

**Supplementary Table S3.** Recommendation statements according to the validation of digital diagnostics from the Digital Pathology Guideline of the Federal Association of German Pathologist [5]

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**Recommendation statement**

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Recommendation 2\_2: The validation SHOULD be suitable for the clinical aim (kind of diagnosis) which is addressed by the WSI implementation. The preparation of the material (formalin fixation, paraffin embedding, frozen sections, immunohistochemical stains, cytology smears, etc.) should be included in the study. A renewed validation study is necessary if a new preparation technique is inaugurated which differs from the already proven method.

Recommendation 2\_3: The validation study SHOULD reproduce the reality of the clinical – pathological environment which will be used for the virtual technology.

Recommendation 2\_4: The validation study SHOULD include the complete WSI-System and its archive.  
It is not necessary to validate individual components of the system.

Recommendation 2\_5: The adequately trained pathologist, who will diagnose the WSI diagnostically in the routine, SHOULD be involved in the validation process.

Recommendation 2\_6: The validation process SHOULD include a sample of at least 60 cases per application (Routine stains of fixed tissue), which are representative samples of the spectrum and complexity of routine diagnostics.  
The validation process SHOULD each have 20 cases for each additional Application (e.g. immunohistochemistry, special stains). The validation is done by the diagnosis comparison of the associated glass slide and of archived WSI, or of the actual WSI, if the manufacturer provides this procedure as fallback option.

Recommendation 2\_7: WSI and glass slides MAY be evaluated at random or systematic order.

Recommendation 2\_8: A waiting period of at least two weeks between the assessment of the WSI and glass slides SHOULD be arranged.

Recommendation 2\_9: Revalidation MUST be performed as soon as a significant change to one components of the WSI system has occurred.

Recommendation 2\_10: The validation MUST confirm the diagnostic concordance between WSI and glass slides, and document the accepted intra - observer reproducibility.

Recommendation 2\_11: The validation SHOULD confirm that all material, which is present on the glass slide, will be also present in the WSI.

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## References

1. Cross S, Furness P, Igali L, Snead DR, Treanor D. Best practice recommendations for implementing digital pathology. London: The Royal College of

Pathologists, 2018; 1-43.

2. Al-Janabi S, Huisman A, Nikkels PG, ten Kate FJ, van Diest PJ. Whole slide images for primary diagnostics of paediatric pathology specimens: a feasibility study. *J Clin Pathol* 2013; 66: 218-23.
3. Williams BJ, Hanby A, Millican-Slater R, Nijhawan A, Verghese E, Treanor D. Digital pathology for the primary diagnosis of breast histopathological specimens: an innovative validation and concordance study on digital pathology validation and training. *Histopathology* 2018; 72: 662-71.
4. Ribback S, Flessa S, Gromoll-Bergmann K, Evert M, Dombrowski F. Virtual slide telepathology with scanner systems for intraoperative frozen-section consultation. *Pathol Res Pract* 2014; 210: 377-82.
5. Federal Association of German Pathologists Bundesverband Deutscher Pathologen (FAGP-BDP). Guidelines digital pathology for diagnosis on (and reports of) digital images, 2018. Berlin: Federal Association of German Pathologists Bundesverband Deutscher Pathologen (FAGP-BDP), 2018.