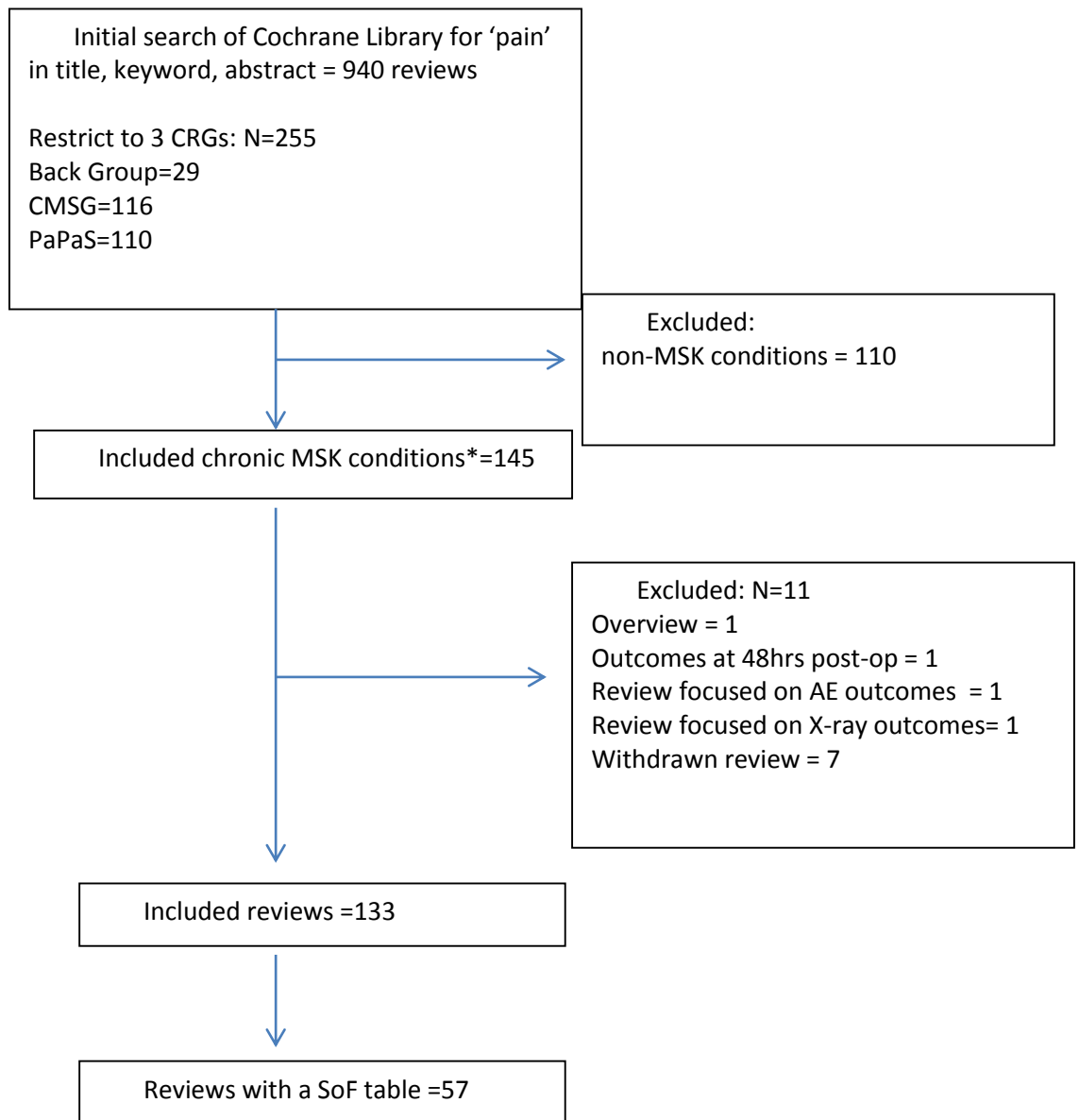


Supplementary Figure 1

Flow chart for selecting included Cochrane Reviews



Supplementary Figure 1. Flow chart for selecting included Cochrane Reviews. CMSG: Cochrane Musculoskeletal Group; CRG: Cochrane Review Group; MSK: musculoskeletal; aPaS: Pain, Palliative, and Supportive Care; SoF: Summary of Findings.

* List of Included Disease Conditions in Cochrane Review Assessment		
Adhesive capsulitis	Chronic neuropathic pain	Osteoporotic vertebral fracture
Ankylosing spondylitis	de Quervain's tenosynovitis	Pediatric pes planus
Cervical degenerative disc disease	Elbow pain	Psoriatic arthritis
Cervical radiculopathy or myelopathy	Fibromyalgia	Rheumatoid arthritis
Chronic gout	Idiopathic scoliosis	Rotator cuff disease
Chronic low-back pain	Myofascial pain	Shoulder pain
Chronic musculoskeletal pain	Osteoarthritis	Systemic sclerosis
Chronic neck pain	Osteoporosis	Tendinitis
		Trigger finger

Supplementary Table 1. Survey questions.

