Table 3: Level 2 Checklist for Screening Full-Text Articles and Study Reports

Reviewer: _____ **Date:** _____		
Ref ID: **Author:** **Publication Year:**		
Did the study include:	**Yes (Include)**	**No (Exclude)**
A. The population of interest:		
• Adults (mean age of ≥ 18 years) with r/r-DLBCL	☐	☐
• Mixed, with ≥ 80% being adults with r/r-DLBCL	☐	☐
• Pediatric or young adult (≤ 25 years) with r/r-ALL	☐	☐
• Mixed, with ≥ 80% being pediatric or young adult (≤ 25 years) with r/r-ALL	☐	☐
B. The intervention of interest:		
• Tisagenlecleucel alone	☐	☐
• Tisagenlecleucel together with drug interventions	☐	☐
• Tisagenlecleucel together with HSCT	☐	☐
C. A comparator of interest:		
• Other Car T-cell therapies	☐	☐
• Conventional salvage therapy	☐	☐
• No Comparator	☐	☐
D. Outcome(s) of interest:		
• Objective efficacy outcomes (e.g., CR, PR, OS, PFS, etc.)	☐	☐
• Quality of life	☐	☐
• Safety outcomes such as Grade ≥ 3 AEs (e.g., CRS, prolonged cytopenias, infections and infestations, febrile neutropenia, neurological effects including hallucination and dysphasia, etc.)	☐	☐
E. A study design of interest:		
• RCTs	☐	☐
• Non-randomized controlled trials • Single-arm studies	☐	☐
• Cohort studies	☐	☐
• Case-control studies	☐	☐
F. Notes:		
G. Selected for inclusion in the review [a]	**Yes ☐**	**No ☐**
H. Reason(s) for exclusion	☐ Irrelevant population ☐ Irrelevant intervention ☐ Irrelevant comparator ☐ Irrelevant outcomes ☐ Irrelevant study design ☐ Other (specify):	

AE= adverse event; CAR = chimeric antigen receptor; CR = complete remission; HSCT = hematopoietic stem cell transplant; OS = overall survival; PFS = progression-free survival; PR = partial remission; RCT = randomized controlled trial; r/r-DLBCL = relapsed/refractory diffuse large B-cell lymphoma; r/r-ALL = relapsed/refractory B-cell acute lymphoblastic lymphoma.

[a] Both reviewers must answer "Yes" to all questions for inclusion at the full-text level. If there is a discrepancy between the reviewers, disagreements will be resolved by discussion or with the involvement of a third reviewer, if necessary.