Supplementary Table 1 – Round 1: items proposed by the writing committee and rated by the radiology panellists (N=42)

Structured Report Items	Essential	Optional	Not relevant	missing	To be outlined	To be given as free text	No preferences
Initial Considerations							
CT protocol details	69,0%	11,9%	16,7%	2,4%	57,1%	11,9%	31%
Available clinical indication	**81,0%**	16,7%	2,4%	0%	23,8%	52,4%	23,8%
Comparison with prior CT examinations	**100%**	0%	0%	0%	42,9%	33,3%	23,8%
Differences in CT technique with prior examinations	66,7%	7,1%	23,8%	2,4%	23,8%	33,3%	42,9%
Motion artifacts	**92,9%**	4,8%	2,4%	0%	47,6%	28,6%	23,8%
HRCT Findings							
Comparison of CT findings with prior scan, indicating change of each HRCT finding	**83,3%**	11,9%	4,8%	0,0%	33,3%	38,1%	28,6%
Initial assessment of signs lung fibrosis (honeycombing, traction bronchiectasis, signs of volume loss)	**97,6%**	2,4%	0,0%	0,0%	69,5%	23,8%	16,7%
Confidence on honeycombing against traction bronchiectasis	73,8%	16,7%	7,1%	2,4%	26,2%	40,5%	33,3%
Avoid description of the absent findings	57,1%	28,6%	14,3%	0,0%	28,6%	31%	40,4%
Description of all CT findings	45,2%	26,2%	28,6%	0,0%	16,7%	31%	52,4%
Description of the most relevant CT findings only (e.g. honeycombing, traction bronchiectasis, signs of volume loss)	66,7%	21,4%	11,9%	0,0%	19%	35,7%	45,2%
Disease distribution on both axial and cranio-caudal planes	**100,0%**	0,0%	0,0%	0,0%	78,6%	7,1%	14,3%
Differentiation between macro- and micro-cystic honeycombing	28,6%	40,5%	28,6%	2,4%	52,4%	4,8%	42,9%
Description of the reticular opacities subtypes (e.g. interlobular or interlobular lines)	59,5%	28,6%	9,5%	2,4%	66,7%	7,1%	26,2%
Emphysema subtype including the so-called airspace	**90,5%**	4,8%	2,4%	2,4%	69,5%	19%	21,4%

enlargement with fibrosis							
Quantitation of FLD extent as percentage of the lung volume	11,9%	57,1%	28,6%	2,4%	50%	7,1%	42,9%
Quantitation of FLD extent according to three categories of severity	69,0%	26,2%	4,8%	0,0%	66,7%	2,4%	31%
Quantitation of FLD extent for any disease OR for sarcoidosis and systemic sclerosis only	11,9%	57,1%	28,6%	2,4%	50%	7,1%	42,9%
Quantitation of emphysema extent as percentage of the lung volume	11,9%	57,1%	28,6%	2,4%	50%	7%	43%
Quantitation of emphysema extent according to three categories of severity	64,3%	33,3%	2,4%	0,0%	66,7%	4,8%	28,6%
Report air trapping only when expiratory CT scan is performed	57,1%	11,9%	31,0%	0,0%	45,2%	4,8%	50%
Suggest air trapping also on inspiratory CT scan	73,8%	19,0%	7,1%	0,0%	47,6%	21,4%	31%
Report enlarged pulmonary artery for any disease OR for sarcoidosis and systemic sclerosis only	**87,8%**	9,8%	0,0%	2,4%	52,4%	4,8%	42,9%
Report enlarged lymph nodes	**80,5%**	17,1%	0,0%	2,4%	40,5%	14,3%	45,2%
Conclusions							
CT pattern	**97,6%**	0,0%	0,0%	2,4%	61,9%	14,3%	23,8%
Proposal for the subsequent diagnostic test	40,5%	54,8%	0,0%	5,0%	45,2%	26,2%	28,6%
Indication for the timing of CT follow-up	45,2%	47,6%	0,0%	2,4%	45,2%	26,2%	28,6%

Note – CT = Computed Tomography; FLD = Fibrosing Lung Disease.

