STROBE Statement— Rescue from Complications after Pancreaticoduodenectomies at a Low-Volume Caribbean Center: Value of Tailored Peri-Pancreatectomy Protocols

Item No Recommendation Title and abstract 1 (a) Indicate the study's design with a commonly used term in the title or the P1 abstract (b) Provide in the abstract an informative and balanced summary of what was P2 done and what was found Introduction 2 Explain the scientific background and rationale for the investigation being P1 Background/rationale 3 State specific objectives, including any prespecified hypotheses P1 Objectives Methods 4 Study design Present key elements of study design early in the paper P2 5 Setting Describe the setting, locations, and relevant dates, including periods of P2 recruitment, exposure, follow-up, and data collection **Participants** 6 (a) Cohort study—Give the eligibility criteria, and the sources and methods of P2 selection of participants. Describe methods of follow-up Case-control study—Give the eligibility criteria, and the sources and methods of case ascertainment and control selection. Give the rationale for the choice of cases and controls Cross-sectional study—Give the eligibility criteria, and the sources and methods of selection of participants (b) Cohort study—For matched studies, give matching criteria and number of P3 exposed and unexposed Case-control study—For matched studies, give matching criteria and the number of controls per case Variables 7 Clearly define all outcomes, exposures, predictors, potential confounders, and P2 effect modifiers. Give diagnostic criteria, if applicable 8* P2Data sources/ For each variable of interest, give sources of data and details of methods of measurement assessment (measurement). Describe comparability of assessment methods if there is more than one group Bias Describe any efforts to address potential sources of bias NA 10 P2 Study size Explain how the study size was arrived at Quantitative variables Explain how quantitative variables were handled in the analyses. If applicable, P2 11 describe which groupings were chosen and why Statistical methods 12 (a) Describe all statistical methods, including those used to control for P2 confounding (b) Describe any methods used to examine subgroups and interactions (c) Explain how missing data were addressed P2 (d) Cohort study—If applicable, explain how loss to follow-up was addressed P2 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 P3 (e) Describe any sensitivity analyses

| 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 | Р3 |
|------------------|-----|---|----|
| | | | |
| | | | |
| | | (b) Give reasons for non-participation at each stage | Р3 |
| | | (c) Consider use of a flow diagram | NA |
| Descriptive | 14* | (a) Give characteristics of study participants (eg demographic, clinical, social) and | Р3 |
| data | | information on exposures and potential confounders | |
| | | (b) Indicate number of participants with missing data for each variable of interest | Р3 |
| | | (c) Cohort study—Summarise follow-up time (eg, average and total amount) | |
| Outcome data | 15* | Cohort study—Report numbers of outcome events or summary measures over time | Р3 |
| | | 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 | |
| Main results | 16 | (a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their | P3 |
| | | precision (eg, 95% confidence interval). Make clear which confounders were adjusted | |
| | | for and why they were included | |
| | | (b) Report category boundaries when continuous variables were categorized | |
| | | (c) If relevant, consider translating estimates of relative risk into absolute risk for a | NA |
| | | meaningful time period | |
| Other analyses | 17 | Report other analyses done—eg analyses of subgroups and interactions, and sensitivity | P3 |
| | | analyses | |
| Discussion | | | |
| Key results | 18 | Summarise key results with reference to study objectives | P4 |
| Limitations | 19 | Discuss limitations of the study, taking into account sources of potential bias or | P6 |
| | | imprecision. Discuss both direction and magnitude of any potential bias | |
| Interpretation | 20 | Give a cautious overall interpretation of results considering objectives, limitations, | P5 |
| | | multiplicity of analyses, results from similar studies, and other relevant evidence | |
| Generalisability | 21 | Discuss the generalisability (external validity) of the study results | P5 |
| | | | |

Other information

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Funding

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.

applicable, for the original study on which the present article is based

Give the source of funding and the role of the funders for the present study and, if

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^{*}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.