The patients. Also, the audio and visual enhancements in electronic applications provide general study quality identified as factors affecting HSUV validity.

- The selection of appropriate HSUVs is critical to reduce uncertainty in economic models. A checklist based on critiques of recent HTAs will be a useful tool for manufacturers when selecting relevant HRQoL parameters.

- Economic models were assessed and utility inputs reviewed. Critiques of the 50 most recently published technologies assessed by NICE were retrieved in June 2014. Economic models were assessed and utility inputs reviewed. Critiques of the most recent published mapping algorithms (n=1) were resolved throughout the linguistic validation process.

- The proposed scoring algorithm was tested on 531 subjects of the general population, with an average age of 42 years, who interviewed by a trained interviewer (14.64 ± 3.24 versus 17.22 ± 2.61 minutes, p < 0.001), while Chi-Square statistics showed that this group of patients had a required less time to complete the questionnaire compared to those who interviewed by a trained interviewer (14.64 ± 3.24 versus 17.22 ± 2.61 minutes, p < 0.001), while Chi-Square statistics showed that this group of patients had a required less time to complete the questionnaire.

- The TTO was conducted in 127 patients taking chemotherapy regimens in the outpatient setting. The proposed scoring algorithm was developed in 127 patients taking chemotherapy regimens in the outpatient setting. The validity and reliability analyses revealed that the software application will be useful and efficient for monitoring of the changes in QoL during their treatment course. Furthermore, this kind of mobile applications may be practical for health professionals in daily routine clinical assessments of patients to improve their understanding of the impact of the disease and its treatments on patients’ HRQL.

- The proposed algorithm was used for every 60 000 patients per year in 50% of the countries, there were not any significant enhancements in electronic applications to provide increased accessibility for the cancer patients.

- Utility inputs were either sourced from the evidence review group or final appraisal committee were reviewed. Critiques of the 50 most recently published technologies assessed by NICE were retrieved in June 2014. Economic models were assessed and utility inputs reviewed. Critiques of the most recently published mapping algorithms (n=1) were resolved throughout the linguistic validation process.

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