

RK checklist

Reported	Reported on Page Number/Line Number	Reported Section
marker examined, the study objectives, and any pre-specified hypotheses.	Page 3, Line 75-79	Introduction
STUDY METHODS		
the characteristics (e.g., disease stage or co-morbidities) of the study patients, including their source and inclusion and exclusion	Page 4, Line 82-87	Methods
treatments received and how chosen (e.g., randomized or rule-based).	-	-
Characteristics		
type of biological material used (including control samples) and methods of preservation and storage.	Page 5, Line 124-126	Methods
the assay method used and provide (or reference) a detailed protocol, including specific reagents or kits used, quality control measures, reproducibility assessments, quantitation methods, and scoring and reporting protocols. Specify whether and how assays were blinded to the study endpoint.	Page 5, Line 126-133	Methods
method of case selection, including whether prospective or retrospective and whether stratification or matching (e.g., by stage of disease or age) was used. Specify the time period from which cases were taken, the end of the follow-up period, and the median follow-up	Page 4, Line 82	Methods
define all clinical endpoints examined.	-	-
candidate variables initially examined or considered for inclusion in models.	Page 4, Line 89-90 Table 1	Methods
rationale for sample size; if the study was designed to detect a specified effect size, give the target power and effect size.	Page 4, Line 82	Methods
Statistical methods		
all statistical methods, including details of any variable selection procedures and other model-building issues, how model assumptions were verified, and how missing data were handled.	Page 4, Line 89-108 Page 5, Line 109-134 Page 6, Line 135-140	Methods
how marker values were handled in the analyses; if relevant, describe methods used for cutpoint determination.	-	-

the flow of patients through the study, including the number of patients included in each stage of the analysis (a diagram may be used) and reasons for dropout. Specifically, both overall and for each subgroup extensively examined report the numbers of patients and the number of events.	Page 6, Line145-146	Results
distributions of basic demographic characteristics (at least age and sex), standard (disease-specific) prognostic variables, and tumor marker, including numbers of missing values.	Table 1	-
presentation		
relation of the marker to standard prognostic variables.	Figure 2	-
univariable analyses showing the relation between the marker and outcome, with the estimated effect (e.g., hazard ratio and probability). Preferably provide similar analyses for all other variables being analyzed. For the effect of a tumor marker on a continuous outcome, a Kaplan-Meier plot is recommended.	Figure 2; Figure 3	
multivariable analyses, report estimated effects (e.g., hazard ratio) with confidence intervals for the marker and, at least for the model, all other variables in the model.	Page 7, Line179-183	Results
reported results, provide estimated effects with confidence intervals from an analysis in which the marker and standard prognostic variables are included, regardless of their statistical significance.	Table 3	
report results of further investigations, such as checking assumptions, sensitivity analyses, and internal validation.	Page 7, Line172-174	Results
discuss the results in the context of the pre-specified hypotheses and other relevant studies; include a discussion of limitations of the study.	Page 9, Line231-239 Page 10, Line246-248 Page 10, Line266-267 Page 11, Line268-269 Page 12, Line299-301	Discuss Discuss Discuss Discuss Discuss
discuss implications for future research and clinical value.	Page 11, Line294-295 Page 12, Line 296, Line 303-306	Discuss Conclus

Altman DG, Sauerbrei W, Taube SE, Gion M, Clark GM: Reporting recommendations for tumor marker prognostic studies (REMARK). J Natl Cancer Inst 2005;

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