Supplementary material 2. Patient-reported variables captured in the Swiss ChiCo pilot patient cohort

Construct	Item Content	Variable Code	Choices, Calculations, OR Slider Labels	Branching Logic
Reasons for non-participation	Record ID	record_id		
Collected at in-clinic recruitment	Are you interested in participating in this study?	chico_interest	1, Yes | 2, No	
	Reasons for not participating	nonparticipation	1, No email address | 2, Unfamiliar with electronic or internet tools | 3, Lack of time | 4, Lack of interest in the study | 5, Data privacy concerns | 6, Other	[chico_interest] = '2'
	Other reason for not participating	nonparticipation_other		[nonparticipation(6)] = '1'
	For clinic staff only	clinic_disrup	1, Disruption to clinic workflow	[nonparticipation(6)] = '1'
Pain, enjoyment and general activity (PEG) scale	What number best describes your pain on average in the past week?	peg_q1_beforetx / peg_q1 / peg_q1_2wks / peg_q1_6wks / peg_q1_12wks	1, 0 = No pain | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = Pain as bad as you can imagine	
Collected at baseline, 1 hour, 2-, 6-, and 12-wks	What number best describes how, during the past week, pain has interfered with your enjoyment of life?	peg_q2_beforetx / peg_q2 / peg_q2_2wks / peg_q2_6wks / peg_q2_12wks	1, 0 = Does not interfere | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = Completely interferes	
	What number best describes how, during the past week, pain has interfered with your general activity?	peg_q3_beforetx / peg_q3 / peg_q3_2wks / peg_q3_6wks / peg_q3_12wks	1, 0 = Does not interfere | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = Completely interferes	
Musculoskeletal health questionnaire (MSK-HQ)	1. Pain/stiffness during the day			
Collected at baseline, 1 hour, 2-, 6-, and 12-wks	How severe was your usual joint or muscle pain and/or stiffness overall during the day in the last 2 weeks?	mskhq_q1_beforetx / mskhq_q1 / mskhq_q1_2wks / mskhq_q1_6wks / mskhq_q1_12wks	1, Not at all | 2, Slightly | 3, Moderately | 4, Fairly severe | 5, Very severe	
	2. Pain/stiffness during the night			
	How severe was your usual joint or muscle pain and/or stiffness overall during the night in the last 2 weeks?	mskhq_q2_beforetx / mskhq_q2 / mskhq_q2_2wks / mskhq_q2_6wks / mskhq_q2_12wks	1, Not at all | 2, Slightly | 3, Moderately | 4, Fairly severe | 5, Very severe	
	3. Walking			
	How much have your symptoms interfered with your ability to walk in the last 2 weeks?	mskhq_q3_beforetx / mskhq_q3 / mskhq_q3_2wks / mskhq_q3_6wks / mskhq_q3_12wks	1, Not at all | 2, Slightly | 3, Moderately | 4, Severely | 5, Unable to walk	
	4. Washing/Dressing			
	How much have your symptoms interfered with your ability to wash or dress yourself in the last 2 weeks?	mskhq_q4_beforetx / mskhq_q4 / mskhq_q4_2wks / mskhq_q4_6wks / mskhq_q4_12wks	1, Not at all | 2, Slightly | 3, Moderately | 4, Severely | 5, Unable to wash or dress myself	
	5. Physical activity levels			
	How much has it been a problem for you to do physical activities (e.g. going for a walk or jogging) to the level you want because of your joint or muscle symptoms in the last 2 weeks?	mskhq_q5_beforetx / mskhq_q5 / mskhq_q5_2wks / mskhq_q5_6wks / mskhq_q5_12wks	1, Not at all | 2, Slightly | 3, Moderately | 4, Very much | 5, Unable to do physical activities	
	6. Work/daily routine			
