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**Table 4:** Results from the methodological evaluation

		Criteria fulfilled in the present review (2019)	Criteria fulfilled in review by Mauer et al. (2008)
Criteria	Subcriteria	Yes N (%)	Yes N (%)
<b>Sample size</b>	Sample size of patient who reported baseline PROs	41 (93)	NR
<b>Missing data</b>	Reasons for missing PROs assessments at baseline reported	5 (11)	5 (10)
	Information given on baseline characteristics for patients with PROs	29 (66)	27 (55)
	Information given on survival for patients with PROs	13 (29)	9 (18)
	Information given on the exact number of available data for each PROs score separately	15 (34)	14 (29)
<b>A priori selection of PROs predictor</b>	A priori selection of potential prognostic PROs guided by subject matter knowledge (literature review, clinical expertise, etc.)	24 (54)	22 (45)
<b>Interaction</b>	Absence of interaction(s) in the final model	38 (86)	46 (94)
<b>Type of variables</b>	PROs scores dichotomized at a cut-off point (median included)	14 (32)	27 (55)
	A priori selection of the cut-off point (median included)	9 (20)	NR
	Continuous summary statistics on PROs scores	37 (84)	27 (55)
<b>Model building strategy</b>	Cox proportional hazards model used for the multivariate analysis	42 (95)	43 (88)
	Univariate screening used to preselect PROs scores and/or clinical factors for consideration in the final multivariate model	31 (70)	16 (33)
	Forced inclusion of preselected clinical factors to enter the multivariate model	12 (27)	21 (43)
<b>Hypothesis</b>	Specification of an a priori hypothesis	5 (11)	NR
<b>Verification of model assumptions</b>	Check of the use of the PH assumption in a Cox proportional hazards model, by using methods such as Schoenfeld residuals or log-log survival	9 (20)	16 (33)
<b>Quantifying predictive accuracy</b>	Measures of the predictive accuracy in univariate or multivariate analysis by using methods such as the Harrell's C discrimination index, Schemper statistics, Nagelkerke R <sup>2</sup> , Likelihood test, PLS regression	14 (32)	7 (14)

	Assessment of the improvement of predictive accuracy due to the addition of the PROs factors as potential prognostic factors in the model	11 (25)	NR
<b>Model validation</b>	Performance of an internal model validation such as bootstrap resampling	16 (36)	9 (18)
	Performance of an external model validation	1 (2)	NR
	Performance of a model validation via an external study	1 (2)	NR

N represents the number of RCTs included and evaluated in the review which have (yes) or have not (not) fulfilled the criteria assessed.

NR = not reported