvement in the METHODS section of the ABSTRACT

Clarify the level of human involvement in the abstract, e.g., use phrases like "fully automated" vs. "therapist/nurse/care provider/physician-assisted" (mention number and expertise of providers involved, if any). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

1 2 3 4 5 subitem not at all important \(\cap \) \(\cap \) \(\cap \) essential

Does your paper address subitem 1b-ii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for

"The questionnaire with tailored web-based feedback was fully automated". "The telephone coaching was assisted by trained health counsellors ..."

1b-iii) Open vs. closed, web-based (self-assessment) vs. face-to-face assessments in the **METHODS** section of the ABSTRACT

Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic or a closed online user group (closed usergroup trial), and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment). Clearly say if outcomes were self-assessed through questionnaires (as common in web-based trials). Note: In traditional offline trials, an open trial (open-label trial) is a type of clinical trial in which both the researchers and participants know which treatment is being administered. To avoid confusion, use "blinded" or "unblinded" to indicated the level of blinding instead of "open", as "open" in web-based trials usually refers to "open access" (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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Does your paper address subitem 1b-iii?

"3,876 railway employees in Sweden were e-mailed an URL to a webbased lifestyle questionnaire assessing nine self-reported health areas (Body Mass Index [BMI], dietary intake, physical activity, stress, sleep, tobacco- and alcohol consumption, history of disease, self-perceived health) as well as motivation to change some health habits".

1b-iv) RESULTS section in abstract must contain use data

Report number of participants enrolled/assessed in each group, the use/uptake of the intervention (e.g., attrition/adherence metrics, use over time, number of logins etc.), in addition to primary/secondary outcomes. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)



Does your paper address subitem 1b-iv?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"They were randomly assigned either a: A) questionnaire (498 answered, 40%), or B) questionnaire + tailored web-based health feedback (482 answered, 37%), or C) questionnaire + tailored webbased health feedback + telephone coaching (493 answered, 37%)".

1b-v) CONCLUSIONS/DISCUSSION in abstract for negative trials

Conclusions/Discussions in abstract for negative trials: Discuss the primary outcome - if the trial is negative (primary outcome not changed), and the intervention was not used, discuss whether negative results are attributable to lack of uptake and discuss reasons. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text. consider adding it)



Does your paper address subitem 1b-v?

"Tailored web-based health feedback and telephone coaching did not have a positive effect on railway employees' overall health in our lifestyle intervention study. However, our findings suggest an increased motivation to change health behaviors related to diet and physical activity among those who received tailored webbased health feedback".

Note: We further discuss the negative results in the discussion

INTRODUCTION

2a) In INTRODUCTION: Scientific background and explanation of rationale

2a-i) Problem and the type of system/solution

Describe the problem and the type of system/solution that is object of the study: intended as standalone intervention vs. incorporated in broader health care program? Intended for a particular patient population? Goals of the intervention, e.g., being more cost-effective to other interventions, replace or complement other solutions? (Note: Details about the intervention are provided in "Methods" under 5)

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Does your paper address subitem 2a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A needs assessment conducted by our research team indicated that more than 60% of the track technicians were overweight, 70% had an unhealthy diet, and almost 50% had high cholesterol levels. Thus, there is a strong need for health improvement among this target group, particularly as unhealthy lifestyles may put the employee, crew, and passengers at risk due to unsafe working

2a-ii) Scientific background, rationale: What is known about the (type of) system

Scientific background, rationale: What is known about the (type of) system that is the object of the study (be sure to discuss the use of similar systems for other conditions/diagnoses, if appropiate), motivation for the study, i.e. what are the reasons for and what is the context for this specific study, from which stakeholder viewpoint is the study performed, potential impact of findings [2]. Briefly justify the choice of the comparator.



Does your paper address subitem 2a-ii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional

information not in the ms, or briefly explain why the item is not applicable/relevant for your study facilitating lifestyle-related nealth behaviors focusing on physical activity [7-9] and diet [10-12]".

"Telephone coaching is another method that has been used to encourage healthy behaviors and has been shown to be as effective as in-person counseling. Above all, interventions using the web or the telephone allow for individuals to take part in interventions irrespective of their geographical location, making these modes of delivery suitable for railway employees".

