

STROBE Checklist: Patient Characteristics and Palliative Care Eligibility in Public vs. Private Emergency Care: A cross-sectional Observational Study

STROBE Item	Description	Assessment	Manuscript Page	Justification
1	Title and abstract	Adequate	p.1	The title identifies the study design ('cross-sectional observational') and the abstract clearly presents objectives, methods, and findings.
2	Background and rationale	Adequate	p.2–3	Background The structured rationale is based on demographic stakeholders, health-system lacks and international benchmarks which are justified by the profound gap in the literature related to the palliative care needs in the Brazilian emergency context.
3	Objectives	Adequate	p.3	The objective is well stated as estimating the proportion of patients appropriate for end-of-life care in emergency departments.
4	Study design	Adequate	p.4	The design of the study is presented in the title ('cross sectional observational') and the abstract outlines purpose, methods, and results.
5	Setting	Adequate	p.4	The four emergency services are described in detail, including context.
6	Participants	Adequate	p.4–5	Inclusion/exclusion criteria are specified. All eligible patients during the two-day window were included.
7	Variables	Adequate	p.5	All main variables (SPICT-BR™, PPS, symptoms, medications) are described and justified.
8	Data sources/measurement	Adequate	p.5–6	Following reviewers' comments, the Methods section was updated to include additional information for evaluator training and calibration, and the use of standardized screening instruments to support coherence upon data collection.

9	Bias	Adequate	p.6 and Revisor Response	The manuscript acknowledges potential sources of selection bias due to the two-day convenience sampling and cross-sectional design. By including all eligible patients present during that period , the study minimizes selection bias.
10	Study size	Partially adequate	p.6 and Revisor Response	No formal sample size calculation. Justified as a census over two days.
11	Quantitative variables	Adequate	p.6–7	Variables are categorized in clinically meaningful groups (e.g., PPS levels).
12	Statistical methods	Adequate	p.6–7	Logistic regression model was included to evaluate the association between type of emergency service (public vs. private) and palliative care eligibility
13	Participants flow	Adequate	p.7, Fig. 1	Flow diagram reformulated per PRISMA-style suggestion; numbers reported.
14	Descriptive data	Adequate	p.7–9	Detailed demographic and clinical characteristics, stratified by service type.
15	Outcome data	Adequate	p.8	PC eligibility prevalence and comparisons between groups are clearly reported.
16	Other analyses	Partially adequate	p.9	Logistic regression model was included
17	Key results	Adequate	p.10	Main findings are synthesized and connected to study aims.
18	Limitations	Adequate	p.11	Limitations (bias, reliability, design) are acknowledged transparently, after reviewers suggestions
19	Interpretation	Adequate	p.11–12	Findings are interpreted in light of international evidence, and speculative content was revised per reviewer guidance to enhance scientific rigor.
20	Generalisability	Partially adequate	p.11	Generalisability is addressed by acknowledging that the study setting—urban emergency services—may not reflect conditions in other regions or care levels.
21	Funding	Adequate	p.12	Funding and conflicts of interest are clearly reported.