	How much have your joint or muscle symptoms interfered with your work or daily routine in the last 2 weeks (including work & jobs around the house)?	mskhq_q6_beforetx / mskhq_q6 / mskhq_q6_2wks / mskhq_q6_6wks / mskhq_q6_12wks	1, Not at all | 2, Slightly | 3, Moderately | 4, Severely | 5, Extremely	
	7. Social activities and hobbies			
	How much have your joint or muscle symptoms interfered with your social activities and hobbies in the last 2 weeks?	mskhq_q7_beforetx / mskhq_q7 / mskhq_q7_2wks / mskhq_q7_6wks / mskhq_q7_12wks	1, Not at all | 2, Slightly | 3, Moderately | 4, Severely | 5, Extremely	
	8. Needing Help			
	How often have you needed help from others (including family, friends or carers) because of your joint or muscle symptoms in the last 2 weeks?	mskhq_q8_beforetx / mskhq_q8 / mskhq_q8_2wks / mskhq_q8_6wks / mskhq_q8_12wks	1, Not at all | 2, Rarely | 3, Sometimes | 4, Frequently | 5, All the time	
	9. Sleep			
	How often have you had trouble with either falling asleep or staying asleep because of your joint or muscle symptoms in the last 2 weeks?	mskhq_q9_beforetx / mskhq_q9 / mskhq_q9_2wks / mskhq_q9_6wks / mskhq_q9_12wks	1, Not at all | 2, Rarely | 3, Sometimes | 4, Frequently | 5, Every night	
	10. Fatigue or low energy			
	How much fatigue or low energy have you felt in the last 2 weeks?	mskhq_q10_beforetx / mskhq_q10 / mskhq_q10_2wks / mskhq_q10_6wks / mskhq_q10_12wks	1, Not at all | 2, Slight | 3, Moderate | 4, Severe | 5, Extreme	
	11. Emotional well-being			
	How much have you felt anxious or low in your mood because of your joint or muscle symptoms in the last 2 weeks?	mskhq_q11_beforetx / mskhq_q11 / mskhq_q11_2wks / mskhq_q11_6wks / mskhq_q11_12wks	1, Not at all | 2, Slightly | 3, Moderately | 4, Severely | 5, Extremely	
	12. Understanding of your condition and any current treatment			
	Thinking about your joint or muscle symptoms, how well do you feel you understand your condition and any current treatment (including your diagnosis and medication)?	mskhq_q12_beforetx / mskhq_q12 / mskhq_q12_2wks / mskhq_q12_6wks / mskhq_q12_12wks	1, Completely | 2, Very well | 3, Moderately | 4, Slightly | 5, Not at all	
	13. Confidence in being able to manage your symptoms			
	How confident have you felt in being able to manage your joint or muscle symptoms by yourself in the last 2 weeks (e.g. medication, changing lifestyle)?	mskhq_q13_beforetx / mskhq_q13 / mskhq_q13_2wks / mskhq_q13_6wks / mskhq_q13_12wks	1, Extremely | 2, Very | 3, Moderately | 4, Slightly | 5, Not at all	
	14. Overall Impact			
	How much have your joint or muscle symptoms bothered you overall in the last 2 weeks?	mskhq_q14_beforetx / mskhq_q14 / mskhq_q14_2wks / mskhq_q14_6wks / mskhq_q14_12wks	1, Not at all | 2, Slightly | 3, Moderately | 4, Very much | 5, Extremely	
	Physical activity Levels	mskhq_activity_beforetx / mskhq_activity / mskhq_activity_2wks / mskhq_activity_6wks / mskhq_activity_12wks		
	In the past week, on how many days have you done a total of 30 minutes or more of physical activity		1, None | 2, 1 day | 3, 2 days | 4, 3 days | 5, 4 days | 6, 5 days | 7, 6 days | 8, 7 days	

Construct	Item Content	Variable Code	Choices, Calculations, OR Slider Labels	Branching Logic
Brief illness perception (IPQ brief) Collected at baseline	Please list in rank-order the three most important factors that you believe caused your current pain complaint 1 2 3	briefillness ipq_q1 ipq_q2 ipq_q3		
