Appendix S2 Description of the 8 criteria designed to assess risk of bias of external validity quality in the studies. This instrument is an adapted version of the Newcastle Ottawa Scale (NOS) for cohort studies

Criterion	Description of criteria
1. Description or type of football players.	Studies that reported participation in the two highest club football league divisions receive
	a star for this criterion. Studies conducted in football tournaments or national team
	football (e.g. World Cup, European championships) were considered elite receive a star
	for this criterion. Studies describing participants as professional were considered elite and
	receive a star for this criterion. Studies that did not describe the level of football or
	described the level of play as amateur did not receive a star for this criterion.
2. Definition of football-related injury.	Studies reporting the incidence of injury in women's football should state the definition of
	injury used in the study receive a star for this criterion.
	Studies that did not state a definition of injury did not receive a start for this criterion.
3. Representativeness of the exposed cohort.	Studies truly representative of the average football players in the community*; (b) studies
	somewhat representative of the average football players in the community*; (c) selected
	participants, group of users; (d) no description of the derivation of the cohort did not
	receive a start for this criterion.
4. Ascertainment of exposure.	(a) Secure record*; (b) structured interview*; (c) written self-report or; (d) no description
	did not receive a start for this criterion.

5. Demonstration that outcome of interest was not present at start of study.	(a) Yes*; Studies that described that football players included were injury-free at baseline received a star for this criterion. (b) No. Studies that did not describe that football players included were injury-free at baseline did not receive a star for this criterion
6. Assessment of outcome.	(a) Independent blind assessment*; (b) record linkage* (e.g International Classification of Diseases (ICD) codes, Sport Medicine Diagnostic Coding System (SMDCS), Orchard Sports Injury Illness Classification System (OSIICS) (c) self-report or (d) no description did not receive a star for this criterion
7. Was follow-up long enough for outcomes to occur risk factors.	(a) Yes* Studies conducted over at least one football season and / or a football tournament received a star for this criterion; (b) No.
(b) Adequacy of follow-up of cohorts	A loss to follow-up greater than 20 % may increase the risk of bias in prospective studies (Fewtrell et al., 2008). (a) Complete follow-up of all subjects accounted for*; (b) \leq 20% of participants lost to follow-up unlikely to introduce bias or description provided of those lost* (c) \geq 20% follow-up rate and no description of those lost or (d) no statement did not receive a star for this criterion

Studies could be awarded a maximum of one star for each item. Eight stars could be awarded for a given study and were categorized into low quality " ≤ 3 stars", moderate quality " ≥ 4 - ≤ 6 stars", and high quality studies " ≥ 7 stars

^{*} A study with this alternative received a star for this criterion.