STROBE Statement Checklist for Cohort Studies

Manuscript: Reliability, measurement error, and exploratory diagnostic discrimination of the King-Devick test in women's flat-track roller derby and rugby league: A four-season retrospective cohort study

Journal: Journal of Functional Morphology and Kinesiology (MDPI)

Study design: Retrospective cohort study

Checklist

Section	Item	Recommendation	Where reported (page, lines)
Title and abstract	1a	Indicate the study design with a commonly used term in the title or abstract	p. 1, lines 2–5 (title: "retrospective cohort study"); p. 1, lines 24–26 (Study Design)
	1b	Provide an informative, balanced summary of what was done and found	pp. 1–2, lines 19–54
Introduction			
Background/rationale	2	Explain the scientific background and rationale	pp. 2–3, lines 58–159
Objectives	3	State specific objectives, including any prespecified hypotheses	p. 3, lines 160–168
Methods			
Study design	4	Present key elements of study design early in the paper	pp. 3–4, lines 170–180; p. 4, lines 197–198
Setting	5	Describe setting, locations, relevant dates, recruitment, exposure, follow-up and data collection	pp. 3–4, lines 170–175 and 182–206; pp. 4–5, lines 219–249; pp. 5–6, lines 286–328; Table 1 (p. 8)
Participants	6a	Give eligibility criteria, sources and methods of selection; describe methods of follow-up	p. 4, lines 182–194 and 201–218; p. 5, lines 287–305; p. 6, lines 306–319; p. 8, lines 488–489
	6b	For matched studies, give matching criteria and number exposed/unexposed	Not applicable (not a matched design); comparator observations described p. 7, lines 391–408
Variables	7	Define all outcomes, exposures, predictors, potential confounders and effect modifiers; give diagnostic criteria	p. 5, lines 259–264 (KDT worsening) and 280–285 (concussion definition); pp. 5–6, lines 287–319; p. 6, lines 330–335 (outcomes); p. 7, lines 384–390 (thresholds)
Data sources/measurement	8	Give sources of data and details of assessment methods; describe comparability across groups	pp. 4–5, lines 229–264 (KDT); p. 5, lines 265–279 (BIST); pp. 5–6, lines 286–328; p. 5, lines 242–249 (comparability of testing conditions)
Bias	9	Describe any efforts to address potential sources of bias	p. 5, lines 242–258; pp. 5–6, lines 299–314; p. 7, lines 397–420; p. 8, lines 441–450; pp. 29–31, lines 947–996

Section	Item	Recommendation	Where reported (page, lines)
Study size	10	Explain how the study size was arrived at	p. 4, lines 182–185 and 197–198
Quantitative variables	11	Explain how quantitative variables were handled; describe groupings and why	p. 5, lines 259–264; p. 7, lines 384–396 and 409–434; p. 8, lines 447–450
Statistical methods	12a	Describe all statistical methods, including those used to control for confounding	pp. 6–8, lines 336–486
	12b	Describe methods used to examine subgroups and interactions	pp. 6–7, lines 359–360 and 368–382; p. 8, lines 439–440, 447–456 and 475–481
	12c	Explain how missing data were addressed	p. 4, lines 199–200 (BIST and post-concussion KDT data complete) and 207–209
	12d	If applicable, explain how loss to follow-up was addressed	Not applicable (no follow-up beyond each concussion event); p. 4, lines 201–206 and 211–218 (repeat participation across seasons)
	12e	Describe any sensitivity analyses	p. 4, lines 215–217; p. 7, lines 379–382 and 409–420; p. 8, lines 441–450
Results			
Participants	13a	Report numbers of individuals at each stage of the study	p. 4, lines 182–185 and 201–206; p. 7, lines 391–392; pp. 8–9, lines 488–492; Supplementary Figure S1
	13b	Give reasons for non-participation at each stage	Not recorded in the retrospective dataset; inclusion criteria p. 4, lines 188–190 and p. 8, lines 488–489
	13c	Consider use of a flow diagram	Supplementary Figure S1 (referenced p. 4, lines 217–218)
Descriptive data	14a	Give characteristics of participants and information on exposures and potential confounders	p. 4, lines 191–194 and 207–211; p. 9, lines 492–497; Table 2 (p. 10); p. 14, lines 569–580; Supplementary Table 4
	14b	Indicate number of participants with missing data for each variable	p. 4, lines 199–200 (no missing BIST/KDT data) and 207–209 (characteristics not available)
	14c	Summarise follow-up time	p. 20, lines 666–675; Table 5 (pp. 20–21)
Outcome data	15	Report numbers of outcome events or summary measures over time	p. 14, lines 580–586; p. 21, lines 689–698; Table 1 (p. 8)
Main results	16a	Give unadjusted estimates and, if applicable, confounder-adjusted estimates with precision (e.g., 95% CI)	pp. 11–21, lines 503–698; Tables 2–5 (pp. 10–21); unadjusted estimates with 95% CI
	16b	Report category boundaries when continuous variables were categorised	p. 7, lines 384–390 and 423–424; Table 4 (p. 16); p. 20, lines 673–675

Section	Item	Recommendation	Where reported (page, lines)
	16c	If relevant, consider translating relative risk into absolute risk	p. 21, lines 693–698; Table 1 (p. 8)
Other analyses	17	Report other analyses done (subgroups, interactions, sensitivity analyses)	pp. 11–13, lines 503–567 (Supplementary Tables 1–3); p. 18, lines 625–644 (Supplementary Table 5); p. 19, lines 654–664; p. 20, lines 672–684
Discussion			
Key results	18	Summarise key results with reference to study objectives	pp. 21–22, lines 699–712
Limitations	19	Discuss limitations, including sources of bias or imprecision, with direction and magnitude	p. 22, lines 713–727; pp. 29–31, lines 947–996
Interpretation	20	Give a cautious overall interpretation considering objectives, limitations, multiplicity and other evidence	pp. 22–32, lines 713–1016; p. 32, lines 1017–1041
Generalisability	21	Discuss the external validity of the study results	pp. 27–28, lines 871–892; p. 30, lines 957–961 and 975–977
Other information			
Funding	22	Give the source of funding and the role of funders	p. 33, line 1050