| | Diagnosis | | | | | | | OI | JADAS | S 2 Iten | ns* | | | | | | G | RADE (outcom | e level) | | |
|-------------------------------|-----------|-----------------------------|-----------------|----------|----------|--------------|----------|----------|----------|----------|----------|----------|--------------|----------|----------|----------|--------------|---------------|-------------|-------------|--|
| Index test | Reference | uries Study | Likelihood | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | Study | Risk of | Indirectness | Inconsistency | Imprecise | Publication | Downgrade |
| | standard | | ratio | | | | | | | | | | | | design | bias | | , | evidence ✓ | bias | |
| Aktiv slump | MRI | | LR+ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | × | ? | V | ? | ↓ |
| | | | LR- | | | | | | | | | | | | | | | | √ | | \ |
| Dain during CLD | MRI | | LR+ | √ | ✓ | √ | ✓ | ✓ | ✓ | ✓ | √ | ✓ | √ | ✓ | / | ✓ | × | ? | ✓ | 2 | ↓ |
| Pain during SLR | WIKI | | LR- | V | • | v | • | • | • | • | V | • | • | • | • | • | | f | ✓ | - · · | \ |
| | | | LR+ | | | | | | | | | | | | | | | | ✓ | | \ |
| Pai during 90deg R KF | MRI | | LR- | ✓ | ✓ | ✓ | √ | ✓ | ✓ | ✓ | ✓ | ✓ | \checkmark | ✓ | ✓ | ✓ | × | ? | ✓ | ? | \ |
| | | | | | | | | | | | | | | | | | | | ✓ | | |
| Pai during 30deg R KF | MRI | Wangensteen et al. (1) | LR+ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | × | ? | | ? | \ |
| | | 5 t and (1) | LR- | | | | | | | | | | | | | | | | ✓ | | \ |
| Pain during active KF | MRI | | LR+ | √ | ✓ | √ | ✓ | ✓ | ✓ | ✓ | √ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ? | ✓ | · ? | \leftrightarrow |
| r air during active iti | IVII (I | | LR- | • | · | · | • | · | ľ | | · | | · | • | · | • | • | • | ✓ | • | \leftrightarrow |
| | | | LR+ | | | | | | | | | | | | | | | | ✓ | | \ |
| Pain during active KE | MRI | | LR- | √ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | √ | √ | ✓ | ✓ | ✓ | √ | × | ? | ✓ | ? | \ |
| | | | LR+ | | | | | | | | | | | | | | | | ✓ | | \ |
| Pain during trunk F | MRI | | LR- | ✓ | ✓ | \checkmark | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | \checkmark | ✓ | ✓ | ✓ | × | ? | √ | ? | \ |
| | | | | | | | | | | | | | | | | | | | | | |
| Taking off shoe | US | | LR+: N/A | × | ✓ | ? | × | ✓ | ✓ | × | × | ✓ | ? | ? | ✓ | xx | × | ? | N/A | ? | N/A |
| Designed range of | | | LR- LR+: N/A | | | | | | | | | | | | | | | | ? N/A | | ↓↓↓ N/A |
| Resisted range of motion test | US | Zeren et al. (2) | LR- | × | √ | ? | × | √ | ✓ | × | × | ✓ | ; | ? | √ | xx | × | ? | √ × | ? | → → → |
| Passive range of motion test | US | (←) | LR+: N/A LR- | × | ✓ | ? | × | ✓ | √ | × | × | ✓ | ? | ? | ✓ | xx | × | ? | N/A ✓ | ? | N/A ↓↓↓ |
| Active range of motion | US | | LR+: N/A | × | ✓ | ? | × | √ | ✓ | × | × | ✓ | 2 | ? | / | xx | × | ? | N/A | ? | N/A |
| test | 05 | | LR- | ^ | • | ſ | ^ | Y | V | ^ | ^ | V | ? | | • | ~ ~ | ^ | ſ | ✓ | | $\downarrow\downarrow\downarrow\downarrow$ |
| Composit | MRI | Schneider- Kolsky et al. | LR+ | √ | ✓ | √ | ✓ | ✓ | ✓ | ✓ | √ | ✓ | ? | ✓ | ✓ | ✓ | × | ? | ✓ | . ? | \ |
| σοπροσιι | INIUI | (3) | LR-: N/A | • | | • | | | | | • | | ŗ | | | | | | N/A | ŗ. | N/A |

Abbreviations: MRI (magnetic resonance imaging); US (ultrasound); LR+ (Positive likelihood ratio); LR- (negative likelihood ratio); N/A (not applicable)

*Item 1: Was a consecutive or random sample of patients enrolled? Item 2: Was a case-control design avoided? Item 3: Did the study avoid inappropriate exclusions? Item 4: Were the index test results interpreted without knowledge of the results of the reference standard? Item 5: If a threshold was used, was it pre-specified? Item 6: Is the reference standard likely to correctly classify the target condition? Item 7: Were the reference standard results interpreted without knowledge of the results of the index test? Item 8: Was there an appropriate interval between index test(s) and reference standard? Item 9: Did all patients receive a reference standard? Item 10: Did patients receive the same reference standard? Item 11: Were all patients included in the analysis?

