Supplementary Table 2. Risk of Bias Tool designed for the assessment of bias in studies specific to delirium in Palliative Care. DSM: Diagnostic and Statistical Manual of Mental Disorders, ICD: International Classification of Diseases

Domains	Signalling questions	Response options	Risk of bias judgments	Rationale / Major applicability concerns				
STUDY RISK of BIAS – INTERNAL VALIDITY								
Selection bias/Study	 Were the characteristics (such as age, disease status, consideration of pre-existing cognitive impairment of patients clearly described?) Yes/Probably Yes	Low	Reviewer's rationale:				
Participation	Was the recruitment strategy random or consecutive?Did the inclusion and exclusion criteria allow for appropriate selection of the target population for the	No/Probably No	Moderate					
	study?	No information	High					
			Critical					
Attrition Bias (Relevant for	 Was the presence or absence of delirium documented for 80% or more of the study participants? Was there adequate documentation for reasons of missing data (skip if question not applicable)? 	Yes/Probably Yes	Low	Reviewer's rationale:				
Incidence and Period	3) Were the characteristics similar between the group recruited to the study and the group eventually analyzed?	No/Probably No	Moderate					
Prevalence)		No information	High					
			Critical					
Detection bias	 Was the diagnosis of delirium performed by a trained/competent assessor? Was the diagnosis of delirium performed by an independent assessor (i.e. not a member of the care 	Yes/Probably Yes	Low	Reviewer's rationale:				
	team)?	No/Probably No	Moderate					
	3) In diagnosing delirium, were the gold standard (DSM or ICD) diagnostic criteria for delirium either operationalized directly or applied through use of an objective (requiring patient participation) assessment tool validated against these gold standard criteria?	ent No information	High					
	4) Was the diagnosis of delirium measured in a standard manner for all participants? 4)		Critical					
Data Reporting/	Were the statistical analyses for the parameters of interest (i.e. incidence/prevalence) appropriate?	Yes/Probably Yes	Low	Reviewer's rationale:				
Analyses		No/Probably No	Moderate					
		No information	High					
			Critical					
	STUDY APPLICABILITY / EXTERNAL VALIDITY							
Applicability	1) Is this study applicable to the target population as defined by the systematic review protocol*?	Yes/Probably Yes	No/Minor concerns	Reviewer's rationale:				
		No/Probably No	Major concerns					
		No information						
			1	1				

^{*} POPULATION: All adult (≥ 18 years old) patients receiving or eligible for palliative care. This will include:

a. patients admitted to an inpatient palliative care unit or hospice;

b. patients followed by a consulting palliative care team in hospital;

c. patients having cancer or AIDS as a progressive life threatening illness and are unequivocally eligible for palliative care referral but assessed by an oncology, psychiatry, psycho-oncology or supportive care service;

d. patients under the care of community palliative care program or community hospice care program