

Recommendations for Generation of Allocation Identifiers for Double Blinded Study

1. The number of Allocation identifiers (IDs) to be generated should balance the requirements of blinding and allow quick identification of allocated treatments correctly in medical emergencies.
2. Allocation IDs should be nominal values e.g. letters, colours, names.
3. The number of Allocation IDs should be the multiple of treatment arms and divisible by the target recruitment number which should adhere to the allocation ratio as defined by the study protocol.
4. An Allocation Set should contain a random mix of Allocation IDs to help prevent accidental unblinding. For example:

Treatment Codes	Allocation Sets
1	C,G,H,R,Y
2	A,E,J,M,U
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.	
.	
.	
i	

i = number of arms

5. Every Allocation ID within the same Allocation Set should have equal probability of being allocated to the relevant treatment code.
6. The Allocation IDs in the Allocation Sets must be mutually exclusive.
7. There is no recommendation for the maximum number of Allocation IDs.
8. Create and store securely a complete list of allocations for all potential trial participants.
9. Allocation lists and coding documentation should be reviewed by another appropriate qualified person independent of the randomisation and unblinding procedure.