별첨1

비뚤림위험 평가

1. Rob

연번(Ref ID)		1
1저자(출판연도)		Behrend (2022)
영역	비뚤림위험	
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 □ 불확실	An assistant not involved in other parts of the trial made the computer-generated block randomization (www.sealedenvelope.com) with equal number of subjects in each block (1:1:1).
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	Opaque envelopes ensured allocation concealment.
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	The infusion pumps did not display the infusion program, and both patients and investigators were therefore blinded throughout the trial period. - All patients were evaluated postoperatively before
Blinding of outcome assessment (결과평가에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	discharge and contacted by phone by one of the investigators on each of the three postoperative days to guide and to remind patients of filling out the trial questionnaire continuously
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실	결측치가 군간 유사하게 발생 - (3 arms) We randomized 86 patients. Of these, 27 patients in each intervention group were included in the final data analysis~ - excluded: CONT-INF (2명), PIB (3명), BOL-ON-DEM (0명)
Selective reporting (선택적 보고)	■ 낮음 □ 높음 □ 불확실	프로토콜은 없지만 연구방법에 명시된 결과들을 연구결과에서 보고하고 있음
Industrial funding support (민간연구비 지원)	■ 낮음 □ 높음 □ 불확실	Funding information This trial was funded by Innovation Fund Denmark (grant number 65-2014-3) and Nordsjællands Hospital (no grant number).

연번(Ref ID)		2
1저자(출판연도)		Finneran (2022)
영역	비뚤림위험	
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 □ 불확실	After confirming a successful block in the sciatic distribution, participants were randomized using a computer generated list (prepared by the University of California San Diego Investigational Drug Service) and
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	provided to the investigational brug service) and provided to the investigators in opaque, sealed, sequentially numbered security envelopes to one of two treatment groups (1:1 ratio) in blocks of four:
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	Thus, both the participants and investigators were blinded to treatment group.
Blinding of outcome assessment (결과평가에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	participants and outcome assessors were blinded to randomization.
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실	A total of 71 participants were enrolled beginning July 15, 2020, and ending March 10, 2021 (fig. 2). Enrollment was ceased when the target sample size had been obtained, and data collection was finished on March 16, 2021. All but one participant had a successful sciatic nerve block. The remaining 70 participants were randomized and equally divided between the treatment groups, ~
Selective reporting (선택적 보고)	■ 낮음 □ 높음 □ 불확실	주요 결과인 통증 점수 및 약물 사용은 그래프로만 제시함 (p-value는 모두 제시함)
Industrial funding support (민간연구비 지원)	□ 낮음 ■ 높음 □ 불확실	Research Support InfuTronix (Natick, Massachusetts) provided the electronic pumps used in this study. The company was given the opportunity to review the protocol and suggested minor revisions. The investigators retained full control of the investigation, including study design, protocol implementation, data collection, data analysis, results interpretation, and manuscript preparation.

연번(Ref ID)		3 Breebaart (2021)		
1저자(출판연도)				
영역	비뚤림위험			
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 Patients were randomized by a compu □ 불확실 sequence and concealed in sealed env			
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	a continuous infusion of L group (group B).	A (group A) (or to the PIB
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	prospective double-blind rather envelope was opened an independent anesthesic participate in registration of	, and the pur llogist who di	mp prepared I d not
Blinding of outcome assessment (결과평가에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	The anesthesiologist performed and the independent obsestudy group. The data and at the ward by a study nudata out of the PCA pump	rver were una l observations urse, who also	aware of the were collect collected th
		결측치가 군간 유사하게 발생하	하고 원인도 유시	사함
			lost to f	ollow-up
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실		Group B (Bolus) 7명	Group C (Continuous) 9명
		lost pump data	2	1
		protocol violation	3	4
		catheter related problems	2	4
Selective reporting (선택적 보고)	■ 낮음 □ 높음 □ 불확실	프로토콜은 없지만 연구방법에 명 보고하고 있음		 연구결과에서
Industrial funding support (민간연구비 지원)	■ 낮음 □ 높음 □ 불확실	Funding No funding was received	for this study	

연번(Ref ID)		4
1저자(출판연도)		Short (2019)
영역	비뚤림위험	
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 □ 불확실	Randomization was performed by a dedicated research assistant using a non-stratified 1:1 computer-generated randomization table and sealed
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	envelope technique. CI or PIB regimes were delive using the CADD - Solis Ambulatory Infusion Pump (Smiths Medical, Minneapolis, Minnesota, USA).
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	Study participants and investigators collecting outcomes were blinded to group allocation by cove pump settings.
Blinding of outcome assessment (결과평가에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	Postoperative outcomes were assessed by a blinde investigator at discharge from PACU 6, 12, 24, 36 48 hours following commencement of the infusion.
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실	결측치 없음 - A total of 60 patients were randomized to receiv Cl (n=30) or PIB (n=30) infusion regimens
Selective reporting (선택적 보고)	■ 낮음 □ 높음 □ 불확실	프로토콜은 없지만 연구방법에 명시된 결과들을 연구결과에서 보고하고 있음
Industrial funding support (민간연구비 지원)	□ 낮음 ■ 높음 □ 불확실	- Funding: This study was supported by a financial grant and equipment supplies from Smiths Medic Dr Ki Jinn Chin is supported by a Merit Award f the Department of Anesthesia, University of Torc - Competing interests: WWSC (공자자) has received honorarium from Aspen Pharma, BBraun, Smiths Medical and SonoSite. The other authors declare conflicts of interest.

