Supplemental Table S1. TRIPOD Checklist

Section/Topic	Item		Checklist Item	Page
Title and abstract				
Title	1	D;V	Identify the study as developing and/or validating a multivariable prediction model, the target population, and the outcome to be predicted.	1
Abstract	2	D;V	Provide a summary of objectives, study design, setting, participants, sample size, predictors, outcome, statistical analysis, results, and conclusions.	3, 4
Introduction				
Background and objectives	3a	D;V	Explain the medical context (including whether diagnostic or prognostic) and rationale for developing or validating the multivariable prediction model, including references to existing models.	5, 6
	3b	D;V	Specify the objectives, including whether the study describes the development or validation of the model or both.	5, 6
Methods				
Source of data	4a	D;V	Describe the study design or source of data (e.g., randomized trial, cohort, or registry data), separately for the development and validation data sets, if applicable.	6, 7, 8
	4b	D;V	Specify the key study dates, including start of accrual; end of accrual; and, if applicable, end of follow-up.	7
Participants	5a	D;V	Specify key elements of the study setting (e.g., primary care, secondary care, general population) including number and location of centres.	7
	5b	D;V	Describe eligibility criteria for participants.	6, 7
	5c	D;V	Give details of treatments received, if relevant.	6, 8
Outcome	6a	D;V	Clearly define the outcome that is predicted by the prediction model, including how and when assessed.	10, 11
	6b	D;V	Report any actions to blind assessment of the outcome to be predicted.	NA
Predictors	7a	D;V	Clearly define all predictors used in developing or validating the multivariable prediction model, including how and when they were measured.	8, 9
	7b	D;V	Report any actions to blind assessment of predictors for the outcome and other predictors.	NA
Sample size	8	D;V	Explain how the study size was arrived at.	11
Missing data	9	D;V	Describe how missing data were handled (e.g., complete-case analysis, single imputation, multiple imputation) with details of any imputation method.	7
Statistical analysis methods	10a	D	Describe how predictors were handled in the analyses.	9
	10b	D	Specify type of model, all model-building procedures (including any predictor selection), and method for internal validation.	9

	10c	V	For validation, describe how the predictions were calculated.	10
	10d	D;V	Specify all measures used to assess model performance and, if relevant, to compare multiple models.	10
	10e	V	Describe any model updating (e.g., recalibration) arising from the validation, if done.	NA
Risk groups	11	D;V	Provide details on how risk groups were created, if done.	13
Development vs. validation	12	V	For validation, identify any differences from the development data in setting, eligibility criteria, outcome, and predictors.	7, 8, 10-12
Results				
	13a	D;V	Describe the flow of participants through the study, including the number of participants with and without the outcome and, if applicable, a summary of the follow-up time. A diagram may be helpful.	11
Participants	13b	D;V	Describe the characteristics of the participants (basic demographics, clinical features, available predictors), including the number of participants with missing data for predictors and outcome.	11, 12
	13c	V	For validation, show a comparison with the development data of the distribution of important variables (demographics, predictors and outcome).	12, Table 1
Model development	14a	D	Specify the number of participants and outcome events in each analysis.	11
	14b	D	If done, report the unadjusted association between each candidate predictor and outcome.	NA
Model specification	15a	D	Present the full prediction model to allow predictions for individuals (i.e., all regression coefficients, and model intercept or baseline survival at a given time point).	14
	15b	D	Explain how to the use the prediction model.	12
Model performance	16	D;V	Report performance measures (with CIs) for the prediction model.	13
Model-updating	17	V	If done, report the results from any model updating (i.e., model specification, model performance).	NA
Discussion				
Limitations	18	D;V	Discuss any limitations of the study (such as nonrepresentative sample, few events per predictor, missing data).	18
Interpretation	19a	V	For validation, discuss the results with reference to performance in the development data, and any other validation data.	15-17
	19b	D;V	Give an overall interpretation of the results, considering objectives, limitations, results from similar studies, and other relevant evidence.	19
Implications	20	D;V	Discuss the potential clinical use of the model and implications for future research.	16-18
Other information				

Supplementary information	21	D;V	Provide information about the availability of supplementary resources, such as study protocol, Web calculator, and data sets.	12
Funding	22	D;V	Give the source of funding and the role of the funders for the present study.	2

