Supplementary Table 1: Diagnostic Outcomes of Included Studies

	TP	FP	TN	FN	Sensitivity (%)	Specificity (%)	PPV (%)	NPV (%)	LR+	LR-
Baron 2018	16	3	35	5	76	92	84.2	87.5	9.6	0.26
Bukar 2022	1	1	62	3	25	98	50	95.4	14.7	0.76
Charernjiratragul 2022	20	28	319	13	61	92	41.6	96	7.5	0.43
Drukker 2018	15	17	326	12	56	95	46.8	96.5	12.1	0.46
Mokhtari 2022	13	3	100	7	65	97	81	93	21.7	0.36
Nirumanesh 2020	16	15	172	4	80	92	52	98	10	0.21
Shu 2021	8	19	78	7	53	80	29.6	91.8	2.7	0.58

TP: True positive, FP: False positive, TN: True negative, FN: False negative, PPV: Positive predictive value, NPV: Negative

predictive value, LR+: Likelihood ration positive, LR-: Likelihood ration negative

Supplementary Table 2: Quality assessment of included studies, according to Quality Assessment of Diagnostic Accuracy Studies-2 (QUADAS-2) tool.

	Patient selection		Index test		Reference standard		Flow and timing	
	Risk of bias	Applicability concern	Risk of bias	Applicability concern	Risk of bias	Applicability concern	Risk of bias	Applicability concern
Baron 2018	unclear	low	high	low	low	low	low	low
Bukar 2022	unclear	low	low	low	low	low	low	low
Charernjiratragul 2022	unclear	low	unclear	low	low	low	low	low
Drukker 2018	low	low	high	low	low	low	low	low
Mokhtari 2022	unclear	low	low	low	low	low	low	low
Nirumanesh 2020	low	low	unclear	low	low	low	low	low
Shu 2021	unclear	low	unclear	unclear	low	low	low	low

Supplementary Table 3: Summary of GRADE to assess the diagnostic accuracy of abdominal ultrasonographic sliding sign in the evaluation of severe intra-abdominal adhesions in women undergoing repeat cesarean delivery.

No of studies	Design	Limitations	Indirectness	Inconsistency	Imprecise data	Publication bias	Quality
True positives (women with severe intra-abdominal adhesions)							
7 studies (1318 patients)	Prospective observational studies with one descriptive study	Serious limitations [a]	Not serious	Not serious	Not serious	Unlikely	⊕⊕⊕◯ —— Moderate
True negatives (women without severe intra-abdominal adhesions)							
7 studies (1318 patients)	Prospective observational studies with one descriptive study	Serious limitations [a]	Not serious	Not serious	Not serious	Unlikely	⊕⊕⊕◯ —— Moderate
False positives (women incorrectly classified as having severe intra-abdominal adhesions)							
			Not serious	Not serious		Unlikely	⊕⊕⊕◯

No of studies	Design	Limitations	Indirectness	Inconsistency	Imprecise data	Publication bias	Quality
7 studies (1318 patients)	Prospective observational studies with one descriptive study	Serious limitations [a]			Not serious		Moderate

False negatives (women incorrectly classified as not having severe intra-abdominal adhesions)

No of studies	Design	Limitations	Indirectness	Inconsistency	Imprecise data	Publication bias	Quality
7 studies (1318 patients)	Prospective observational studies with one descriptive study	Serious limitations [a]	Not serious	Not serious	Not serious [b]	Unlikely	⊕⊕⊕○ Moderate

[a] Patients selection method was unclear in most of the studies, also the risk of bias concerning index test factor was high in two studies due to the absence of a prespecified threshold for interpretation or threshold use. [b] Because of the small number of included studies we could not perform publication bias assessment.