NOS Case Control

Selection
1) Is the case definition adequate:
   a) Yes, with independent validation. *
   b) Yes, e.g. self-reports.
   c) No description.

2) Representativeness of the cases:
   a) Consecutive or obviously representative series of cases. *
   b) Potential for selection biases or not stated.

3) Selection of Controls:
   a) Community controls. *
   b) Hospital controls.
   c) No description.

4) Definition of Controls:
   a) No history of suicide/self-harm. *
   b) No description of source.

Comparability
1) Comparability of cases and controls on the basis of the design or analysis:
   a) Study controls for LGBTQ status. *
   b) Study controls for LGBTQ and self-harm/suicide. **

Exposure
1) Ascertainment of exposure:
   a) Secure record (e.g. surgical records). *
   b) Structured interview where blind to case/control status. *
   c) Self-report.
   d) No description.

2) Same method of ascertainment for cases and controls:
   a) Yes. *
   b) No.

3) Non-Response rate:
   a) Same rate for both groups. *
   b) Non respondents described.
   c) Rate different and no designation.
NOS Cohort

Selection
1) Representativeness of the exposed cohort:
   a) Truly representative of the average in target population (all subjects or random sampling).
      *
   b) Somewhat representative of the average in the target population (non-random sampling).
      *
   c) Selected group of users.
   d) No description.

2) Selection of the non-exposed cohort:
   a) Drawn from the same community as the exposed cohort. *
   b) Drawn from a different source.
   c) No description.

3) Ascertainment of exposure:
   a) Secure record (e.g. surgical records). *
   b) Structured interview. *
   c) Written self-report.
   d) No description.

4) Demonstration that outcome of interest was not present at start of study:
   a) Yes. *
   b) No.

Comparability
1) Comparability of cohorts on the basis of the design or analysis:
   a) Study controls for LGBTQ status. *
   b) Study controls for LGBTQ and self-harm/suicide. **

Outcome
1) Assessment of outcome:
   a) Independent blind assessment. *
   b) Record linkage. *
   c) Self-report.
   d) No description.

2) Was follow-up long enough for outcomes to occur:
   a) Yes e.g. 6 months. *
   b) No.

3) Adequacy of follow up of cohorts:
   a) Complete follow up - all subjects accounted for. *
   b) Subjects lost to follow up but rate given (description given). *
   c) Subjects lost to follow up (no description given).
   d) No description at all.
NOS Cross Sectional

1) Representativeness of the sample:
   a) Truly representative of the average in the target population. (all subjects or random sampling) *
   b) Somewhat representative of the average in the target population. (non-random sampling) *
   c) Selected group of users.
   d) No description of the sampling strategy.

2) Sample size:
   a) Justified and satisfactory. *
   b) Not justified.

3) Non-respondents:
   a) Comparability between respondents and non-respondents characteristics is established, and the response rate is satisfactory. *
   b) The response rate is unsatisfactory, or the comparability between respondents and non-respondents is unsatisfactory.
   c) No description of the response rate or the characteristics of the responders and the non-responders.

4) Ascertainment of the exposure:
   a) Validated measurement tool. **
   b) Non-validated measurement tool, but the tool is available or described. *
   c) No description of the measurement tool.

Comparability:
1) The subjects in different outcome groups are comparable, based on the study design or analysis. Confounding factors are controlled.
   a) study controls for LGBTQ status *
   b) study controls for LGBTQ and self-harm/suicide **

Outcome:
1) Assessment of the outcome:
   a) Independent blind assessment. **
   b) Record linkage. **
   c) Self report. *
   d) No description.

2) Statistical test:
   a) The statistical test used to analyze the data is clearly described and appropriate, and the measurement of the association is presented, including confidence intervals and the probability level (p value). *
   b) The statistical test is not appropriate, not described or incomplete.