Quadas 2 risk of bias assessment: × item not fulfilled; ✓ = item fulfilled; ? unclear or unknown if item is fulfilled

GRADE assessments: \times = item cause for possible downgrade once; \times = item cause for possible downgrade twice; \checkmark = item fulfilled, no downgrading; ? = item unclear or not available, no upgrading or downgrading.

** \downarrow = downgrade quality by one level; $\downarrow \downarrow$ =downgrade quality by two levels; $\downarrow \downarrow \downarrow$ =downgrade quality by three levels; \leftrightarrow =no downgrade

Table 2. Risk of bias assessment and GRADE of clinical tests for diagnosing adductor injuries.

| | Diagnosis | S | | | | | | | | AS Item | • | | | | | | C | GRADE (outcon | ne level) | | |
|---------------------------|--------------------|-----------|------------------|----------|----------|----------|----------|----------|----------|-----------|----------|----------|----|----------|--------------|--------------|--------------|----------------|--------------------|------------------|-------------------------|
| | Adductor inju | uries | | | | | | C | ZUADA | AO ILEITI | 5 | | | | | | | ATADE (OUICOTI | ie ievei) | | |
| Index test | Reference standard | Study | Likelihood ratio | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | Study design | Risk of bias | Indirectness | Inconsistency | Imprecise evidence | Publication bias | Downgrade** |
| Palpation | MRI | | LR + | ✓ | ✓ | √ | ✓ | ✓ | ✓ | √ | ✓ | / | ? | ✓ | | _ | × | ? | ✓ | ? | V |
| raipation | IVINI | | LR - | | | • | • | • | • | • | | , | | • | • | • | ^ | ŗ. | × | ŗ | $\downarrow \downarrow$ |
| 0 00 | MRI | | LR + | ✓ | ✓ | √ | ✓ | ✓ | √ | ✓ | √ | ✓ | ? | √ | ✓ | √ | | ? | x | 2 | ↓↓ |
| Squeeze 0° | MHI | | LR - | • | • | • | • | • | • | • | • | • | | • | • | • | X | f | ✓ | ? | \ |
| 0 | MDI | | LR + | √ | ✓ | √ | ✓ | ✓ | √ | | √ | ✓ | 2 | ✓ | ✓ | √ | × | ? | ✓ | 2 | |
| Squeeze 45° | MRI | Serner et | LR - | • | • | V | • | • | • | ✓ | • | • | ? | v | • | • | * | f | • | ? | \ |
| Isometric adduction | MDI | al. (4) | LR + | √ | ✓ | | ✓ | ✓ | √ | | | ✓ | | ✓ | ✓ | √ | | 2 | x | 2 | ↓↓ |
| (outer range) | MRI | | LR - | • | • | √ | • | • | • | ✓ | √ | • | ? | V | V | • | × | ? | ✓ | ? | \ |
| | | | LR + | ✓ | ✓ | | ✓ | ✓ | √ | | | | | | | | | 2 | x | 2 | ↓↓ |
| Adductor stretching | MRI | | LR - | • | • | √ | • | • | • | ✓ | √ | ✓ | ? | √ | ✓ | ✓ | × | ? | ✓ | ? | \ |
| Flexion Abduction | MBI | | LR + | ✓ | | | | | ✓ | | | | 2 | | | | | 2 | | | |
| External Rotation (FABER) | MRI | | LR - | • | √ | √ | ✓ | ✓ | V | √ | √ | ✓ | ? | √ | ✓ | √ | × | ? | √ | ? | V |

Abbreviations: MRI (magnetic resonance imaging); LR+ (Positive likelihood ratio); LR- (negative likelihood ratio).

*Item 1: Was a consecutive or random sample of patients enrolled? Item 2: Was a case-control design avoided? Item 3: Did the study avoid inappropriate exclusions? Item 4: Were the index test results interpreted without knowledge of the results of the reference standard? Item 5: If a threshold was used, was it pre-specified? Item 6: Is the reference standard likely to correctly classify the target condition? Item 7: Were the reference standard results interpreted without knowledge of the results of the index test? Item 8: Was there an appropriate interval between index test(s) and reference standard? Item 9: Did all patients receive a reference standard? Item 10: Did patients receive the same reference standard? Item 11: Were all patients included in the analysis?

Quadas 2 risk of bias assessment: × item not fulfilled; ✓ = item fulfilled; ? unclear or unknown if item is fulfilled

GRADE assessments: x = item cause for possible downgrade once; xx = item cause for possible downgrade twice; x = item fulfilled, no downgrading; ? = item unclear or not available, no upgrading or downgrading.

