

**CHEERS Checklist****Items to include when reporting economic evaluations of health interventions**

The **ISPOR CHEERS Task Force Report**, *Consolidated Health Economic Evaluation Reporting Standards (CHEERS)—Explanation and Elaboration: A Report of the ISPOR Health Economic Evaluations Publication Guidelines Good Reporting Practices Task Force*, provides examples and further discussion of the 24-item CHEERS Checklist and the CHEERS Statement. It may be accessed via the *Value in Health* or via the ISPOR Health Economic Evaluation Publication Guidelines – CHEERS: Good Reporting Practices webpage: <http://www.ispor.org/TaskForces/EconomicPubGuidelines.asp>

Section/item	Item No	Recommendation	Reported on page No/ line No
<b>Title and abstract</b>			
Title	1	Identify the study as an economic evaluation or use more specific terms such as “cost-effectiveness analysis”, and describe the interventions compared.	1
Abstract	2	Provide a structured summary of objectives, perspective, setting, methods (including study design and inputs), results (including base case and uncertainty analyses), and conclusions.	1
<b>Introduction</b>			
Background and objectives	3	Provide an explicit statement of the broader context for the study. Present the study question and its relevance for health policy or practice decisions.	1
<b>Methods</b>			
Target population and subgroups	4	Describe characteristics of the base case population and subgroups analysed, including why they were chosen.	2-6
Setting and location	5	State relevant aspects of the system(s) in which the decision(s) need(s) to be made.	6
Study perspective	6	Describe the perspective of the study and relate this to the costs being evaluated.	6
Comparators	7	Describe the interventions or strategies being compared and state why they were chosen.	6
Time horizon	8	State the time horizon(s) over which costs and consequences are being evaluated and say why appropriate.	6
Discount rate	9	Report the choice of discount rate(s) used for costs and outcomes and say why appropriate.	8
Choice of health outcomes	10	Describe what outcomes were used as the measure(s) of benefit in the evaluation and their relevance for the type of analysis performed.	7
Measurement of effectiveness	11a	<i>Single study-based estimates:</i> Describe fully the design features of the single effectiveness study and why the single study was a sufficient source of clinical effectiveness data.	7

		of methodological assumptions (such as discount rate, study perspective).	
	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.	8
Characterising 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.	9-11
<b>Discussion</b>			
Study findings, limitations, generalisability, 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.	9-14
<b>Other</b>			
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.	14
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.	

For consistency, the CHEERS Statement checklist format is based on the format of the CONSORT statement checklist

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