

Study parameters	18	Report the values, ranges, references, and, if used, probability distributions for all parameters. Report reasons or sources for distributions used to represent uncertainty where appropriate. Providing a table to show the input values is strongly recommended.	0	0	0	0	0	0	0	0	0
Incremental costs and outcomes	19	For each intervention, report mean values for the main categories of estimated costs and outcomes of interest, as well as mean differences between the comparator groups. If applicable, report incremental cost-effectiveness ratios.	0.5	0.5	1	0	0	0.5	0	0	0
Characterizing uncertainty	20a	<i>Single study-based economic evaluation:</i> Describe the effects of sampling uncertainty for the estimated incremental cost and incremental effectiveness parameters, together with the impact of methodological assumptions (such as discount rate, study perspective).	0	0	0	0	0	0	0	0	0
	20b	<i>Model-based economic evaluation:</i> Describe the effects on the results of uncertainty for all input parameters, and uncertainty related to the structure of the model and assumptions.									
Characterizing heterogeneity	21	If applicable, report differences in costs, outcomes, or cost-effectiveness that can be explained by variations between subgroups of patients with different baseline characteristics or other observed variability in effects that are not reducible by more information.	NA	NA	NA	Na	NA	0.5	NA	NA	NA
Discussion											
Findings, limitations, generalizability, and current knowledge	22	Summarise key study findings and describe how they support the conclusions reached. Discuss limitations and the generalisability of the findings and how the findings fit with current knowledge.	0.5	0	0	0	0.5	1	0.5	0	0
Other											
Source of funding	23	Describe how the study was funded and the role of the funder in the identification, design, conduct, and reporting of the analysis. Describe other non-monetary sources of support.	1	0	0	1	0	1	1	0	1
Conflicts of interest	24	Describe any potential for conflict of interest of study contributors in accordance with journal policy. In the absence of a journal policy, we recommend authors comply with International Committee of Medical Journal Editors recommendations.	1	1	1	1	1	0	1	1	1
Scoring			6.5	3.5	6	3	1.5	9	2.5	2	4.5
Sackett			II	IV	IV	IV	IV	III	IV	IV	III
Level of evidence											
<p>Level I: High quality randomized trial or prospective study; testing of previously developed diagnostic criteria on consecutive patients; sensible costs and alternatives; values obtained from many studies with multiway sensitivity analyses; systematic review of Level I RCTs and Level I studies; Level II: Lesser quality RCT; prospective comparative study; retrospective study; untreated controls from an RCT; lesser quality prospective study; development of diagnostic criteria on consecutive patients; sensible costs and alternatives; values obtained from limited studies; with multiway sensitivity analyses; systematic review of Level II studies or Level I studies with inconsistent result; Level III: Case control study (therapeutic and prognostic studies); retrospective comparative study; study of nonconsecutive patients without consistently applied reference "gold" standard; analyses based on limited alternatives and costs and poor estimates; systematic review of Level III studies; Level IV: Case series; case control study (diagnostic studies); poor reference standard; analyses with no sensitivity analyses; Level V: Expert opinion.</p>											