<u>Materials Design Analysis Reporting (MDAR)</u> Checklist for Authors

The MDAR framework establishes a minimum set of requirements in transparent reporting applicable to studies in the life sciences (see Statement of Task: doi:10.31222/osf.io/9sm4x.). The MDAR checklist is a tool for authors, editors, and others seeking to adopt the MDAR framework for transparent reporting in manuscripts and other outputs. Please refer to the MDAR Elaboration Document for additional context for the MDAR framework.

For all that apply, please note where in the manuscript the required information is provided.

Materials:

Newly created materials	indicate where provided: page no/section/legend)	n/a
The manuscript includes a dedicated "materials		
availability statement" providing transparent		
disclosure about availability of newly created		V
materials including details on how materials can be		
accessed and describing any restrictions on access.		

Antibodies	indicate where provided: page no/section/legend)	n/a
For commercial reagents, provide supplier name, catalogue number and <u>RRID</u> , if available.		v

DNA and RNA sequences	indicate where provided: page no/section/legend)	n/a
Short novel DNA or RNA including primers, probes: Sequences should be included or deposited in a public repository.		v
Cell materials	indicate where provided: page no/section/legend	n/a
Cell lines: Provide species information, strain. Provide accession number in repository OR supplier name, catalog number, clone number, OR RRID.		v
Primary cultures: Provide species, strain, sex of origin, genetic modification status.		v

Experimental animals	indicate where provided: page no/section/legend)	n/a
Laboratory animals or Model organisms: Provide species, strain, sex, age, genetic modification status. Provide accession number in repository OR supplier name, catalog number, clone number, OR RRID.		v
Animal observed in or captured from the field: Provide species, sex, and age where possible.		v

Plants and microbes	indicate where provided: page no/section/legend)	n/a
Plants: provide species and strain, ecotype and cultivar where relevant, unique accession number if available, and source (including location for collected wild specimens).		v
Microbes: provide species and strain, unique accession number if available, and source.		V

Human research participants	indicate where provided: page no/section/legend) or state if these demographics were not collected	n/a
If collected and within the bounds of privacy constraints report on age, sex and gender or ethnicity for all study participants.	Table 1 in manuscript	

Design:

Study protocol	indicate where provided: page no/section/legend)	n/a
If study protocol has been pre-registered, provide DOI. For clinical trials, provide the trial registration number OR cite DOI.		v

Laboratory protocol	indicate where provided: page no/section/legend)	n/a
Provide DOI OR other citation details if detailed step- by-step protocols are available.		v

Experimental study design (statistics details)		
For in vivo studies: State whether and how the following have been done	indicate where provided: page no/section/legend. If it could have been done, but was not, write not done	n/a
Sample size determination		V
Randomisation		V
Blinding		V
Inclusion/exclusion criteria	Study Design section of the Methods in the Supplement	

Sample definition and in-laboratory replication	indicate where provided: page no/section/legend	n/a
State number of times the experiment was replicated in laboratory.		V
Define whether data describe technical or biological replicates.		V

Ethics	indicate where provided: page no/section/legend	n/a
Studies involving human participants: State details of authority granting ethics approval (IRB or equivalent committee(s), provide reference number for approval.	Ethics section of the Methods in the Supplement	
Studies involving experimental animals: State details of authority granting ethics approval (IRB or equivalent committee(s), provide reference number for approval.		V
Studies involving specimen and field samples: State if relevant permits obtained, provide details of authority approving study; if none were required, explain why.		v

Dual Use Research of Concern (DURC)	indicate where provided: page no/section/legend	n/a
If study is subject to dual use research of concern		
regulations, state the authority granting approval		V
and reference number for the regulatory approval.		

Analysis:

Attrition	indicate where provided: page no/section/legend	n/a
Describe whether exclusion criteria were		
preestablished. Report if sample or data points were	Study Design section of the Methods in the	
omitted from analysis. If yes report if this was due to	Supplement, Results section in the manuscript,	
attrition or intentional exclusion and provide	Supplemental Figure 1	
justification.		

Statistics	indicate where provided: page no/section/legend	n/a
Describe statistical tests used and justify choice of tests.	Statistical Analysis section of the Methods in the Supplement	

Data availability	indicate where provided: page no/section/legend	n/a
For newly created and reused datasets, the manuscript includes a data availability statement that provides details for access or notes restrictions on access.	Data Availability Statement in manuscript	
If newly created datasets are publicly available, provide accession number in repository OR DOI OR URL and licensing details where available.		v
If reused data is publicly available provide accession number in repository OR DOI OR URL, OR citation.		v

Code availability	indicate where provided: page no/section/legend	n/a
For all newly generated custom computer code/software/mathematical algorithm or re-used code essential for replicating the main findings of the study, the manuscript includes a data availability statement that provides details for access or notes restrictions.	Code Availability Statement in manuscript	
If newly generated code is publicly available, provide accession number in repository, OR DOI OR URL and licensing details where available. State any restrictions on code availability or accessibility.	Code Availability Statement in manuscript	
If reused code is publicly available provide accession number in repository OR DOI OR URL, OR citation.		v

Reporting

MDAR framework recommends adoption of discipline-specific guidelines, established and endorsed through community initiatives. Journals have their own policy about requiring specific guidelines and recommendations to complement MDAR.

