Online Resource 4: Definitions of extent of resection and recurrence/progression provided by study authors

	ALFORD ET AL [13]	DODGSHUN ET AL [14]	DORWARD ET AL [15]	KIM ET AL [16]	UDAKA ET AL [17]	VASSILYADI ET AL [18]	KORONES ET AL [12]
GROSS TOTAL RESECTION	No residual tumour	Absence of enhancing nodular elements determined on the immediate postoperative MR scan defined by radiologist	Lack of nodular enhancement on early postoperative MR imaging (i.e. within 48 hours of surgery)	Lack of nodular enhancement on imaging performed in the immediate postoperative period (within 3 days of the surgery) by a neuroradiologist &2 neurosurgeons	NR NR	NR	NR
SUB-TOTAL RESECTION	Residual tumour	N/A	N/A	N/A	NR	NR	NR
RECURRENCE	NR	NR	Development of progressive, nodular enhancement on 2 successive follow-up images	Early nodular enhancement on imaging at 3-6 months	NR	NR	Ttumor which had completely responded to treatment and regrew
PROGRESSION	NR	N/A	N/A	N/A	25% increase in the maximal cross-sectional area documented on MRI	Residual lesion enlargement in all three dimensions compared to the previous MRI image	Residual tumor which progressed

Key: MRI: Magnetic resonance imaging; N/A: not applicable; NR: not reported

The utility of routine surveillance screening with magnetic resonance imaging (MRI) to detect tumour recurrence in children with low grade central nervous system (CNS) tumours: a systematic review

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