2b) In INTRODUCTION: Specific objectives or hypotheses

Does your paper address CONSORT subitem 2b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The aim of this study was to evaluate the health effects of a workplace intervention in the railway industry using web-based health feedback with or without telephone coaching, in comparison to no health feedback or telephone coaching".

METHODS

3a) Description of trial design (such as parallel, factorial) including allocation ratio

Does your paper address CONSORT subitem 3a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"When the questionnaire URL was emailed, the participants were randomly assigned one of three conditions: A) questionnaire, or B) questionnaire + tailored web-based health feedback, or C) questionnaire + tailored web-based health feedback + telephone health coaching".

3b) Important changes to methods after trial commencement (such as eligibility criteria), with reasons

Does your paper address CONSORT subitem 3b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

| There were no deviators to methods after trial commencement. |
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3b-i) Bug fixes, Downtimes, Content Changes

Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].



Does your paper address subitem 3b-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

| There were no updates to the website (content) during the intervention. |
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4a) Eligibility criteria for participants

Does your paper address CONSORT subitem 4a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

| and were tools included in the employees' ordinary operation to carry out their work". | |
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| "The research group collected lists of potential participants (employees) from the company manager at the four companies. | |
| All employees with an email address were eligible for the study. The participant lists was given to the web company, which was responsible for distributing the questionnaires. Randomization lists | |

4a-i) Computer / Internet literacy

Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.

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Does your paper address subitem 4a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"....The method of using the web to deliver health interventions seems however appropriate for our study population. About 90% of the Swedish population has access to the web and 85% has broadband at home. Further, it is expected that more than 96% of all Internet users will be connected to social networks in the nearest future [33]. A high computer literacy and experience of use among our study population is therefore likely".

4a-ii) Open vs. closed, web-based vs. face-to-face assessments:

Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.

Does your paper address subitem 4a-ii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

web-based lifestyle questionnaire ..."

"The questionnaire with tailored web-based feedback was fully automated. The telephone coaching was assisted by trained health counsellors (using traditional behavioral change theories i.e. the Transtheoretical model and Motivational Interviewing technique). Nine months later, a follow-up questionnaire (version C) was e-mailed to the participants".

4a-iii) Information giving during recruitment

Information given during recruitment. Specify how participants were briefed for recruitment and in the informed consent procedures (e.g., publish the informed consent documentation as appendix, see also item X26), as this information may have an effect on user self-selection, user expectation and may also bias results.

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Does your paper address subitem 4a-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this"

to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Participant information and informed consent documentation were given online by the participants' as part of the welcome and information letter provided in the starting procedure of the questionnaire".

4b) Settings and locations where the data were collected

Does your paper address CONSORT subitem 4b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The interventions, the tailored web-based health feedback (saved on the website) and the telephone coaching services were available during nine months. Data was collected by the web company [18] and sent to the researchers after the intervention had ended".

4b-i) Report if outcomes were (self-)assessed through online questionnaires

Clearly report if outcomes were (self-)assessed through online questionnaires (as common in webbased trials) or otherwise.

Does your paper address subitem 4b-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Both the baseline and the follow-up questionnaire assessed the following nine health areas divided into sections: Body Mass Index (BMI), dietary intake, physical activity, stress, sleep, tobacco- and alcohol consumption, history of disease and self-perceived health. Each section comprised a number of items. All outcomes were self-assessed through the web-based questionnaire".

4b-ii) Report how institutional affiliations are displayed

Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer rates, use, and reactions with regards to an intervention. (Not a required item – describe only if this may bias results)

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Does your paper address subitem 4b-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The university logotype (Karolinska Institutet) was available on the starting page of the website enlosing the web-based questionnaire. This page also had names and affiliations of the research group (main researchers) part of the participant information sheet and instructions.

5) The interventions for each group with sufficient details to allow replication, including how and when they were actually administered

5-i) Mention names, credential, affiliations of the developers, sponsors, and owners

Mention names, credential, affiliations of the developers, sponsors, and owners [6] (if authors/evaluators are owners or developer of the software, this needs to be declared in a "Conflict of interest" section or mentioned elsewhere in the manuscript).

