

hospital 1: Second Affiliate Hospital of Zhejiang University Medical School hospital 2: Second Affiliated Hospital of Zhejiang Chinese Medical University hospital 3: Hubei University of Medicine affiliated Renmin Hospital

Scheme S1. Workflow chart of patient selection and the exclusion criteria.

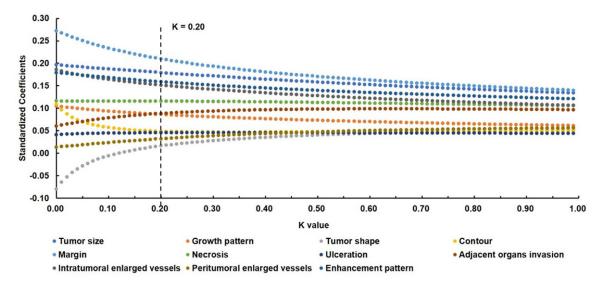


Figure S1. The ridge curve of the relevant predictors in gastric GISTs.

**Table S1.** Ridge regression results of CT features (k = 0.20)

	Unstandardized Coefficients		Standardized Coefficients	t	р	R <sup>2</sup>	Adjusted R <sup>2</sup>	р
	В	S.E.	Beta				π-	
Tumor Size	0.034	0.009	0.183	3.748	< 0.001	0.660	0.633	p < 0.001
Growth pattern	0.132	0.066	0.089	1.991	0.048			
Tumor shape	0.019	0.13	0.007	0.143	0.886			
Contour	0.134	0.131	0.051	1.027	0.306			
Margin	0.556	0.136	0.22	4.086	< 0.001			
Necrosis	0.258	0.122	0.116	2.114	0.036			
Ulceration	0.117	0.123	0.045	0.952	0.343			
Adjacent organs invasion	0.209	0.131	0.084	1.592	0.114			
Intratumoral enlarged vessels	0.449	0.134	0.157	3.338	0.001			
Peritumoral enlarged vessels	0.065	0.117	0.028	0.558	0.578			
Enhancement pattern	0.358	0.115	0.163	3.103	0.002			
Constant	0.478	0.09	-	5.323	< 0.001			

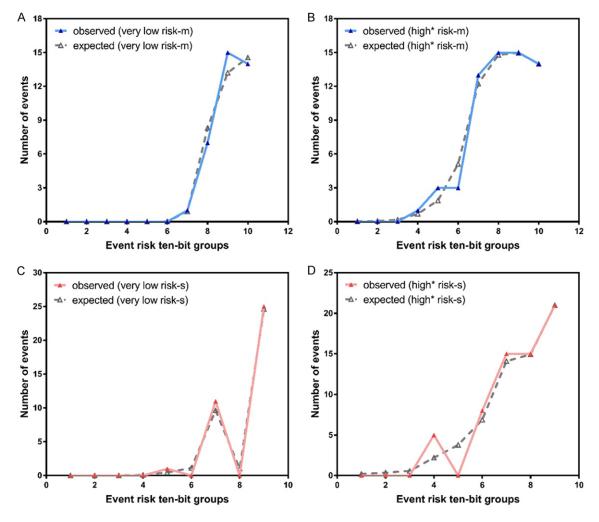


Figure S2. A. The calibration curve of predictive model (m) in very low risk grade (p = 0.920). B. The calibration curve of predictive model (m) in high\* risk grade (p = 0.936). C. The calibration curve of score model (s) in very low risk grade (p = 0.721). D. The calibration curve of score model (s) in high\* risk grade (p = 0.098).

## A practical multi-class scoring system of gastric GISTs

**Table S2.** The AUCs, sensitivity and specificity of predictive models and score models in training and validation cohorts

Madala	ALIO	95%	% C.I.	cut off point		
Models	AUC	Lower	Upper sensitivity specific		specificity	
very low risk model for training	0.986	0.952	0.998	94.59%	98.23%	
very low risk score model for training	0.973	0.932	0.992	97.30%	93.81%	
high1* risk model for training	0.976	0.937	0.994	89.06%	97.67%	
high1* risk score model for training	0.977	0.938	0.994	92.19%	94.19%	
very low risk score model for validation	0.912	0.833	0.982	92.31%	85.42%	
high1* risk score model for validation	0.972	0.894	0.997	100.00%	87.88%	

**Table S3.** The predicted positive rates including precision, recall and F1 score in three score ranges of the training cohort

Score range	Predicted true positive	Actual positive	Precision	Predicted total positive	Recall	F1 score
$\geq$ 0 and $\leq$ 3	36¹	37 <sup>1</sup>	97.3%	431,2	83.7%	0.900
> 3 and ≤ 8	37 <sup>2</sup>	49 <sup>2</sup>	75.5%	481,2,3	77.1%	0.763
> 8 and $\leq$ 21	54 <sup>3</sup>	64³	84.4%	59 <sup>2,3</sup>	91.5%	0.878

<sup>1:</sup> very low risk; 2: low risk; 3: high\* risk.

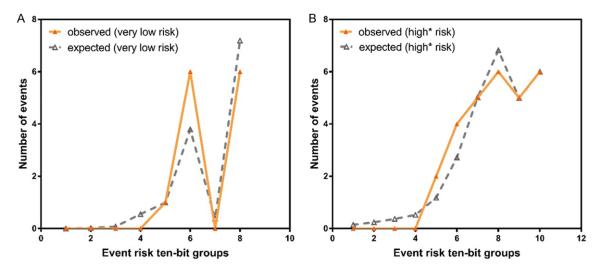


Figure S3. A. The calibration curve of score model in very low risk grade (p = 0.743). B. The calibration curve of score model in high\* risk grade (p = 0.533).

**Table S4.** The predicted positive rates including precision, recall and F1 score in three score ranges of the validation cohort

Score range	Predicted true positive	Actual positive	Precision	Predicted total positive	Recall	F1 score
$\geq$ 0 and $\leq$ 3	12 <sup>1</sup>	13¹	92.3%	191,2	63.2%	0.740
> 3 and ≤ 8	<b>11</b> <sup>2</sup>	20 <sup>2</sup>	55.0%	161,2,3	68.8%	0.611
> 8 and ≤ 21	24 <sup>3</sup>	28³	85.7%	26 <sup>2,3</sup>	92.3%	0.907

<sup>1:</sup> very low risk; 2: low risk; 3: high\* risk.