Supplementary Table 2 – In Round 2 the radiology panelists: A) re-rated those items that did not reach the threshold for consensus in Round 1 and B) classified as 'to be outlined' or 'to be given as free text' those items that did reach the threshold for consensus on Round 1

Structured Report Items	Essential	Optional	Not relevant	missing	To be outlined	To be given as free text	No preferences
Initial Considerations							
CT protocol details	51,2%	46,3%		2,4%	48,8%	2,5%	51,2%
Available clinical indication	**Reached threshold for consensus in Round 1**				**56,1%**	43,9%	0,0%
Comparison with prior CT examinations	**Reached threshold for consensus in Round 1**				**75,6%**	24,4%	0,0%
Differences in CT technique with prior examinations	46,3%	53,7%		0,0%	36,6%	9,7%	56,1%
Motion artifacts	**Reached threshold for consensus in Round 1**				**78,0%**	19,5%	2,4%
CT Findings							
Comparison of CT findings with prior scan, indicating change of each CT finding	**Reached threshold for consensus in Round 1**				41,5%	**58,5%**	0,0%
Initial assessment of signs lung fibrosis (honeycombing, traction bronchiectasis, signs of volume loss)	**Reached threshold for consensus in Round 1**				**85,4%**	14,6%	0,0%
Confidence on honeycombing against traction bronchiectasis	78,0%	17,1%		4,9%	29,3%	48,8%	24,4%
Avoid description of the absent findings	51,2%	46,3%		2,4%	39,0%	12,2%	51,2%
Description of all CT findings	53,7%	43,9%		2,4%	19,5%	34,1%	48,8%
Description of the most relevant CT findings only (e.g. honeycombing, traction bronchiectasis, signs of volume loss)	61,0%	39,0%		0,0%	41,5%	19,5%	41,5%
Disease distribution on both axial and cranio-caudal planes	**Reached threshold for consensus in Round 1**				**87,8%**	12,2%	0,0%
Differentiation between macro- and micro-cystic honeycombing	24,4%	73,2%		2,4%	24,4%	0,0%	78,1%
Description of the reticular opacities subtypes (e.g. interlobular or interlobular lines)	58,5%	39,0%		2,4%	46,3%	12,2%	43,9%

Emphysema subtype including the so-called airspace enlargement with fibrosis	**Reached threshold for consensus in Round 1**				**90,2%**	9,8%	0,0%
Quantitation of FLD extent as percentage of the lung volume	46,3%	51,2%		2,4%	78,1%	14,6%	9,7%
Quantitation of FLD extent according to three categories of severity	65,9%	31,7%		2,4%	53,7%	12,2%	36,6%
Quantitation of FLD extent for any disease OR for sarcoidosis and systemic sclerosis only	46,3%	51,2%		2,4%	21,9%	2,5%	78,1%
Quantitation of emphysema extent as percentage of the lung volume	31,7%	68,3%		0,0%	26,8%	4,9%	70,7%
Quantitation of emphysema extent according to three categories of severity	65,9%	34,1%		0,0%	58,5%	7,3%	36,6%
Report air trapping only when expiratory CT scan is performed	51,2%	46,3%		2,4%	43,9%	7,3%	51,2%
Suggest air trapping also on inspiratory CT scan	78,0%	22,0%		0,0%	53,7%	24,4%	24,4%
Report enlarged pulmonary artery for any disease OR for sarcoidosis and systemic sclerosis only	**Reached threshold for consensus in Round 1**				**66,7%**	23,8%	9,5%
Report enlarged lymph nodes	**Reached threshold for consensus in Round 1**				**61,9%**	28,9%	9,5%
Conclusions							
CT pattern	**Reached threshold for consensus in Round 1**				**82,9%**	17,1%	0,0%
Proposal for the subsequent diagnostic test	46,3%	53,7%		0,0%	39,0%	7,3%	56,1%
Indication for the timing of CT follow-up	46,3%	51,2%		2,4%	34,1%	12,2%	56,1%

Note – CT = Computed Tomography; FLD = Fibrosing Lung Disease.

