**Statistical Analysis Plan (SAP)**

*Please complete all relevant sections. Instructions are in red and should be deleted when completing the SAP. The purpose of this template is to provide a general layout, but sections can be reformatted as you wish.*

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|  |  |
| --- | --- |
| **Title** |  |
| **CRU/Department/Division/Center** |  |
| **IRB Number** |  |
| **Investigators:** |  |
| **Primary Investigator** |  |
| **Collaborative Lead** |  |
| **Co-authors (if known)**  |  |
| **Analysis Biostatistician(s)** |  |
| **Biostatistics Supervisor** |  |
| **Lead Biostatistician** |  |
| **Subject Matter Expert**  |  |
| **Original Creation Date** |  |
| **Version Date** |  |
| **Project Folder Location** |  |
| **Project Goal(s)** | *Manuscript, abstract, presentation, etc.*  |
| **Submission Deadline(s)** | *Deadline(s) of above goal(s)* |
| **Effort Estimate (optional)** |  |
| **Investigator Agreement** | [ ]  All statistical analyses included in an abstract or manuscript should reflect the work of the biostatistician(s) listed on this SAP. No changes or additional analyses should be made to the results or findings without discussing with the project biostatistician(s). [ ]  All biostatisticians on this SAP should be given sufficient time to review the full presentation, abstract, manuscript, or grant and be included as co-authors on any abstract or manuscript resulting from the analyses. [ ]  If substantial additional analysis is necessary or the aims of the project change, a new SAP will need to be developed. [ ]  Publications resulting from this SAP are supported in part by the Duke CTSA and must cite grant number UL1TR002553 and be submitted to PubMed Central.[ ] I have reviewed the SAP and understand that any changes must be documented.*Acknowledged by:* Click or tap here to enter text.*Date:* Click or tap to enter a date. |
| **Activity Log** | *This section should be used to track any amendments or changes made to the SAP. It should include detailed information about the changes and the date.* *This is where you should put any information about whether this is an entirely new SAP and an addendum was not appropriate. Here you should state why you had to write an entirely new SAP. Otherwise, include the changes as a ‘change log’ in the addendum section below. State reason and details if this is a new SAP for a project that has undergone changes (i.e. dataset changed because the original one was not appropriate and a new SAP was created).**OPTIONAL: This section can also be used to track your project milestones/meetings/status if you find it helpful.*  |
| **Acronyms** | *XXX* | *Definition here* |
|  | *YYY* | *Definition here* |
|  | *XXX* | *Definition here* |

# Study Overview

Background/Introduction: *This section should be written by the author of the SAP so other biostatisticians can easily follow and to ensure everyone understands the background and goals of the project. If pieces are copied from the protocol or other documents, cite the document. References are not necessary here.*

## Study Aims

[insert aims (this is in scientific terms)]

## Study Hypotheses

[insert hypotheses (this is in statistical terms)]

*If the analysis is descriptive, simply say so and skip the rest of this section.*

## Primary Hypotheses

[insert]

*You should only have 1-2 primary hypotheses and the rest should be secondary.*

## Secondary Hypotheses

[insert]

# Study Population

## Inclusion Criteria

* [insert]

## Exclusion Criteria

* [insert]

## Data Acquisition

*Fill in all relevant information:*

|  |  |
| --- | --- |
| Study design |  |
| Data source/how the data were collected |  |
| Contact information for team member responsible for data collection/acquisition |  |
| Date or version (if downloaded, provide date) |  |
| Data transfer method and date |  |
| Where dataset is stored |  |

Notes: *Include any additional details that give information about how this data set was acquired.*

Description:

[insert]

# Outcomes, Exposures, and Additional Variables of Interest

## If you choose not to use the table format below, make sure all the information outlined below is still included.

## Primary Outcome(s)

*You should only have 1-2 primary outcomes and the rest should be secondary.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Outcome** | **Description** | **Variables and Source**  | **Specifications** |
|  |  |  | e.g., how is it coded? |
|  |  |  |  |

## Secondary Outcome(s)

|  |  |  |  |
| --- | --- | --- | --- |
| **Outcome** | **Description** | **Variables and Source**  | **Specifications** |
|  |  |  | e.g., how is it coded? |
|  |  |  |  |

## Additional Variables of Interest

*This is optional but generally this would be all your covariates of interest. If there are any variables that need special calculations etc. include them here or in a data dictionary that is an appendix to this SAP which you can reference here.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Variable** | **Description** | **Variables and Source**  | **Specifications** |
|  |  |  | e.g., how is it coded? |
|  |  |  |  |