** \downarrow = downgrade quality by one level; \downarrow \downarrow =downgrade quality by two levels; \downarrow \downarrow \downarrow =downgrade quality by three levels; \leftrightarrow =no downgrade

| Table 3. Risk of bias | assessment and | GRADE of clin | nical tests for | diagnosino | rectus femoris injuries. |
|-----------------------|----------------|---------------|-----------------|------------|--------------------------|
| | | | | | |

| | Diagnosi | is | | | | | | | | S Items | | | | | | | 0 | RADE (outcom | o lovol) | | |
|--|--------------------|------------------|--------------------|----------|-----------|----------|------------|-----------|----------|------------|----------|----------|----------|----------|--------------|--------------|--------------|---------------|--------------------|------------------|-------------------------|
| Re | ctus femoris | injuries | | | | | | G | (UADA | io ileilis | | | | | | | G | HADE (OULCOIT | e ievei) | | |
| Index test | Reference standard | Study | Likelihood ratio | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | Study design | Risk of bias | Indirectness | Inconsistency | Imprecise evidence | Publication bias | Downgrade ** |
| Palpation | MRI | | LR + | ✓ | ✓ | ✓ | √ | \ | ✓ | ✓ | ✓ | / | ? | ✓ | ✓ | ✓ | × | ? | x | · ? | 1 |
| Γαιραιίοι | IVICI | | LR - | • | • | • | • | , | , | • | | , | : | • | | • | _ | · · | ? | : | ↓ |
| Isometric hip flexion | MRI | | LR+ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ? | ✓ | ✓ | ✓ | × | ? | ✓ | · ? | \ |
| 0° | IVINI | | LR - | | • | • | • | • | | • | | • | | • | | • | ^ | į. | × | • | \ |
| Isometric hip flexion | MRI | | LR + | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | √ | √ | ✓ | · · | ✓ | ✓ | ✓ | x | ? | ✓ | ? | V |
| 90° | IVINI | | LR - | | • | • | • | • | | • | | • | | • | • | • | ^ | · · | x | • | $\downarrow \downarrow$ |
| Isometric hip flexion (modified Thomas | MRI | Serner et | LR+ | √ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | √ | ✓ | · · | √ | ✓ | ✓ | x | ? | ✓ | ? | \ |
| Test) | IVINI | al. (4) | LR - | | • | • | • | • | | • | | • | | • | | • | ^ | į. | × | • | $\downarrow \downarrow$ |
| Isometric knee | MRI | | LR + | √ | ✓ | ✓ | √ | ✓ | / | √ | √ | / | ? | √ | ✓ | √ | × | ? | ✓ | ? | \ |
| extension (modified Thomas Test) | MINI | | LR - | | V | • | • | • | • | • | • | • | | • | • | • | ~ | f f | ? | | \ |
| Hip extension | MRI | | LR+ | ✓ | ✓ | √ | ✓ | ✓ | ✓ | ✓ | √ | ✓ | ? | √ | ✓ | ✓ | x | ? | ✓ | ? | V |
| (stretching; modified Thomas Test) | MINI | | LR - | | V | • | • | • | • | • | • | • | | • | • | • | ~ | f f | x | | $\downarrow \downarrow$ |
| Knee flexion | MRI | | LR + | √ | √ | ✓ | ✓ | ✓ | ✓ | ✓ | √ | ✓ | 2 | ✓ | ✓ | ✓ | x | ? | x | 2 | \ |
| (stretching; modified Thomas Test) | MKI | | LR - | | • | • | • | • | • | • | v | ' | ! | • | • | • | * | í. | x | ? | \ |
| Abbreviations: MRI (ma | anotic reconance | co imaging\. I B | + /Docitivo likoli | hood ra | tio\. I D | Inogativ | o likaliha | od ratio) | | | | | | | | | | • | | | |

Abbreviations: MRI (magnetic resonance imaging); LR+ (Positive likelihood ratio); LR- (negative likelihood ratio).

*Item 1: Was a consecutive or random sample of patients enrolled? Item 2: Was a case-control design avoided? Item 3: Did the study avoid inappropriate exclusions? Item 4: Were the index test results interpreted without knowledge of the results of the reference standard? Item 5: If a threshold was used, was it pre-specified? Item 6: Is the reference standard likely to correctly classify the target condition? Item 7: Were the reference standard results interpreted without knowledge of the results of the index test? Item 8: Was there an appropriate interval between index test(s) and reference standard? Item 9: Did all patients receive a reference standard? Item 10: Did patients receive the same reference standard? Item 11: Were all patients included in the analysis?

Quadas 2 risk of bias assessment: × item not fulfilled; ✓ = item fulfilled; ? unclear or unknown if item is fulfilled

GRADE assessments: x = item cause for possible downgrade once; x = item cause for possible downgrade twice; y = item fulfilled, no downgrading; y = item unclear or not available, no upgrading or downgrading.

** \downarrow = downgrade quality by one level; \downarrow \downarrow =downgrade quality by two levels; \downarrow \downarrow \downarrow =downgrade quality by three levels; \leftrightarrow =no downgrade