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Does your paper address subitem 5-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Helpline. The helplines for smoking and alcohol are wellestablished public helplines in Sweden [21]. The Diet and Exercise Helpline was developed for this study".

"The interventions, the tailored web-based health feedback (saved on the website) and the telephone coaching services were available during nine months. Data was collected by the web company [18] and sent to the researchers after the intervention

5-ii) Describe the history/development process

Describe the history/development process of the application and previous formative evaluations (e.g., focus groups, usability testing), as these will have an impact on adoption/use rates and help with interpreting results.



Does your paper address subitem 5-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The researchers developed the questionnaire and the content of the feedback and were involved in the development of content of the telephone coaching. Nationally leading experts in respective health area of the questionnaire quality assured the content (questions and feedback). The questionnaire was pilot tested by the target group and by the research unit at Karolinska Institutet. Most questionnaire sections used validated items from previous research. We used a questionnaire to assess food frequency

5-iii) Revisions and updating

Revisions and updating. Clearly mention the date and/or version number of the application/intervention (and comparator, if applicable) evaluated, or describe whether the intervention underwent major changes during the evaluation process, or whether the development and/or content was "frozen" during the trial. Describe dynamic components such as news feeds or changing content which may have an impact on the replicability of the intervention (for unexpected events see item 3b).

Does your paper address subitem 5-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No updates have been made since the start of the intervention - when the questionnaire first was emailed.

5-iv) Quality assurance methods

Provide information on quality assurance methods to ensure accuracy and quality of information provided [1], if applicable.

Does your paper address subitem 5-iv?

|) | CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form |
|---|---|
| | "The questionnaire was pilot tested by the target group and by the research unit at Karolinska Institutet" |
| | "Most questionnaire sections used validated items from previous research" |
| | "Nationally leading experts in respective health area of the questionnaire quality assured the content (questions and |
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| | 5-v) Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used |
| ١ | Ensure replicability by publishing the source code, and/or providing screenshots/screen-capture video, and/or providing flowcharts of the algorithms used. Replicability (i.e., other researchers should in principle be able to replicate the study) is a hallmark of scientific reporting. |
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| | Does your paper address subitem 5-v? |
| t | Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study |
| | Flow charts and screen shots have been provided as figures in the manuscript. |
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| | 5-vi) Digital preservation |
| l | Digital preservation: Provide the URL of the application, but as the intervention is likely to change or |

Digital preservation: Provide the URL of the application, but as the intervention is likely to change or disappear over the course of the years; also make sure the intervention is archived (Internet Archive, webcitation.org, and/or publishing the source code or screenshots/videos alongside the article). As pages behind login screens cannot be archived, consider creating demo pages which are accessible without login.

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Does your paper address subitem 5-vi?

| The website is not available. It was only available/active during study. |
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5-vii) Access

Access: Describe how participants accessed the application, in what setting/context, if they had to pay (or were paid) or not, whether they had to be a member of specific group. If known, describe how participants obtained "access to the platform and Internet" [1]. To ensure access for editors/reviewers/readers, consider to provide a "backdoor" login account or demo mode for reviewers/readers to explore the application (also important for archiving purposes, see vi).



Does your paper address subitem 5-vii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The employees were emailed a questionnaire (URL) with personal login details (username and password) and instructions on how to proceed to the questionnaire".

"which the participants could visit at any time using their personal login details".

5-viii) Mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework

Describe mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description of the content (including where it is coming from and who developed it) [1]," whether [and how] it is tailored to individual circumstances and allows users to track their progress and receive feedback" [6]. This also includes a description of communication delivery channels and – if computer-mediated communication is a component – whether communication was synchronous or asynchronous [6]. It also includes information on presentation strategies [1], including page design principles, average amount of text on pages, presence of hyperlinks to other resources, etc. [1].



