Section & Topic	No	Item	Reported on pag
TITLE OR ABSTRACT			
	1	Identification as a study of diagnostic accuracy using at least one measure of accuracy	1
		(such as sensitivity, specificity, predictive values, or AUC)	
ABSTRACT			
	2	Structured summary of study design, methods, results, and conclusions	2
		(for specific guidance, see STARD for Abstracts)	
INTRODUCTION			
	3	Scientific and clinical background, including the intended use and clinical role of the index test	3
	4	Study objectives and hypotheses	3-4
METHODS			
Study design	5	Whether data collection was planned before the index test and reference standard	4 (Study Design)
		were performed (prospective study) or after (retrospective study)	
Participants	6	Eligibility criteria	4
	_		Sampling
	7	On what basis potentially eligible participants were identified	4-5 Figure 1
	o	(such as symptoms, results from previous tests, inclusion in registry) Where and when potentially clirible participants were identified (cetting legation and dates)	4-5
	8	Where and when potentially eligible participants were identified (setting, location and dates)	4-5 Table 2
			(setting/location
	9	Whether participants formed a consecutive, random or convenience series	4-5
			Random Series
Test methods	10a	Index test, in sufficient detail to allow replication	6
	10b	Reference standard, in sufficient detail to allow replication	Table 1 5
	100	Reference standard, in sufficient detail to allow replication	Chart Review
	11	Rationale for choosing the reference standard (if alternatives exist)	N/A
	12a	Definition of and rationale for test positivity cut-offs or result categories	6
		of the index test, distinguishing pre-specified from exploratory	Case Definition
	12b	Definition of and rationale for test positivity cut-offs or result categories	5
		of the reference standard, distinguishing pre-specified from exploratory	Chart Review
	13a	Whether clinical information and reference standard results were available	6
		to the performers/readers of the index test	Case Definition
	13b	Whether clinical information and index test results were available	5
		to the assessors of the reference standard	Chart Review
Analysis	14	Methods for estimating or comparing measures of diagnostic accuracy	n/a
	15	How indeterminate index test or reference standard results were handled	5
	1.0		Chart Review
	16	How missing data on the index test and reference standard were handled	n/a, this was a chart review
	17	Any analyses of variability in diagnostic accuracy, distinguishing pre-specified from	6
		exploratory	Case Definition
	_		Table 1
	18	Intended sample size and how it was determined	4 Study Populatior
RESULTS			Study Population
Participants	19	Flow of participants, using a diagram	Figure 1
. a. deipanes	20	Baseline demographic and clinical characteristics of participants	Table 2
	20 21a	Distribution of severity of disease in those with the target condition	Table 2 (Co-
	-1u	Sistinguism of Severity of disease in chose with the target contained	morbidities)
	21b	Distribution of alternative diagnoses in those without the target condition	Table 2 (No HF)
	22	Time interval and any clinical interventions between index test and reference standard	N/A
Test results	23	Cross tabulation of the index test results (or their distribution)	Appendix 6
		by the results of the reference standard	
	24	Estimates of diagnostic accuracy and their precision (such as 95% confidence intervals)	Table 3
	25	Any adverse events from performing the index test or the reference standard	N/A



Standards for Reporting Diagnostic accuracy studies (STARD Checklist) for CHF in COPD Case Validation Study

	26	Study limitations, including sources of potential bias, statistical uncertainty, and generalisability	9 Interpretation(P#5)
	27	Implications for practice, including the intended use and clinical role of the index test	8-9 Interpretation (P#3)
OTHER NFORMATION			
	28	Registration number and name of registry	N/A
	29	Where the full study protocol can be accessed	N/A
	30	Sources of funding and other support; role of funders	Funding Statement: The project was funded through the UBC Division of Cardiology Academic Practice Plan.