| Treatment Hamstring | | | Risk c | f Bias | asses | ssmen | t Item* | * | Outcome | | | GRA | ADE (outcome | level) | | |
|--|-------------------------------|----------|----------|----------|----------|----------|---------|----------|----------------|-----------------|--------------|---------------|--------------|----------|------------------|--|
| Interventions | Study | 1 | 2 | 3 | 4 | 5 | 6 | 7 | | Study design | Risk of bias | Inconsistency | Indirectness | | Publication bias | Downgrade** |
| Multifactorial criteria-based algorithm vs. | Mendiguchia | ? | × | × | ? | ✓ | ? | | Return to play | RCT ✓ | ? | ? | ✓ | xx | ? | ↓↓ |
| lengthening hamstring exercises | et al. (5) | • | | | • | | • | | Reinjuries | RCT ✓ | ? | ? | ✓ | xx | ? | \ |
| Lengthening hamstring exercises versus to | Askling et al. | × | × | × | × | ✓ | ? | ? | Return to play | | xx | ✓ | ✓ | ✓ | ? | ↓↓ |
| conventional hamstring exercises (6) | (7,8) | × | x | x | × | ✓ | ? | ? | Reinjuries | RCT ✓ | xx | ✓ | ✓ | xx | ? | $\downarrow\downarrow\downarrow$ |
| Running and eccentric hamstring strengthening versus agility and trunk stabilization | Silder et al. (9) | ? | ? | x | ? | ✓ | ? | ? | Return to play | RCT ✓ | × | ? | × | xx | ? | 111 |
| Agility and trunk stabilization vs. hamstring | Sherry et al. | 2 | 2 | 16 | 10 | 2 | 2 | 16 | Return to play | RCT ✓ | xx | ? | × | × | ? | $\downarrow\downarrow\downarrow$ |
| stretching and strengthening | (10) | ? | ? | × | × | ? | ! | × | Reinjuries | RCT ✓ | xx | ? | × | × | ? | $\downarrow\downarrow\downarrow\downarrow$ |
| Hamstring stretching four times/day versus hamstring stretching once daily | Malliaropoulos et al. (11) | ? | ? | x | ? | ? | ? | × | Return to play | RCT ✓ | xx | ? | × | ✓ | ? | \ |
| | Reurink et al. (12) | √ | ✓ | ✓ | ✓ | ✓ | ? | ✓ | Return to play | | √ | × | ✓ | √ | ? | |
| Platelet-rich plasma versus placebo or rehabilitation (6) | Hamilton et al. (13) | ? | ? | ✓ | ✓ | ✓ | × | ✓ | | RCT ✓ | • | ^ | • | • | | \ |
| | Hamid et al. (14) | ✓ | ✓ | × | √ | ✓ | × | ✓ | Reinjuries | RCT √ | ✓ | ✓ | ✓ | × | ? | \ |
| Pain-threshold (≤4 on the 0-10 NRS) versus Pain-free (0 on the 0-10 NRS) | Hickey et al. | × | ✓ | ✓ | ✓ | 2 | 2 | / | Return to play | DOT 1 | ✓ | ? | × | × | ? | ↓↓ |
| rehabilitation | (15) | ^ | • | • | • | | | • | Reinjuries | RCT √ | √ | ? | ✓ | xx | Ş | $\downarrow \downarrow$ |

Abbreviations: RCT (randomized controlled trial)

*Item 1: Random sequence generation; Item 2: Allocation concealment; Item 3: Blinding of participants and personal; Item 4: Blinding of outcome assessor; Item 5: Incomplete outcome data; Item 6: Selective reporting; Item 7: Other sources of bias.

Risk of bias assessment: × item not fulfilled; ✓ = item fulfilled; ? unclear or unknown if item is fulfilled

GRADE assessments: $x = \text{item cause for possible downgrade once}; \ x = \text{item cause for possible downgrade twice}; \ y = \text{item fulfilled, no downgrading; ? = item unclear or not available, no upgrading or downgrading.}$

^{**} \downarrow = downgrade quality by one level; \downarrow \downarrow =downgrade quality by two levels; \downarrow \downarrow =downgrade quality by three levels; \leftrightarrow =no downgrade

| Table 5. Risk of bias asses | sment and | GRAI | DE fo | or trea | atme | nt of | rectus | fem | oris/q | uadr | iceps | injuri | es. | | | | | | | | | | |
|-----------------------------|--------------|------|-------|---------|------|-------|--------|------|--------|----------|-------|----------|------|----|----------|----------------|-----------------|--------------|---------------|--------------|--------------------|------------------|-------------|
| Treatment Rectus femoris/ | quadriceps | | | | | | SI | GN C | heck | list 3' | r | | | | | Outcome | | | G | RADE (outcor | ne level) | | |
| Interventions | Study | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | | Study design | Risk of bias | Inconsistency | Indirectness | Imprecise evidence | Publication bias | Downgrade** |
| A two-phase criteria-based | Cross et al. | ./ | NI/A | × | NI/A | 2 | N/A | × | × | V | 2 | ~ | N/A | 2 | ~ | Return to play | Cohort XX | × | ? | × | × | ? | 1 |
| intervention | (16) | V | N/A | ^ | N/A | • | IN/A | ^ | ^ | ~ | ! | ^ | IN/A | | ^ | Reinjuries | Cohort XX | × | ? | ✓ | ✓ | ? | 1 |

Abbreviations: N/A (not applicable).

