## **BIAS Reporting Guideline**



The Biomedical Image Analysis Challenges (BIAS) statement [1] has been officially approved by the Enhancing the QUAlity and Transparency Of health Research (EQUATOR) initiative as a guideline for reporting challenge results (click <u>here</u> for details). The present checklist represents a light version, comprising the parameters that represent the main body of the paper. **Please report the page number(s) (or N/A) for each parameter, such that the reviewers can quickly find relevant information and assess the comprehensiveness of the report.** Please cite [1] when referring to/using the BIAS guideline and/or the light version of the checklist as basis of your paper.

[1] Maier-Hein, L. et al. BIAS: Transparent reporting of biomedical image analysis challenges. Medical image analysis, 66, 101796 (2020).

Section/ Topic	No	Checklist Item	Reported on page
Introduction			
	4a	General introduction to the topic from a <b>biomedical point of view</b> .	
	4b	General introduction to the topic from a <b>technical point of view</b> .	
	4c	Concise statement of the primary challenge objective, including a statement of the task.	
Methods			
Challenge	5	Representative name of the challenge including an acronym (if any).	
organization	6	Information on the <b>organizing team</b> (names and affiliations).	
		Intended <b>submission cycle</b> of the challenge, including information on whether/how the challenge has	
	7	been/will be continued after the present study.	
		Examples: One-time event with fixed submission deadline; repeated event with annual fixed submission deadline	
	8a	Event (e.g. conference) that was associated with the challenge (if any).	
	8b	Platform (e.g. grand-challenge.org) used to run the challenge.	
	8c	<b>URL</b> for the challenge website (if any).	
	9a	Allowed user interaction of the algorithms (e.g. only (semi-) automatic methods).	
		Policy on the <b>usage of training data</b> .	
	9b	Examples: Training data have been restricted to the data provided by the challenge or to publicly available data	
		including (open) pre-trained nets.	
	9c	Participation policy for members of the organizers' institutes.	
		<i>Example:</i> Members of the organizers' institutes could participate but were not eligible for awards.	
	9d	Award policy, including details with respect to challenge prizes.	
	9e	Policy for <b>results announcement</b> .	
		Example: The top three performing methods were announced publicly	
		Publication policy, including details on who of the participating teams' members qualified as author,	
	9f	whether participating teams could publish their own results separately, and whether an embargo time	
		was defined.	
	10a	Method used for result submission, including a link to the <b>submission instructions</b> (if any).	
		<i>Examples</i> : Docker container on the Synapse platform. Link to submission instructions: <url>; algorithm output was</url>	
		sent to organizers via e-mail. Submission instructions were sent by e-mail. Information on the possibility for participating teams to <b>evaluate</b> their <b>algorithms before submitting</b>	
	10b	final results.	
		<b>Timetable</b> for the challenge, including the release date(s) of the training/validation/test cases,	
	11	registration date/period, submission date(s), associated workshop days, release date(s) of the results.	
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	12	Indication whether ethics approval was necessary for the data. If yes, details on the ethics approval and	
		URL or <b>reference to the document</b> of the ethics approval (if available).	
		Information on how the data can be used and distributed by the participating teams as well as others,	
	13	including the explicit <b>listing of the license</b> .	
		Examples: CC BY (Attribution); CC BY-SA (Attribution-ShareAlike)	
	14a	Information on the accessibility of the organizers' evaluation software, preferably, including a link	
		to the code.	
	14b	Information on the accessibility of the participating teams' code in an analogous manner.	
	15	Information related to conflicts of interest, including information related to <b>sponsoring/funding</b> of the	
		challenge and an explicit statement who had <b>access to the test case labels</b> and when.	
	16	<b>Contributions</b> of all authors to the paper (preferably in the appendix).	
Mission of the	17	Main field(s) of application that the participating algorithms target. Examples: Diagnosis; intervention planning; screening; training	
challenge	18	Task category/-ies.         Examples: Classification; detection; segmentation; reconstruction	
	19a	Target cohort, i.e. the subjects/objects from whom/which the data would be acquired in the final	
	17d	biomedical application.	
	19b	Challenge cohort, i.e. the subject(s)/object(s) from whom/which the challenge data was acquired.	
	20	Imaging technique(s) applied in the challenge.	
	Additi	onal information given along with the images, corresponding to the	
	21a	<b>image data</b> (e.g. tumor volume).	
	21b	<b>patient</b> in general (e.g. gender, medical history).	
	21c	acquisition process (e.g. calibration data for an image modality).	
		Data origin, i.e. the region(s)/part(s) of subject(s)/object(s) from whom/which the image data would be	
	22a	acquired in the final biomedical application.	
	22b	Algorithm target, i.e. the structure(s)/subject(s)/object(s)/ component(s) that the participating	
		algorithms have been designed to focus on.	
	23	Property/-ies of the algorithms to be optimized to perform well in the challenge. Should be	
		reflected in the metrics (parameter 29) and ranking (parameter 30) applied.	
		• <i>Example 1:</i> Find liver segmentation algorithm that processes CT images of a certain size in less than a minute with an error that reflects inter returnic bility of events	
		<ul> <li>minute with an error that reflects inter-rater variability of experts.</li> <li><i>Example 2</i>: Find lung tumor detection algorithm with high sensitivity for mammography images.</li> </ul>	
Challanga	24a 24b		
Challenge		<b>Device(s)</b> used to acquire the challenge data, including details on the device(s) used to acquire the	
data sets		imaging data as well as information on additional devices used for performance assessment.	
		Relevant details on the imaging process/ <b>data acquisition</b> for each acquisition device (e.g. image	
		acquisition protocol(s)).	
	24c	<b>Center(s)/institute(s)</b> in which the data was acquired and/or <b>data providing platform/source</b> (e.g. previous challenge).	
	24d	Relevant <b>characteristics</b> (e.g. level of expertise) <b>of the subjects</b> (e.g. surgeon)/objects (e.g. robot)	
		involved in the data acquisition process (if any).	
	25a	Information on the meaning of one <b>case</b> in this challenge. A case encompasses all data that is	
		processed to produce one result that is then compared to the corresponding reference result (i.e. the	
		desired algorithm output).	
		Example: Training and test cases both represented a CT image of a human brain. Training cases had a weak	
		annotation (tumor present or not and tumor volume) while the test cases were annotated with the tumor contour.	
	25b	Total number of cases as well as the number of training, validation and test cases.	
	25c	Justification why a total number of cases and the specific proportion of training, validation and test	
		cases was chosen.	
	25d	<b>Further important characteristics</b> of the training, validation and test cases (e.g. class distribution in classification tasks) and justification of choice.	