Does your paper address subitem 5-viii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The three helplines that were offered were: 1) The Quit-Smoking-Helpline, 2) The Alcohol-Helpline, and 3) The Diet and Exercise Helpline. The helplines for smoking and alcohol are well-established public helplines in Sweden [21]. The Diet and Exercise Helpline was developed for this study. All helplines used counselors that were specifically trained to work effectively with behaviour changes using traditional counseling approaches such as the Motivational Interviewing technique [22] and TTM [16]"...

5-ix) Describe use parameters

Describe use parameters (e.g., intended "doses" and optimal timing for use). Clarify what

| instructions or recommendations were given to the user, e.g., regarding timing, | frequency, |
|---|------------|
| heaviness of use, if any, or was the intervention used ad libitum. | |

Does your paper address subitem 5-ix?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The interventions, the tailored web-based health feedback (saved on the website) and the telephone coaching services were available during nine months".

The participants could login at any time during this time period.

5-x) Clarify the level of human involvement

Clarify the level of human involvement (care providers or health professionals, also technical assistance) in the e-intervention or as co-intervention (detail number and expertise of professionals involved, if any, as well as "type of assistance offered, the timing and frequency of the support, how it is initiated, and the medium by which the assistance is delivered". It may be necessary to distinguish between the level of human involvement required for the trial, and the level of human involvement required for a routine application outside of a RCT setting (discuss under item 21 – generalizability).

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subitem not at all important O O O essential

Does your paper address subitem 5-x?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The questionnaire with tailored web-based feedback was fully automated. The telephone coaching was assisted by trained health counsellors"...

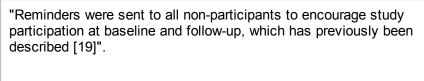
5-xi) Report any prompts/reminders used

Report any prompts/reminders used: Clarify if there were prompts (letters, emails, phone calls, SMS) to use the application, what triggered them, frequency etc. It may be necessary to distinguish between the level of prompts/reminders required for the trial, and the level of prompts/reminders for a routine application outside of a RCT setting (discuss under item 21 – generalizability).

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subitem not at all important O O O essential

Does your paper address subitem 5-xi? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study



5-xii) Describe any co-interventions (incl. training/support)

Describe any co-interventions (incl. training/support): Clearly state any interventions that are provided in addition to the targeted eHealth intervention, as ehealth intervention may not be designed as stand-alone intervention. This includes training sessions and support [1]. It may be necessary to distinguish between the level of training required for the trial, and the level of training for a routine application outside of a RCT setting (discuss under item 21 – generalizability.

Does your paper address subitem 5-xii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"When the questionnaire URL was emailed, the participants were randomly assigned one of three conditions: A) questionnaire, or B) questionnaire + tailored web-based health feedback, or C) questionnaire + tailored web-based health feedback + telephone health coaching".

"A helpdesk was administered by the research group and the web company if participants needed any help to access or use the

6a) Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed

Does your paper address CONSORT subitem 6a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Outcomes were measured at baseline and follow-up. See flowchart.

All outcomes were self-assessed through the web-based questionnaire.

In details, our primary outcome was BMI (kg/m2), computed by dividing the body weight (in kilograms) by the height (in meters)

6a-i) Online questionnaires: describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed

If outcomes were obtained through online questionnaires, describe if they were validated for online use and apply CHERRIES items to describe how the questionnaires were designed/deployed [9].

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subitem not at all important O O O essential

Does your paper address subitem 6a-i?

assess lunch intake, by allowing the participants to complete a typical lunch meal by dragging pictures of food items to a virtual food plate. This interactive food plate has been validated and described previously [14]. Alcohol consumption was studied using the Alcohol Use Disorders Identification Test, AUDIT-C [23] and tobacco use was assessed using validated questionnaires provided by the Quit-Smoking-Helpline (see below). We also inquired about the average numbers of hours per week devoted to

6a-ii) Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored

Describe whether and how "use" (including intensity of use/dosage) was defined/measured/monitored (logins, logfile analysis, etc.). Use/adoption metrics are important process outcomes that should be reported in any ehealth trial.

Does your paper address subitem 6a-ii?

Copy and paste relevant sections from manuscript text

"We did not track the participants' log ins to the tailored website enclosing the personal health feedback, which would have allowed us to study the participants' use of the website".