연번(Ref ID)		5
1저자(출판연도)		Ding (2015)
영역	비뚤림위험	
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 □ 불확실	Randomization was performed using an online randomizer, similar to a flip of a coin.
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	Participants were randomized to receive either a popliteal sciatic nerve block as a single shot (SSB group) or a continuous infusion through an On Q continuous infusion pump (On Q group).
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	Patients were blinded to the group they were randomized to until after the surgery. The surgeon and anesthesiologist were blinded to the randomization until the day of surgery.
Blinding of outcome assessment (결과평가에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	Follow-up data collection was performed by trained full-time research coordinator who was also blinded to the randomization until the day of surgery.
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실	결측치가 군간 유사하게 발생하고 원인도 유사함 Of the 50 patients enrolled in this study, a total of were excluded. Reasons for exclusion included an inability to provide adequate postoperative follow-up (2 SSB and 1 On Q), a history of chronic pain that was not initially disclosed to the treatment team (1 SSB and 1 On Q),
Selective reporting (선택적 보고)	□ 낮음 ■ 높음 □ 불확실	불완전한 결과보고 - 주요 결과인 통증 점수는 그래프로만 제시되고, 일부 결과지표는 결과값을 제시하지 않고 통계적 유의성만 언급함
Industrial funding support (민간연구비 지원)	□ 낮음 ■ 높음 □ 불확실	N. C. Tejwani(교신저자) has received royalties from Biomet, is on the speaker's bureau and a paid consultant for Zimmer and Stryker, and is a board member of the Orthopaedic Trauma Association and the Foundation of Orthopaedic Trauma. The remaining authors report no conflict of interest.

연번(Ref ID)		6	
1저자(출판연도)		Elliot (2010)	
영역	비뚤림위험		
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 □ 불확실	A prospective, randomized, double blind, placebo-controlled trial	
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	Sealed envelopes were sequentially used for randomization.	
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	The patients and the assessors were blinded to the treatment allocated. These were opened by the anesthetist and the allocation recorded in a file, held by the anesthetic	
Blinding of outcome assessment (결과평가에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	department. No circumstances were foreseen whereba patient would need to be unblinded other than at their own request.	
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실	There were no withdrawals or loss to followup with 100% completion and return of the pain diaries	
Selective reporting (선택적 보고)	■ 낮음 □ 높음 □ 불확실	프로토콜은 없지만 연구방법에 명시된 결과들을 연구결과에서 보고하고 있음	
Industrial funding support (민간연구비 지원)	■ 낮음 □ 높음 □ 불확실	No benefits in any form have been received or will be received from a commercial party related directly or indirectly to the subject of this article.	

연번(Ref ID)		7
1저자(출판연도)		Taboada (2009)
영역	비뚤림위험	
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 □ 불확실	Using a computer-generated sequence, patients were randomly assigned to receive either a Cl of 0.125% levobupivacaine at an infusion rate of 5 ml/h (group
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	Cl, n=25) or an ARB dose of 5 ml every hour of the same local anesthetic (group ARB, n=25).
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	prospective, randomized, double-blind study
Blinding of outcome assessment (결과평가에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	An investigator blinded to the study evaluated the degree of pain at 6 and 24 h postoperatively.
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실	결측치 없음 - Fifty patients were enrolled in the study.
Selective reporting (선택적 보고)	■ 낮음 □ 높음 □ 불확실	프로토콜은 없지만 연구방법에 명시된 결과들을 연구결과에서 보고하고 있음
Industrial funding support (민간연구비 지원)	□ 낮음 □ 높음 ■ 불확실	언급없음

연번(Ref ID)		8
1저자(출판연도)		Taboada (2008)
영역	비뚤림위험	
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 □ 불확실	Using a computer-generated sequence, patients were randomly assigned to receive either a continuous infusion of 0.125% levobupivacaine at an infusion rate
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	of 5 mL/h (n 22) or an automated intermittent bolus dose of 5 mL every hour of the same local anesthetic (n 22) for 24 h after surgery.
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	prospective, randomized, double-blind study
Blinding of outcome assessment (결과평가에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	An investigator blinded to the study evaluated the degree of pain at 6, 8 12, and 24 h postoperatively.
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실	결측치 없음
Selective reporting (선택적 보고)	■ 낮음 □ 높음 □ 불확실	주요 결과인 통증 점수 및 약물 사용은 그래프로만 제시함
Industrial funding support (민간연구비 지원)	■ 낮음 □ 높음 □ 불확실	Supported by Institutional and Departmental sources.

