# CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating web-based and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 - description of the intervention) may also be applicable for other study designs.

The goal of the CONSORT EHEALTH checklist and guideline is to be

- a) a guide for reporting for authors of RCTs,
- b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the checklist.

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (non-pharmacologic treatment) items.

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE OF THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red \*.

In the textboxes, either copy & paste the relevant sections from your manuscript into this form - please include any quotes from your manuscript in QUOTATION MARKS, or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED).

Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF\_AND\_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE !!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the caption):

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and Mobile Health Interventions

J Med Internet Res 2011;13(4):e126

URL: http://www.jmir.org/2011/4/e126/

doi: 10.2196/jmir.1923 PMID: 22209829

Google에 로그인하여 진행상황을 저장하세요. 자세히 알아보기

\* 표시는 필수 질문임

Your name \*

First Last

Sejun OH

Primary Affiliation (short), City, Country \* University of Toronto, Toronto, Canada

University of Korea, Seoul

Your e-mail address \* abc@gmail.com

wowman@korea.ac.kr

Title of your manuscript \*

Provide the (draft) title of your manuscript.

Rehabilomics Strategies Enabled by Cloud-Based Rehabilitation: A Scoping Review

Name of your App/Software/Intervention \*

If there is a short and a long/alternate name, write the short name first and add the long name in brackets.

Rehabilomics Strategies Enabled by Cloud-Bas

Evaluated Version (if any)

e.g. "V1", "Release 2017-03-01", "Version 2.0.27913"

내 답변

Language(s) \*

What language is the intervention/app in? If multiple languages are available, separate by comma (e.g. "English, French")

English

URL of your Intervention Website or App

e.g. a direct link to the mobile app on app in appstore (itunes, Google Play), or URL of the website. If the intervention is a DVD or hardware, you can also link to an Amazon page.

내 답변

URL of an image/screenshot (optional)

내 답변

Accessibility * Can an enduser access the intervention presently?
access is free and open
access only for special usergroups, not open
access is open to everyone, but requires payment/subscription/in-app purchases
app/intervention no longer accessible
이 기타: Our paper is scoping review.
Primary Medical Indication/Disease/Condition * e.g. "Stress", "Diabetes", or define the target group in brackets after the condition, e.g. "Autism (Parents of children with)", "Alzheimers (Informal Caregivers of)" 내 답변
Primary Outcomes measured in trial * comma-separated list of primary outcomes reported in the trial  Rehabilomics Strategies Enabled by Cloud-Bas
Secondary/other outcomes Are there any other outcomes the intervention is expected to affect? 내 답변

Recommended "Dose" * What do the instructions for users say on how often the app should be used?
Approximately Daily
Approximately Weekly
Approximately Monthly
Approximately Yearly
"as needed"
○ 기타:
Approx. Percentage of Users (starters) still using the app as recommended after * 3 months
unknown / not evaluated
O-10%
11-20%
21-30%
31-40%
41-50%
51-60%
61-70%
71%-80%
81-90%
91-100%
● 기타: None (Scoping review)

Overall, was the app/intervention effective? *
yes: all primary outcomes were significantly better in intervention group vs control
partly: SOME primary outcomes were significantly better in intervention group vs control
on statistically significant difference between control and intervention
O potentially harmful: control was significantly better than intervention in one or more outcomes
inconclusive: more research is needed
이 기타: None (Scoping review)
Article Preparation Status/Stage *
Article Preparation Status/Stage *  At which stage in your article preparation are you currently (at the time you fill in this form)
At which stage in your article preparation are you currently (at the time you fill in this form)
At which stage in your article preparation are you currently (at the time you fill in this form)  not submitted yet - in early draft status
At which stage in your article preparation are you currently (at the time you fill in this form)  not submitted yet - in early draft status  not submitted yet - in late draft status, just before submission
At which stage in your article preparation are you currently (at the time you fill in this form)  onot submitted yet - in early draft status  not submitted yet - in late draft status, just before submission  submitted to a journal but not reviewed yet
At which stage in your article preparation are you currently (at the time you fill in this form)  onot submitted yet - in early draft status  not submitted yet - in late draft status, just before submission  submitted to a journal but not reviewed yet  submitted to a journal and after receiving initial reviewer comments
At which stage in your article preparation are you currently (at the time you fill in this form)  not submitted yet - in early draft status  not submitted yet - in late draft status, just before submission  submitted to a journal but not reviewed yet  submitted to a journal and after receiving initial reviewer comments  submitted to a journal and accepted, but not published yet