6a-iii) Describe whether, how, and when qualitative feedback from participants was obtained

Describe whether, how, and when qualitative feedback from participants was obtained (e.g., through emails, feedback forms, interviews, focus groups).

Does your paper address subitem 6a-iii?

Copy and paste relevant sections from manuscript text

"The participants in group C received telephone coaching in addition to web-based tailored health feedback, if their reported health habits did not meet the national guidelines, or if they reported a motivation or willingness to change health habits (same conditions as for web-based health feedback). If the participants were referred to telephone coaching, they could either leave their

6b) Any changes to trial outcomes after the trial commenced, with reasons

Does your paper address CONSORT subitem 6b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

| No changes were made after the trial commenced. | | | | | |
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7a) How sample size was determined

NPT: When applicable, details of whether and how the clustering by care provides or centers was addressed

7a-i) Describe whether and how expected attrition was taken into account when calculating the sample size

Describe whether and how expected attrition was taken into account when calculating the sample size.

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Does your paper address subitem 7a-i?

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Sample size was computed in order to detect a pre-specified effect size delta (computed as [largest_mean - smallest_mean]/sigma) equal to 0.3 on the main outcome, BMI, in our main analysis (ANOVA), with a power higher than 80%, and assuming that 80% of the subjects involved would have withdrawn from the study. We have verified that the chosen sample size ensures adequate power (>80%) also in the secondary outcomes in the main analyses.

7b) When applicable, explanation of any interim analyses and stopping guidelines

| Does yo | ur paper | address | CONSORT | subitem | 7b? | * |
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Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

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8a) Method used to generate the random allocation sequence

NPT: When applicable, how care providers were allocated to each trial group

Does your paper address CONSORT subitem 8a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"All employees with an email address were eligible for the study. The participant lists was given to the web company, which was responsible for distributing the questionnaires. Randomization lists were automatically created by the web company prior to distributing the questionnaire URL".

8b) Type of randomisation; details of any restriction (such as blocking and block size)

Does your paper address CONSORT subitem 8b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

| Within each company, simple 1:1: | 1 randomization was | performed |
|-------------------------------------|---------------------|-----------|
| with no stratification or blocking. | | |

9) Mechanism used to implement the random

allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned

Does your paper address CONSORT subitem 9? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

| "Randomization lists were automatically | created by the web company |
|--|----------------------------|
| prior to distributing the questionnaire UR | ₹L" |

10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

Does your paper address CONSORT subitem 10? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Randomization lists were automatically created by the web company prior to distributing the questionnaire URL"

"The company Netsurvey AB was responsible for randomization".

See: http://www.netsurvey.se/en/ for company information.

11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how

NPT: Whether or not administering co-interventions were blinded to group assignment

11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).



| Does your pape | r address | subitem | 11a-i? |
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Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

After assignment to the interventions, the participants were blinded to the interventions (A, B, C).

11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator".

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subitem not at all important \(\cap \) \(\old \) \(\old \) essential







Does your paper address subitem 11a-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The participants did not know about the different interventions when they started the study.

All participants received intervention C at follow-up - to meet the requirements by The Ethics Committee of the Karolinska Institutet, Stockholm, Sweden.

11b) If relevant, description of the similarity of interventions

(this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

Does your paper address CONSORT subitem 11b? *

| N/A | | | |
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12a) Statistical methods used to compare groups for primary and secondary outcomes

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

Does your paper address CONSORT subitem 12a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

We studied if differences in participants' reported health habits at baseline and follow-up varied across the three groups (A vs. B vs. C). Chi-square tests were performed to study possible differences in categorical variables, and ANOVA (or Kruskal Wallis) for continuous variables.

Generalized Estimating Equation (GEE) regression models

12a-i) Imputation techniques to deal with attrition / missing values

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

Does your paper address subitem 12a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Only those who participated at both baseline and follow-up were considered for analyses".

