## STARD checklist for reporting of studies of diagnostic accuracy

Section and Topic	Item #		On page #
TITLE/ABSTRACT/	1	Identify the article as a study of diagnostic accuracy (recommend MeSH	2
KEYWORDS		heading 'sensitivity and specificity').	
INTRODUCTION	2	State the research questions or study aims, such as estimating diagnostic	6
		accuracy or comparing accuracy between tests or across participant	
		groups.	
METHODS			_
Participants	3	The study population: The inclusion and exclusion criteria, setting and	7
	4	locations where data were collected.	_
	4	Participant recruitment: Was recruitment based on presenting symptoms,	7
		results from previous tests, or the fact that the participants had received the index tests or the reference standard?	
	5	Participant sampling: Was the study population a consecutive series of	7
		participants defined by the selection criteria in item 3 and 4? If not,	,
		specify how participants were further selected.	
	6	Data collection: Was data collection planned before the index test and	7
		reference standard were performed (prospective study) or after	
		(retrospective study)?	
Test methods	7	The reference standard and its rationale.	11,13
	8	Technical specifications of material and methods involved including how	8,9,10,11
		and when measurements were taken, and/or cite references for index	
		tests and reference standard.	
	9	Definition of and rationale for the units, cut-offs and/or categories of the	8,11
	10	results of the index tests and the reference standard.	
	10	The number, training and expertise of the persons executing and reading	
		the index tests and the reference standard.	_
	11	Whether or not the readers of the index tests and reference standard	7
		were blind (masked) to the results of the other test and describe any	
Statistical methods	12	other clinical information available to the readers.  Methods for calculating or comparing measures of diagnostic accuracy,	12
Statistical methods	12	and the statistical methods used to quantify uncertainty (e.g. 95%	12
		confidence intervals).	
	13	Methods for calculating test reproducibility, if done.	12
RESULTS			
Participants	14	When study was performed, including beginning and end dates of	See
		recruitment.	methods
	15	Clinical and demographic characteristics of the study population (at least	
		information on agemetho, gender, spectrum of presenting symptoms).	
	16	The number of participants satisfying the criteria for inclusion who did or	See flow
		did not undergo the index tests and/or the reference standard; describe	chart
		why participants failed to undergo either test (a flow diagram is strongly	
		recommended).	_
Test results	17	Time-interval between the index tests and the reference standard, and	7
	18	any treatment administered in between.  Distribution of severity of disease (define criteria) in those with the target	
	10	condition; other diagnoses in participants without the target condition.	
	19	A cross tabulation of the results of the index tests (including	14
	19	indeterminate and missing results) by the results of the reference	14
		standard; for continuous results, the distribution of the test results by the	
		results of the reference standard.	
	20	Any adverse events from performing the index tests or the reference	14
		standard.	
Estimates	21	Estimates of diagnostic accuracy and measures of statistical uncertainty	15
		(e.g. 95% confidence intervals).	
	22	How indeterminate results, missing data and outliers of the index tests	See flow
		were handled.	chart
	23	Estimates of variability of diagnostic accuracy between subgroups of	15
		participants, readers or centers, if done.	
	24	Estimates of test reproducibility, if done.	14
DISCUSSION	25	Discuss the clinical applicability of the study findings.	18,19,21