

Figure S1 Distribution of 13 preoperative parameters in blood and their importance in separating oral squamous cell carcinoma (OSCC) from non-OSCC. (A) Relative importance of variables for segregation of OSCC from non-OSCC patients calculated using random forest, extreme gradient boosting (XGBoost), and support vector machine (SVM). Variable importance is represented as a percentage of the highest value. (B) The violin plots represent the distribution of 13 preoperative parameters in blood for distinguishing OSCC from non-OSCC.

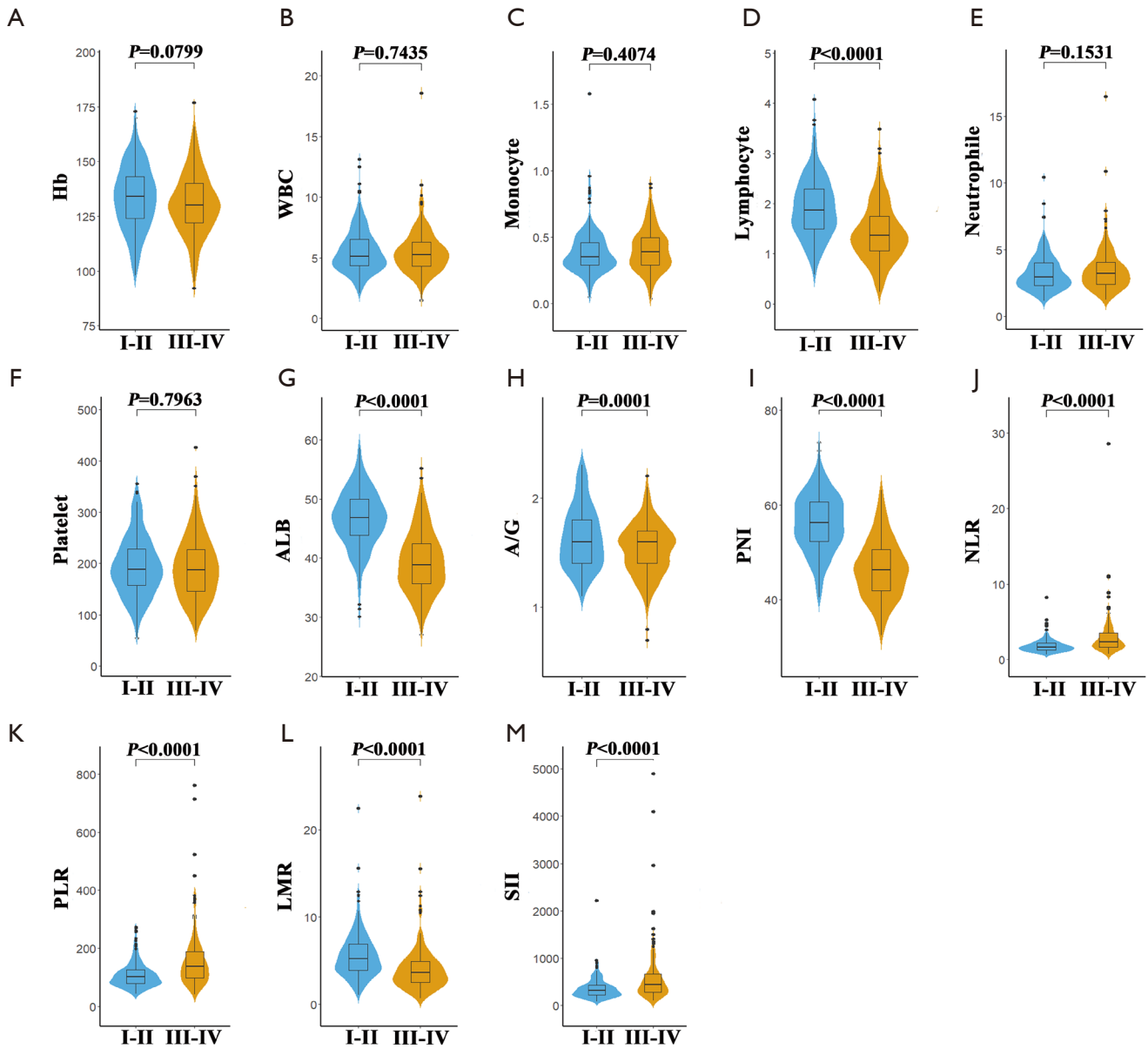


Figure S2 The violin plots represent the distribution of 13 preoperative parameters in blood for machine learning method-based prediction of clinical stage of oral squamous cell carcinoma (OSCC). (A) hemoglobin (Hb); (B) white blood cells (WBC); (C) monocyte; (D) lymphocyte; (E) neutrophil; (F) platelet; (G) albumin (ALB); (H) albumin-globulin ratio (A/G); (I) prognostic nutritional index (PNI); (J) neutrophil-lymphocyte ratio (NLR); (K) platelet-lymphocyte ratio (PLR); (L) lymphocyte-monocyte ratio (LMR); (M) systemic immune-inflammation index (SII).

