Appendix A.

Table A1. Outcomes identified during the overview of reviews and consumer focus groups and interviews

Outcome Name	Outcome Description
	The ability to carry out usual everyday activities including looking after yourself (e.g., bathing, dressing or
Activities of daily living	feeding), or other activities (e.g., cooking, cleaning, managing finances, caring for others or shopping)
Appetite	The natural and recurring desire for food and drink
Balance	The ability to remain upright and steady
	The confidence that you can perform activities without losing balance (e.g., walking inside or outside the
Balance confidence	home, climbing stairs, standing on tip toes to reach for an object, bending to pick something up off the floor)
Body composition	The amount of fat, muscle and bone in your body
Prosthlassnass	How short of broath you are
Breathlessness	How short of breath you are
Cognition	The ability to learn, think, remember things, problem solve, understand instructions, make decisions or pay
Cognition	attention
Emotional and Mental	Your mood - whether and how often you feel happy, calm, anxious, depressed, sad or angry - and your self
Wellbeing	esteem
Fatience	An overwhelming, sustained feeling of exhaustion, mental or physical tiredness, having little energy for
Fatigue	physical and mental work
Haematological status	Components of your blood (e.g., levels of inflammation, the amount of red or white blood cells)
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Health-related quality of life	How well you feel about life; how much your health is affecting your quality of life
Lung function	How well your lungs work to help you breath
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Muscle oxygenation	Use of oxygen by your muscles when you exercise

Neurological symptoms	This may include numbness (reduced sensation of surfaces and their texture or quality) or weakness (loss of muscle strength) in your arms and/or legs
Nutrition status	Changes to your weight, food intake and/or taste
Pain Peripheral skeletal muscle	A sensation of unpleasant feeling indicating potential or actual damage to any part of your body
strength	The strength of the muscles in your arms and/or legs
Physical activity levels	How active you are (e.g., the number of steps you take a day, how long you are active for, how much time you spend sitting)
Physical fitness	How fit you are. Your ability to perform sports, occupations and daily activities
Physical function	Having the mobility and strength to perform activities required for day to day tasks (e.g., get out of bed, stand up from a chair, walking, or climbing stairs)
Resilience	The ability to cope with and recover quickly from difficult situations
Respiratory muscle strength	The strength of the muscles that help you to breathe in and out
Return to work or prior role	Returning to your previous job (full or part-time), changing to a different job, or doing the same thing you did before your lung cancer diagnosis
Self-efficacy	Self-belief that you can manage your condition or symptoms or complete your rehabilitation program
Sleep and related symptoms	The quality of your sleep (e.g., how long you take to go to sleep, how many times you wake up at night, how much sleep you get)
Social roles, activities or relationships and support	Connecting with others and maintaining family, friendship and/or romantic relationships. The ability and desire to join in activities with others. The support you receive from family and/or friends.
Treatment response	Your response to medical treatments (e.g., chemotherapy, radiotherapy, immunotherapy, targeted therapies)