

Reporting checklist for cohort study.

Based on the STROBE cohort guidelines.

Instructions to authors

Complete this checklist by entering the page numbers from your manuscript where readers will find each of the items listed below.

Your article may not currently address all the items on the checklist. Please modify your text to include the missing information. If you are certain that an item does not apply, please write "n/a" and provide a short explanation.

Upload your completed checklist as an extra file when you submit to a journal.

In your methods section, say that you used the STROBE cohortreporting guidelines, and cite them as:

von Elm E, Altman DG, Egger M, Pocock SJ, Gotsche PC, Vandembroucke JP. The Strengthening the Reporting of Observational Studies in Epidemiology (STROBE) Statement: guidelines for reporting observational studies.

			Page
Reporting Item			Number
Title and abstract			
Title	#1a	Indicate the study’s design with a commonly used term in the title or the abstract	1
Abstract	#1b	Provide in the abstract an informative and balanced summary of what was done and what was found	2
Introduction			
Background / rationale	#2	Explain the scientific background and rationale for the investigation being reported	3
Objectives	#3	State specific objectives, including any prespecified hypotheses	3
Methods			
Study design	#4	Present key elements of study design early in the paper	4

Setting	#5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	4
Eligibility criteria	#6a	Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up.	4
Eligibility criteria	#6b	For matched studies, give matching criteria and number of exposed and unexposed	-
Variables	#7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	4
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. Give information separately for for exposed and unexposed groups if applicable.	4
Bias	#9	Describe any efforts to address potential sources of bias	
Study size	#10	Explain how the study size was arrived at	4
Quantitative variables	#11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen, and why	4-5
Statistical methods	#12a	Describe all statistical methods, including those used to control for confounding	4-5
Statistical methods	#12b	Describe any methods used to examine subgroups and interactions	4-5
Statistical methods	#12c	Explain how missing data were addressed	5
Statistical methods	#12d	If applicable, explain how loss to follow-up was addressed	n/a
Statistical methods	#12e	Describe any sensitivity analyses	n/a

Results

Participants	#13a	Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible,	5
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included in the study, completing follow-up, and analysed. Give information separately for exposed and unexposed groups if applicable.

Participants	#13b	Give reasons for non-participation at each stage	5
Participants	#13c	Consider use of a flow diagram	n/a
Descriptive data	#14a	Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders. Give information separately for exposed and unexposed groups if applicable.	5
Descriptive data	#14b	Indicate number of participants with missing data _Table 2_ for each variable of interest	
Descriptive data	#14c	Summarise follow-up time (eg, average and total amount)	n/a
Outcome data	#15	Report numbers of outcome events or summary measures over time. Give information separately for exposed and unexposed groups if applicable.	
Main results	#16a	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	5
Main results	#16b	Report category boundaries when continuous variables were categorized	
Main results	#16c	If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	
Other analyses	#17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	5-6

Discussion

Key results	#18	Summarise key results with reference to study objectives	6
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.	7-8
Interpretation	#20	Give a cautious overall interpretation considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence.	7-8
Generalisability	#21	Discuss the generalisability (external validity) of the study results	8

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
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None The STROBE checklist is distributed under the terms of the Creative Commons Attribution License CC-BY. This checklist can be completed online using <https://www.goodreports.org/>, a tool made by the [EQUATOR Network](#) in collaboration with [Penelope.ai](#)

Fibromyalgia and Pain Survey

2016 Revisions to the 2010/2011 fibromyalgia diagnostic criteria (1)

Question 1

Have you had pain more days than not during the last 3 months?

☐ Yes ☐ No

If you checked yes, please proceed to question 2. If you checked no, the survey is complete.

Question 2

Please select all the areas you have had pain in during the past 3 months.

- ☐ Left shoulder, left upper arm and/or left lower arm
- ☐ Left hip or buttock, left upper leg and/or left lower leg
- ☐ Right shoulder, right upper arm and/or right lower arm
- ☐ Right hip or buttock, right upper leg and/or right lower leg
- ☐ Neck, upper back and/or lower back

Question 3

Please select all the areas you have had pain during the past 3 months.

- ☐ Left Jaw
- ☐ Right Jaw
- ☐ Left shoulder
- ☐ Right shoulder
- ☐ Left upper arm (above the elbow and below the shoulder)
- ☐ Right upper arm (above the elbow and below the shoulder)
- ☐ Left lower arm (below the elbow)
- ☐ Right lower arm (below the elbow)

- ☐ Left hip or buttock
- ☐ Right hip or buttock
- ☐ Left upper leg (below the hip and above the knee)
- ☐ Right upper leg (below the hip and above the knee)
- ☐ Left lower leg (below the knee)
- ☐ Right lower leg (below the knee)
- ☐ Neck
- ☐ Upper back
- ☐ Lower back
- ☐ Chest
- ☐ Abdomen

Question 4

For each symptom below, indicate how severe this symptom has been for you during the past week ranging from 0 to 3.