Journal *  If you already know where you will submit this paper (or if it is already submitted), please provide the journal name (if it is not JMIR, provide the journal name under "other")
onot submitted yet / unclear where I will submit this
<ul> <li>Journal of Medical Internet Research (JMIR)</li> </ul>
JMIR mHealth and UHealth
○ JMIR Serious Games
JMIR Mental Health
○ JMIR Public Health
JMIR Formative Research
Other JMIR sister journal
○ 기타:
Is this a full powered effectiveness trial or a pilot/feasibility trial? *
O Pilot/feasibility
Fully powered
Fully powered
Manuscript tracking number *  If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of each published article in JMIR)
Manuscript tracking number *  If this is a JMIR submission, please provide the manuscript tracking number under "other"  (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of

TITLE AND ABSTRACT								
1a) TITLE: Identification as a	random	ized tria	I in the	title				
1a) Does your paper address CONSORT item 1a? * I.e does the title contain the phrase "Randomized Controlled Trial"? (if not, explain the reason under "other")  yes  7年: A Scoping Review								
1a-i) Identify the mode of delivery in the title  Identify the mode of delivery. Preferably use "web-based" and/or "mobile" and/or "electronic game" in the title. Avoid ambiguous terms like "online", "virtual", "interactive".  Use "Internet-based" only if Intervention includes non-web-based Internet components (e.g. email), use "computer-based" or "electronic" only if offline products are used. Use "virtual" only in the context of "virtual reality" (3-D worlds). Use "online" only in the context of "online support groups". Complement or substitute product names with broader terms for the class of products (such as "mobile" or "smart phone" instead of "iphone"), especially if the application runs on different platforms.								
subitem not at all important	1	2	3	4	5	essential 선택해제		

Does your paper address subitem 1a-i? \*

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Background: Rehabilomics, or the integration of rehabilitation with genomics, proteomics, metabolomics, and other "-omics" fields, aims to promote personalized approaches to rehabilitation care. Cloud-based rehabilitation offers streamlined patient data management and sharing and potentially plays a significant role in advancing Rehabilomics research. This study explored the current status and potential benefits of implementing Rehabilomics strategies through cloud-based rehabilitation.

Objective: The objective of this scoping review is to investigate the implementation of Rehabilomics strategies through cloud-based rehabilitation and to summarize the current state of knowledge within the research domain. This analysis aims to understand the impact of cloud platforms on the field of Rehabilomics and provide insights into future research directions.

1a-ii) Non-web-based components or important co-interventions in title								
Mention non-web-based components or important co-interventions in title, if any (e.g., "with telephone support").								
, , , , , , , , , , , , , , , , , , , ,	1	2	3	4	5			
subitem not at all important	<ul><li>•</li></ul>	0	0	0	0	essential		
subitem not at an important						선택해제		

Does your paper address subitem 1a-ii?

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

All studies based on Cloud-Based Rehabilitation

1a-iii) Primary condition or target group in the title  Mention primary condition or target group in the title, if any (e.g., "for children with Type I Diabetes") Example: A Web-based and Mobile Intervention with Telephone Support for Children with Type I Diabetes: Randomized Controlled Trial									
	1	2	3	4	5				
subitem not at all important	<b>o</b>	0	0	0	0	essential			
						선택해제			
Does your paper address subitem 1a-iii? *  Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  As a scoping review, We simplified the title to a paper that is characteristic of Rehabilomics Strategies by Cloud-Based Rehabilitation									
1b) ABSTRACT: Structured summary of trial design, methods, results, and conclusions  NPT extension: Description of experimental treatment, comparator, care providers, centers, and blinding status.									
1b-i) Key features/functionalities/components of the intervention and comparator in the METHODS section of the ABSTRACT  Mention key features/functionalities/components of the intervention and comparator in the abstract. If possible, also mention theories and principles used for designing the site. Keep in mind the needs of systematic reviewers and indexers by including important synonyms. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)									
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subitem not at all important	0	0	0	0	<b>()</b>	essential			
						선택해제			

# Does your paper address subitem 1b-i? \*

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Methods: In this scoping review, we systematically searched major academic databases including CINAHL, Embase, Google Scholar, PEDro, PubMed, ScienceDirect, and SCOPUS to identify relevant studies and applied the predefined inclusion criteria to select appropriate research. Subsequently, we analyzed the selected papers to identify trends and insights regarding cloud-based rehabilitation and Rehabilomics within the current research landscape.

1b-ii) Level of human involvement in the METHODS section of the ABSTRACT Clarify the level of human involvement in the abstract, e.g., use phrases like "fully automated" vs. "therapist/nurse/care provider/physician-assisted" (mention number and expertise of providers involved, if any). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

1 2 3 4 5
subitem not at all important O O ● O essential 선택해제

### Does your paper address subitem 1b-ii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Results: This study reports the various applications and outcomes of implementing Rehabilomics strategies through cloud-based rehabilitation. Cloud platforms offer new possibilities for data sharing and collaboration in Rehabilomics research, underpinning a patient-centered approach, and enhancing the development of personalized therapeutic strategies.

