Number of studies (Reference) Test 9. Ultrasoui	Study design	N	Risk of bias	Inconsiste ncy	Indirectn ess	Imprecisio n	Sensitivi ty % (95% Cl)	Specific ity % (95% Cl)	Positiv e likeliho od ratio (95% Cl)	Negativ e Likeliho od ratio (95% CI)	AUROC	Quality
1 (Witters 2009)	Cohort study	6 6	no serious risk of bias	no serious inconsiste ncy	no serious indirectne ss	very serious imprecisio n ^a	50.0 (95% Cl: 14.3- 85.6)*	66.7 (95% CI: 63.1- 70.2)*	1.5 (95% Cl: 0.39- 2.88)*	0.75 (95% CI: 0.21- 1.36)*	0.62 (95% Cl: 0.40- 0.84)	LOW
Fest 14. Transie of adults and ch	-	aphy	/ using Fibro	oscan (Age-s	pecific cut-o	ff values at §	5.63kPa for <	12 years a	nd 6.50kP	a for ≥12 ye	ars) in a p	opulation
1 (Witters 2009)	Cohort study	6 6	no serious risk of bias	no serious inconsiste ncy	no serious indirectne ss	very serious imprecisio n ^a	50.0 (95% Cl: 14.5- 85.3)*	83.3 (95% CI: 79.8- 86.9)	3.0 (95% CI: 0.72- 6.5)*	0.60 (95% CI: 0.17- 1.07)*	0.78 (95% CI: 0.61- 0.95)	LOW

Table 70: Tasta 0.9.44 Index tasta (Illing a und and Transient slaste graphs) versus Dischemical OFI Dt definition to detect OFI D

Abbreviations: AUROC: area under the curve; CFLD: cystic fibrosis liver disease; CI: confidence interval; kPA: kilopascal

†Diagnosis of CFLD was defined as persistently elevated results (3–6 months, 1.5 times age-dependent upper limit of normal) for 2 of these liver tests: AST, ALT, alkaline phosphatase, bilirubin and gamma-GT.

* Calculated by the NGA from data available in the study report a. 95% confidence interval for sensitivity was very wide (width \geq 30 percentage points)