PRISMA - COSMIN OUTCOME Measurement Instruments

Full report

Item 29: Recommendations

If appropriate, make recommendations for suitable OMIs for a particular use.

Title	1	Title
Abstract	2	See tip sheets for Abstracts
Summary	3	Plain language summary
Open Science	4	Registration and protocol *a. Registration information* *b. Accession of protocol* *c. Protocol amendments*
	5	Support
	6	Competing interests
	7	Availability of data and other materials
Introduction	8	Rationale
	9	Objectives
Methods	10	Followed guidelines
	11	Eligibility criteria
	12	Information sources
	13	Search strategy
	14	Selection process
	15	Data collection process
	16	Data items
	17	Study risk of bias assessment
	18	Measurement properties
	19	Synthesis methods *a. Eligibility processes* *b. Methods for synthesis* *c. Causes of inconsistency* *d. Sensitivity analyses*
	20	Certainty assessment
	21	Formulating recommendations
Results	22	Study selection *a. Results of search and selection* *b. Excluded reports with reasons*
	23	OMI characteristics *a. Characteristics of OMIs* *b. Interpretability aspects of OMIs* *c. Feasibility aspects of OMIs*
	24	Study characteristics
	25	Risk of bias in studies
	26	Results of individual studies
	27	Results of syntheses *a. Results of syntheses conducted* *b. Results of causes of inconsistency* *c. Results of sensitivity analyses*
	28	Certainty of evidence
	29	**Recommendations**
Discussion	30	Discussion *a. Interpretation of results* *b. Limitations of evidence* *c. Limitations of review processes* *d. Implications*

Tips for reporting this item:

- If recommendations on the suitability of OMIs for a particular use are made, report which OMIs can be recommended and/or which OMIs cannot be recommended.

Examples:

"The DFS-SF and IWADL had sufficient relevance, comprehensiveness, and comprehensibility, and at least low-quality evidence for sufficient internal consistency, and can thus be considered for use in research and clinical practice. Both also had sufficient reliability, but measurement error of the IWADL was insufficient. The DFS-SF and IWADL had inconsistent responsiveness, with high-quality evidence for the subscale of the DFS-SF. This limitation should be taken into account when considering using the DFS-SF and IWADL."

Elsman EBM et al. Systematic review on the measurement properties of diabetes-specific patient-reported outcome measures (PROMs) for measuring physical functioning in people with type 2 diabetes. *BMJ Open Diabetes Res. Care*, 2022;10(3):e002729. https://doi.org/10.1136/bmjdrc-2021-002729.

"The combined rating of the evidence was supportive of a provisional endorsement of both MHQ subscales as core OMI […]. The working group noted the need to re-assess clinical trial discrimination in future clinical trials on their research agenda. AUSCAN received a provisional endorsement to serve as a second measure of function […]. While AUSCAN function may have better metric properties than MHQ, the working group felt that due to important feasibility issues (i.e., not available in public domain, costs associated with use of questionnaire), this instrument could not be recommended as a mandatory instrument to measure function in all hand OA [osteoarthritis] trials."

Kroon FP et al. Core outcome measurement instrument selection for physical function in hand osteoarthritis using the OMERACT Filter 2.1 process. *Semin. Arthritis Rheum.*, 2021:1311-1319. https://doi.org/10.1016/j.semarthrit.2021.08.014.

From: Elsman EBM, Mokkink LB, Terwee CB, Beaton D, Gagnier JJ, Tricco AC, et al. Guideline for reporting systematic reviews of outcome measurement instruments (OMIs): PRISMA-COSMIN for OMIs 2024. J Clin Epidemiol, 2024, https://doi.org/10.1016/j.jclinepi.2024.111422.

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