**Additional file 2 – STROBE Checklist**

**Re: A method to audit and score implementation of knowledge translation (KT) interventions in large health regions – an observational pilot study using rectal cancer surgery in Ontario**

1. We have included ‘observational pilot study; in our title and the abstract we believe is informative and balanced.

2-3. The background provides the rationale for our study (page 5,6 – lines 94-103). There are no pre-specified hypotheses.

4. Near the beginning of the paper we summarize key elements of the study (page 7 – line 125).

5. We describe the study setting (page 5 – line 105) and relevant dates (intervention implementation – page 7 – line 127; interviews dates - page 10 - line 208).

6. Participants – we interviewed stateholders from each of 14 health regions to obtain information on potential KT activities implemented to improve rectal cancer surgery (page 8 – line 151) and then had KT experts review data and ascribe a KT signature score to each region (page 10 – line 196). We consider this a cross-sectional study.

7. The main outcome is the ability to ascribe to each of 14 Ontario health regions a KT Signature score (page 9 – line 181).

8. Sources of data (interviews and summary of data – page 8 – line 159) are described as are methods of how these data were reviewed and scored by individual KT experts (page 10 – line 196).

9. We discuss potential recall bias (page 14 – line 300) and over-reporting bias (page 15 – line 305) in our limitations section, and why we believe these potential biases are not a concern.

10. Not applicable – activities in the entire province of Ontario were considered.

11. We describe our method at arriving at a KT signature score (page 10 – line 197) and how scores were then used to create two groups (page 10 – line 204). There were no further analyses with these groups.

12. Statistical methods – please see item 11 above.

13. NA. We have included a Flow Diagram - Figure 1.

14. NA

15. We report scores and groupings (page 10 – line 213).

16. estimates, adjusted – NA

17. Subanalyses, sensitivity analyses – NA

18. Discussion - key results presented (page 12 – lines 235-246).

19. Limitations – presented (page 14,15 – lines 284-317).

20-21. A similar study has not been done before. We provide an overall conclusion – interpretation – of our study (page 15 – line 319).

22. Sources of funding and role of funders is included (page 17 – line 345).