# Statistical Analysis Plan

[insert]

*Every analysis step should refer back to an aim/hypothesis/objective. You can include just one deadline for the project, but if there are multiple major stopping points, you should include individual deadlines for each milestone. Good practice is to number each item here and reference them in your code. If you have to wait for data, you should include a disclaimer that X analysis cannot be completed until the data is collected and deadlines cannot be determined until you receive the data.*

*For more details on what to include, see the SAP Checklist document.*

## Demographic and Clinical Characteristics (“Table 1”)

[insert]

## Analyses Plan for Aim 1

[insert]

## Analyses Plan for Aim 2

[insert]

ETC

# Limitations

*All design and analysis limitations (this will grow as you do the study and should be included in the report)*

# Addendum for Additional Analyses

[insert if applicable]

*All post-hoc analyses should be described here. If minor changes are made to the main analysis (e.g. adding a covariate to the model), this can be changed in the main analysis section above and a note should be added to the activity log.*

# Appendix

*This section can be used to include table shells, example figures, or anything else that does not belong in the body of the SAP but you feel should be included.*

# References

*If needed, this section can included citations to statistical methods, programming software (including R packages), and/or relevant clinical literature.*

 Statistical Analysis Plan Checklist

*Below you will find a checklist of recommended items to include in a statistical analysis plan. Some of these are specific to clinical trials (based on this* [*JAMA paper*](https://jamanetwork.com/journals/jama/fullarticle/2666509)*) and some are other are specific to observational studies (based on* [*STROBE*](https://www.strobe-statement.org/index.php?id=available-checklists)*/*[*RECORD*](http://www.record-statement.org/) *guidelines), so every item will not be necessary for every project. The biostatistician should start with the SAP template above and add in necessary information from the checklist. Item numbers that are starred (\*) are not explicitly included in the SAP template and should be added by the author if relevant to the project. This checklist was developed using the* [*CONSORT 2010 Checklist*](http://www.consort-statement.org/)*.*

1Turner L, Shamseer L, Altman DG, et al. Consolidated standards of reporting trials (CONSORT) and the completeness of reporting of randomised controlled trials (RCTs) published in medical journals. *Cochrane Database Syst Rev*. 2012;11:MR000030. Published 2012 Nov 14. doi:10.1002/14651858.MR000030.pub2

