<table>
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<tr>
<th>Author, year, country</th>
<th>No. of participants</th>
<th>Study type</th>
<th>Intervention (a, Timing of commencement; b, Contents; c, Duration; d, Frequency)</th>
<th>Control</th>
<th>Outcomes</th>
<th>Notes</th>
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| Jones et al., 2003, UK | 126 | Multi-centre RCT | a: in-hospital  
b: routine follow-up plus rehabilitation package consisting of 93 pages of text  
c: 6 weeks  
d: every day* | No intervention | HRQoL, Mortality, Depression symptoms, PTSD-related symptoms | ICU rehabilitation before randomisation* |
| Cuthbertson et al., 2009, UK | 286 | Multi-centre RCT | a: in-hospital  
b: manual based, self-directed, physical rehabilitation program developed by physiotherapists and introduced by a study nurse  
c: continued for 3 months after discharge  
d: unknown | No intervention | HRQoL, Mortality, Quality-adjusted life years, Incidence and severity of PTSD, Anxiety and depression symptoms, Cost effectiveness | ICU rehabilitation before randomisation* |
| Elliott et al., 2011, Australia | 195 | Multi-centre RCT | a: after hospital discharge  
b: home-based physical rehabilitation program focused on strength training and walking  
c: 8 weeks  
d: 5 times/week | No intervention | HRQoL, Mortality, Physical function | No ICU rehabilitation before randomisation* |
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| Salisbury et al., 2010, UK| 16           | Single-centre pilot RCT | a: in-hospital  
b: enhanced physiotherapy and dietetic rehabilitation package  
c: unknown  
d: unknown | Standard care | Physical outcomes, Nutritional outcome, Breathlessness on the Visual analogue scale scores for breathlessness, fatigue, joint stiffness, pain, and appetite |
| Batterham et al., 2014, UK| 59           | Multi-centre RCT | a: after hospital discharge  
b: hospital-based, physiotherapist-led, supervised exercise  
c: 8 weeks  
d: 2 times/week | No intervention | HRQoL, Oxygen uptake, Mood disorder                                      |
| Connolly et al., 2015, UK | 20           | Two-centre pilot RCT | a: after hospital discharge  
b: exercise-base rehabilitation session of 40 minutes  
c: 8 weeks  
d: 3 times/week (2 times supervised, 1 time unsupervised) | No intervention | HRQoL, ADL, Mortality, Physical function, Muscle strength, Adverse events, Anxiety and depression symptoms |
| Walsh et al., 2015, UK    | 240          | Two-centre RCT | a: in-hospital  
b: mobilization exercise and relevant dietetic, occupational, and speech/language therapy  
c: from ICU discharge until hospital | Standard care | Mobility index, HRQoL, Anxiety and depression symptoms, Self-reported symptom scores (using visual analogue scales) |

*ICU rehabilitation before randomisation
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| McWilliams et al., 2016, UK | 73           | Single-centre RCT | a: after hospital discharge  
b: outpatient-based exercise and education program  
c: 7 weeks  
d: 3 times/week (1 supervised, 2 self-directed titrated) | No intervention | ICU rehabilitation | Exercise capacity, HRQoL, Mortality, Adverse events* |
| Shelly et al., 2017, India | 35           | RCT          | a: after hospital discharge  
b: home-based respiratory and mobility training  
c: 4 weeks  
d: 5 times/week | No intervention |  | HRQoL |
| McDowell et al., 2017, UK | 60           | Multi-centre RCT | a: after hospital discharge  
b: standard care plus personalized exercise program  
c: 6 weeks  
d: 3 times/week (2 supervised and 1 unsupervised) | No intervention |  | HRQoL, Mortality, Adverse events, Mobility index, Hand function, Exercise capacity, Breathlessness, Anxiety and depression symptoms, Readiness to exercise, Self-efficacy to |
exercise

*Unpublished data

ICU, intensive care unit; RCT, randomised controlled trial; HRQoL, health-related quality of life; PTSD, post-traumatic stress disorder; ADL, activity of daily living