PRISMA-DTA Checklist

Section/topic	#	PRISMA-DTA Checklist Item	Reported on Page Number/Line Number	Reported on Section/Paragraph
TITLE/ABSTRACT				
Title	1	Identify the report as a systematic review (+/- meta-analysis) of diagnostic test accuracy (DTA) studies.	Page 1, line 1 to 2.	Section 1, paragraph 1.
Abstract	2	Abstract: See PRISMA-DTA for abstracts (Table 2).	Page 2, line 14 to 41.	Section 2, paragraph 1 to 4.
INTRODUCTION				
Rationale	3	Describe the rationale for the review in the context of what is already known.	Page 3, line 46 to 63.	Section 3, paragraph 1 to 2.
Clinical role of index test	D1	State the scientific and clinical background, including the intended use and clinical role of the index test, and if applicable, the rationale for minimally acceptable test accuracy (or minimum difference in accuracy for comparative design).	Page 3 to 5, line 64 to 89.	Section 3, paragraph 3.
Objectives	4	Provide an explicit statement of question(s) being addressed in terms of participants, index test(s),and target condition(s).	Page 5, line 90 to 96.	Section 3, paragraph 4.
METHODS				
Protocol and registration	5	Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and,if available, provide registration information including registration number.	Page 5, line 99 to 103.	Section 4, paragraph 1.
Eligibility criteria	6	Specify study characteristics (participants, setting, index test(s), reference standard(s),target condition(s),and study design) and report characteristics (e.g., years considered, language, publication status) used as criteria for eligibility, giving rationale.	Page 6, line 114 to 130.	Section 4, paragraph 3.
Information sources	7	Describe all information sources (e.g., databases with dates of coverage, contact with study authors to identify additional studies) in the search and date last searched.	Page 5 to 6, line 106 to 111.	Section 4, paragraph 2.
Search	8	Present full search strategies for all electronic databases and other sources searched, including any limits used, such that they could be repeated.	Page 5, line 106 to 109.	Section 4, paragraph 2.
Study selection	9	State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if applicable, included in the meta-analysis).	Page 6, line 114 to 130.	Section 4, paragraph 3.
Data collection process	10	Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any processes for obtaining and confirming data from investigators.	Page 7, line 133 to 141.	Section 4, paragraph 4.
Definitions for data extraction	11	Provide definitions used in data extraction and classifications of target condition(s),index test(s), reference standard(s) and other characteristics (e.g. study design, clinical setting).	Page 7, line 133 to 141.	Section 4, paragraph 4.

Risk of bias and applicability	12	Describe methods used for assessing risk of bias in individual studies and concerns regarding the applicability to the review question.	Page 7, line 144 to 148.	Section 4, paragraph 5.
Diagnostic accuracy measures	13	State the principal diagnostic accuracy measure(s) reported (e.g. sensitivity, specificity) and state the unit of assessment (e.g. per-patient, per-lesion).	Page 19, line 400 to 401.	Section 7, paragraph 7.
Synthesis of results	14	Describe methods of handling data, combining results of studies and describing variability between studies. This could include, but is not limited to: a) handling of multiple definitions of target condition. b) handling of multiple thresholdsoftest positivity, c) handling multiple index test readers, d) handling of indeterminate test results, e) grouping and comparing tests, f) handling of different reference standards	Page 7 to 8, line 152 to166.	Section 4, paragraph 6.
Meta-analysis	D2	Report the statistical methods used for meta-analyses, if performed.	Page 8 to 9, line 167 to 190.	Section 4, paragraph 7 to 8.
Additional analyses	16	Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if done, indicating which were pre-specified.	Page 8 to 9, line 167 to 180.	Section 4, paragraph 7.
RESULTS				
Study selection	17	Provide numbers of studies screened, assessed for eligibility, included in the review (and included in meta-analysis, if applicable) with reasons for exclusions at each stage, ideally with a flow diagram.	Page 9 to 10, line 194 to 201.	Section 5, paragraph 1.
Study characteristics	18	For each included study provide citations and present key characteristics including: a) participant characteristics (presentation, prior testing), b) clinical setting, c) study design, d) target condition definition, e) index test, f) reference standard, g) sample size, h) funding sources	Page 10, line 202 to 209.	Section 5, paragraph 2.
Risk of bias and applicability	19	Present evaluation of risk of bias and concerns regarding applicability for each study.	Page 10, line 212 to 217.	Section 5, paragraph 3.
Results of individual studies	20	For each analysis in each study (e.g. unique combination of index test, reference standard, and positivity threshold) report 2x2 data (TP, FP, FN, TN) with estimates of diagnostic accuracy and confidence intervals, ideally with a forest or receiver operator characteristic (ROC) plot.	Page 10 to 14, line 220 to 295.	Section 5, paragraph 4 to to 9.
Synthesis of results	21	Describe test accuracy, including variability; if meta-analysis was done, include results and confidence intervals.	Page 11 to 14, line 220 to 295.	Section 5, paragraph 4 to to 9.
Additional analysis	23	Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression; analysis of index test: failure rates, proportion of inconclusive results, adverse events).	Page 11 to 14, line 220 to 295.	Section 5, paragraph 4 to to 9.
DISCUSSION				
Summary of evidence	24	Summarize the main findings including the strength of evidence.	Page 14 to 19, line 298 to 406.	Section 6, paragraph 1 to 7.
Limitations	25	Discuss limitations from included studies (e.g. risk of bias and concerns regarding applicability) and from the review process (e.g. incomplete retrieval of identified research).	Page 18 to19, line 390 to 406.	Section 6, paragraph 7.