연번(Ref ID)		9
1저자(출판연도)		Dadure (2006)
영역	비뚤림위험	
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 □ 불확실	Children were randomly assigned to CEB (Group 1) or - CPNB (Group 2). Randomization was generated by our
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	institutional Department of Biostatistics.
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	□ 낮음 □ 높음 ■ 불확실	언급없음
Blinding of outcome assessment (결과평가에 대한 눈가림)	□ 낮음 □ 높음 ■ 불확실	언급없음
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실	결측치가 군간 유사하게 발생하고 원인도 유사함 - Four patients were excluded from the study after randomization: one for blood in the epidural catheter before surgery (Group 1B), one for inability to place popliteal catheter (Group 2A), and two for revocation of parents' consent.
Selective reporting (선택적 보고)	□ 낮음 □ 높음 ■ 불확실	- 주요 결과인 통증 점수는 그래프로만 제시함 - 약물 사용은 평균값만 제시하고 표준편차(SD) 제시하지 않음
Industrial funding support (민간연구비 지원)	■ 낮음 □ 높음 □ 불확실	Supported, in part, by the Association pour le Developpement et la Recherche en Anesthesie Reanimation, CHU Lapeyronie, Montpellier, France (마취소생술 개발 및 연구 협회)

연번(Ref ID)		10
1저자(출판연도)		Zaric (2004)
영역	비뚤림위험	
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 □ 불확실	The Central Pharmacy performed the randomization and delivered identical blinded infusion pumps. The code for the given medicine was first opened after
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	the conclusion of the study. Sealed opaque envelopes were sequentially used to insure random allocation.
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	randomized, double blind, controlled trial The code for the given medicine was first opened
Blinding of outcome assessment (결과평가에 대한 눈가림)	■ 낮음□ 높음□ 불확실	after the conclusion of the study.
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실	결측치가 군간 유사하게 발생하고 원인도 유사함 - Initially 63 patients were included in the study, but three were excluded from the final analysis because of breach of the protocol. Sensory and motor blockade were present in all patients (except one) at the time of discharge.
Selective reporting (선택적 보고)	■ 낮음 □ 높음 □ 불확실	주요 결과인 통증 점수는 그래프로만 제시함
Industrial funding support (민간연구비 지원)	□ 낮음 □ 높음 ■ 불확실	언급없음

연번(Ref ID)		11
1저자(출판연도)		White (2003)
영역	비뚤림위험	
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 □ 불확실	Before entering the operating room (OR), patients were assigned to one of two study groups according
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	to a computer-generated randomization number table.
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	□ 낮음 □ 높음 ■ 불확실	In this randomized, double-blinded, placebo-controlled study
Blinding of outcome assessment (결과평가에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	Follow-up telephone evaluations were performed by a blinded observer (TI) at 24 h, 48 h, 72 h, and 1 wk after surgery to determine the number of doses of oral analgesic medications consumed after discharge and the occurrence of any side effects
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실	결측치가 군간 유사하게 발생하고 원인도 유사함 - Of the 24 patients enrolled in the study, 4 were eliminated from the data analysis because of catheter dislodgement before discharge from the hospital.
Selective reporting (선택적 보고)	■ 낮음 □ 높음 □ 불확실	프로토콜은 없지만 연구방법에 명시된 결과들을 연구결과에서 보고하고 있음
Industrial funding support (민간연구비 지원)	□ 낮음 ■ 높음 □ 불확실	The medical supplies required for this study were provided by I-Flow Corporation (Lake Forest, CA) and B. Braun (Bethlehem, PA). Departmental resources and funds from the McDermott Chair of Anesthesiology were used to support Dr. White's clinical research program.

연번(Ref ID)		12
1저자(출판연도)		Ilfeld (2002)
영역	비뚤림위험	
Random sequence generation (무작위 배정순서 생성)	■ 낮음 □ 높음 □ 불확실	A Randomized, Double-Blinded, Placebo-Controlled Study An investigational pharmacist using a computer-generated randomization table performed group assignment.
Allocation concealment (배정순서 은폐)	■ 낮음 □ 높음 □ 불확실	. Assignment was not known to the patients or any
Blinding of participants and personnel (연구 참여자, 연구자에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	clinical personnel. Group designation was not revealed to the investigators until after all clinical data were collected and the study completed.
Blinding of outcome assessment (결과평가에 대한 눈가림)	■ 낮음 □ 높음 □ 불확실	consists and the stady completed.
Incomplete outcome data (불충분한 결과자료)	■ 낮음 □ 높음 □ 불확실	결측치 없음 - Thirty patients were approached for study inclusion. All chose to be enrolled. All patients had a posterior popliteal sciatic nerve block and a perineural catheter placed successfully.
Selective reporting (선택적 보고)	■ 낮음 □ 높음 □ 불확실	주요 결과인 통증 점수 및 약물 사용은 그래프로만 제시함
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