*Item 1: The study addresses an appropriate and clearly focused question?; Item 2: The two groups being studied are selected from source populations that are comparable in all respects other than the factor under investigation?; Item 3: The study indicates how many of the people asked to take part did so, in each of the groups being studied?; Item 4: The likelihood that some eligible subjects might have the outcome at the time of enrolment is assessed and taken into account in the analysis?; Item 5: What percentage of individuals or clusters recruited into each arm of the study dropped out before the study was completed?; Item 6: Comparison is made between full participants and those lost to follow up, by exposure status?; Item 7: The outcomes are clearly defined?; Item 8: The assessment of outcome is made blind to exposure status. If the study is retrospective this may not be applicable?; Item 9: Where blinding was not possible, there is some recognition that knowledge of exposure status could have influenced the assessment of outcome?; Item 10: The method of assessment of exposure is reliable?; Item 11: Evidence from other sources is used to demonstrate that the method of outcome assessment is valid and reliable?; Item 12: Exposure level or prognostic factor is assessed more than once?; Item 13: The main potential confounders are identified and taken into account in the design and analysis?; Item 14: Have confidence intervals been provided?

Risk of bias assessment: × item not fulfilled; ✓ = item fulfilled; ? unclear or unknown if item is fulfilled

GRADE assessments: x = item cause for possible downgrade once; xx = item cause for possible downgrade twice; x = item fulfilled, no downgrading; ?= item unclear or not available, no upgrading or downgrading.

** $\downarrow\downarrow\downarrow$ =downgrade quality by three levels

| Table 6. Risk of bias asses | sment and (| GRAI | DE fo | or tre | atme | nt of o | calf in | juries | 3. | | | | | | | | | | | | | | |
|------------------------------|----------------------|----------|-------|----------|------|---------|----------|----------|--------|-------|------|------|----|----|----|----------------|------------------|--------------|---------------|--------------|--------------------|------------------|--------------|
| Treatment Calf | | | | | | ; | SIGN | Che | cklist | 3 and | d 4* | | | | | Outcome | | | G | RADE (outco | me level) | | |
| Interventions | Study | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | | Study design | Risk of bias | Inconsistency | Indirectness | Imprecise evidence | Publication bias | Downgrade*** |
| Multimodal treatment program | Millar (17) | × | N/A | × | N/A | 2 | 2 | ? | x | N/A | 2 | N/A | × | x | × | Return to play | Cohort XX | xx | ? | ✓ | ? | ? | \ |
| Multimodal treatment program | Williar (17) | ^ | IN/A | ^ | IN/A | | | ŗ | ^ | IN/A | · | IN/A | ^ | ^ | ^ | Reinjuries | Cohort XX | xx | ? | ✓ | ? | ? | \ |
| Multimodal treatment program | Pedret et al. (18) | ✓ | N/A | × | N/A | ✓ | N/A | x | x | ? | ? | x | ? | ? | × | Reinjuries | Cohort XX | × | ? | √ | ? | ? | \ |
| Platelet-rich plasma** | Borrione et al. (19) | × | ✓ | ✓ | ? | ✓ | ✓ | ✓ | x | ? | × | x | - | - | - | Return to play | Case- control | xx | ? | √ | ✓ | ? | 1 |

Abbreviations: N/A (not applicable).

*SIGN 3: Item 1: The study addresses an appropriate and clearly focused question?; Item 2: The two groups being studied are selected from source populations that are comparable in all respects other than the factor under investigation?; Item 3: The study indicates how many of the people asked to take part did so, in each of the groups being studied?; Item 4: The likelihood that some eligible subjects might have the outcome at the time of enrolment is assessed and taken into account in the analysis?; Item 5: What percentage of individuals or clusters recruited into each arm of the study dropped out before the study was completed?; Item 6: Comparison is made between full participants and those lost to follow up, by exposure status?; Item 7: The outcomes are clearly defined?; Item 8: The assessment of outcome is made blind to exposure status. If the study is retrospective this may not be applicable?; Item 9: Where blinding was not possible, there is some recognition that knowledge of exposure status could have influenced the assessment of outcome?; Item 10: The method of outcome assessment of exposure is reliable?; Item 11: Evidence from other sources is used to demonstrate that the method of outcome assessment is valid and reliable?; Item 12: Exposure level or prognostic factor is assessed more than once?; Item 13: The main potential confounders are identified and taken into account in the design and analysis?; Item 14: Have confidence intervals been provided?

SIGN 4: Item 1: The study addresses an appropriate and clearly focused question?; Item 2: The cases and controls are taken from comparable populations?; Item 3: The same exclusion criteria are used for both cases and controls?; Item 4: What percentage of each group (cases and controls) participated in the study?; Item 5: Comparison is made between participants and non-participants to establish their similarities or differences?; Item 6: Cases are clearly defined and differentiated from controls?; Item 7: It is clearly established that controls are non-cases?; Item 8: Measures will have been taken to prevent knowledge of primary exposure influencing case ascertainment?; Item 9: Exposure status is measured in a standard, valid and reliable way?; Item 10: The main potential confounders are identified and taken into account in the design and analysis?; Item 11: Confidence intervals are provided.

** Risk of bias using SIGN 4

Risk of bias assessment: × item not fulfilled; ✓ = item fulfilled; ? unclear or unknown if item is fulfilled

GRADE assessments: × = item cause for possible downgrade once; ×× = item cause for possible downgrade twice; ✓ = item fulfilled, no downgrading; ?= item unclear or not available, no upgrading or downgrading.