|  |  |  |  |
| --- | --- | --- | --- |
| Section/Topic | Item # | Description | Included(Yes/No/NA) |
| Administrative Information |
| Study Information | 1a | Descriptive title that matches the protocol, with SAP either as a forerunner or subtitle |  |
| 1b | Trial registration number, protocol version number, and/or IRB number. |  |
|  | 1c | CRU/Department/Division/Center/other collaborative unit that the study falls under |  |
| Roles and responsibility | 2a | Listing of principal investigators, clinical leads, and co-authors (if known) |  |
| 2b | Name and affiliation of SAP author(s) |  |
|  | 2c | Names, affiliations, and roles of other SAP contributors (e.g. senior statistician) |  |
| SAP Information | 3 | SAP version number, with date of current version and original creation date |  |
| Project Information | 4a | Project folder location |  |
|  | 4b | Project goals (e.g. manuscript, abstract, presentation, etc.) |  |
|  | 4c | Project deadlines (of listed goals) |  |
|  | 4d | Effort estimate |  |
| **Investigator Agreement** |
| Investigator Agreement | 5 | Confirmation that BERD Method Core’s collaborative process has been reviewed, that all statistical analyses included in an abstract or manuscript should reflect the SAP, no changes should be made to the SAP without discussing with the SAP author, all biostatisticians on the SAP are co-authors on the manuscript, and that publications resulting from the SAP must cite grant number UL1TR002553 and be submitted to PubMed Central  |  |
| Signatures | 6 | Signatures of SAP author, senior statistician, and principal investigator(s) |  |
| **Activity Log** |
| SAP revisions | 7a | SAP revision history with dates |  |
|  | 7b | Justification for each SAP revision |  |
|  | 7c\* | Timing of SAP revision in relation to any interim analyses or submissions |  |
| Study Overview |
| Background and introduction | 8 | Synopsis of scientific background and rationale for the study |  |
| Aims and Hypotheses | 9a | List of all scientific aims/objectives of the study, with specifications of primary, secondary, etc. |  |
| 9b | List of all statistical hypotheses (corresponding to the scientific aims), with specifications of primary, secondary, etc. |  |
| Variables of Interest | 10a | List of all outcome/endpoint variables, with a description of their coding/units, timing, and source, corresponding to the statistical hypotheses. If any variables are defined using ICD or CPT codes, list them out. |  |
|  | 10b | List of all exposure variables, with a description of their coding/units, timing, and source, corresponding to the statistical hypotheses. If any variables are defined using ICD or CPT codes, list them out. |  |
|  | 10c | List of any additional variables of interest (e.g. covariates, potential confounders, effect modifiers, etc.) in the analysis |  |
|  | 10d\* | Location of data dictionary (or provided as an appendix)  |  |
|  | 10e\* | Report category boundaries if continuous variables are collapsed into categories, and describe any other relevant data transformations |  |
| Causal Graph | 11\* | May be helpful to include a DAG or other graph/diagram that describes the way the variables of interest are presumed to relate to each other |  |
| **Study Methods** |
| Study Plan and Design | 12a | Description of the study design (e.g. parallel group randomized trial, case-control study, cohort study, etc.)  |  |
| 12b\* | Study setting, location, and relevant dates (e.g. periods of enrolment, exposure, follow-up, and collection) |  |
| 12c\* | Description of intervention or exposure groups, with allocation ratios, and details of any matching criteria |  |
| 12d\* | Details on randomization (e.g. stratification factors) and blinding procedures  |  |
| 12e | List of eligibility and/or inclusion/exclusion criteria |  |
| 12f\* | Description of screening/enrolment/recruitment processes |  |
| 12g\* | Description of patient flow (e.g. CONSORT diagram) |  |
| 12h\* | Description of analysis population (e.g. intention to treat, per protocol, etc.) |  |
| 12i\* | Definitions of adherence/compliance, protocol deviations, loss-to-follow-up, adverse events, etc. |  |
| 12j\* | Time points at which outcomes are measured  |  |
| 12k\* | Timing of final analyses (are all outcomes analysed collectively, or will short-term outcomes be analysed separately from long-term outcomes, etc.) |  |
| Sample Size | 13a\* | Sample size calculation or justification (either provided in full or summarized, with link to original source) |  |
|  | 13b\* | Description of pre-planned subgroup analyses, power for these analyses, and planned multiple comparison adjustment procedures  |  |
| Interim Analyses | 14a\* | Description of what interim analyses will be conducted at which time points, and what methods used to adjust significance levels due to the interim analysis  |  |
|  | 14b\* | Details of any guidelines (e.g. safety, futility) for stopping the study early  |  |
|  | 14c\* | Details of any changes to trial design due to interim analyses (e.g. enrolling more patients) |  |
| Data  | 15a | Description of data collection/acquisition process, with contact information for team member responsible |  |
|  | 15b | Description of data flow/transfer from primary data collection through to creation of final analysis dataset |  |
|  | 15c | Data transfer method and date |  |
|  | 15d | Folder location where datasets are stored |  |
|  | 15e\* | Description of any additional data management, quality control, or processing undertaken |  |
|  | 15f\* | If any data are extracted from a database, a description of the database and the query used for the extraction, and whether/how it was merged with any data from outside that database. If the study involved linkage of databases, consider use of a flow diagram to demonstrate the data linkage process, including the number of individuals with linked data at each stage. |  |
|  | 15f\* | Description of any other data sources incorporated in the analysis |  |
| Missing Data | 16a\* | Description of sources and magnitudes of missing data  |  |
|  | 16b\* | Description of how missing data patterns will be presented/summarized (may be helpful to have a table shell or draft CONSORT-style diagram) |  |