0 means the symptom has not been a problem for you this past week

1 means the symptom has been a slight or mild problem, generally coming and going rather than lasting all the time

2 means the symptom has been moderate causing considerable problems and lasting all the time

3 means the symptom has been severe and continuous and is disturbing your day to day life

Symptom 1: Fatigue (Please only check ONE number)

☐ 0 ☐ 1 ☐ 2 ☐ 3

Symptom 2: Waking unrefreshed (Please only check ONE number)

☐ 0 ☐ 1 ☐ 2 ☐ 3

Symptom 3: Memory issues or lack of concentration (Please only check ONE number)

☐ 0 ☐ 1 ☐ 2 ☐ 3

Question 5

During the past 6 months have you experienced the following symptoms?

1. Headaches

☐ Yes ☐ No

2. Pain or cramps in the lower abdomen

☐ Yes ☐ No

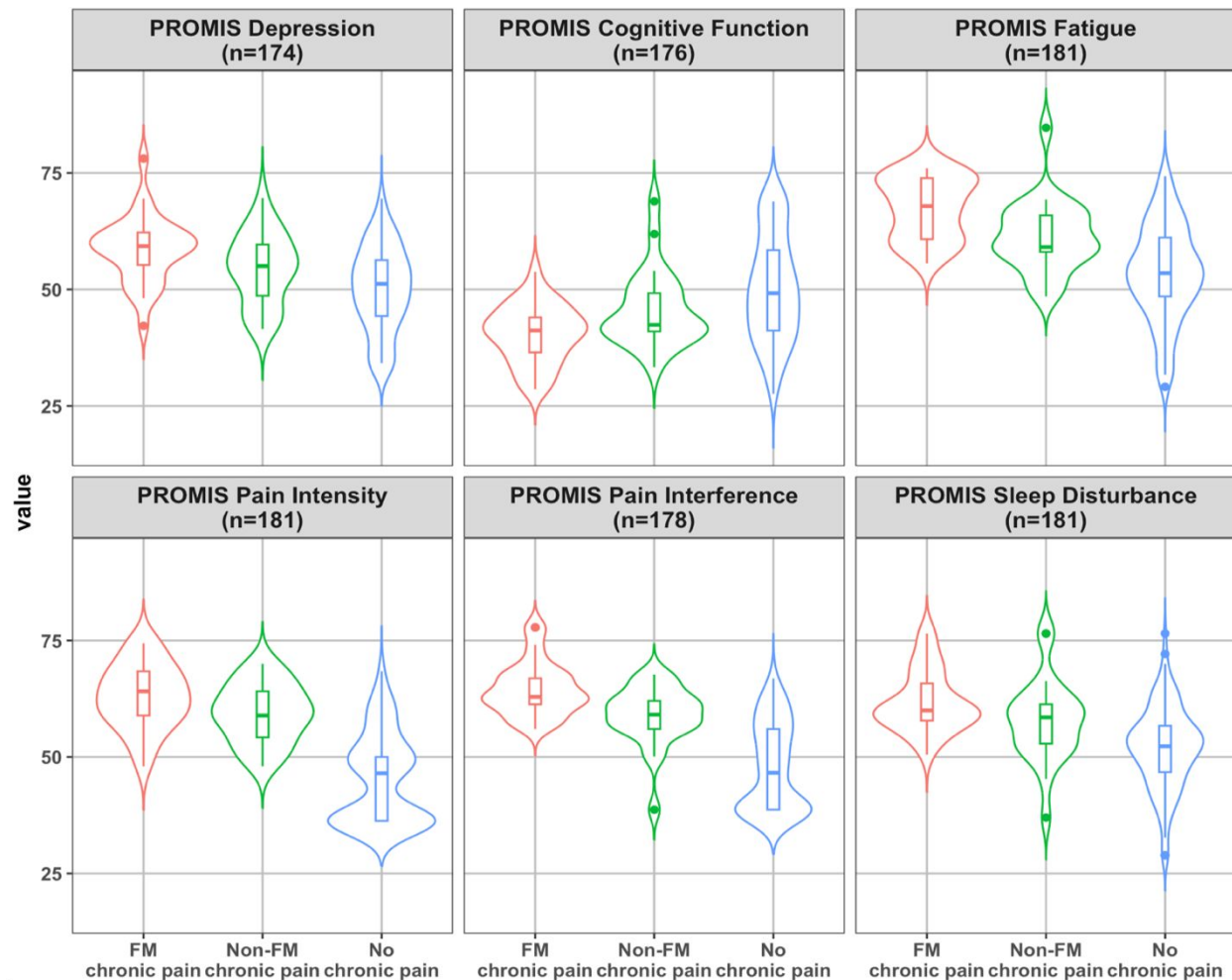
3. Depression

☐ Yes ☐ No

End of Survey. Thank you for your participation!

(1) Wolfe F, Clauw DJ, Fitzcharles MA, et al. 2016 Revisions to the 2010/2011 fibromyalgia diagnostic criteria. *Semin Arthritis Rheum*. Dec 2016;46(3):319-329

Supplementary figure 2. Comparison of PROMIS patient-reported outcome scores by chronic pain group: fibromyalgia (FM) pain, non-FM chronic pain, and no chronic pain



Note: center line in box=median score; pair-wise tests suggest that the no-chronic-pain group is different from both chronic pain groups, and FM and non-FM chronic pain groups are only significantly different for fatigue and cognitive function; small sample size limits meaningful inference.