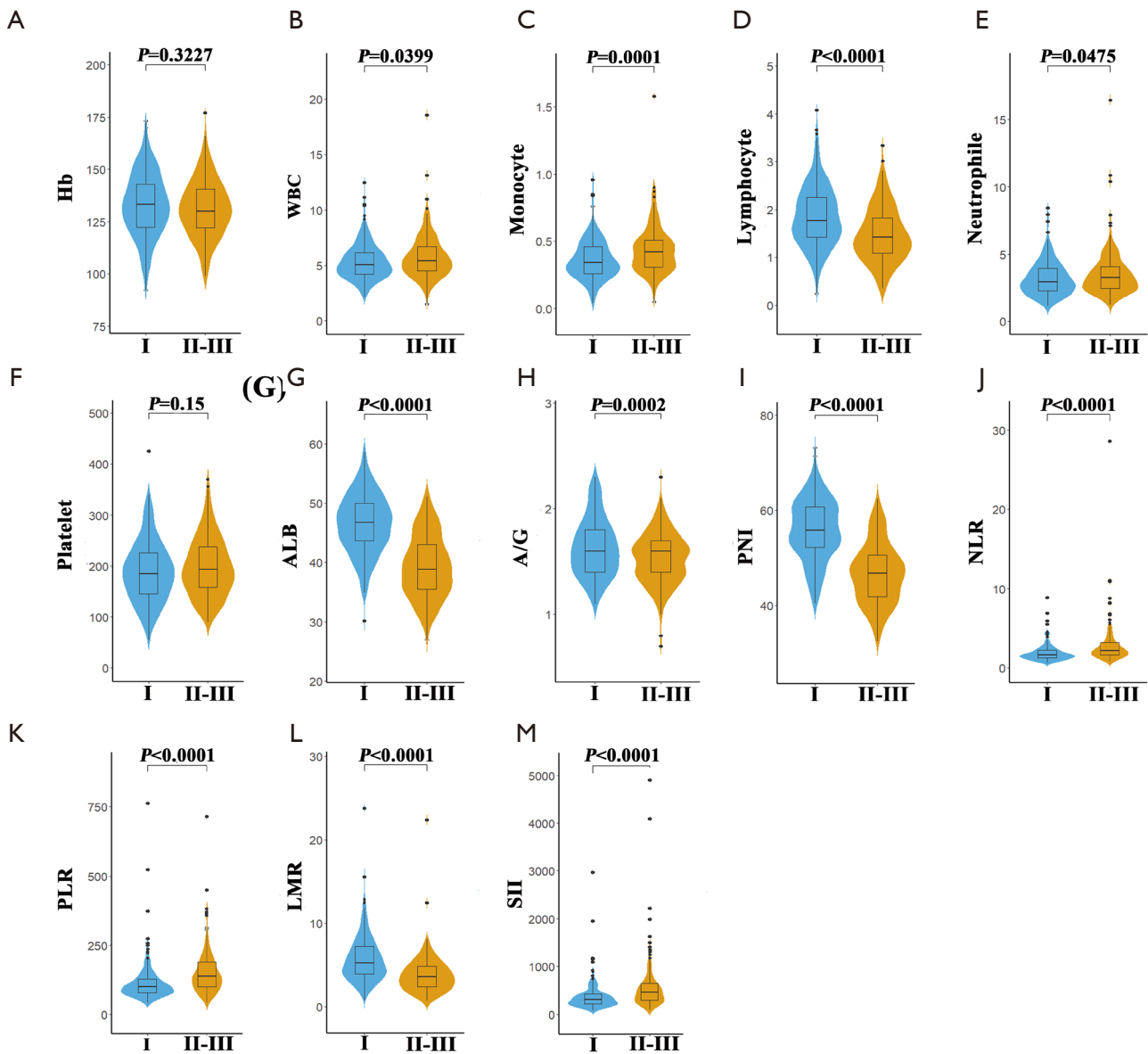


Figure S3 The violin plots representing distribution of 13 preoperative parameters in blood for machine learning method-based prediction of pathological grade of oral squamous cell carcinoma (OSCC). (A) hemoglobin (Hb); (B) white blood cells (WBC); (C) monocyte; (D) lymphocyte; (E) neutrophil; (F) platelet; (G) albumin (ALB); (H) albumin-globulin ratio (A/G); (I) prognostic nutritional index (PNI); (J) neutrophil-lymphocyte ratio (NLR); (K) platelet-lymphocyte ratio (PLR); (L) lymphocyte-monocyte ratio (LMR); (M) systemic immune-inflammation index (SII).