Supplementary Table 3 – In Round 3 the pulmonologists panelists: A) re-rated those items that did not reach the threshold for consensus in Round 1 and B) classified as 'to be outlined' or 'to be given as free text' those items that did reach the threshold for consensus on Round 1

Structured Report Items	Essential	Optional	Not relevant	missing	To be outlined	To be given as free text	No preferences
Initial Considerations							
CT protocol details	33,3%	66,7%			16,7%	16,7%	66,7%
Available clinical indication	**AGREE WITH RP CONSENSUS**						
Comparison with prior CT examinations	**AGREE WITH RP CONSENSUS**						
Differences in CT technique with prior examinations	41,7%	58,3%			25%	25%	50%
Motion artifacts	**AGREE WITH RP CONSENSUS**						
HRCT Findings							
Comparison of CT findings with prior scan, indicating change of each HRCT finding	**AGREE WITH RP CONSENSUS**						
Initial assessment of signs lung fibrosis (honeycombing, traction bronchiectasis, signs of volume loss)	**AGREE WITH RP CONSENSUS**						
Confidence on honeycombing against traction bronchiectasis	33,3%	66,7%			25%	25%	50%
Avoid description of the absent findings	41,7%	58,3%			25%	25%	50%
Description of all CT findings	41,7%	58,3%			25%	8,3%	66,7%
Description of the most relevant CT findings only (e.g. honeycombing, traction bronchiectasis, signs of volume loss)	16,2%	83,3%			8,3%	8,3%	83,3%
Disease distribution on both axial and cranio-caudal planes	**AGREE WITH RP CONSENSUS**						
Differentiation between macro- and micro-cystic honeycombing	8,3%	91,6%			8,3%	0,0%	91,7%
Description of the reticular opacities subtypes (e.g. interlobular or interlobular lines)	25%	75%			25%	0,0%	75,0%
Emphysema subtype including the so-called airspace enlargement with fibrosis	**AGREE WITH RP CONSENSUS**						

Quantitation of FLD extent as percentage of the lung volume	100	0%			0,0%	0,0%	100%
Quantitation of FLD extent according to three categories of severity	25%	75%			16,7%	8,3%	75,0%
Quantitation of FLD extent for any disease OR for sarcoidosis and systemic sclerosis only	25%	75%			33,3%	0,0%	66,7%
Quantitation of emphysema extent as percentage of the lung volume	25%	75%			16,7%	8,3%	75,0%
Quantitation of emphysema extent according to three categories of severity	100%	0%			16,7%	16,7%	66,7%
Report air trapping only when expiratory CT scan is performed	41,7%	58,3%			16,7%	33,3%	50%
Suggest air trapping also on inspiratory CT scan	41,7%	58,3%			25%	25%	50%
Report enlarged pulmonary artery for any disease OR for sarcoidosis and systemic sclerosis only	**AGREE WITH RP CONSENSUS**						
Report enlarged lymph nodes	**AGREE WITH RP CONSENSUS**						
Other ancillary findings	**AGREE WITH RP CONSENSUS**						
Conclusions							
CT pattern	**AGREE WITH RP CONSENSUS**						
Proposal for the subsequent diagnostic test	33,3%	66,7%			16,7%	16,7%	66,7%
Indication for the timing of HRCT follow-up	16,2%	83,3%			0.0%	16,7%	83,3%

Note – CT = Computed Tomography; FLD = Fibrosing Lung Disease.

Supplementary Table 4 – Item proposed by the pulmonology panelists for the radiology panelists

OPTION A + B (Essential for 85,7%)*	
OPTION A (Essential for 14.3%)	**OPTION B (to be considered only in association with option A)**
UIP DEFINITE	UNIDENTIFIABLE ASSOCIATIONS OR KNOWN CAUSES
UIP POSSIBLE	CONNECTIVE TISSUE DISEASE
UIP POSSIBLE OR DEFINITE WITH SIGNS OF ACUTE COMPLICATIONS (TO BE SPECIFIED)	ASBESTOSIS
NSIP	CHRONIC HYPERSENSITIVITY PNEUMONITIS
NSIP-OP	
FIBROSING SARCOIDOSIS	
PPFE	
UNCLASSIFIABLE	

Note – NSIP = Non-Specific Interstitial Pneumonia; OP = organizing pneumonia; PPFE = Pleuroparenchymal Fibroelastosis; UIP = Usual Interstitial Pneumonia

*The majority (85.7%) of the RPs