## **Peer Review File**

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**Comment 1:** Page 2, line 39-41: "Yet, most patients, especially those with lung cancer (the leading cause of cancer death) (1), are not detected through cancer screening but are present by self-referral, with self-appraisal and help seeking, inevitably causing delays." the word present isn't clear here. Perhaps changing to "are identified though self-referral, with self-appraisal...."

**Reply 1:** Thank you for pointing out this. We agree that the writing was a bit unclear, specially given quite a complex structure of the sentence.

**Changes in the text:** We use reviewer's suggestion to revise as (page 2, lines 39-42): "Yet, most patients, especially those with lung cancer (the leading cause of cancer death) (1), are not detected through cancer screening; instead, they are identified through self-referral, with self-appraisal and help seeking, sometimes inevitably causing delays."

**Comment 2:** No other comments from me. This is a well written manuscript that clearly outlines some of the challenges in designing and reporting on research into the timeliness of diagnosis and treatment in cancer care. The authors have proposed a new framework which is based on two of the key models of assessing pathways to and timeliness of cancer diagnosis and treatment. It would be great to see some research using the authors proposed pathway, to identify if it works in a research setting.

**Reply 2:** Thank you very much for reviewing our paper with the above positive comments. Regarding the implementation of the new framework, actually its preliminary version has been presented in our systematic overview (reference #8: Zhang J, IJzerman MJ, Oberoi J, et al. Lung Cancer 2022;166:27-39), and this final version has been supporting the conduction of a very first data-linkage cohort study in Australia using datasets from primary care, hospitals and registries to investigate times to diagnosis and treatment for lung cancer. We sincerely hope the publications from this study could be a great example of implementing this framework, and at the end the framework would be useful and adopted across healthcare systems in different countries.

Changes in the text: There is no change in main text regarding this comment.