Demographics Collected 1 hour after initial assessment	Sex	sex_p	1, Male | 2, Female	
	Nationality	nationality	1, Swiss | 2, Non-Swiss	
	Highest level of education	education	1, Compulsory | 2, Secondary | 3, Tertiary	
	At present, are you working	Job	1, Full time at your usual job | 2, Full time at a lighter job | 3, Part time | 4, Not working - disability | 5, Not working - IV/pensioner applicant | 6, Housewife/Househusband | 7, Retired (not disability) | 8, Unemployed | 9, Student	
	How would you describe the total physical strain caused by your work?	workstrain	1, Very light | 2, Light | 3, Somewhat strenuous | 4, Strenuous | 5, Very strenuous	[job] = '1' or [job] = '2' or [job] = '3' or [job] = '6' or [job] = '9'
	Have you missed any days of work due to your current pain complaint?	sick_leave	1, Yes | 2, No	
	How many days of sick leave have you had in the last 2 weeks ?	n_sickleave		[sick_leave] = '1'
	Smoking Status	smoking	1, Current smoker | 2, Previous smoker | 3, Never smoker	
	How much do you smoke on average per day?	n_cigarettes		[smoking] = '1'
	Have you visited a chiropractor before?	newpatient	1, I am new to chiropractic | 2, I have visited a chiropractor before	
Injury Characteristics Collected 1 hour after initial assessment	Have you visited a medical doctor for your current pain complaint?	md_currentpain	1, Yes | 2, No	
	Were you referred to chiropractic care for your pain complaint from a healthcare professional?	referral_source	1, Yes | 2, No	
	Which healthcare professional referred you to chiropractic care?	hcrefer_specify	1, Other chiropractor | 2, Family practitioner | 3, Internist | 4, Orthopaedic surgeon | 5, Physical therapist | 6, Massage therapist | 7, Other	[referral_source] = '1'
	Please specify which healthcare professional referred you to chiropractic care.	hc_refer_other		[hcrefer_specify] = '7'
	How long has it been since your current pain complaint began?	date_of_inj	1, 1-2 days | 2, 3-7 days | 3, 1-2 weeks | 4, 2-4 weeks | 5, 1-3 months | 6, 4-12 months | 7, More than 12 months	
	Main location of pain complaint	pain_complaint	1, Low back pain | 2, Low back pain with leg pain | 3, Neck pain | 4, Neck pain with arm pain | 5, Middle back pain | 6, Headache | 7, Shoulder pain | 8, Hip pain | 9, Knee pain | 10, Pain in multiple areas | 11, Other	
	Please specify the main location of your pain complaint	pain_complaint_other		[pain_complaint] = '11'
	Are you currently taking medication to reduce your pain?	medication	1, Yes, prescription medication | 2, Yes, non-prescription medication | 3, No	
Imaging Use Collected 1 hour after initial assessment	In the last 1 month have you received any diagnostic imaging for your current pain complaint?	image_postvisit	1, Yes | 2, No	
	X ray (radiography) in the last 1 month?	xray_postvisit	1, Yes | 2, No | 3, Unsure	[image_postvisit] = '1'
	Ultrasound scan in the last 1 month?	ultra_postvisit	1, Yes | 2, No | 3, Unsure	[image_postvisit] = '1'
	MRI scan in the last 1 month?	mri_postvisit	1, Yes | 2, No | 3, Unsure	[image_postvisit] = '1'
	CT scan in the last 1 month?	ctscan_postvisit	1, Yes | 2, No | 3, Unsure	[image_postvisit] = '1'
	In the last 1 year have you received diagnostic imaging for any pain complaint?	imaging1y_postvisit	1, Yes | 2, No	
