MJA
The Medical Journal of Australia

Supporting Information

STROBE statement

Appendix to: Egilmezer E, Teutsch SM, Nunez C, et al. Birth prevalence, clinical sequelae, and management of congenital cytomegalovirus infections in Australia, 1999–2023: a national prospective study. *Med J Aust* 2025; doi: 10.5694/mja2.70047.

STROBE Statement—Checklist of items that should be included in reports of *cohort studies*

	Item No	Recommendation
Title and abstract	1	(*a*) Indicate the study's design with a commonly used term in the title or the abstract *Done (included prevalence and clinical sequelae)*
		(*b*) Provide in the abstract an informative and balanced summary of what was done and what was found *Done as reviewed and comments added*
Introduction		
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported *Done*
Objectives	3	State specific objectives, including any prespecified hypotheses *Done*
Methods		
Study design	4	Present key elements of study design early in the paper *Done including descriptoin*
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection *Done including APSU collection processes*
Participants	6	(*a*) Give the eligibility criteria, and the sources and methods of selection of participants. Describe methods of follow-up *Done. Infants are not followed up as part of these studies.*
		(*b*) For matched studies, give matching criteria and number of exposed and unexposed *Not a matched study*
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable *Dobne where relevant*
Data sources/ measurement	8*	For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group *Done*
Bias	9	Describe any efforts to address potential sources of bias *Done as part of APSU studies*
Study size	10	Explain how the study size was arrived at *Done as this is a cohort from APSU national surveillance*
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why *Not applicable*
Statistical methods	12	(*a*) Describe all statistical methods, including those used to control for confounding *Done*
		(*b*) Describe any methods used to examine subgroups and interactions *Done*
		(*c*) Explain how missing data were addressed *Done as the study is voluntary participation*
		(*d*) If applicable, explain how loss to follow-up was addressed *Done not applicable as followup is clinical and outside the study*
		(*e*) Describe any sensitivity analyses *Not applicable*
Results		
Participants	13*	(a) Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed *Done*
		(b) Give reasons for non-participation at each stage *Done*
		(c) Consider use of a flow diagram *Done and included as Figure 1*
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders *Done*
		(b) Indicate number of participants with missing data for each variable of interest *Done*

		(c) Summarise follow-up time (eg, average and total amount) *Not applicable as infants not followed as part of APSU study*
Outcome data	15*	Report numbers of outcome events or summary measures over time *Done for antiviral therapies*
Main results	16	(*a*) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included *Done*
		(*b*) Report category boundaries when continuous variables were categorized *Discrete variables*
		(*c*) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period *Not applicable*
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses *Done*
Discussion		
Key results	18	Summarise key results with reference to study objectives *Done*
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias *Done*
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence *Done*
Generalisability	21	Discuss the generalisability (external validity) of the study results *Done*
Other information		
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based *Done*

*Give information separately for exposed and unexposed groups.

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at http://www.plosmedicine.org/, Annals of Internal Medicine at http://www.annals.org/, and Epidemiology at http://www.epidem.com/). Information on the STROBE Initiative is available at http://www.strobe-statement.org.