Supplementary Online Content

Coyner AS, Oh MA, Shah PK, et al. External validation of a retinopathy of prematurity screening model using artificial intelligence in 3 low- and middle-income populations. *JAMA Ophthalmol*. Published online June 30, 2022. doi:10.1001/jamaophthalmol.2022.2135

eFigure. Selection of Study Population

This supplementary material has been provided by the authors to give readers additional information about their work.

eFigure. Selection of Study Population. Infants from different LMICs were screened for ROP using their respective inclusion criteria. For this study, infants were required to have an exam at or after 30 weeks PMA, GA recorded, and retinal fundus images (centered on the macula).

India
February 2019–December 2020
BW ≤ 2000 grams or GA < 34 weeks
(GA < 37 weeks if other risk factors)
2730 babies

India
January 2021–June 2021
BW ≤ 2000 grams or GA < 34 weeks
(GA < 37 weeks if other risk factors)
2271 babies

Mongolia
December 2015–January 2017
BW ≤ 2000 grams or GA < 37 weeks
319 babies

Nepal
October 2016–August 2018
BW ≤ 1700 grams or GA < 36 weeks
373 babies

350 babies excluded
    345 w/o exam at PMA ≥ 30 weeks
    5 treated before PMA ≥ 30 weeks

1509 babies excluded
    1313 w/o PMA recorded
    5 w/o GA recorded
    56 w/o exam at PMA ≥ 30 weeks
    5 treated before PMA ≥ 30 weeks
    130 w/o posterior-pole centered images

2 babies excluded
    2 w/o exam at PMA ≥ 30 weeks

43 babies excluded
    43 w/o exam at PMA ≥ 30 weeks

80% of dataset

20% of dataset

29 babies excluded
    57 eyes w/ TR-ROP Dx at exam

Training Dataset
1848 w/o TR-ROP
27 w/ TR-ROP

Validation Dataset
462 w/o TR-ROP
14 w/ TR-ROP

Test Dataset
735 w/o TR-ROP
27 w/ TR-ROP

Test Dataset
264 w/o TR-ROP
53 w/ TR-ROP

Test Dataset
327 w/o TR-ROP
3 w/ TR-ROP