## **ADDITIONAL FILE 2. COSMIN ASSESSMENT**

Step 1. Evaluated measurement properties in the article

Х	Internal consistency	Box A
Χ	Reliability	Box B
Χ	Measurement error	Box C
Χ	Content validity	Box D
Χ	Structural validity	Box E
	Hypotheses testing	Box F
	Cross-cultural validity	Box G
	Criterion validity	Box H
	Responsiveness	Box I
	Interpretability	Box J

Step 2. Determining if the statistical method used in the article are based on CTT or IRT

	Box General requirements for studies that applied Item Response Theory	(IRT) n	nodels	
1	Was the IRT model used adequately described? e.g. One Parameter Logistic Model (OPLM), Partial Credit Model (PCM), Graded Response Model (GRM)	res	no X	?
2	Was the computer software package used adequately described? e.g. RUMM2020, WINSTEPS, OPLM, MULTILOG, PARSCALE, BILOG, NLMIXED		X	
3	Was the method of estimation used adequately described? e.g. conditional maximum likelihood (CML), marginal maximum likelihood (MML)		X	
4	Were the assumptions for estimating parameters of the IRT model checked? e.g. unidimensionality, local independence, and item fit (e.g. differential item functioning (DIF)			X
	*The model used in the LW-T2DM scale is based on Classical Test Theory			

# Step 3. Determining if a study meets the standards for good methodological quality

	Box A. Internal consistency			
		yes	no	?
1	Does the scale consist of effect indicators, i.e. is it based on a reflective model?	X		
Desi	gn requirements	yes	no	,
2	Was the percentage of missing items given?	Χ		
3	Was there a description of how missing items were handled?	Х		
4	Was the sample size included in the internal consistency analysis adequate?	X		
5	Was the unidimensionality of the scale checked? i.e. was factor analysis or IRT model applied?		Х	
6	Was the sample size included in the unidimensionality analysis adequate?		Х	
7	Was an internal consistency statistic calculated for each (unidimensional) (sub)scale separately?	X		
8	Were there any important flaws in the design or methods of the study?		Х	
Stat	stical methods	yes	no	NA
9	for Classical Test Theory (CTT): Was Cronbach's alpha calculated?	X		
10	for dichotomous scores: Was Cronbach's alpha or KR-20 calculated?			X
11	for IRT: Was a goodness of fit statistic at a global level calculated? e.g. χ2, reliability			Х
	coefficient of estimated latent trait value (index of (subject or item) separation)			

	Box B. Reliability: relative measures (including test-retest reliability, inter-rater reliability and intra-	rater re	liabilit	v)	
Desig	in requirements	yes	no	?	
1	Was the percentage of missing items given?		Χ		
2	Was there a description of how missing items were handled?		X		
3	Was the sample size included in the analysis adequate?	Χ			
4	Were at least two measurements available?	Х			
5	Were the administrations independent?	Χ			
6	Was the time interval stated?	Χ			
7	Were patients stable in the interim period on the construct to be measured?			X	
8	Was the time interval appropriate?	Χ			
9	Were the test conditions similar for both measurements? e.g. type of administration, environment, instructions	Х			
10	Were there any important flaws in the design or methods of the study?		Х		
Statis	stical methods	yes	no	NA	?
11	for continuous scores: Was an intraclass correlation coefficient (ICC) calculated?	Х			
12	for dichotomous/nominal/ordinal scores: Was kappa calculated?	Χ			
13	for ordinal scores: Was a weighted kappa calculated?	Χ			
14	for ordinal scores: Was the weighting scheme described? e.g. linear, quadratic		Х		

	Box C. Measurement error: absolute measures			
Desi	gn requirements	yes	no	?
1	Was the percentage of missing items given?	X		
2	Was there a description of how missing items were handled?	Х		
3	Was the sample size included in the analysis adequate?	Χ		
4	Were at least two measurements available?	Χ		
5	Were the administrations independent?	Χ		
6	Was the time interval stated?	Χ		
7	Were patients stable in the interim period on the construct to be measured?	Χ		
8	Was the time interval appropriate?	Χ		
9	Were the test conditions similar for both measurements? e.g. type of administration, environment, instructions	Х		
10	Were there any important flaws in the design or methods of the study?		Χ	
Stati	stical methods	yes	no	?
11	for CTT: Was the Standard Error of Measurement (SEM), Smallest Detectable Change (SDC) or Limits of Agreement (LoA) calculated?	Х		