1b-iii) Open vs. closed, web-based (self-assessment) vs. face-to-face assessments in the METHODS section of the ABSTRACT

Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic or a closed online user group (closed usergroup trial), and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment). Clearly say if outcomes were self-assessed through questionnaires (as common in web-based trials). Note: In traditional offline trials, an open trial (open-label trial) is a type of clinical trial in which both the researchers and participants know which treatment is being administered. To avoid confusion, use "blinded" or "unblinded" to indicated the level of blinding instead of "open", as "open" in web-based trials usually refers to "open access" (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

1 2 3 4 5 subitem not at all important O O O O essential 선택해제

## Does your paper address subitem 1b-iii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Cloud platforms offer new possibilities for data sharing and collaboration in Rehabilomics research, underpinning a patient-centered approach, and enhancing the development of personalized therapeutic strategies.

1b-iv) RESULTS section in abstract must contain use data Report number of participants enrolled/assessed in each group, the use/uptake of the intervention (e.g., attrition/adherence metrics, use over time, number of logins etc.), in addition to primary/secondary outcomes. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)									
	1	2	3	4	5				
subitem not at all important	0	0	•	0	0	essential			
						선택해제			
Does your paper address subitem 1b-iv?  Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  Cloud platforms offer new possibilities for data sharing and collaboration in Rehabilomics research, underpinning a patient-centered approach, and enhancing the development of personalized therapeutic strategies.									
1b-v) CONCLUSIONS/DISCUSSION in abstract for negative trials  Conclusions/Discussions in abstract for negative trials: Discuss the primary outcome - if the trial is negative (primary outcome not changed), and the intervention was not used, discuss whether negative results are attributable to lack of uptake and discuss reasons. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)									
	1	2	3	4	5				
subitem not at all important	0	0	•	0	0	essential			
						선택해제			

Does your paper address subitem 1b-v?  Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  scoping review highlights									
INTRODUCTION									
2a) In INTRODUCTION: Scientific background and explanation of rationale									
2a-i) Problem and the type of system/solution  Describe the problem and the type of system/solution that is object of the study: intended as stand-alone intervention vs. incorporated in broader health care program? Intended for a particular patient population? Goals of the intervention, e.g., being more cost-effective to other interventions, replace or complement other solutions? (Note: Details about the intervention are provided in "Methods" under 5)									
	1	2	3	4	5				
subitem not at all important	0	0	•	0	0	essential			
						선택해제			

Does your paper address subitem 2a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Rehabilitation is a crucial component of healthcare aimed at improving the functional capacity and quality of life for individuals facing various health challenges [1,2].

Traditionally, standardized approaches have been used in rehabilitation, sometimes failing to fully consider the unique needs and characteristics of each patient. However, the need for more personalized rehabilitation has become important after COVID-19 [3]. Advancements in genomics [4], epigenomic [5], proteomics [6], metabolomics [7], and related fields have made personalized rehabilitation approaches more feasible [8,9]. The convergence of rehabilitation and "omics" sciences has given rise to the concept of "Rehabilomics" [10]. This concept utilizes an individual's biological characteristics or biomarkers to tailor rehabilitation approaches, providing a pathway for personalized rehabilitation programs, and enabling the integration of "omics" for studying rehabilitation processes and outcomes [10,11].

2a-ii) Scientific background, rationale: What is known about the (type of) system Scientific background, rationale: What is known about the (type of) system that is the object of the study (be sure to discuss the use of similar systems for other conditions/diagnoses, if appropriate), motivation for the study, i.e. what are the reasons for and what is the context for this specific study, from which stakeholder viewpoint is the study performed, potential impact of findings [2]. Briefly justify the choice of the comparator.

	1	2	3	4	5	
subitem not at all important	0	0	0	•	0	essential
						선택해제

Does your paper address subitem 2a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Rehabilomics seeks to leverage cutting-edge molecular and genomic information to tailor rehabilitation interventions for optimal patient outcomes [10,12]. By understanding the genetic, proteomic, and metabolic profiles of patients, healthcare providers can design rehabilitation programs that are not only more effective, but also better aligned with an individual's genetic and physiological makeup [11-13]. This paradigm shift holds immense promise for improving rehabilitation outcomes and enhancing patient experiences [14].