Conclusions	26	Provide a general interpretation of the results in the context of other evidence. Discuss implications for future research and clinical practice (e.g. the intended use and clinical role of the index test).	Page 19, line 409 to 412.	Section 7, paragraph 1.
FUNDING				
Funding	27	For the systematic review, describe the sources of funding and other support and the role of the funders.	Page 19 to 20, line 417 to 420.	Section 7, paragraph 2.

Adapted From: McInnes MDF, Moher D, Thombs BD, McGrath TA, Bossuyt PM, The PRISMA-DTA Group (2018). Preferred Reporting Items for a Systematic Review and Meta-analysis of Diagnostic Test Accuracy Studies: The PRISMA-DTA Statement. JAMA. 2018 Jan 23;319(4):388-396. doi: 10.1001/jama.2017.19163.

Table 2 PRISMA-DTA for Abstracts Checklist

Section/topic	#	PRISMA-DTA Checklist Item	Reported on Page Number/Line Number	Reported on Section/Paragraph
TITLE and PURPOSE				
Title	1	Identify the report as a systematic review (+/- meta-analysis) of diagnostic test accuracy (DTA) studies.	Page 1, line 1 to 2.	Section 1, paragraph 1.
Objectives	2	Indicate the research question, including components such as participants, index test, and target conditions.	Page 2, line 14 to 20.	Section 2, paragraph 1.
METHODS				
Eligibility criteria	3	Include study characteristics used as criteria for eligibility.	Page 2, line 21 to 24.	Section 2, paragraph 2.
Information sources	4	List the key databases searched and the search dates.	Page 2, line 23 to 24.	Section 2, paragraph 2.
Risk of bias & applicability	5	Indicate the methods of assessing risk of bias and applicability.	Page 2, line 24 to 25.	Section 2, paragraph 2.
Synthesis of results	A1	Indicate the methods for the data synthesis.	Page 2, line 25 to 29.	Section 2, paragraph 2.
RESULTS				
Included studies	6	Indicate the number and type of included studies and the participants and relevant characteristics of the studies (including the reference standard).	Page 2, line 30.	Section 2, paragraph 3.
Synthesis of results	7	Include the results for the analysis of diagnostic accuracy, preferably indicating the number of studies and participants. Describe test accuracy including variability; if meta-analysis was done, include summary results and confidence intervals.	Page 2, line 30 to 36.	Section 2, paragraph 3.

DISCUSSION				
Strengths and limitations	9	Provide a brief summary of the strengths and limitations of the evidence	Page 2, line 37 to 40.	Section 2, paragraph 4.
Interpretation	10	Provide a general interpretation of the results and the important implications.	Page 2, line 37 to 40	Section 2, paragraph 4.
OTHER				
Funding	11	Indicate the primary source of funding for the review.	See Table 1 #27.	
Registration	12	Provide the registration number and the registry name	See Table 1 #5.	

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Article information: https://dx.doi.org/10.21037/qims-23-1089
*As the checklist was provided upon initial submission, the page number/line number reported may be changed due to copyediting and may not be referable in the published version. In this case, the section/ paragraph may be used as an alternative reference.