

Supplement Table S1. Details of acupuncture treatments based on the STRICTA 2010 checklist

	Item	Detail
1. Acupuncture rationale	1a) Style of acupuncture	Electroacupuncture and intradermal acupuncture based on traditional Korean Medicine theory
	1b) Reasoning for treatment provided, based on historical context, literature sources, and/or consensus methods, with references where appropriate	Based on consensus of the Korean medicine doctors, clinical experience, and experimental/clinical articles
	1c) Extent to which treatment was varied	All participants received standardized treatment
2.Details of needling	2a) Number of needle insertions per subject per session	4 electroacupuncture needles & 4 intradermal acupuncture needles
	2b) Names of points used	Lt PC5, Lt PC6, Lt ST36, Lt ST37 (4 points for electroacupuncture) Both HT7 , both TF4 (4 points for intradermal acupuncture)
	2c) Depth of insertion, based on a specified unit of measurement	2.0 ± 0.5 cm (electroacupuncture) About 1 mm (intradermal acupuncture)
	2d) Response sought	De-qi and slight muscle twitch
	2e) Needle stimulation	1) 3 times clockwise rotated to induce de-qi sensation 2) Electrical stimulation with a frequency of 2 Hz, 400 µs per stimulation (ES-160, ITO, Japan)
	2f) Needle retention time	20 minutes
	2g) Needle type	Acupuncture : disposable, sterile needles (0.20mm × 30mm, Dongbang Acupuncture Inc., Boryung, Korea) Intradermal acupuncture : disposable, sterile, sticker-type

		intredermal needle (0.18 × 1.3 × 1.5 mm, Dongbang Acupuncture Inc., Boryung, Korea)
3. Treatment regimen	3a) Number of treatment sessions	10 session
	3b) Frequency and duration of treatment sessions	10 acupuncture treatments session over 10 weeks. It took 20 minutes per each session
4. Other components of treatment	4a) Details of other interventions administered to the acupuncture group	Conventional western medicine management according to atrial fibrillation management guideline
	4b) Setting and context of treatment, including instructions to practitioners, and information and explanations to patients	All patients were admitted to the cardiac ward for treatment of atrial fibrillation by electronic cardioversion. All information was provided to participants. Follow up acupuncture treatment was conducted in outpatient department.
5. Practitioner background	5) Description of participating acupuncturists	Licensed Korean medicine doctor with at least 3 years of clinical practice. The practitioners have studied acupuncture for more than 6 years and graduated from the College of Korean Medicine. The Korean medicine doctor was licensed by Korean Ministry of Health and Welfare. Standardized operation procedures were predefined for reliable procedure
6. Control interventions	6a) Rationale for the control or comparator in the context of the research question, with sources that justify this choice	Based on consensus of the Korean medicine doctors, clinical experience, and experimental/clinical articles
	6b) Precise description of the control or comparator. If sham acupuncture or any other type of acupuncture-like control is used, provide details as for Items 1 to 3 above.	<p>Acupuncture point : See Supplement Table 2</p> <p>Depth of insertion : 0.5cm</p> <p>De-qi sensation and electronic current was not adopted.</p> <p>Other aspect of sham treatment was similar to active acupuncture group.</p>