Study selection worksheet for full	Reviewer 1:	Reviewer 2:	
records			
Lead author name and Ref ID Number:			
Research type: Does the study report	Yes	Unclear	No
results of primary research with an	↓	\downarrow	\rightarrow
adequate sample size (≥10 eyes per retinal	next question	next question	EXCLUDE
condition)?			
Index test : Does the study report using	Yes	Unclear	No
FAF imaging for a retinal condition?	\	\downarrow	\rightarrow
Exclude tumours or secondary retinal	next question	next question	EXCLUDE
conditions (e.g. caused by drug toxicity or			
other ocular conditions such as glaucoma)			
Reference standard: Does the study	Yes	Unclear	No
report the use of one or more of: fundus	\	\downarrow	\rightarrow
fluorescein angiography, indocyanine green	next question	next question	EXCLUDE
angiography, optical coherence			
tomography, fundus photography or other			
standard imaging test(s) for diagnosis or			
monitoring of a retinal condition?			
Diagnostic data: Does the study report	Yes	Unclear	No
sensitivity and/or specificity data for FAF	\	\downarrow	\rightarrow
imaging or data that could be used to	next question	next question	EXCLUDE
calculate sensitivity or specificity?			
Final Decision	INCLUDE	UNCLEAR FYCI	EXCLUDE
	INCLUDE	(Discuss)	EXCLUDE
Additional questions for level of evidence			
Is the study prospective, retrospective or			
unclear?			
Does the study report both sensitivity AND			
specificity data for FAF imaging?			

specificity data for FAF imaging?

aMay not be specifically referred to as a reference standard or gold standard.