|  | 16c\* | Description of contingency plans for handling missing data in analysis |  |
| Simulations | 17a\* | If conducting a simulation, a description of the purpose of the simulation and its design (e.g. fully factorial, partially factorial, grid search, etc.) |  |
|  | 17b\* | Define the fixed and variable factors or parameters in the simulation, the estimands/targets of the simulation, and the performance measures to be estimated (with justifications of their relevance to the estimands/targets)  |  |
|  | 17c\* | Description of the tabular and graphical presentations of simulation results and their interpretation |  |
| **Statistical Analysis Plan** |
| Statistical Significance | 18a\* | Hypothesis testing framework (e.g. superiority, equivalence, non-inferiority), or description of alternative analytic framework (e.g. evaluation of a posterior in a Bayesian analysis, etc.) |  |
| 18b\* | Level of significance for primary hypotheses, including a description and rationale for any multiple comparisons adjustment or Type I error control procedures |  |
|  | 18c\* | Description of any decision-making rules based on confidence intervals, credible intervals, prediction intervals, Bayes’ factors, or other alternative inferential methods |  |
|  | 18d\* | Description of how the results of any hypothesis tests (or alternative inferential methods) will be interpreted with respect to both the statistical hypotheses and scientific aims/objectives of the study |  |
| Descriptive Statistics | 19a\* | List of characteristics (e.g. demographic, clinical) to be summarized descriptively (e.g. “Table 1”) |  |
|  | 19b\* | Description of how these characteristics will be summarized descriptively (e.g. means/medians vs. N (%), tabular displays, graphical displays, etc.) |  |
|  | 19c\* | Summarize follow-up time (e.g. average and total amount) and number of events |  |
| Analysis Methods | 20a | For each aim/hypothesis (see items 9a/9b), a description of what analysis method will be used and how the results from this method will be reported and interpreted |  |
|  | 20b\* | Description of any transformations, standardizations, covariate or confounder adjustments, weighting, or stratification methods to be used and why.  |  |
|  | 20c\* | For each analytic method proposed, a description of the assumptions of that method and what processes will be used to evaluate whether or not those assumptions hold |  |
|  | 20d\* | Details of contingency plans/alternative methods to be used if the assumptions are found not to hold |  |
|  | 20e\* | In the case of non-standard test statistics, formulas provided for the test statistic with a description of the mathematical null hypothesis, how significance is determined, and how the test statistic is interpreted |  |
|  | 20f\* | In the case of regression models, formulas provided for the full model with a description of which parameters are to be used, how they will be interpreted, how confidence intervals will be constructed, etc. |  |
|  | 20g\* | In the case of survey, hierarchical/nested, or clustered data, a description of what methods will be used to adjust for the data structure and why (e.g. if using a GEE, describing which correlation structure and why it was chosen, etc.)  |  |
|  | 20h\* | For non-continuous outcomes, clearly explain the effect used (e.g. risk difference, risk ratio, odds ratio, etc.), whether it is relative or absolute, and justify why that was chosen as the effect measure of interest |  |
|  | 20i\* | Documentation of any non-standard methods used (e.g. using alternative degree of freedom calculation methods, using a non-canonical link function, etc.) |  |
|  | 20j\* | Description of any limitations, sources of bias, internal/external validity, and other relevant discussions concerning the interpretation and generalizability of the design or methods used |  |
| Additional Analysis Methods | 21a\* | Description of any pre-planned sensitivity analyses and how they will be interpreted |  |
| 21b\* | Description of pre-planned subgroup analyses, power for these analyses, and planned multiple comparison adjustment procedures |  |
| 21c\* | Description of any additional post-hoc calculations or analyses (e.g. evaluating interaction/modification effects, calculating mediation or local average treatment effects, evaluation of AUROC curves, etc.) |  |
|  | 21d\* | If conducting any bootstrap analyses, a description of the sampling algorithm and number of iterations used |  |
|  | 21e\* | If conducting any cross-validation procedures, a description of how the cross-validation is conducted (e.g. leave-one-out, train/validation/test, etc.) |  |
| Exploratory Analyses | 22a\* | Description and justification for any pre-planned exploratory analyses and what methods will be used to conduct them |  |
|  | 22b\* | Framework for conducting any unplanned exploratory analyses and how they will be integrated into the planned analysis |  |
| Software | 23\* | List of statistical software (along with version numbers) to be used for each phase of the analysis; in the case of R or Stata, additionally list any requisite installed packages and their version numbers |  |
| Other | 24\* | Description of any additional planned analyses of the data (e.g. a safety analysis looking at adverse event rates for a Data Safety Monitoring Board, etc.) |  |
| **Tables and Figures** |
| Table Shells | 25\* | Example tables related to any of the conducted analyses; if possible including any available preliminary data |  |
| Example Figures | 26\* | Example figures related to any of the conducted analyses; if possible including any available preliminary data. |  |
| **References** |
| References | 27a | References for any non-standard statistical methods used |  |
|  | 27b | References (and locations) for any relevant protocols, standard operating procedures, or other documents cited in the SAP |  |
| **Additional Information** |
| Appendices | 28\* | If necessary, appendices may be included (e.g. a full data dictionary, a copy of a Case Report Form, etc.) |  |
| Addendums | 29\* | Any additional analyses conducted that were not included in the SAP should be documented in an addendum, describing the purpose of the additional analysis, when it was conducted, and by whom |  |
|  |  |  |  |