Appendix C. DistillerSR Screening and Abstraction Forms

Title Screening

Is the article published in English?

Does the article report primary data?

Are the participants in the article human?

Is unresectable colorectal cancer the primary focus of the article?

Abstract Screening

Is the article published in English?

Does the article report primary data?

Are the participants in the article human?

Is unresectable colorectal cancer the primary focus of the article?

CRC Full-text Screening

Is article published in English?
Is treatment date prior to January 1, 2000?
Is the study of relevant design?
Are the study participants human?
Does the article report on the correct patient population?
Did the study employ a relevant intervention?
Did the study report a relevant outcome?

STUDY DESCRIPTION

First Author (Last name):

Year of Publication:

Study design:

What key question(s) does this article address?

Descriptors of Treatment (e.g., drug(s) used, route, etc)

Enrollment Start Date (mm/yyyy)

Enrollment End Date (mm/yyyy)

Number in Group

Outcomes

Setting

Patient population with CRC (%)

Previous Treatment Previous resection: % yes

Previous systemic chemotherapy: % yes

Previous liver-directed therapy: Therapy: %, Therapy2: ...

Previous LDT: select all that apply

DIAGNOSIS Adenocarcinoma Mucinous

Mucinous

Synchronous

Mean Liver

Median Liver

Min Liver

Max Liver

Mean N Hepatic

Median N Hepatic

Min N Hepatic

Max N Hepatic

Other Liver Involvement: Name: %, Name2: ...

PATHOLOGY

Mean Size of Hepatic (cm) Lesion(s) Median Size of Hepatic (cm) Lesion(s) Min Size of Hepatic Lesion(s)
Max Size of Hepatic Lesion(s)
% Unilobar Hepatic Lesion(s)
% Bilobar Hepatic Lesion(s)
Other noted lesion characteristics

PATIENT CHARACTERISITCS

Sex (% Male) Mean Age Median Age Min Age

Max Age

RACE: White (%)
RACE: Black (%)
RACE: Asian (%)
RACE: Hispanic (%)
Child-pugh score: Mean
Child-pugh score: Median
Child-pugh score: Min

Child-pugh score: Max Child-pugh class (A, B, or C) ECOG Performance Score: Mean ECOG Performance Score: Median ECOG Performance Score: Min ECOG Performance Score: Max

Karnofsky Score: Mean Karnofsky Score: Median Karnofsky score: Min Karnofsky Score: Max

ABSTRACTOR COMMENTS: If you would like to leave a comment pertaining to the information above indicate your name

below:

Outcomes Form

FOLLOW-UP

Follow-up assessed?

Length of Follow-up (weeks)

N Subjects Lost to Follow-up

OUTCOMES

Survival outcome definition:

Median Overall Survival (months)

95% CI: Lower limit 95% CI: Upper limit

Mean Overall Survival (months)

95% CI: Lower limit **95% CI:** Upper limit

Survival by Year

% survived at year 1

% survived at year 2

% survived at year 3

% survived at year 4

% survived at year 5

Progression Free Survival

Progression free survival definition:

Liver PFS

Median (months)

95% CI: Lower Limit

95% CI: Upper Limit

Liver PFS

Mean (months)

95% CI: Lower Limit

95% CI: Upper Limit

Overall PFS

Median (months)

95% CI: Lower Limit

95% CI: Upper Limit

Overall PFS

Mean (months)

95% CI: Lower Limit

95% CI: Upper Limit

Outcomes Continued

Local Recurrence N

Local Recurrence %

Pain, Instrument

Mean Pain Score

Min Pain Score

Max Pain Score

Pain Score p-value

QOL, Instrument

Min QOL Score

Max QOL Score

QOL Score p-value

Mean LOS (days)

Min LOS (days)

Max LOS (days)

LOS p-value

Hepatic Abscess (%)

Hepatic Hemorrhage (%)

Biloma (%)

Steatohepatitis (%)

Injury to adjacent organ(s) (%)

Liver failure (%)

Increased alkaline phosphatase (N)

Increased alkaline phosphatase (%)

Increased bilirubin (N)

Increased bilirubin (%)

Increased transaminases (N)

Increased transaminases (%)

Please describe any rare adverse events which do not fit into the categorizations above:

ABSTRACTOR COMMENTS: If you would like to leave a comment pertaining to the information above indicate your name below:

Study Quality

Comparative Studies Quality Assessment (USPSTF)

Initial assembly of comparable groups

Maintenance of comparable groups (includes attrition, crossovers,

adherence, and contamination)

Avoidance of important differential loss to followup or overall

high loss to followup.

Measurements reliable, valid, equal (includes masking of

outcome assessment)

Interventions comparable/ clearly defined

All important outcomes considered Appropriate analysis of results (adjustment for potential confounders and intention-to-treat analysis) Funding/ sponsorship source acknowledged Overall Rating

Non-Randomized Comparative-Deeks and colleagues

Prospective sample definition and selection Clearly described inclusion/exclusion criteria Representative Sample Attempt to balance groups by design Comparable groups as baseline, including clearly described prognostic characteristics Clearly specified interventions Participants in treatment groups recruited within the same time period

Attempt to allocate participants to treatment groups to minimize bias

Concurrent treatment(s) given equally to all treatment groups

Valid, reliable, and equal outcome measures

Blinded outcome assessment

Adequate length of follow-up

Attrition below an overall high level (<20%)

Difference in attrition between treatment

groups below a high level (<15%)

Adjusted for confounders in statistical analysis

Carey and Boden case series quality assessment tool Clearly Defined Question Well-described study population Well-described intervention Use of Validated Outcome Measures Appropriate Statistical Analysis Well-Described Results Discussion/Conclusions Supported by Data

Funding/Sponsorship Source Acknowledged