Adherence to community standards	indicate where provided: page no/section/legend	
State if relevant guidelines (e.g., ICMJE, MIBBI, ARRIVE) have been followed, and whether a checklist (e.g., CONSORT, PRISMA, ARRIVE) is provided with the manuscript.	Strobe Checklist was uploaded separately	

STROBE Statement—checklist of items that should be included in reports of observational studies

	Item No.	Recommendation	Page No.
Title and abstract	1	(a) Indicate the study's design with a commonly used term in the title or the abstract	2
		(b) Provide in the abstract an informative and balanced summary of what was done and what was	2
		found	
Introduction			
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	3-5
Objectives	3	State specific objectives, including any prespecified hypotheses	5
Methods			
Study design	4	Present key elements of study design early in the paper	26
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure,	26-28
		follow-up, and data collection	
Participants	6	(b) Cohort study—Give the eligibility criteria, and the sources and methods of selection of	27-28
		participants. Describe methods of follow-up	
		Case-control study-Give the eligibility criteria, and the sources and methods of case	
		ascertainment and control selection. Give the rationale for the choice of cases and controls	
		Cross-sectional study-Give the eligibility criteria, and the sources and methods of selection of	
		participants	
		(b) Cohort study—For matched studies, give matching criteria and number of exposed and	-
		unexposed	
		Case-control study—For matched studies, give matching criteria and the number of controls per	
		case	
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers.	27-29
		Give diagnostic criteria, if applicable	
Data sources/	8*	For each variable of interest, give sources of data and details of methods of assessment	27-29 (and Supplemental Table 2)
measurement		(measurement). Describe comparability of assessment methods if there is more than one group	
Bias	9	Describe any efforts to address potential sources of bias	28-29, 31
Study size	10	Explain how the study size was arrived at	26-27

Continued on next page

Quantitative	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which	28-29 (and Supplemental
variables		groupings were chosen and why	Table 2)
Statistical	12	(a) Describe all statistical methods, including those used to control for confounding	29-30
methods		(b) Describe any methods used to examine subgroups and interactions	29-30
		(c) Explain how missing data were addressed	30
		(d) Cohort study—If applicable, explain how loss to follow-up was addressed	29-30
		Case-control study—If applicable, explain how matching of cases and controls was addressed	
		<i>Cross-sectional study</i> —If applicable, describe analytical methods taking account of sampling strategy	
		(e) Describe any sensitivity analyses	30-31
Results			
Participants	13*	(a) Report numbers of individuals at each stage of study-eg numbers potentially eligible, examined	5-6 (and Supplemental
		for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed	Figure 1)
		(b) Give reasons for non-participation at each stage	5-6 (and Supplemental
			Figure 1)
		(c) Consider use of a flow diagram	Supplemental Figure 1
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on	Table 1 and Supplemental
		exposures and potential confounders	Table 5
		(b) Indicate number of participants with missing data for each variable of interest	5-6 (and Supplemental
			Figure 1)
		(c) Cohort study—Summarise follow-up time (eg, average and total amount)	5-6 (and Supplemental Table
			4)
Outcome data	15*	Cohort study—Report numbers of outcome events or summary measures over time	Supplemental Figure 2
		Case-control study-Report numbers in each exposure category, or summary measures of exposure	-
		Cross-sectional study—Report numbers of outcome events or summary measures	-
Main results	16	(a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision	Tables 2-4
		(eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were	
		included	
		(b) Report category boundaries when continuous variables were categorized	-
		(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time	-
		period	

Continued on next page

Other analyses	17	Report other analyses done-eg analyses of subgroups and interactions, and sensitivity analyses	7-8	
Discussion				
Key results	18	Summarise key results with reference to study objectives	8-10	
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss	11-12	
		both direction and magnitude of any potential bias		
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of	12	
		analyses, results from similar studies, and other relevant evidence		
Generalisability	21	Discuss the generalisability (external validity) of the study results	-	
Other informati	on			
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the	16	
		original study on which the present article is based		

*Give information separately for cases and controls in case-control studies and, if applicable, for exposed and unexposed groups in cohort and cross-sectional studies.

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at http://www.plosmedicine.org/, Annals of Internal Medicine at http://www.annals.org/, and Epidemiology at http://www.epidem.com/). Information on the STROBE Initiative is available at www.strobe-statement.org.