	26a	Method for determining the reference annotation. If human annotation was involved, state the number of annotators.
	26b	<b>Instructions given to the annotators</b> (if any) prior to the annotation, preferably, including a link to the <b>annotation protocol</b> .
	26c	Details on the subject(s)/algorithm(s) that annotated the cases (e.g. information on level of
	200	expertise such as number of years of experience, medically-trained or not).
	26d	Method(s) used to merge multiple annotations for one case (if any).
	27	Method(s) used for pre-processing the raw training data before it is provided to the participating
		teams.
		Most relevant possible error sources related to the image annotation, preferably including an
	28a	estimate of the magnitude (range) of these errors, using inter-and intra-annotator variability, for
		example.
	28b	In an analogous manner, <b>other relevant sources of error</b> .
Assessment	29a	Metric(s) used to assess a property of an algorithm. Should reflect the desired properties described
method		in assessment aim(s) (parameter 23). Which metric(s) were used to compute the ranking(s) (if any).
	29b	Justification why the metric(s) was/were chosen, preferably with reference to the biomedical
		application.
	30a	Method used to compute a performance rank for all submitted algorithms, including how results
		were obtained per case and metrics are aggregated to get a final ranking.
	30b	Method(s) used to manage <b>submissions with missing results</b> on test cases.
	30c	Justification why the described ranking scheme(s) was/were used.
	31a	<b>Details for all statistical methods</b> , including description of the <b>missing data handling</b> , details about assessment of <b>variability of rankings</b> , or indication of any <b>software product</b> used for data analysis.
	31b	Justification why the described statistical method(s) was/were used.
Results		
Challenge	32a	Summarizing information on the <b>number of registrations</b> .
outcome	32b	Summarizing information on the <b>number of participating teams</b> that provided valid submissions.
	32c	Summarizing information on the <b>number of participating teams</b> that the <b>paper</b> refers to (with <b>justification</b> ).
	33a	Team identifiers for the participating teams that are included in the paper.
	33d	Method description including parameter instantiation and/or a reference/URL to a document
	33b	containing this information for the participating teams that are included in the paper.
		Raw and/or <b>aggregated metric values</b> (including measure of variability) for all participating teams and
	34	each metric and the <b>numbers of test set submissions</b> for each participating team.
	35a	Ranking(s) (if any) including the number of test set submissions for each team.
	35b	Results of the statistical analyses.
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		Results of further analyses (if applicable), e.g. related to <b>combining algorithms</b> via ensembling, <b>inter-</b>
	36	Results of further analyses (if applicable), e.g. related to <b>combining algorithms</b> via ensembling, <b>inter-</b> algorithm variability, common problems/biases of the submitted methods, or ranking variability.
Discussion	36	Results of further analyses (if applicable), e.g. related to <b>combining algorithms</b> via ensembling, <b>inter-</b> <b>algorithm variability</b> , <b>common problems/biases</b> of the submitted methods, or <b>ranking variability</b> .
Discussion		algorithm variability, common problems/biases of the submitted methods, or ranking variability.
Discussion	36 37	algorithm variability, common problems/biases of the submitted methods, or ranking variability. Main results of the challenge.
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Discussion	37	algorithm variability, common problems/biases of the submitted methods, or ranking variability.         Main results of the challenge.         (Expected) Biomedical and technical impact of the challenge in the context of the state of the art with reference to the challenge motivation (parameter 1).
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Discussion	37 38 39a	algorithm variability, common problems/biases of the submitted methods, or ranking variability.         Main results of the challenge.         (Expected) Biomedical and technical impact of the challenge in the context of the state of the art with reference to the challenge motivation (parameter 1).         Detailed discussion and conclusion whether the task is now solved in a satisfactory way (e.g. the remaining errors are comparable to inter-annotator variability).
Discussion	37 38	algorithm variability, common problems/biases of the submitted methods, or ranking variability.         Main results of the challenge.         (Expected) Biomedical and technical impact of the challenge in the context of the state of the art with reference to the challenge motivation (parameter 1).         Detailed discussion and conclusion whether the task is now solved in a satisfactory way (e.g. the remaining errors are comparable to inter-annotator variability).         Detailed analysis of individual cases, in which the majority of algorithms performed poorly (if any).
Discussion	37 38 39a	algorithm variability, common problems/biases of the submitted methods, or ranking variability.         Main results of the challenge.         (Expected) Biomedical and technical impact of the challenge in the context of the state of the art with reference to the challenge motivation (parameter 1).         Detailed discussion and conclusion whether the task is now solved in a satisfactory way (e.g. the remaining errors are comparable to inter-annotator variability).

41	Recommendations for future work and maintenance plans for the challenge and its website (if any).
42	Concise conclusion based on the results of the study.