### 2b) In INTRODUCTION: Specific objectives or hypotheses

Does your paper address CONSORT subitem 2b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Despite these exciting possibilities, there remains a need to comprehensively explore the current landscape of cloud-based rehabilitation in the context of Rehabilomics [21]. This scoping review aims to fill this gap by providing an overview of the existing literature and shedding light on key trends, challenges, and opportunities in this emerging field. By examining the integration of cloud-based technologies with Rehabilomics strategies, we aim to contribute to the understanding of how these approaches can be harnessed to optimize rehabilitation interventions and ultimately improve patient outcomes. Therefore, this study examined the latest trends through a scoping review of cloud-based rehabilitation.

Accordingly, we sought to derive strategies for Rehabilomics.

The Rehabilomics approach, which utilizes an individual's genomic, proteomic, and metabolomic information to deliver personalized rehabilitation, has tremendous potential to enhance the effectiveness and patient experience of rehabilitation services. Moreover, the integration of cloud computing technology can facilitate data sharing and collaboration among healthcare providers, researchers, and patients, opening up opportunities to develop innovative, data-driven rehabilitation solutions.

### **METHODS**

3a) Description of trial design (such as parallel, factorial) including allocation ratio									
Does your paper address CONSORT subitem 3a? *  Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  None in paper address CONSORT subitem 3a									
3b) Important changes to met criteria), with reasons	thods af	ter trial o	commer	ncement	(such as	s eligibility			
Does your paper address CONSORT subitem 3b? *  Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  None in paper address CONSORT subitem 3b									
3b-i) Bug fixes, Downtimes, Content Changes Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].									
subitem not at all important	1	2	3	4	5	essential 선택해제			

### Does your paper address subitem 3b-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address subitem 3b-i

4a) Eligibility criteria for participants

## Does your paper address CONSORT subitem 4a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Inclusion and exclusion criteria were established to select articles from the search results. The inclusion criteria included papers discussing the integration of cloud computing and Rehabilomics strategies, applications in the fields of rehabilitation and healthcare, data sharing and collaboration, and personalized therapy. Papers unrelated to relevant topics or those lacking sufficient information were excluded. Two independent reviewers conducted a thorough examination of the papers, and the final selections were made through discussion.

#### 4a-i) Computer / Internet literacy

Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.

 $\circ$ subitem not at all important essential 선택해제

## Does your paper address subitem 4a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

#### Data Extraction and Analysis

Relevant information was extracted and analyzed from the selected papers. This includes details such as paper titles, authors, publication years, research topics, methodologies, key findings, and conclusions. Extracted data were synthesized in relation to key themes and subjected to statistical and content analyses to ascertain current research trends in cloud-based rehabilitation and Rehabilomics strategies

### 4a-ii) Open vs. closed, web-based vs. face-to-face assessments:

Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.

1 2 3 4 5 subitem not at all important O O O O essential 선택해제

#### Does your paper address subitem 4a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

# Reporting of Findings

The results obtained from this scoping review are presented as a comprehensive overview of the key themes, research trends, and related topics. This review summarizes the current research trends in cloud-based rehabilitation and Rehabilomics strategies and offers suggestions for future research.

4a-iii) Information giving during recruitment Information given during recruitment. Specify how participants were briefed for recruitment and in the informed consent procedures (e.g., publish the informed consent documentation as appendix, see also item X26), as this information may have an effect on user self-selection, user expectation and may also bias results.							
	1	2	3	4	5		
subitem not at all important	0	0	•	0	0	essential	
						선택해제	

### Does your paper address subitem 4a-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address subitem 4a-iii, due to scoping review

4b) Settings and locations where the data were collected

# Does your paper address CONSORT subitem 4b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

To initiate the research, we conducted searches across major academic databases, including CINAHL, Embase, Google Scholar, PEDro, PubMed, ScienceDirect, and SCOPUS. The search terms and syntax were designed to encompass terms such as "cloud-based rehabilitation," "Rehabilomics," "cloud computing in rehabilitation," "personalized rehabilitation," and "omics technologies in rehabilitation."

