|  |  |  |  |
| --- | --- | --- | --- |
| **Section/topic** | **#** | **Checklist item** | **Reported on page #** |
| **TITLE** | | |  |
| Title | 1 | Identify the report as a systematic review, meta-analysis, or both. **Publication identified as a systematic review in Title.** | 1 |
| **ABSTRACT** | | |  |
| Structured summary | 2 | Provide a structured summary including, as applicable: background; objectives; data sources; study eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; limitations; conclusions and implications of key findings; systematic review registration number. **Structured abstract presented with the following sections: AIM, METHODS, RESULTS, CONCLUSION. This is per the editor’s guidelines for a structured abstract for a systematic review in World Journal of Gastrointestinal Endoscopy.** | 4-5 |
| **INTRODUCTION** | | |  |
| Rationale | 3 | Describe the rationale for the review in the context of what is already known. **Introduction states rationale: “This work systematically reviews ERCP during pregnancy, with a particular focus on differences between the pregnant versus non-pregnant patient…..”** | 8 |
| Objectives | 4 | Provide an explicit statement of questions being addressed with reference to participants, interventions, comparisons, outcomes, and study design (PICOS). Introduction specifies objectives: **“focus on differences between the pregnant versus non-pregnant patient in patient indications, patient preparation, procedural medications, complications, reducing fetal radiation exposure, and maternal and fetal outcomes.”** | 8 |
| **METHODS** | | |  |
| Protocol and registration | 5 | Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and, if available, provide registration information including registration number. | N/A |
| Eligibility criteria | 6 | Specify study characteristics (e.g., PICOS, length of follow-up) and report characteristics (e.g., years considered, language, publication status) used as criteria for eligibility, giving rationale. **Statement on criteria: “Two clinicians independently reviewed the literature, and decided on which articles to incorporate in this review based on priority as determined by consensus. Large clinical trials, meta-analyses, systematic reviews, and controlled trials were assigned a higher priority than review articles or small clinical series, and individual case reports….”** | 8 |
| Information sources | 7 | Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched. **Statement on literature search: Systematic computerized literature search was performed using PubMed with the key words ‘ERCP’ and ‘pregnancy’.** | 8 |
| Search | 8 | Present full electronic search strategy for at least one database, including any limits used, such that it could be repeated. **Statement on literature search: Systematic computerized literature search was performed using PubMed with the key words ‘ERCP’ and ‘pregnancy’.** | 8 |
| Study selection | 9 | State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if applicable, included in the meta-analysis). . **Statement on criteria: “Two clinicians independently reviewed the literature, and decided on which articles to incorporate in this review based on priority as determined by consensus. Large clinical trials, meta-analyses, systematic reviews, and controlled trials were assigned a higher priority than review articles or small clinical series, and individual case reports….”** | 8 |
| Data collection process | 10 | Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any processes for obtaining and confirming data from investigators. **Statement: Data were extracted independently by 2 authors to prevent errors in data extraction.** | 8 |
| Data items | 11 | List and define all variables for which data were sought (e.g., PICOS, funding sources) and any assumptions and simplifications made. **No funding sources specified on title page.** | 5, 6 |
| Risk of bias in individual studies | 12 | Describe methods used for assessing risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis. | - |
| Summary measures | 13 | State the principal summary measures (e.g., risk ratio, difference in means). Risk ratio and differences in means not discussed. | NA |
| Synthesis of results | 14 | Describe the methods of handling data and combining results of studies, if done, including measures of consistency (e.g., I2) for each meta-analysis. **Not applicable, this is a systematic review and not a meta-analysis.** | NA |

Page 1 of 2

|  |  |  |  |
| --- | --- | --- | --- |
| **Section/topic** | **#** | **Checklist item** | **Reported on page #** |
| Risk of bias across studies | 15 | Specify any assessment of risk of bias that may affect the cumulative evidence (e.g., publication bias, selective reporting within studies). | 18 |
| Additional analyses | 16 | Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were pre-specified. | N/A |
| **RESULTS** | | |  |
| Study selection | 17 | Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for exclusions at each stage, ideally with a flow diagram. | 8 |
| Study characteristics | 18 | For each study, present characteristics for which data were extracted (e.g., study size, PICOS, follow-up period) and provide the citations. **Study size, and follow-up period of studies provided in Results for all studies. All studies cited in Results and listed in references.** | Tables 3 & 4 |
| Risk of bias within studies | 19 | Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12). | - |
| Results of individual studies | 20 | For all outcomes considered (benefits or harms), present, for each study: (a) simple summary data for each intervention group (b) effect estimates and confidence intervals, ideally with a forest plot. **Summary data provided for all studies. This study is a systematic review and not a meta-analysis. Therefore, forest plots are not applicable.** | Tables 3 & 4 |
| Synthesis of results | 21 | Present results of each meta-analysis done, including confidence intervals and measures of consistency. This systematic review is not a meta-analysis and therefore these data are not applicable. | NA |
| Risk of bias across studies | 22 | Present results of any assessment of risk of bias across studies (see Item 15). | 18-19 |
| Additional analysis | 23 | Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see Item 16]). **This study is a systematic review and not a meta-analysis, and therefore this data request is not applicable.** | NA |
| **DISCUSSION** | | |  |
| Summary of evidence | 24 | Summarize the main findings including the strength of evidence for each main outcome; consider their relevance to key groups (e.g., healthcare providers, users, and policy makers). | 15-17 |
| Limitations | 25 | Discuss limitations at study and outcome level (e.g., risk of bias), and at review-level (e.g., incomplete retrieval of identified research, reporting bias). | 14, 17 |
| Conclusions | 26 | Provide a general interpretation of the results in the context of other evidence, and implications for future research. | 15-17 |
| **FUNDING** | | |  |
| Funding | 27 | Describe sources of funding for the systematic review and other support (e.g., supply of data); role of funders for the systematic review. **This systematic review states specifically that no funding was provided for this study.** | See conflict of interest statement |

*From:*  Moher D, Liberati A, Tetzlaff J, Altman DG, The PRISMA Group (2009). Preferred Reporting Items for Systematic Reviews and Meta-Analyses: The PRISMA Statement. PLoS Med 6(6): e1000097. doi:10.1371/journal.pmed1000097

For more information, visit: **www.prisma-statement.org**.

Page 2 of 2