*** $\downarrow \downarrow \downarrow$ =downgrade quality by three levels

Supplementary material

| Prevention Hamstring | | | Risk | of Bia | s ass | essme | nt Iten | ו* | Outcome | | | GR/ | DE (outcome l | evel) | | |
|---|------------------------------------|----------|----------|--------|-------|----------|----------|----------|----------|-----------------|--------------|---------------|---------------|--------------------|------------------|--|
| Interventions | Study | 1 | 2 | 3 | 4 | 5 | 6 | 7 | | Study design | Risk of bias | Inconsistency | Indirectness | Imprecise evidence | Publication bias | Downgrade ** |
| | Gabbe et al. (21) | √ | ✓ | × | x | ✓ | ✓ | ✓ | | | | | | | | |
| | Soligard et al. (22) | ? | ? | × | x | x | ✓ | ✓ | | | | | | | | |
| | Engebretsen et al. (23) | ? | ? | × | × | ? | ? | x | | | | | | | | |
| Interventions including the Nordic Hamstring exercise (20) | Petersen et al. (24) | ✓ | ✓ | × | x | ✓ | ✓ | ✓ | Injuries | RCT √ | ?/✓ | × | ✓ | ✓ | ✓ | \ |
| | Del Ama Espinosa et al. (25) | ✓ | ✓ | × | × | ✓ | ✓ | ✓ | | | | | | | | |
| | Silvers-Granelli et al. (26) | ✓ | ? | x | x | x | ? | × | | | | | | | | |
| | Van der Horst et al. (27) | ✓ | ✓ | x | × | ✓ | ✓ | ✓ | | | | | | | | |
| | Aksling et al. (29) | ? | ? | x | ? | ? | ? | × | | | | | | | | |
| Mixed eccentric hamstring training (28) | Gabbe et al. (21) | ✓ | ✓ | x | x | ✓ | ✓ | ✓ | Injuries | RCT✓ | ✓ | × | _ | × | ? | * |
| gg | Engebretsen et al. (23) | ? | ? | × | × | ? | ? | × | , | noi | | | | | • | |
| | Petersen et al. (24) | √ | ✓ | × | x | √ | ✓ | ✓ | | | | | | | | |
| FIFA 11+ (30) | Soligard et al. (22) | ? | ? | × | × | × | ✓ | ✓ | Injuries | RCT ✓ | × | ✓ | ✓ | √ | ? | \ |
| 1117(114 (00) | Silvers-Granelli et al. (26) | √ | ? | × | × | × | ? | × | injunes | HOI V | | | • | | • | |
| Nordic Hamstring Exercise Protocol (meta- analysis performed as part of this | Petersen et al. (24) | ✓ | ✓ | × | × | ✓ | ✓ | ✓ | Injuries | | ✓ | √ | ✓ | √ | ? | |
| statement) | Van der Horst et al. (27) | ✓ | ✓ | x | x | ✓ | ✓ | ✓ | Injuries | RCT ✓ | • | • | • | • | ŗ | \leftrightarrow |
| Bounding exercise program | Van de Hoef et al. (31) | ✓ | ? | x | × | ✓ | ✓ | ✓ | Injuries | RCT ✓ | ✓ | ? | ✓ | × | ? | \ |
| FIFA 11+ program pre- and post-football | Al Attar et al. (32) | ✓ | ? | x | x | ✓ | ✓ | x | Injuries | RCT ✓ | × | ? | ✓ | xx | ? | 1 |
| Modified FIFA 11+ with rescheduling of Part 2 versus standard FIFA 11+ | Whalan et al. (33) | ? | ? | x | x | ✓ | ? | ✓ | Injuries | RCT ✓ | ? | ? | ✓ | × | ? | V |
| Balance board training | Soderman et al. (34) | ? | ? | × | × | ✓ | ? | × | Injuries | RCT √ | × | ? | ✓ | xx | ? | $\downarrow\downarrow\downarrow\downarrow$ |

*Item 1: Random sequence generation; Item 2: Allocation concealment; Item 3: Blinding of participants and personal; Item 4: Blinding of outcome assessor; Item 5: Incomplete outcome data; Item 6: Selective reporting; Item 7: Other sources of bias.

Risk of bias assessment: × item not fulfilled; ✓ = item fulfilled; ? unclear or unknown if item is fulfilled

Supplementary material

GRADE assessments: x = item cause for possible downgrade once; x = item cause for possible downgrade twice; x = item fulfilled, no downgrading; ? = item unclear or not available, no upgrading or downgrading.