Does your paper address subitem 4b-i? *  Copy and paste relevant sections from the manuscript (include quotes in quotation in like this to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  None in paper address subitem 4b-i, due to scoping review  4b-ii) Report how institutional affiliations are displayed  Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer ruse, and reactions with regards to an intervention. (Not a required item – describe on this may bias results)  1 2 3 4 5  subitem not at all important  essen		1	2	3	4	5	
Does your paper address subitem 4b-i? *  Copy and paste relevant sections from the manuscript (include quotes in quotation in "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  None in paper address subitem 4b-i, due to scoping review  4b-ii) Report how institutional affiliations are displayed  Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer ruse, and reactions with regards to an intervention. (Not a required item – describe on this may bias results)  1 2 3 4 5  subitem not at all important  O O O essen	subitem not at all important	<b>O</b>	0	0	0	0	essent
Copy and paste relevant sections from the manuscript (include quotes in quotation in "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  None in paper address subitem 4b-i, due to scoping review  4b-ii) Report how institutional affiliations are displayed  Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer ruse, and reactions with regards to an intervention.(Not a required item – describe on this may bias results)  1 2 3 4 5  subitem not at all important  • essen	7						선택
"like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  None in paper address subitem 4b-i, due to scoping review  4b-ii) Report how institutional affiliations are displayed Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer ruse, and reactions with regards to an intervention. (Not a required item – describe on this may bias results)  1 2 3 4 5  subitem not at all important  • essen	Does your paper address sub	oitem 4b	-i? *				
providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  None in paper address subitem 4b-i, due to scoping review  4b-ii) Report how institutional affiliations are displayed Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer ruse, and reactions with regards to an intervention.(Not a required item – describe on this may bias results)  1 2 3 4 5  subitem not at all important  • O O essen							
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### Does your paper address subitem 5-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

#### Reporting of Findings

The results obtained from this scoping review are presented as a comprehensive overview of the key themes, research trends, and related topics. This review summarizes the current research trends in cloud-based rehabilitation and Rehabilomics strategies and offers suggestions for future research.

### 5-iii) Revisions and updating

Revisions and updating. Clearly mention the date and/or version number of the application/intervention (and comparator, if applicable) evaluated, or describe whether the intervention underwent major changes during the evaluation process, or whether the development and/or content was "frozen" during the trial. Describe dynamic components such as news feeds or changing content which may have an impact on the replicability of the intervention (for unexpected events see item 3b).

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# Does your paper address subitem 5-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address subitem 5-iii, due to scoping review

5-iv) Quality assurance methods  Provide information on quality assurance methods to ensure accuracy and quality of information provided [1], if applicable.									
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Ensure replicability by publishing the source code, and/or providing screenshots/screen- capture video, and/or providing flowcharts of the algorithms used. Replicability (i.e., other researchers should in principle be able to replicate the study) is a hallmark of scientific reporting.									
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## Does your paper address subitem 5-v?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The primary objective of this scoping review was to investigate and synthesize current literature trends in cloud-based rehabilitation for Rehabilomics strategies. To initiate the research, we conducted searches across major academic databases, including CINAHL, Embase, Google Scholar, PEDro, PubMed, ScienceDirect, and SCOPUS. The search terms and syntax were designed to encompass terms such as "cloud-based rehabilitation," "Rehabilomics," "cloud computing in rehabilitation," "personalized rehabilitation," and "omics technologies in rehabilitation." The search included articles published from January 2000 to September 2023. The study protocol was registered in the Open Science Framework (https://doi.org/10.17605/OSF.IO/8M2TN) . The research questions are as follows:

- · Have cloud-based rehabilitation systems been developed and evaluated recently?
- What Rehabilomics strategies are based on primary outcomes and user perceptions of cloud-based rehabilitation systems?

#### 5-vi) Digital preservation

Digital preservation: Provide the URL of the application, but as the intervention is likely to change or disappear over the course of the years; also make sure the intervention is archived (Internet Archive, <a href="webcitation.org">webcitation.org</a>, and/or publishing the source code or screenshots/videos alongside the article). As pages behind login screens cannot be archived, consider creating demo pages which are accessible without login.

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### Does your paper address subitem 5-vi?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address subitem 5-vi, due to scoping review

### 5-vii) Access

Access: Describe how participants accessed the application, in what setting/context, if they had to pay (or were paid) or not, whether they had to be a member of specific group. If known, describe how participants obtained "access to the platform and Internet" [1]. To ensure access for editors/reviewers/readers, consider to provide a "backdoor" login account or demo mode for reviewers/readers to explore the application (also important for archiving purposes, see vi).

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Does your paper address subitem 5-vii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address subitem 5-vii, due to scoping review

5-viii) Mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework

Describe mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description of the content (including where it is coming from and who developed it) [1]," whether [and how] it is tailored to individual circumstances and allows users to track their progress and receive feedback" [6]. This also includes a description of communication delivery channels and – if computer-mediated communication is a component – whether communication was synchronous or asynchronous [6]. It also includes information on presentation strategies [1], including page design principles, average amount of text on pages, presence of hyperlinks to other resources, etc. [1].

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### Does your paper address subitem 5-viii? \*

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## Reporting of Findings

The results obtained from this scoping review are presented as a comprehensive overview of the key themes, research trends, and related topics. This review summarizes the current research trends in cloud-based rehabilitation and Rehabilomics strategies and offers suggestions for future research.