12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

Does your paper address CONSORT subitem 12b? *

| see 12 a |
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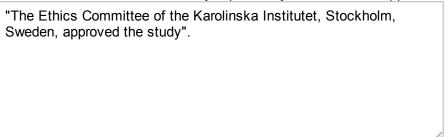
X26) REB/IRB Approval and Ethical Considerations [recommended as subheading under "Methods"] (not a CONSORT item)

X26-i) Comment on ethics committee approval



Does your paper address subitem X26-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study



x26-ii) Outline informed consent procedures

Outline informed consent procedures e.g., if consent was obtained offline or online (how? Checkbox, etc.?), and what information was provided (see 4a-ii). See [6] for some items to be included in informed consent documents.



Does your paper address subitem X26-ii?

"Participant information and informed consent documentation were given online by the participants' as part of the welcome and information letter provided in the starting procedure of the questionnaire".

X26-iii) Safety and security procedures

Safety and security procedures, incl. privacy considerations, and any steps taken to reduce the likelihood or detection of harm (e.g., education and training, availability of a hotline)

Does your paper address subitem X26-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The employees were emailed a questionnaire (URL) with personal login details (username and password)"

"A helpdesk was administered by the research group and the web company if participants needed any help to access or use the website, or had any questions regarding the content of the feedback".

RESULTS

13a) For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome

NPT: The number of care providers or centers performing the intervention in each group and the number of patients treated by each care provider in each center

Does your paper address CONSORT subitem 13a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

They were randomly assigned either a: A) questionnaire (498 answered, 40%), or B) questionnaire + tailored web-based health feedback (482 answered, 37%), or C) questionnaire + tailored web-based health feedback + telephone coaching (493 answered, 37%).

13b) For each group, losses and exclusions after randomisation, together with reasons

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

N/A "Only those who participated at both baseline and follow-up were considered for analyses".

13b-i) Attrition diagram

Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the intervention/comparator in each group plotted over time, similar to a survival curve) or other figures or tables demonstrating usage/dose/engagement.



Does your paper address subitem 13b-i?

Copy and paste relevant sections from the manuscript or cite the figure number if applicable (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study considered for analyses".

"We have previously presented results on response rate in the present study, suggesting that the overall response rate may be vulnerable to specific occupational groups with less screen time, season of study, and the possibility to participate during work hours [19]".

See: Svensson et al. The effect of reminders in a web-based

14a) Dates defining the periods of recruitment and follow-up

Does your paper address CONSORT subitem 14a? *

"Between September and December 2008, we asked 3,876 employees (18-65 years) at four transportation companies in the Swedish railway industry to complete a web-based lifestyle questionnaire".

"The interventions, the tailored web-based health feedback (saved on the website) and the telephone coaching services were available during nine months".

14a-i) Indicate if critical "secular events" fell into the study period

Indicate if critical "secular events" fell into the study period, e.g., significant changes in Internet resources available or "changes in computer hardware or Internet delivery resources"

Does your paper address subitem 14a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study



14b) Why the trial ended or was stopped (early)

Does your paper address CONSORT subitem 14b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

| N/A. | | | |
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15) A table showing baseline demographic and clinical characteristics for each group

NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and centers (volume) in each group

Does your paper address CONSORT subitem 15? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this"

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| information not in the ms, | or briefly ex | plain why | the item is no | t applicable, | /relevant for | your study |

| Table 1 provides demographic and basic characteristics. | | | | | | | | |
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15-i) Report demographics associated with digital divide issues

In ehealth trials it is particularly important to report demographics associated with digital divide issues, such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the participants, if known.

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| subitem not at all important | \bigcirc | | • | | | essential |

Does your paper address subitem 15-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

| Yes. Table 1 provides demographic and basic characteristics related to this subitem. |
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16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups

16-i) Report multiple "denominators" and provide definitions

Report multiple "denominators" and provide definitions: Report N's (and effect sizes) "across a range of study participation [and use] thresholds" [1], e.g., N exposed, N consented, N used more than x times, N used more than y weeks, N participants "used" the intervention/comparator at specific pre-defined time points of interest (in absolute and relative numbers per group). Always clearly define "use" of the intervention.

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Does your paper address subitem 16-i? *

""Among the 981 employees who participated at both baseline and follow-up, 357 (36.4%) represented group A, 301 (30.7%) group B and 324 (33%) group C"...