** \downarrow = downgrade quality by one level; \downarrow \downarrow =downgrade quality by two levels; \downarrow \downarrow \downarrow =downgrade quality by three levels; \leftrightarrow =no downgrade

| Prevention Adductor (Gro | oin) | | Risk | of Bias | sasse | ssmei | nt Item* | | Outcome | | | GRA | ADE (outcome le | evel) | | |
|--|-------------------------------------|----------|----------|---------|-------|----------|----------|----------|----------|-----------------|--------------|---------------|-----------------|--------------------|------------------|---|
| Interventions | Study | 1 | 2 | 3 | 4 | 5 | 6 | 7 | | Study design | Risk of bias | Inconsistency | Indirectness | Imprecise evidence | Publication bias | Downgrade ** |
| | Arnason et al. (36) | ? | ? | × | x | ? | ? | × | | | | | | | | |
| | Beijsterveldt et al. (37) | ? | ? | × | x | ✓ | × | ? | | | | | | | | |
| Mixed groin prevention programs (35) | Engebretsen et al. (23) | ? | ? | x | × | ? | ? | × | Injuries | RCT ✓ | × | ✓ | × | × | ç | ↓ ↓ |
| | Holmich et al. (38) | ✓ | ✓ | × | × | ✓ | ? | × | , | NOT 7 | | | | | • | |
| | Soderman et al. (34) | ? | ? | × | × | ✓ | ? | × | | | | | | | | |
| | Steffen et al. (39) | ? | ? | × | × | ✓ | ? | × | | | | | | | | |
| Specific adductor strength training (35) | Holmich et al. (38) | ✓ | ✓ | × | × | ✓ | ? | x | Injuries | DOT V | × | ✓ | × | × | 2 | ↓ ↓ |
| Specific adductor strength training (55) | Engebretsen et al. (23) | ? | ? | × | × | ? | ? | × | injunes | RCT ✓ | ~ | • | ^ | _ | · | VV |
| ΓΙΓΛ 11 (ΩΕ) | Steffen et al. (39) | ? | ? | × | × | ✓ | ? | × | Injuries | | × | × | × | × | ? | ** |
| FIFA 11 (35) | Beijsterveldt et al. (37) | ? | ? | × | × | ✓ | × | ? | injunes | RCT ✓ | | _ | ^ | _ | ŗ | V |
| FIFA 11+ programme in footabll (30) | Silvers- Granelli et al. (26) | ✓ | ? | × | × | × | ? | × | Injuries | RCT ✓ | × | ✓ | × | √ | Ş | \ |
| | Soligard et al. (22) | ? | ? | × | × | × | ✓ | ✓ | - | | | | | | • | |
| FIFA 11+ programme in mixed sports | Longo et al. (40) | ✓ | ? | × | × | √ | ✓ | ✓ | Injuries | RCT ✓ | ✓ | × | × | xx | ? | $\downarrow \downarrow \downarrow \downarrow$ |
| p. ag. a | Slauterbeck et al. (41) | ✓ | ? | X | X | √ | ? | √ | , | noi * | | | | | • | |
| Adductor strengthening program | Haroy et al. (42) | √ | ? | X | × | √ | ✓ | √ | Injuries | RCT ✓ | √ | ? | × | ✓ | ? | V |
| FIFA 11+ program pre- and post-football | Al Attar et al. (32) | √ | ? | × | × | √ | ✓ | × | Injuries | RCT ✓ | × | ? | X | XX | ? | $\downarrow\downarrow\downarrow\downarrow$ |
| Modified FIFA 11+ with rescheduling of Part 2 versus standard FIFA 11+ | Whalan et al. (33) | ? | ? | × | x | ✓ | ? | ✓ | Injuries | RCT √ | ? | ? | × | ✓ | ? | ↓ |

Abbreviations: RCT (randomized controlled trial)

*Item 1: Random sequence generation; Item 2: Allocation concealment; Item 3: Blinding of participants and personal; Item 4: Blinding of outcome assessor; Item 5: Incomplete outcome data; Item 6: Selective reporting; Item 7: Other sources of bias.

Risk of bias assessment: × item not fulfilled; ✓ = item fulfilled; ? unclear or unknown if item is fulfilled

GRADE assessments: \times = item cause for possible downgrade once; $\times \times$ = item cause for possible downgrading or downgrading.

** \downarrow = downgrade quality by one level; \downarrow \downarrow =downgrade quality by two levels; \downarrow \downarrow \downarrow =downgrade quality by three levels; \leftrightarrow =no downgrade

| Table 9. Risk of bias assessment and | d GRADE for p | reventi | on of | anterio | r thigh | n/quad | driceps i | njuries. | | | | | | | | |
|--|-------------------------------------|----------|-------|---------|---------|----------|-----------|----------|----------|-----------------|--------------|---------------|----------------|--------------------|------------------|--|
| Prevention anterior thigh/quad | driceps | | Risk | of Bia | s asse | essme | nt Item | | Outcome | | | GRA | ADE (outcome l | evel) | | |
| Interventions | Study | 1 | 2 | 3 | 4 | 5 | 6 | 7 | | Study design | Risk of bias | Inconsistency | Indirectness | Imprecise evidence | Publication bias | Downgrade |
| FIFA 11+ (meta-analysis performed as part | Silvers- Granelli et al. (26) | ✓ | ? | × | x | x | ? | × | Injuries | RCT √ | × | ✓ | ✓ | × | ? | 4 |
| of this statement) | Soligard et al. (22) | ? | ? | x | x | x | ✓ | ✓ | , , , | nor - | | | | | • | , |
| FIFA 11+ program pre- and post-football | Al Attar et al. (32) | ✓ | ? | × | × | ✓ | ✓ | × | Injuries | RCT ✓ | × | ? | ✓ | ×× | ? | $\downarrow\downarrow\downarrow\downarrow$ |
| Modified FIFA 11+ with rescheduling of Part 2 versus standard FIFA 11+ | Whalan et al. (33) | ? | ? | × | × | ✓ | ? | ✓ | Injuries | RCT ✓ | ? | ? | ✓ | ✓ | ? | \leftrightarrow |
| Balance board training | Soderman et al. (34) | ? | ? | × | × | ✓ | ? | × | Injuries | RCT ✓ | × | ? | ✓ | ×× | ? | 1 |