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Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

#### 5-xi) Report any prompts/reminders used

Report any prompts/reminders used: Clarify if there were prompts (letters, emails, phone calls, SMS) to use the application, what triggered them, frequency etc. It may be necessary to distinguish between the level of prompts/reminders required for the trial, and the level of prompts/reminders for a routine application outside of a RCT setting (discuss under item 21 – generalizability).

1 2 3 4 5 subitem not at all important © ○ ○ ○ ○ essential 선택해제

#### Does your paper address subitem 5-xi? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address subitem 5-xi, due to scoping review

#### 5-xii) Describe any co-interventions (incl. training/support)

Describe any co-interventions (incl. training/support): Clearly state any interventions that are provided in addition to the targeted eHealth intervention, as ehealth intervention may not be designed as stand-alone intervention. This includes training sessions and support [1]. It may be necessary to distinguish between the level of training required for the trial, and the level of training for a routine application outside of a RCT setting (discuss under item 21 – generalizability.

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Does your paper address subitem 5-xii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

6a) Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed

Does your paper address CONSORT subitem 6a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

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7a) How sample size was det NPT: When applicable, details of centers was addressed			w the clu	stering b	y care pr	ovides or			

7a-i) Describe whether and h calculating the sample size Describe whether and how expe sample size.									
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7b) When applicable, explan	ation of	any inte	rim anal	yses an	d stoppii	ng guidelines			
Does your paper address CONSORT subitem 7b? *  Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  Table 1. Study of cloud-based rehabilitation									
8a) Method used to generate NPT: When applicable, how care						p			

Does your paper address CONSORT subitem 8a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

8b) Type of randomisation; details of any restriction (such as blocking and block size)

Does your paper address CONSORT subitem 8b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

9) Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned

Does your paper address CONSORT subitem 9? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address CONSORT subitem 9, due to scoping review

10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

Does your paper address CONSORT subitem 10? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how NPT: Whether or not administering co-interventions were blinded to group assignment

11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).

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Does your paper address subitem 11a-i?\*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator".

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### Does your paper address subitem 11a-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address subitem 11a-ii, due to scoping review

11b) If relevant, description of the similarity of interventions (this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

# Does your paper address CONSORT subitem 11b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address CONSORT subitem 11b, due to scoping review

12a) Statistical methods used to compare groups for primary and secondary outcomes

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

# Does your paper address CONSORT subitem 12a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

## 12a-i) Imputation techniques to deal with attrition / missing values

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

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Does your paper address subitem 12a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address subitem 12a-i, due to scoping review

12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

Does your paper address CONSORT subitem 12b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

X26) REB/IRB Approval and Ethical Considerations [recommended as subheading under "Methods"] (not a CONSORT item)

Does your paper address subitem X26-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address subitem X26-i, due to scoping review

x26-ii) Outline informed consent procedures  Outline informed consent procedures e.g., if consent was obtained offline or online (how? Checkbox, etc.?), and what information was provided (see 4a-ii). See [6] for some items to be included in informed consent documents.								
	1	2	3	4	5			
subitem not at all important	0	0	•	0	0	essential		
						선택해제		
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  None in paper address subitem X26-ii, due to scoping review								
X26-iii) Safety and security p	rocedure	es						
	Safety and security procedures, incl. privacy considerations, and any steps taken to reduce the likelihood or detection of harm (e.g., education and training, availability of a hotline)							
	1	2	3	4	5			
subitem not at all important	0	0	•	0	0	essential 선택해제		

## Does your paper address subitem X26-iii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Integration of Cloud Computing: Most studies have explored the integration of cloud-computing technologies in the context of rehabilitation and Rehabilomics. Cloud platforms are used for data storage, analysis, and sharing to facilitate collaborative research efforts.

Personalized Rehabilitation: Many studies have focused on the concept of personalized rehabilitation by leveraging omics data to tailor rehabilitation programs for individual patients. This approach aims to improve treatment efficacy and patient outcomes.

Data Security and Privacy: Several studies have addressed the critical issues of data security and patient privacy in cloud-based rehabilitation. Ensuring the confidentiality and integrity of patient data has become a key concern.