Gen	Box D. Content validity (including face validity)  eral requirements	yes	no	?	
1	Was there an assessment of whether all items refer to relevant aspects of the construct to be measured?	X			
2	Was there an assessment of whether all items are relevant for the study population? (e.g. age, gender, disease characteristics, country, setting)	Х			
3	Was there an assessment of whether all items are relevant for the purpose of the measurement instrument? (discriminative, evaluative, and/or predictive)			X	
4	Was there an assessment of whether all items together comprehensively reflect the	Χ			
	construct to be measured?				
5	Were there any important flaws in the design or methods of the study?	X			
	Box E. Structural validity				
1	Does the scale consist of effect indicators, i.e. is it based on a reflective model?	yes X	no	?	
Desi	gn requirements	yes	no	?	
2	Was the percentage of missing items given?	Χ			
3	Was there a description of how missing items were handled?	Χ			
4	Was the sample size included in the analysis adequate?	X			
5	Were there any important flaws in the design or methods of the study?	Χ			
Stat	istical methods	yes	no	NA	

6	for CTT: Was exploratory or confirmatory factor analysis performed?	Х	
7	for IRT: Were IRT tests for determining the (uni-) dimensionality of the items performed?		X

# Step 4: Determining the Generalisability of the results

	Box Generalisability			N/A
	the sample in which the HR-PRO instrument was evaluated adequately described?	yes	no	NA
1	median or mean age (with standard deviation or range)?	Х		
2	distribution of sex?	X		
3	important disease characteristics (e.g. severity, status, duration) and description of treatment?			X
4	setting(s) in which the study was conducted? e.g. general population, primary care or hospital/rehabilitation care	X		
5	countries in which the study was conducted?	Х		
6	language in which the HR-PRO instrument was evaluated?	Χ		
7	Was the method used to select patients adequately described? e.g. convenience, consecutive, or random	Х		
		yes	no	?
8	Was the percentage of missing responses (response rate) acceptable?	X		

### COSMIN box 1. Standards for evaluating the quality of PROM development

Part 1a (PROM design) and part 1b (Cognitive interview study or other pilot test) both need to be completed for each PROM because all standards of part 1a and part 1b will be included in the final rating of the quality of the PROM development. However, if a cognitive interview study or other pilot test was not performed, only the first standard in part 1b needs to be completed and the rest of the box can be skipped. For rating the standards, the "worst score counts" method is used. A total rating for the box can be obtained by taking the lowest rating of any standard in the box. It is also possible to obtain total ratings for different parts of the boxes by taking the lowest rating of any standard of that part of the box.

#### **Box 1. PROM development**

	PROM design neral design requirements	Very Good	Adequate	Doubtful	Inadequate	Not applicable
1	Is a clear description provided of the construct to be measured?	Construct clearly described				
2	Is the origin of the construct clear: was a theory, conceptual framework or disease model used or clear rationale provided to define the construct to be measured?	Origin of the construct clear				
3	Is a clear description provided of the target population for which the PROM was developed?	Target population clearly described				
4	Is a clear description provided of the context of use	Context of use clearly described				

General design requirements	Very Good	Adequate	Doubtful	Inadequate	Not applicable
5 Was the PROM development study performed in a sample representing the target population for which the PROM was developed?	Study performed in a sample representing the target population				
Concept elicitation (relevance and comprehensiveness)					
Was an appropriate qualitative data collection method used to identify relevant items for a new PROM?		Assumable that the qualitative method was appropriate and suitable for the construct and study population, but not clearly described			
Were skilled group moderators/interviewers used?					Not applicable
8 Were the group meetings or interviews based on an appropriate topic or interview guide?					Not applicable

General design requirements	Very Good	Adequate	Doubtful	Inadequate	Not applicable
9 Were the group meetings or interviews recorded and transcribed verbatim?					Not applicable
10 Was an appropriate approach used to analyse the data?					Not applicable
11 Was at least part of the data coded independently?					Not applicable
12 Was data collection continued until saturation was reached?					Not applicable
13 For quantitative studies (surveys): was the sample size appropriate?	≥100				

1b. Cognitive interview study or other pilot test					
	Very Good	Adequate	Doubtful	Inadequate	Not applicable
14 Was a cognitive interview study or other pilot test conducted?	YES				
General design requirements	-				
15 Was the cognitive interview study or other pilot test performed in a sample representing the target population?	Study performed in a sample representing the target population				
Comprehensibility					
16 Were patients asked about the comprehensibility of the PROM?			Not clear (SKIP standards 17- 35)		

#### COSMIN box 2. Standards for evaluating the quality of content validity studies of PROMs

#### **Box 2. Content validity**

Only those parts of the box need to be completed for which information is available. For example, if a content validity study was not performed in professionals, parts 2d and 2e do not need to be completed. If patients were included in a content validity study, but they were only asked about comprehensibility of the PROM items, sections 2a and 2b do not need to be completed.

For rating the standards, the "worst score counts" method is used. A total score for the box can be obtained by taking the lowest rating of any standard in the box. It is also possible to obtain total ratings for different parts of the boxes by taking the lowest rating of any standard of that part of the box.

Content validity study was not performed in professionals or patients.