Supplementary Appendix 1. Completed PRISMA-DTA 2018 Checklist

Manuscript: **MRI-PDFF and Selected Quantitative Ultrasound Methods for Hepatic Steatosis: Histology-Referenced Diagnostic Performance and Longitudinal Responsiveness—A Systematic Review and Meta-Analysis**
Checklist framework: McInnes MDF, Moher D, Thombs BD, et al. Preferred reporting items for a systematic review and meta-analysis of diagnostic test accuracy studies: The PRISMA-DTA statement. *JAMA*. 2018;319(4):388-396. [Crossref] Erratum in: *JAMA*. 2019;322(20):2026. [Crossref] Item descriptions below are concise restatements; item numbers follow the official PRISMA-DTA checklist.

Section	Topic	Item	PRISMA-DTA reporting requirement	Reported in manuscript
TITLE/ABSTRACT	Title	1	Identify the report as a systematic review, with meta-analysis where applicable, of diagnostic test accuracy studies.	Title page
	Abstract	2	Report the review using the PRISMA-DTA abstract framework.	Abstract
INTRODUCTION	Rationale	3	Explain the rationale in the context of existing evidence.	Introduction
	Clinical role	D1	Describe the scientific and clinical background, intended use, and clinical role of the index tests.	Introduction
	Objectives	4	State the review question in terms of participants, index tests, reference standard, and target condition.	Introduction; study objective
METHODS	Protocol and registration	5	State whether a protocol exists and provide registration information.	Methods—Study Design and Registration; PROSPERO CRD420261366403
	Eligibility criteria	6	Specify eligible participants, settings, index tests, reference standards, target conditions, designs, and report characteristics.	Methods—Eligibility Criteria and Study Selection
	Information sources	7	List all information sources, coverage, and date of the last search.	Methods—Search Strategy
	Search	8	Provide reproducible search strategies and all applied limits.	Supplementary Table 1
	Study selection	9	Describe screening, eligibility assessment, and inclusion in qualitative and quantitative syntheses.	Methods—Study Selection, Data Extraction, and Outcomes
	Data collection	10	Describe extraction procedures, reviewer duplication, consensus, and data confirmation.	Methods—Study Selection, Data Extraction, and Outcomes
	Extraction definitions	11	Define target conditions, grade contrasts, index tests, reference standards, and study classifications.	Methods; Supplementary Table 3
	Risk of bias/applicability	12	Describe assessment of study-level risk of bias and applicability concerns.	Methods—Risk of Bias and Methodological Quality; Supplementary Table 5
	Accuracy measures	13	State the diagnostic accuracy measures and unit of assessment.	Methods—Study Selection, Data Extraction, and Outcomes
	Synthesis	14	Describe data handling, pooling, threshold management, test grouping, and heterogeneity assessment.	Methods—Statistical Analysis
	Meta-analysis	D2	Report the statistical methods used for diagnostic meta-analysis.	Methods—Statistical Analysis
	Additional analyses	16	Describe prespecified subgroup, sensitivity, or meta-regression analyses and explain analyses that were not estimable.	Methods—Statistical Analysis; Supplementary Table 4
RESULTS	Study selection	17	Report records and studies at each selection stage with exclusion reasons, ideally in a flow diagram.	Results—Study Selection; Figure 1
	Study characteristics	18	Present key characteristics of each included study.	Results—Study Characteristics; Table 1
	Risk of bias/applicability	19	Present risk-of-bias and applicability judgments for included studies.	Results—Methodological Quality; Figure 2; Supplementary Table 5
	Individual-study results	20	Report study-level diagnostic results for each index-test, reference-standard, and threshold combination.	Results; Tables 2–3; Figures 3–6; Supplementary Tables 3–4; Supplementary Figures 1–16
	Synthesis results	21	Report pooled accuracy estimates, uncertainty, and between-study variability.	Results—Diagnostic Accuracy; Tables 2 and 3; Supplementary Table 5
	Additional analyses	23	Report subgroup and sensitivity analyses, or explain why planned analyses could not be estimated.	Results; Tables 2 and 3; Supplementary Tables 4 and 5
DISCUSSION	Summary of evidence	24	Summarize the main findings and the strength of the evidence.	Discussion—Principal Findings and Interpretation
	Limitations	25	Discuss limitations of included studies and of the review process.	Discussion—Strengths and Limitations
	Conclusions	26	Interpret findings in context and discuss clinical and research implications.	Conclusion
FUNDING	Funding	27	Report funding/support for the review and the funders' role.	Declarations—Funding

Reporting locations refer to the current manuscript. Supplementary Tables 1–5 and Supplementary Figures 1–16 are provided in the supplementary materials file; this completed checklist is provided separately as Supplementary Appendix 1. MRI-PDFF, magnetic resonance imaging-derived proton density fat fraction; PRISMA-DTA, Preferred Reporting Items for Systematic Reviews and Meta-Analyses of Diagnostic Test Accuracy Studies; DTA, diagnostic test accuracy; JAMA, Journal of the American Medical Association; PROSPERO, International Prospective Register of Systematic Reviews.