## RESULTS

13a) For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome NPT: The number of care providers or centers performing the intervention in each group and the number of patients treated by each care provider in each center

# Does your paper address CONSORT subitem 13a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

13b) For each group, losses and exclusions after randomisation, together with reasons

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study None in paper CONSORT subitem 13b, due to scoping review 13b-i) Attrition diagram Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the intervention/comparator in each group plotted over time, similar to a survival curve) or other figures or tables demonstrating usage/dose/engagement. 1 • 0 0 0 0 subitem not at all important essential 선택해제 Does your paper address subitem 13b-i? Copy and paste relevant sections from the manuscript or cite the figure number if applicable (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study None in paper CONSORT subitem 13b-i, due to scoping review 14a) Dates defining the periods of recruitment and follow-up

Does your paper address CONSORT subitem 14a? \* Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study None in paper CONSORT subitem 14a, due to scoping review 14a-i) Indicate if critical "secular events" fell into the study period Indicate if critical "secular events" fell into the study period, e.g., significant changes in Internet resources available or "changes in computer hardware or Internet delivery resources" subitem not at all important essential 선택해제 Does your paper address subitem 14a-i? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study None in paper CONSORT subitem 14a-i, due to scoping review 14b) Why the trial ended or was stopped (early)

Does your paper address CONSORT subitem 14b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper CONSORT subitem 14b, due to scoping review

15) A table showing baseline demographic and clinical characteristics for each group

NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and centers (volume) in each group

Does your paper address CONSORT subitem 15? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

15-i) Report demographics associated with digital divide issues

In ehealth trials it is particularly important to report demographics associated with digital divide issues, such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the participants, if known.

1 2 3 4 5
subitem not at all important O O o o essential

선택해제

Does your paper address subitem 15-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups

## 16-i) Report multiple "denominators" and provide definitions

Report multiple "denominators" and provide definitions: Report N's (and effect sizes) "across a range of study participation [and use] thresholds" [1], e.g., N exposed, N consented, N used more than x times, N used more than y weeks, N participants "used" the intervention/comparator at specific pre-defined time points of interest (in absolute and relative numbers per group). Always clearly define "use" of the intervention.

1 2 3 4 5
subitem not at all important O ● O essential 선택해제

Does your paper address subitem 16-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

16-ii) Primary analysis should be intent-to-treat  Primary analysis should be intent-to-treat, secondary analyses could include comparing only "users", with the appropriate caveats that this is no longer a randomized sample (see							
18-i).							
	1	2	3	4	5		
subitem not at all important	0	0	•	0	0	essential	
						선택해제	

# Does your paper address subitem 16-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address subitem 16-ii, due to scoping review

17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)

# Does your paper address CONSORT subitem 17a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address subitem 17a, due to scoping review

17a-i) Presentation of process outcomes such as metrics of use and intensity of use

In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure metrics such as "average session length". These must be accompanied by a technical description how a metric like a "session" is defined (e.g., timeout after idle time) [1] (report under item 6a).

1 2 3 4 5 subitem not at all important O O O O essential 선택해제

## Does your paper address subitem 17a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

17b) For binary outcomes, presentation of both absolute and relative effect sizes is recommended

Does your paper address CONSORT subitem 17b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address CONSORT subitem 17b, due to scoping review

18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory Does your paper address CONSORT subitem 18? \* Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Table 1. Study of cloud-based rehabilitation 18-i) Subgroup analysis of comparing only users A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii). 1 2 3 4 5 O O essential subitem not at all important 선택해제 Does your paper address subitem 18-i? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Table 1. Study of cloud-based rehabilitation

19) All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)

# Does your paper address CONSORT subitem 19? \* Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not

applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

# 19-i) Include privacy breaches, technical problems

Include privacy breaches, technical problems. This does not only include physical "harm" to participants, but also incidents such as perceived or real privacy breaches [1], technical problems, and other unexpected/unintended incidents. "Unintended effects" also includes unintended positive effects [2].

1 2 3 4 5
subitem not at all important O O ● O essential

Does your paper address subitem 19-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Table 1. Study of cloud-based rehabilitation

	19-ii) Include qualitative feedback from participants or observations from staff/researchers								
	Include qualitative feedback from participants or observations from staff/researchers, if available, on strengths and shortcomings of the application, especially if they point to unintended/unexpected effects or uses. This includes (if available) reasons for why people did or did not use the application as intended by the developers.								
		1	2	3	4	5			
	subitem not at all important	0	0	•	0	0	essential		
							선택해제		
Does your paper address subitem 19-ii?  Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  Table 1. Study of cloud-based rehabilitation									
DISCUSSION									

22) Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence

NPT: In addition, take into account the choice of the comparator, lack of or partial blinding, and unequal expertise of care providers or centers in each group

22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use)  Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).									
1 2 3 4 5									
subitem not at all important	0	0	•	0	0	essential			
						선택해제			
Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  None in paper address subitem 22-i, due to scoping review									
	22-ii) Highlight unanswered new questions, suggest future research Highlight unanswered new questions, suggest future research.								
g.mgm and offered new quee	1			4	5				
subitem not at all important	0	0	0	•	0	essential 선택해제			

## Does your paper address subitem 22-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Future studies should prioritize the refinement of cloud services, emphasize data integrity, and develop standardized protocols for data sharing. Moreover, it is essential to conduct robust clinical studies to evaluate the efficacy of personalized rehabilitation interventions. These efforts will not only provide evidence of improved patient outcomes but also guide the implementation of best practices in clinical settings.

 Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses

#### 20-i) Typical limitations in ehealth trials

Typical limitations in ehealth trials: Participants in ehealth trials are rarely blinded. Ehealth trials often look at a multiplicity of outcomes, increasing risk for a Type I error. Discuss biases due to non-use of the intervention/usability issues, biases through informed consent procedures, unexpected events.

1 2 3 4 5
subitem not at all important O O ● O essential

Does your paper address subitem 20-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

## Limitations

Although the detailed variables and algorithms of each Rehabilomics model are not known, various interventions and rehabilitation strategies according to each disease, body type, constitution, and gene are needed based on the models and strategies presented in this study.

21) Generalisability (external validity, applicability) of the trial findings NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

# 21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations

1 2 3 4 5
subitem not at all important O O O O essential

## Does your paper address subitem 21-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

## Future Prospects of Cloud-Based Rehabilitation

The findings of this scoping review provide valuable insights into the prospects of cloud-based rehabilitation. Cloud computing technology offers innovative opportunities in the healthcare domain [40] and is increasingly being leveraged as part of Rehabilomics strategies. This integrative approach has the potential to open new horizons in rehabilitation therapy and enhance patient-centered personalized treatment. In particular, telehealth [50] and telemedicine-rehabilitation [51,52] offer the advantage of providing medical support and monitoring through connectivity, especially for patients suffering from chronic conditions such as PD [27,32], stroke [38], and traumatic brain injury [11,12,53]. Daily routines and rehabilitation data are aggregated in the cloud, enabling individuals to review their personal data [45]. With their consent, patients can share these data with local community hospitals when seeking medical consultation or treatment, allowing healthcare professionals to assess their rehabilitation patterns at home [44].

21-ii) Discuss if there were elements in the RCT that would be different in a routine application setting									
Discuss if there were elements in the RCT that would be different in a routine application setting (e.g., prompts/reminders, more human involvement, training sessions or other co-interventions) and what impact the omission of these elements could have on use, adoption, or outcomes if the intervention is applied outside of a RCT setting.									
1 2 3 4 5									
subitem not at all important O O O o essential									
Does your paper address subitem 21-ii?  Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  None in paper address subitem 21-ii, due to scoping review									
OTHER INFORMATION									
23) Registration number and name of trial registry									
Does your paper address CONSORT subitem 23? *  Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study									
The study protocol was registered in the Open Science Framework (https://doi.org/10.17605/OSF.IO/8M2TN)									
24) Where the full trial protocol can be accessed, if available									

## Does your paper address CONSORT subitem 24? \*

Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

None in paper address CONSORT subitem 24, due to scoping review

25) Sources of funding and other support (such as supply of drugs), role of funders

## Does your paper address CONSORT subitem 25? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

#### Acknowledgments

The authors would like to thank Editage for the technical editing of the manuscript. This study was supported by 1) a National IT Industry Promotion Agency grant funded by the Ministry of Science and ICT and the Ministry of Health and Welfare (NO. S1906-21-1001, Development Project of the Precision Medical Hospital Information System (P-HIS)); and 2) the MSIT (Ministry of Science and ICT (MSIT), Korea, under the ICT Creative Consilience Program (IITP-2022-2020-0-01819) and (IITP-2023-2020-0-01819), supervised by the IITP (Institute for Information & Communications Technology Planning & Evaluation).

X27) Conflicts of Interest (not a CONSORT item)

X27-i) State the relation of the study team towards the system being evaluated In addition to the usual declaration of interests (financial or otherwise), also state the relation of the study team towards the system being evaluated, i.e., state if the authors/evaluators are distinct from or identical with the developers/sponsors of the intervention.										
1 2 3 4 5										
subitem not at all important	0	0	0	0	•	essential				
						선택해제				
Does your paper address subitem X27-i?  Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study  Conflicts of Interest None declared.										
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How much time did you spend on going through the checklist INCLUDING  * making changes in your manuscript
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As a result of using this checklist, do you think your manuscript has improved? *
yes
O no
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Would you like to become involved in the CONSORT EHEALTH group?  This would involve for example becoming involved in participating in a workshop and writing an "Explanation and Elaboration" document
O yes
no
○ 기타:
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Any other comments or questions on CONSORT EHEALTH

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