"Upon referral, 173 (53%), 23 (7%), and 19 (6%) participants reported a wish to be dialed by, or to dial themselves to the Diet and Exercise Helpline, the Quit-Smoking-Helpline, and the Alcohol-Helpline, respectively. Out of these, 77 (45%) participants

16-ii) Primary analysis should be intent-to-treat

Primary analysis should be intent-to-treat, secondary analyses could include comparing only "users", with the appropriate caveats that this is no longer a randomized sample (see 18-i).

Does your paper address subitem 16-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Only those who participated at both baseline and follow-up were considered for analyses".

"We have previously presented results on response rate in the present study, suggesting that the overall response rate may be vulnerable to specific occupational groups with less screen time, season of study, and the possibility to participate during work hours [19]".

17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)

Does your paper address CONSORT subitem 17a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

For continuous outcomes, effect sizes were computed in terms of eta-squared. 95% confidence intervals are reported.

BMI (kg/m2) eta-squared: 0.0020762 95%

C.I. (0;0.0100158)
eating breakfast (days/week) N.A. Kruskal Wallis used instead of ANOVA
carbohydrates intake (gr/day) eta-squared: 0.0046229
95% C.I. (0;0.0154133)

17a-i) Presentation of process outcomes such as metrics of use and intensity of use

In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure metrics such as "average session length". These must be accompanied by a technical description how a metric like a "session" is defined (e.g., timeout after idle time) [1] (report under item 6a).

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Does your paper address subitem 17a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

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| See 17a | | | |
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17b) For binary outcomes, presentation of both absolute and relative effect sizes is recommended

Does your paper address CONSORT subitem 17b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

```
"do not know" VS "often", "mostly", "always") V = 0.0575
number of occasions of alcohol consumption ("never", "1 time/m or less", "2-3 times/month", "2-3 times/week", "≥4-6 times/week") V = 0.0653
number of glasses during a typical alcohol occasion ("1-2 glasses", "3-4 glasses" VS "≥ 5 glasses") V = 0.0604
smoke ("daily", "sometimes" VS "no") V = 0.0378
snus ("daily", "sometimes" VS "no") V = 0.0200
```

18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory

Does your paper address CONSORT subitem 18? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Our results from the GEE-models support no significant changes over time for the various reported health aspects at baseline and follow-up, or between the three groups. However, our results suggest significant increases in days of eating breakfast (p<0.001), days of physical activity per week (p=0.002), and decreases in sugar intake (p<0.001) at follow-up with no statistically significant differences regarding type of interventions (group B or C)."

18-i) Subgroup analysis of comparing only users

A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii).

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Does your paper address subitem 18-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

19) All important harms or unintended effects in each group

(for specific guidance see CONSORT for harms)

Does your paper address CONSORT subitem 19? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The employees were emailed a questionnaire (URL) with personal login details (username and password) and instructions on how to proceed to the questionnaire. Participant information and informed consent documentation were given online by the participants' as part of the welcome and information letter provided in the starting procedure of the questionnaire".

19-i) Include privacy breaches, technical problems

Include privacy breaches, technical problems. This does not only include physical "harm" to participants, but also incidents such as perceived or real privacy breaches [1], technical problems, and other unexpected/unintended incidents. "Unintended effects" also includes unintended positive effects [2].

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Does your paper address subitem 19-i?

The questionnaire did not possess any potential harm to the participants.

"A helpdesk was administered by the research group and the web company if participants needed any help to access or use the website, or had any questions regarding the content of the feedback"

19-ii) Include qualitative feedback from participants or observations from staff/researchers

Include qualitative feedback from participants or observations from staff/researchers, if available, on strengths and shortcomings of the application, especially if they point to unintended/unexpected effects or uses. This includes (if available) reasons for why people did or did not use the application as intended by the developers.

Does your paper address subitem 19-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study



DISCUSSION

22) Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence

NPT: In addition, take into account the choice of the comparator, lack of or partial blinding, and unequal expertise of care providers or centers in each group

22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use)

Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).

