Supplementary Information:

Histological Assessment:

Hepatic steatosis and lobular inflammation were scored on 4-point ordinal scales (0, 1, 2, and 3), and ballooning was scored on a 3-point ordinal scale (0, 1, and 2). The NAFLD Activity Score (NAS) was calculated as the sum of the steatosis, lobular inflammation, and ballooning scores and ranged from 0-8. Hepatic fibrosis was scored using a 5-point ordinal scale (0, 1, 2, 3, and 4), with stage 4 considered cirrhosis and stages 3-4 considered advanced fibrosis. NASH was scored on a 3-point ordinal scale (non-NASH, borderline NASH, and definite NASH). (1)

Clinical Research Assessment:

A detailed history, including medication use, was obtained from all patients. A physical exam, including vital signs, height, weight, and anthropometric measurements, was performed by a trained investigator. Body mass index (BMI) was calculated as body weight (in kilograms) divided by height in meters squared. Alcohol consumption history was obtained from all patients and then ascertained using the Alcohol Use Disorders Identifications Test (2) and the Skinner questionnaire.(3) The following biochemical markers were obtained from all subjects: alanine aminotransferase (ALT), aspartate aminotransferase (AST), alkaline phosphatase (Alk Phos), gamma-glutamyl transpeptidase (GGT), total bilirubin, direct bilirubin, albumin, hemoglobin A1c (HbA1c), fasting glucose and insulin, homeostatic model assessment of insulin resistance (defined as the product of glucose and insulin divided by 405), prothrombin time/international normalized ratio, fasting lipid panel, free fatty acids, C-reactive protein, and platelet count.
References:


Supplementary Figure 2: Derivation of cohort

Patients with biopsy-proven NAFLD (n = 184)

Excluded patients:
- No ARFI due to patient schedule (n = 16)
- No MRE due to patient schedule (n = 11)
- No ARFI and MRE due to patient schedule (n = 28)
- Failed ARFI (n = 3)
- Failed MRE (n = 1)

ARFI, MRE, and biopsy all within 1 year (n = 125)