	X-ray (radiography) in the last 1 year?	xray_1yr	1, Yes | 2, No | 3, Unsure	[imaging1y_postvisit] = '1'
	Ultrasound scan in the last 1 year?	ultrasound_1yr	1, Yes | 2, No | 3, Unsure	[imaging1y_postvisit] = '1'
	MRI scan in the last 1 year?	mri_1yr	1, Yes | 2, No | 3, Unsure	[imaging1y_postvisit] = '1'
	CT scan in the last 1 year?	ctscan_1yr	1, Yes | 2, No | 3, Unsure	[imaging1y_postvisit] = '1'
COVID-19 aspects Collected 1 hour after initial assessment	How is your quality of life at the moment compared to the time before the COVID-19 pandemic?	patient_cov_1	1, Better | 2, Similar | 3, Worsened	
	How are your physical activity habits at the moment compared to the time before the COVID-19 pandemic?	pat_cov_2	1, Better | 2, Similar | 3, Worsened	
	Have you been unable to seek planned or necessary medical treatment because of the COVID-19 pandemic?	pat_cov_3	1, Yes | 2, No	
	What treatment could you not participate in because of the COVID-19 pandemic?	pat_cov_4		[pat_cov_3] = '1'
	Would you be interested in receiving virtual or telehealth chiropractic sessions?	virtual	1, Yes | 2, No | 3, Unsure	

Construct	Item Content	Variable Code	Choices, Calculations, OR Slider Labels	Branching Logic
Orebro Musculoskeletal Pain Screening Questionnaire - Short Collected 1 hour after initial assessment	How long have you had your current pain complaint?	omps_q1	1, 0-1 weeks | 2, 2-3 weeks | 3, 4-5 weeks | 4, 6-7 weeks | 5, 8-9 weeks | 6, 10-11 weeks | 7, 12-23 weeks | 8, 24-35 weeks | 9, 36-52 weeks | 10, > 52 weeks	
	How would you rate the pain that you have had during the past week?	omps_q2	1, 0 = No pain | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = Pain as bad as it could be	
	How tense or anxious have you felt in the past week?	omps_q5	1, 0 = Absolutely calm and relaxed | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = As tense and anxious as I've ever felt	
	How much have you been bothered by feeling depressed in the past week?	omps_q6	1, 0 = Not at all | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = Extremely	
	In your view, how large is the risk that your current pain may become persistent?	omps_q7	1, 0 = No risk | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = Very large risk	
	In your estimation, what are the chances you will be working your normal duties in 3 months?	omps_q8	1, 0 = No chance | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = Very large chance	
	An increase in pain is an indication that I should stop what I'm doing until the pain decreases.	omps_q9	1, 0 = Completely disagree | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = Completely agree	
	I should not do my normal work with my present pain.	omps_q10	1, 0 = Completely disagree | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = Completely agree	
	I can do light work for an hour	omps_q3	1, 0 = Can't do it because of the pain problem | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = Can do it without pain being a problem	
	I can sleep at night.	omps_q4	1, 0 = Can't do it because of the pain problem | 2, 1 | 3, 2 | 4, 3 | 5, 4 | 6, 5 | 7, 6 | 8, 7 | 9, 8 | 10, 9 | 11, 10 = Can do it without pain being a problem	
Follow-up Questionnaire: injury characteristics and imaging use Collected at 2-, 6-, and 12-wks	In the last 2 wks / 4 wks / 6 wks have you had any follow-up visits with the chiropractor for your pain complaint?	fu_chiro_2wks / fu_chiro_6wks / fu_chiro_12wks	1, Yes | 2, No	
