

Appendix B.1. Medical therapy alone extraction form

Author, Year		Study Name		Intervention 1	
PMID*		RefID			
Key Question(s)					
Design †					
Extractor				Comments	

* or Cochrane number

† RCT; Randomized; NRCS, prospective; NRCS, retrospective; Cohort, prospective; Cohort, retrospective

B. ELIGIBILITY CRITERIA AND OTHER CHARACTERISTICS

Inclusion	Exclusion	Did patients refuse and were considered ineligible for other Tx? (If yes, list the other Tx)	Enrollment Years	Multicenter?	Country	Funding source	Definition of asymptomatic disease *	Description of the diagnostic modality#	Comments

* Describe 1) % stenosis 2) how stenosis was diagnosed (imaging modality, measurement method NASCET - ECST) 3) Whether patients were stroke free or not (if not, what was the duration since stroke)

Describe: ICAVL lab, central reading of imaging, 1 or multiple readers, prevalidated Ultrasound lab, reported diagnostic accuracy, confirmatory imaging technique (CTA, MRA, angiography)

C. DESCRIPTION OF INTERVENTIONS (per study protocol) *

Medical Tx										
Anti-PLTs	Dual Anti-PLT	Statins (or other antilipids)	Anti-HT	Anti-coagulants	Lifestyle modification	Smoking cessation	Exercise	Diet	Other	Comments

* Please provide summary statistics for each intervention. If the intervention is mentioned but no summary statistics are provided, then only list intervention. If intervention is not mentioned, use "nd"

D. BASELINE CHARACTERISTICS:

AuthorYear Country PMID	N enrolled (analyzed)	Male, %	Age, y	% age >80 y	HTN, %	AFib/AFlutter, %	% hyper- lipidemia	DM, %	Smokers, % (define)	% CAD	% PVD	% previous TIA	% previous CEA	%≥70% stenosis	% contralateral occlusion	% previous CAS

* Mean±SD. If median, SE, range, IQR, or other, specify these.

Only one of the two rows (CEA or CAS) will be filled for each of these variables.

E. OUTCOMES (all outcomes listed should match one-for-one with outcomes in results sections)

	Specific Outcome	Composite?	Primary outcome?	Definition of Outcome	FU duration	Baseline screening	FU screening, Timepoints	Assessment by Neurologist (Y/N?)
1								
2								
3								
4								

Specific outcomes:

Composite outcomes: (any stroke, MI, death: <30 days; ipsilateral stroke >31 days), (any stroke: <30 days; ipsilateral stroke >31 days), (any stroke, death: <30 days; ipsilateral stroke >31 days), (any adverse event:<30 days), (any stroke, MI, death: <30 days), (any stroke, death: <30 days).

Separate outcomes: Major stroke, Major ipsilateral stroke, Major nonipsilateral stroke, Minor stroke, Minor ipsilateral stroke, Minor nonipsilateral stroke, Death, Cardiac Death, Neurological Death, Other cause of Death, Referral to CEA or CAS, MI, STEMI, Non-STEMI, Fatal MI,

E2. Definitions of components of outcomes:

Stroke	
TIA (time or tissue based definition?)	
major stroke	
MI	
Referral to CEA or CAS	
Restenosis	
other	

F. RESULTS (other reporting)

Author, Year, Country, PMID	Outcome	Intervention	Follow-up in person-years (raw data)	Events (raw data)	Annual Rate as per Raw Data *	Follow-up in person-years (Kaplan Meier estimates)	Events (Kaplan Meier estimates)	Annual Rate as per Kaplan Meier estimates	Quality	Quality issues

* Annualized rate of (No of events/ person-years of follow-up)

Comments on Results	

Author, Year, Country, PMID	Subgroup	Outcome	Intervention	Follow-up in person-years (raw data)	Events (raw data)	Annual Rate as per Raw Data *	Follow-up in person-years (Kaplan Meier estimates)	Events (Kaplan Meier estimates)	Annual Rate as per Kaplan Meier estimates	Quality	Quality issues

G. QUALITY

Study objectives and hypothesis clearly stated? (y/n)	Were inclusion / exclusion Criteria Clear? (y/n)	Consecutive Patients? (y/n/nd)	Was Selection Bias Likely (if yes, explain below)? * (y/n)	Were Interventions Adequately Described? (y/n)	Were the Outcomes Fully Defined? (y/n)	Power calculations described? (y/n/NA)	Dropout rate / Crossover to CEA rate >20%? (y/n/nd/NA)	Outcome ascertainment by neurologist (y/n) (if no, explain below)?	Diagnostic imaging quality characteristics present? (Y/n/nd)	Clear population Description with No Discrepancies (y/n)	Clear Reporting of Results with No Discrepancies (y/n)
Other Issues:											
Overall Quality (A, B, C)											

* Common source of selection bias: non consecutive patients, population of patients deemed eligible for CEA or CAS, population of patients self-selected for medical Tx

H. SUMMARY OF THE STUDY IN NARRATIVE FORM

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