In our initial thinking about which domains of pain should be measured, we came up with the following suggestions: pain intensity, pain frequency, and pain interference with function. In the following questions, we will ask you to provide comments on each one separately and to add any other pain domains of interest to you that are not on this list. Please comment on whether information on pain intensity should be presented in a Cochrane 'Summary of findings' table and discussed further.

Please comment on whether information on pain frequency should be presented in a Cochrane 'Summary of findings' table and discussed further.

Please comment on whether information on pain interference with function should be presented in a Cochrane 'Summary of findings' table and discussed further.

Please comment on any other pain domains that you feel should be discussed.

In our initial thinking about potential topics for discussion on the question, which measures of change (or 'discrimination') should be presented, we came up with the following suggestions: individual patient response, definitions of 'state', and between-group differences. In the following questions, we will ask you to provide comments on each one separately and to add any other topics about discrimination that are of interest to you. Please comment on whether you think information on the following should be presented in a Cochrane 'Summary of findings' and discussed further: Patient response: analyses and decision on a definition of thresholds for minimum and major clinical importance for change (e.g. 50% improvement in pain intensity from baseline as measured on a NRS)

Please comment on whether you think information on the following should be presented in a Cochrane 'Summary of findings' table and discussed further: Definition of thresholds for minimum and major clinical importance for state (Patient Acceptable State, Low or Minimum State; e.g. achieving a state of 'no worse than mild pain')

Please comment on whether you think information on the following should be presented in a Cochrane 'Summary of findings' table and discussed further: Group difference: analyses and decision on a definition of thresholds for minimum and major clinical importance for change between treatment and control groups (e.g. a 20%? or 30%? difference in mean pain scores between groups)

Please comment on any other important topics about 'discrimination' that you feel should be discussed.

Please comment on whether you feel it is important that a responder index with pain as one of multiple domains be included in a Cochrane 'Summary of findings' table? (e.g. OMERACT-OARSI responder index).

In our initial thinking about important topics to discuss under 'feasibility of measurement', we came up with the following suggestions: sensibility, respondent burden, monetary and other costs, and interpretability of results . In the following Questions, we will ask you to provide comments on each one separately and to add any other items about 'feasibility of measurement' of interest to you that are not on this list. Please comment on whether you feel that 'sensibility' (comprehensiveness, understandability, length, and suitability of response options) is an important topic to consider about an outcome presented in a Cochrane 'Summary of findings' table.

Please comment on whether you feel that 'respondent burden' is an important topic to consider about an outcome presented in a Cochrane 'Summary of findings' table.

Please comment on whether you feel that 'monetary and other costs' is an important topic to consider about an outcome presented in a Cochrane 'Summary of findings' table.

Please comment on whether you feel that 'interpretability of results' is an important topic to consider about an outcome presented in a Cochrane 'Summary of findings' table.

PLEASE comment on any other important topics about 'feasibility of measurement' that you feel should be discussed.

Please comment on whether you feel it is important to present generic pain measures, condition-specific pain measures, or both, in a Cochrane 'Summary of findings' table?

We propose using osteoarthritis as the example for our discussions. Are there other conditions you feel important to include in the discussions?

Which aspects of domains of pain, discrimination, and feasibility do you feel are the most important to achieve consensus on?

Please suggest which methods you feel are best to achieve consensus; i.e. Delphi, surveys, face-to-face meetings, background papers for workshops, others?

Supplementary Table 2. List of organizations represented in the survey and interviews.

ACTTION/IMMPACT
Cochrane Back Group
Cochrane Musculoskeletal Group
Cochrane Neuromuscular Disease Group
Cochrane Pain, Palliative and Supportive Care Group
Cochrane Applicability and Recommendations Methods Group
Cochrane Patient Reported Outcomes Methods Group
Cochrane Editorial Unit
COMET
COSMIN
NIH/National Library of Medicine
OMERACT
OMERACT Patient Partners
VAPAIN

ACTTION/IMMPACT= Analgesic, Anesthetic, and Addiction Clinical Trial Translations/Initiative on Methods, Measurement, and Pain Assessment in Clinical Trials; COMET=Core Outcome Measures in Effectiveness Trials; COSMIN=CONsensus-based Standards for the selection of health Measurement Instruments; NIH=National Institutes of Health; OMERACT=Outcome Measures in Rheumatology; VAPAIN= Validation and Application of a core set of patient-relevant outcome domains to assess the effectiveness of multimodal pain therapy.