Supplementary Table 2. Grading of Recommendations Assessment, Development and Evaluation (GRADE) definitions of the level of evidence and the strength of recommendation used in the 2025 Korean evidence-based clinical practice guideline for pediatric hepatoblastoma, developed by the Korean Society of Pediatric Hematology and Oncology and the National Cancer Center of Korea

Level of evidence	Color code	Definition
High		We are very confident that the true effect lies close to that of the estimate of the effect. Further research is very unlikely to change our confidence in the estimate of effect.
Moderate		We are moderately confident in the effect estimate: the true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different.
Low		Our confidence in the effect estimate is limited: the true effect may be substantially different from the estimate of the effect.
Very low		We have very little confidence in the effect estimate: the true effect is likely to be substantially different from the estimate of effect.

Strength of recommendation	Color code	Definition
Strong		The desirable effects of the intervention clearly outweigh the undesirable effects. Most patients should receive (or should not receive) the intervention as standard practice.
Weak		The balance between desirable and undesirable effects is uncertain or closely matched. Individualized clinical decision-making is required, incorporating patient and family preferences, resource use and feasibility.

The level of evidence was rated as high, moderate, low or very low based on the certainty in treatment effects for the target population; certainty was influenced by limitations in study design, inconsistency, imprecision and indirectness of the data. Risk of bias was assessed with the revised Cochrane risk-of-bias tool for randomized trials (ROB 2.0) for randomized studies and with the Risk of Bias Assessment Tool for Non-Randomized Studies version 2.0 (ROBANS 2.0) for nonrandomized studies.