Abbreviations: RCT (randomized controlled trial)

*Item 1: Random sequence generation; Item 2: Allocation concealment; Item 3: Blinding of participants and personal; Item 4: Blinding of outcome assessor; Item 5: Incomplete outcome data; Item 6: Selective reporting; Item 7: Other sources of bias.

Risk of bias assessment: × item not fulfilled; ✓ = item fulfilled; ? unclear or unknown if item is fulfilled

GRADE assessments: \times = item cause for possible downgrade once; \times = item cause for possible downgrading; ? = item unclear or not available, no upgrading or downgrading.

^{**} \downarrow = downgrade quality by one level; \downarrow \downarrow =downgrade quality by two levels; \downarrow \downarrow \downarrow =downgrade quality by three levels; \leftrightarrow =no downgrade

| Table 10. Risk of bias asse | essment and (| GRA | ADE | for p | orever | ntion | of cal | f inju | ries. | | | | | | | | | | | | | | |
|---------------------------------|---------------------|----------|---------|-------|--------|-------|--------|----------|-------|---------|----------|----|----|----|----|----------|-----------------|--------------|---------------|--------------|--------------------|------------------|-------------|
| Prevention Ca | lf | | | | | | S | SIGN | Chec | klist 3 | }* | | | | | Outcome | | | G | RADE (outco | me level) | | |
| Interventions | Study | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | | Study design | Risk of bias | Inconsistency | Indirectness | Imprecise evidence | Publication bias | Downgrade** |
| soccer-specific balance program | Kraemer et al. (43) | ✓ | N/ A | N/A | ? | × | ? | ✓ | x | x | ✓ | ✓ | ? | ? | × | Injuries | Cohort XX | × | ? | ✓ | ? | ? | \ |

Abbreviations: N/A (not applicable).

*SIGN 3: Item 1: The study addresses an appropriate and clearly focused question?; Item 2: The two groups being studied are selected from source populations that are comparable in all respects other than the factor under investigation?; Item 3: The study indicates how many of the people asked to take part did so, in each of the groups being studied?; Item 4: The likelihood that some eligible subjects might have the outcome at the time of enrolment is assessed and taken into account in the analysis?; Item 5: What percentage of individuals or clusters recruited into each arm of the study dropped out before the study was completed?; Item 6: Comparison is made between full participants and those lost to follow up, by exposure status?; Item 7: The outcomes are clearly defined?; Item 8: The assessment of outcome is made blind to exposure status. If the study is retrospective this may not be applicable?; Item 9: Where blinding was not possible, there is some recognition that knowledge of exposure status could have influenced the assessment of outcome?; Item 10: The method of outcome assessment of exposure is reliable?; Item 11: Evidence from other sources is used to demonstrate that the method of outcome assessment is valid and reliable?; Item 12: Exposure level or prognostic factor is assessed more than once?; Item 13: The main potential confounders are identified and taken into account in the design and analysis?; Item 14: Have confidence intervals been provided?

Risk of bias assessment: × item not fulfilled; ✓ = item fulfilled; ? unclear or unknown if item is fulfilled

GRADE assessments: × = item cause for possible downgrade once; ×× = item cause for possible downgrade twice; ✓ = item fulfilled, no downgrading; ?= item unclear or not available, no upgrading or downgrading.

** $\downarrow\downarrow\downarrow$ =downgrade quality by three levels

ROBIS: Tool to assess risk of bias in systematic reviews

Table 11. Suggested Tabular Presentation for ROBIS Results

| Review | | Phase 2 | | | Phase 3 |
|--------------------|----------------------------------|---|---|---------------------------|-------------------------------|
| _ | 1. STUDY ELIGIBILITY CRITERIA | 2. IDENTIFICATION AND SELECTION OF STUDIES | 3. DATA COLLECTION AND STUDY APPRAISAL | 4. SYNTHESIS AND FINDINGS | RISK OF BIAS IN THE REVIEW |
| Van Dyk 2019 (20) | <u>©</u> | 8 | <u>©</u> | ? | ? |
| Thorborg 2017 (30) | | | \odot | ? | ? |
| Esteve 2015 (35) | ? | ? | <u>©</u> | ? | ? |
| Goode 2015 (28) | ? | | ? | ? | ? |
| Pas 2015 (6) | ? | <u>©</u> | <u>©</u> | ? | ? |
| Rieman 2013 (44) | ? | ? | © | ? | ? |

© = low risk; <mark>⊖ =</mark> high risk; ? = unclear risk

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