Study ID	Sample size calculation	Sampling: •Frame	Recruitment method	Respons e rate	Administration method	Validity of tool Pilot testing done
Khan, 2007[1]	Not reported	<ul> <li>Method (type)</li> <li>Frame: Patients in the waiting area in orthopedic surgery clinic</li> <li>Method: Convenient sampling ""</li> </ul>	In person	Not reported	In person, self- administered	<ul> <li>Validity of tool: Not reported</li> <li>Pilot testing: Not reported.</li> </ul>
Fisher, 2012[2]	Not reported	<ul> <li>Frame: North American public visiting the spineuniverse.com website.</li> <li>Method: convenient sampling "The survey was posted on www.spineuniverse.com [] All respondents voluntarily filled out the survey"</li> </ul>	Internet- unrestricted self-selected survey	Not reported: not applicabl e	Internet "The survey was posted on <u>www.spineuniverse.</u> <u>com</u> "	<ul> <li>Validity of tool: Partially validated "Multiple iterations of the survey were generated to ensure question clarity and inclusion of relevant content."</li> <li>Pilot-testing: Yes "Each rendition was piloted on small samples of the general population</li> </ul>
Camp, 2013[3]	Not reported	<ul> <li>Frame: postoperative patients attending follow up hip and knee arthroplasty clinics at Mount Sinai Hospital and Holland Orthopaedic, Arthritic Centre and the New England Baptist Hospital in US(1) and Canada (2) English-speaking patients who were at least eighteen years old and who had undergone primary or revision hip or knee arthroplasty at least three months earlier were eligible to participate in the study.</li> <li>Method: Convenient sampling</li> </ul>	In person- "Patients attending follow-up arthroplasty clinics at the participating hospitals were asked by clinic personnel or the first author"	88% for US, 92% for Canada, Combine d rate: 90%	In-person, self- administered questionnaires (with no assistance) 40 item questionnaire (3- likert scale):	<ul> <li>Validity of tool: Not reported</li> <li>Pilot testing: Yes "Testing the derived questionnaire on nonsurgical volunteers and postoperative arthroplasty patients in addition to using cognitive interviews to ensure that questions would be understood."</li> </ul>

## S3 Table. Methodological features of included studies on interactions with device industry

Lieberma n, 2013[4]	No	<ul> <li>Frame: All patients 18 years old or older scheduled for primary THA and TKA from the orthopedic practices of two joint arthroplasty specialists at an academic health center.</li> <li>Method: convenient sampling</li> </ul>	In person "Just before the 6- week follow-up visit, the surgeons asked the patients if they wanted to participate in this study by filling out a survey"	41%	In person, self- administered questionnaire	<ul> <li>Validity of tool: Self- developed tool, no validation reported</li> <li>Pilot testing: not reported.</li> </ul>
Dipaola, 2014[5]	No	<ul> <li>Frame: visitors of the spineuniverse.com website.</li> <li>Method: convenient sampling "The survey was posted on http://www.spineuniverse.com/ [] All respondents voluntarily filled out the survey in a Web-based format posted on http://www.spineuniverse.com/."</li> </ul>	Internet - unrestricted self-selected survey	Not reported: not applicabl e	Internet "Survey was administered using a ''spine Web site"	<ul> <li>Validity of tool: Partial validation</li> <li>"Multiple iterations of the survey were generated to ensure that the questions were clear and included relevant content"</li> <li>Pilot testing: Yes.</li> <li>"Each rendition was piloted on small samples of the general population.""</li> </ul>

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