

# Table 1 The MI-CLAIM checklist

From: [Minimum information about clinical artificial intelligence modeling: the MI-CLAIM checklist](#)

Before paper submission			
Study design (Part 1)	Completed: page number		Notes if not completed
The clinical problem in which the model will be employed is clearly detailed in the paper.	<input checked="" type="checkbox"/>	1	
The research question is clearly stated.	<input checked="" type="checkbox"/>	1	
The characteristics of the cohorts (training and test sets) are detailed in the text.	<input type="checkbox"/>		No train/test split
The cohorts (training and test sets) are shown to be representative of real-world clinical settings.	<input type="checkbox"/>		No train/test split

The state-of-the-art solution used as a baseline for comparison has been identified and detailed.	<input checked="" type="checkbox"/>	2	
<b>Data and optimization (Parts 2, 3)</b>	<b>Completed:</b>	<b>page number</b>	<b>Notes if not completed</b>
The origin of the data is described and the original format is detailed in the paper.	<input checked="" type="checkbox"/>	1	
Transformations of the data before it is applied to the proposed model are described.	<input checked="" type="checkbox"/>	1-2	
The independence between training and test sets has been proven in the paper.	<input type="checkbox"/>		No train/test split
Details on the models that were evaluated and the code developed to select the best model are provided.	<input checked="" type="checkbox"/>	1-2	
Is the input data type structured or unstructured?	<input checked="" type="checkbox"/> Structured <input type="checkbox"/> Unstructured		
<b>Model performance (Part 4)</b>	<b>Completed:</b>	<b>page number</b>	<b>Notes if not completed</b>
The primary metric selected to evaluate algorithm performance (e.g., AUC, F-score, etc.), including the justification for selection, has been clearly stated.	<input checked="" type="checkbox"/>	1	

The primary metric selected to evaluate the clinical utility of the model (e.g., PPV, NNT, etc.), including the justification for selection, has been clearly stated.	<input type="checkbox"/>		No clinical aspect, this is a biological discovery study
The performance comparison between baseline and proposed model is presented with the appropriate statistical significance.	<input type="checkbox"/>		only K-means vs. Leiden explored
<b>Model examination (Part 5)</b>	<b>Completed: page number</b>		<b>Notes if not completed</b>
Examination technique 1 <sup>a</sup>	<input checked="" type="checkbox"/>	3	
Examination technique 2 <sup>a</sup>	<input checked="" type="checkbox"/>	3-4	
A discussion of the relevance of the examination results with respect to model/algorithm performance is presented.	<input checked="" type="checkbox"/>	3-4	
A discussion of the feasibility and significance of model interpretability at the case level if examination methods are uninterpretable is presented.	<input type="checkbox"/>		The clustering is interpretable through UMAP and ROC gene mapping.
A discussion of the reliability and robustness of the model as the underlying data distribution shifts is included.	<input type="checkbox"/>		Implied through denoising and integration analysis but not directly tested
<b>Reproducibility (Part 6): choose appropriate tier of transparency</b>			<b>Notes</b>
Tier 1: complete sharing of the code		<input checked="" type="checkbox"/>	

Tier 2: allow a third party to evaluate the code for accuracy/fairness; share the results of this evaluation	<input type="checkbox"/>	
Tier 3: release of a virtual machine (binary) for running the code on new data without sharing its details	<input type="checkbox"/>	
Tier 4: no sharing	<input type="checkbox"/>	

PPV, positive predictive value; NNT, numbers needed to treat.

<sup>a</sup>Common examination approaches based on study type: for studies involving exclusively structured data, coefficients and sensitivity analysis are often appropriate; for studies involving unstructured data in the domains of image analysis or natural language processing, saliency maps (or equivalents) and sensitivity analyses are often appropriate.

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