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subitem not at all important O O O essential

Does your paper address subitem 22-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

health feedback on increased motivation to change behaviors. More specifically, the intervention groups at baseline reported higher motivation to improve dietary and physical activity habits compared to group A, receiving no health feedback. At follow-up, all groups received health feedback including group A, but only group A reported an increased motivation to change dietary and physical activity habits. It may thus be proposed that tailored health feedback positively alters participants' willingness to

22-ii) Highlight unanswered new questions, suggest future research

Highlight unanswered new questions, suggest future research.

Does your paper address subitem 22-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Future research is recommended to further study the effects on motivation with respect to short term and long term effects".

20) Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses

20-i) Typical limitations in ehealth trials

Typical limitations in ehealth trials: Participants in ehealth trials are rarely blinded. Ehealth trials often look at a multiplicity of outcomes, increasing risk for a Type I error. Discuss biases due to non-use of the intervention/usability issues, biases through informed consent procedures, unexpected events.

Does your paper address subitem 20-i? *

"The limited advertisement of the telephone helplines in the present study should also be highlighted".

"We did not track the participants' log ins to the tailored website enclosing the personal health feedback, which would have allowed us to study the participants' use of the website".

"The method of using the web to deliver health interventions seems however appropriate for our study population".

21) Generalisability (external validity, applicability) of the trial findings

NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations



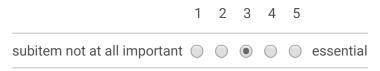
Does your paper address subitem 21-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"It must be acknowledged, however, that our participants represented mostly middle-aged men working in the railway industry. Extending our findings to other populations is therefore difficult".

21-ii) Discuss if there were elements in the RCT that would be different in a routine application setting

Discuss if there were elements in the RCT that would be different in a routine application setting (e.g., prompts/reminders, more human involvement, training sessions or other co-interventions) and what impact the omission of these elements could have on use, adoption, or outcomes if the intervention is applied outside of a RCT setting.



Does your paper address subitem 21-ii?

| This subitem is somewhat emphasized throughout the discussion section. | |
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OTHER INFORMATION

23) Registration number and name of trial registry

Does your paper address CONSORT subitem 23? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

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24) Where the full trial protocol can be accessed, if available

Does your paper address CONSORT subitem 24? *

Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

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25) Sources of funding and other support (such as supply of drugs), role of funders

Does your paper address CONSORT subitem 25? *

"The study was financially supported by the Swedish Transport Administration, the Erik and Edith Fernstrom's foundation, Sven and Dagmar Saléns foundation, and the regional agreement on medical training and clinical research between Stockholm County Council and Karolinska Institutet, Sweden".

X27) Conflicts of Interest (not a CONSORT item)

X27-i) State the relation of the study team towards the system being evaluated

In addition to the usual declaration of interests (financial or otherwise), also state the relation of the study team towards the system being evaluated, i.e., state if the authors/evaluators are distinct from or identical with the developers/sponsors of the intervention.

Does your paper address subitem X27-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The authors disclose no conflicts of interest.

About the CONSORT EHEALTH checklist

As a result of using this checklist, did you make changes in your manuscript? *

- yes, major changes
- yes, minor changes
- no

What were the most important changes you made as a result of using this checklist?

Changes to the methods section such as clarifrying the methods (recruitment, the interventions, how the questionnaire was developed and by whom). Some details were added to the results section.

How much time did you spend on going through the checklist INCLUDING making changes

| 0 | CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form |
|---|--|
| | in your manuscript * |
| | 8 hours |
| | As a result of using this checklist, do you think your manuscript has improved? * |
| | yes |
| | ○ no |
| | ○ Övrigt: |
| | Would you like to become involved in the CONSORT EHEALTH group? This would involve for example becoming involved in participating in a workshop and writing an "Explanation and Elaboration" document |
| | yes |
| | O no |
| | ○ Övrigt: |
| | Any other comments or questions on CONSORT EHEALTH |
| | Thanks for good job! |
| | I think the Consort Ehealth is an excellent way to quality assure ehealth research. |
| | Sincerely, Madeleine Solenhill |
| | |
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