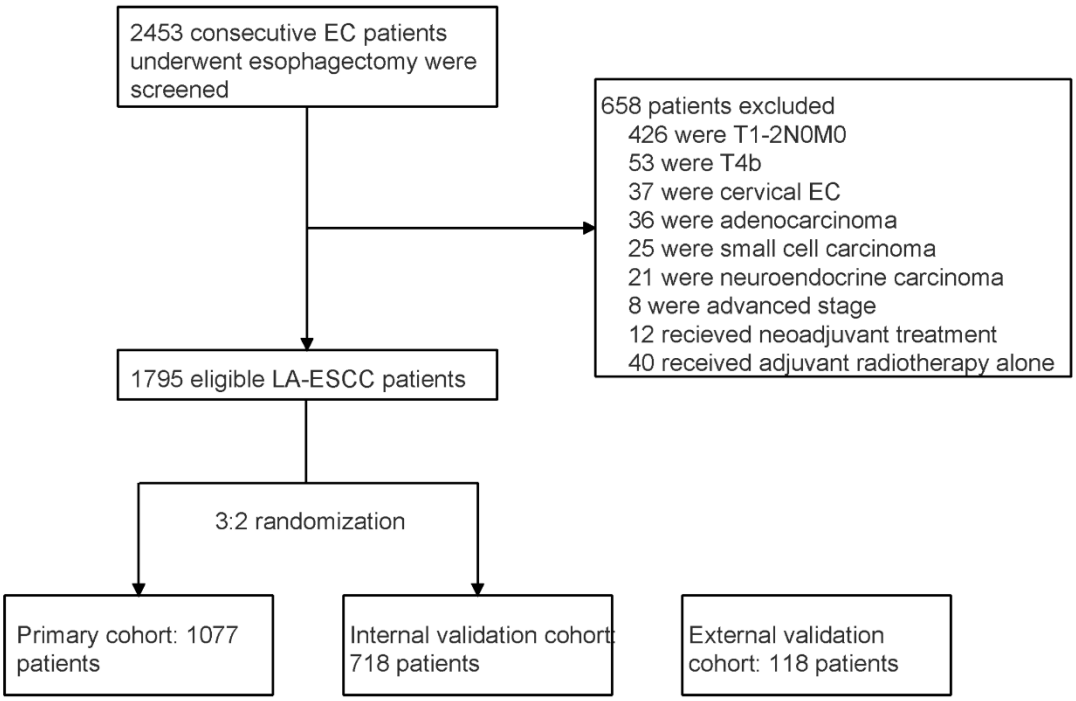
*Items relevant only to the development of a prediction model are denoted by D, items relating solely to a validation of a prediction model are denoted by V, and items relating to both are denoted D;V. We recommend using the TRIPOD Checklist in conjunction with the TRIPOD Explanation and Elaboration document.

Supplemental Table S2. Nomogram score formula

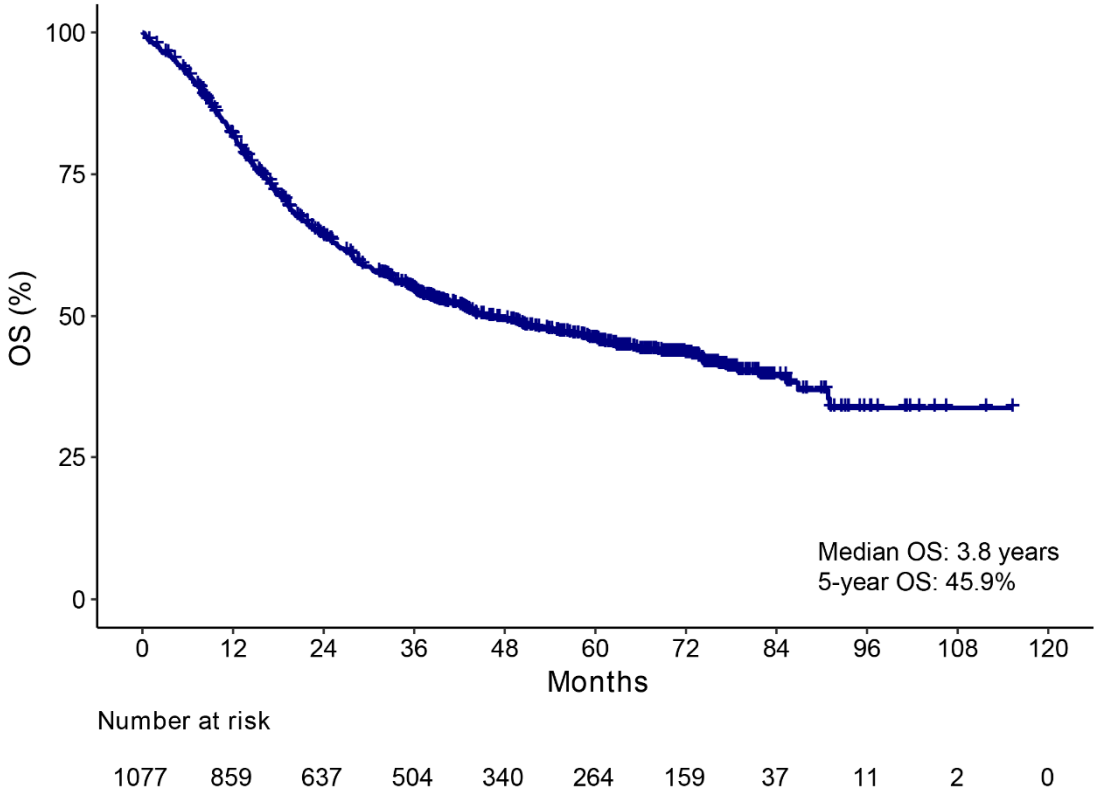
Variable	Variable score
Gender	
Female	0
Male	22.5
Pathological T stage	
T1b	0
T2	48.3
T3	68.9
T4	100
Pathological N stage	
N0	0
N1	45.2
N2	75.2
N3	93.5
Tumor differentiation	
Good	0
Moderate	13.9
Poor	20.1
Surgical margin	
Negative	0
Positive	18.0
Lymphovascular invasion	
No	0
Yes	4.7
Number of lymph node resection	
≥ 15	0
< 15	20.1
Adjuvant therapy	
Chemoradiotherapy	0
Chemotherapy	14.8
No	31.7

Linear predictor = 0.018×points - 3.03

5-year OS rate = 1.65e-07×points^3 - 8.56e-05×points^2 + 0.0086×points + 0.649



Supplemental Figure S1. Flow chart for patient inclusion. EC, esophageal carcinoma; LA-ESCC, locally advanced esophageal squamous cell carcinoma.



Supplemental Figure S2. Kaplan-Meier survival curve of the primary cohort. OS, overall survival.