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| **Item to be reported** | **Page no.** |
| **INTRODUCTION** |  |
| 1 | State the marker examined, the study objectives, and any pre-specified hypotheses.  | The study objectives and hypothesis are specified on page 4.  |
| **MATERIALS AND METHODS** |  |
| *Patients* |  |
| 2 | Describe the characteristics (e.g., disease stage or co-morbidities) of the study patients, including their source and inclusion and exclusion criteria.  | This was a retrospective cohort study. Cohort identification, inclusion and exclusion criteria are presented on page 5. The cohort characterization and treatment received are presented in table 1.  |
| 3 | Describe treatments received and how chosen (e.g., randomized or rule-based).  |  |
| *Specimen characteristics* |  |
| 4 | Describe type of biological material used (including control samples) and methods of preservation and storage. | This study is based on FFPE tissues from a clinical biobank. The specimen characteristics is presented on page 5.  |
| *Assay methods* |  |
| 5 | Specify the assay method used and provide (or reference) a detailed protocol, including specific reagents or kits used, quality control procedures, reproducibility assessments, quantitation methods, and scoring and reporting protocols. Specify whether and how assays were performed blinded to the study endpoint. | The detailed protocol is presented on page 6. The assay was performed blinded to the study endpoint which is presented on page 6.  |
| *Study design* |  |
| 6 | State the 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 time.  | The case selection, time period and follow up time are presented on page 5 and 6. The clinical endpoint (overall survival) is defined on page 6. Follow up time is presented on page 9. All candidate variables in statistical modelling are presented on page 8. No power calculation was performed, sample size was based on availability which is presented on page 5. |
| 7 | Precisely define all clinical endpoints examined.  |  |
| 8 | List all candidate variables initially examined or considered for inclusion in models.  |  |
| 9 | Give rationale for sample size; if the study was designed to detect a specified effect size, give the target power and effect size.  |  |
| *Statistical analysis methods* |  |
| 10 | Specify 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.  | The statistical workflow is in detail presented on page 7 and 8.  |
| 11 | Clarify how marker values were handled in the analyses; if relevant, describe methods used for cutpoint determination. |  |
| **RESULTS** |  |
| *Data*  |  |
| 12 | Describe the flow of patients through the study, including the number of patients included in each stage of the analysis (a diagram may be helpful) and reasons for dropout. Specifically, both overall and for each subgroup extensively examined report the numbers of patients and the number of events. | The workflow of patients/samples, with reasons for dropouts are presented on page 9. Cohort data is presented in table 1. The relationship between the marker and standard prognostic variables is presented in table 2.  |
| 13 | Report distributions of basic demographic characteristics (at least age and sex), standard (disease-specific) prognostic variables, and tumor marker, including numbers of missing values.  |  |
| *Analysis and presentation*  |  |
| 14 | Show the relation of the marker to standard prognostic variables. | Univariable and multivariable analysis with associated Kaplan-Meier plots are presented on page 11 and table 3. Variables are presented with estimated effects, confidence intervals when relevant. Assumption checks are performed as stated in the statistics section and since no violations were found not reported.  |
| 15 | Present univariable analyses showing the relation between the marker and outcome, with the estimated effect (e.g., hazard ratio and survival probability). Preferably provide similar analyses for all other variables being analyzed. For the effect of a tumor marker on a time-to-event outcome, a Kaplan-Meier plot is recommended.  |  |
| 16 | For key multivariable analyses, report estimated effects (e.g., hazard ratio) with confidence intervals for the marker and, at least for the final model, all other variables in the model.  |  |
| 17 | Among 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.  |  |
| 18 | If done, report results of further investigations, such as checking assumptions, sensitivity analyses, and internal validation. |  |
| **DISCUSSION** |  |
| 19 | Interpret the results in the context of the pre-specified hypotheses and other relevant studies; include a discussion of limitations of the study. | The results are interpreted in context, including limitations and potential further research is highlighted in the discussion on pages 13-16.  |
| 20 | Discuss implications for future research and clinical value.  |  |