	How many times have you seen your chiropractor in the last 2 wks / 4 wks / 6 wks?	nfu_chiro_2wks / nfu_chiro_6wks / nfu_chiro_12wks	1, Once | 2, 2-4 times | 3, More than 4 times	[fu_chiro_2wks] / [fu_chiro_6wks] / [fu_chiro_12wks] = '1'
	In the last 2 wks / 4 wks / 6 wks have you visited another healthcare professional other than your chiropractor for your pain complaint?	hc_2wks / hc_6wks / hc_12wks	1, Yes | 2, No	
	How many times have you visited another healthcare professional in the last 2 wks / 4 wks / 6 wks?	nfu_otherhealth_2wks / nfu_otherhealth_6wks / nfu_otherhealth_12wks	1, Once | 2, 2-4 times | 3, More than 4 times	[hc_2wks] / [hc_6wks] / [hc_12wks] = '1'
	Medical doctor visit in the last 2 wks / 4 wks / 6 wks for your pain complaint?	gp_2wks / gp_6wks / gp_12wks	1, Yes | 2, No	[hc_2wks] / [hc_6wks] / [hc_12wks] = '1'
	Physiotherapist visit in the last 2 wks / 4 wks / 6 wks for your pain complaint?	physo_2wks / physo_6wks / physo_12wks	1, Yes | 2, No	[hc_2wks] / [hc_6wks] / [hc_12wks] = '1'
	Other healthcare professional seen in the last 2 wks / 4 wks / 6 wks for your pain complaint?	otherhealth_2wks / otherhealth_6wks / otherhealth_12wks	1, Yes | 2, No	[hc_2wks] / [hc_6wks] / [hc_12wks] = '1'
	Which other healthcare professional did you see?	specif_otherhealth_2wks / specif_otherhealth_6wks / specif_otherhealth_12wks		[otherhealth_2wks] / [otherhealth_6wks] / [otherhealth_12wks]= '1'
	Are you currently taking medication to reduce your pain?	medication_2wks / medication_6wks / medication_12wks	1, Yes, prescription medication | 2, Yes, non-prescription medication | 3, No	
	Have you missed any days of work due to your pain complaint in the last 2 wks / 4 wks / 6 wks?	sickleave_2wks / sickleave_6wks / sickleave_12wks	1, Yes | 2, No	
	How many days of sick leave have you had in the last 2 wks / 4 wks / 6 wks due to your pain complaint?	n_sickleave_2wks / n_sickleave_6wks / n_sickleave_12wks		[sickleave_2wks] / [sickleave_6wks] / [sickleave_12wks] = '1'
	In the last 2 wks / 4 wks / 6 wks have you received any diagnostic imaging for your pain complaint?	imaging_2wks / imaging_6wks / imaging_12wks	1, Yes | 2, No	
	X-Ray (radiography) in the last 2 wks / 4 wks / 6 wks	xray_2wks / xray_6wks / xray_12wks	1, Yes | 2, No | 3, Unsure	[imaging_2wks] / [imaging_6wks] / [imaging_12wks] = '1'
	Ultrasound scan in the last 2 wks / 4 wks / 6 wks	ultra_2wks / ultra_6wks / ultra_12wks	1, Yes | 2, No | 3, Unsure	[imaging_2wks] / [imaging_6wks] / [imaging_12wks] = '1'
	MRI scan in the last 2 wks / 4 wks / 6 wks	mri_2wks / mri_6wks / mri_12wks	1, Yes | 2, No | 3, Unsure	[imaging_2wks] / [imaging_6wks] / [imaging_12wks] = '1'
	CT scan in the last 2 wks / 4 wks / 6 wks	ct_2wks / ct_6wks / ct_12wks	1, Yes | 2, No | 3, Unsure	[imaging_2wks] / [imaging_6wks] / [imaging_12wks] = '1'
Patients' Global Impression of Change (PGIC) scale Collected at 2-, 6-, and 12-wks	To what extent has your pain complaint changed when compared with the situation just before you started chiropractic care?	pgic_q1_2wks / pgic_q1_6wks / pgic_q1_12wks	1, 1. Completely recovered | 2, 2. Much improved | 3, 3. Slightly improved | 4, 4. Not changed | 5, 5. Slightly worsened | 6, 6. Much worsened | 7, 7. Worse than ever	