**Supplementary File 4. Validation cohort.**

**Method**

1. 2021 data set (*n* = 176) was screened, the following data was excluded:

* Incomplete patient data (*n* = 15)
* Possible hepatitis (*n* = 13)
* Dependent drinkers (*n* = 27) (patients who scored ≥ 15 on the alcohol use disorders identification test [AUDIT])1 2
* Cancer/HIV medication (*n* = 2)
* Unable to obtain valid VCTE reading (*n* = 4)

Total for validation cohort data ***n* = 115**

1. The ALT, BMI, and HbA1c readings of the validation cohort were fed into the ALBA algorithm: ((patient ALT score – 28.826)\*0.002638)+ ((patient BMI score – 23.291)\* 0.02152)+((patient HbA1c score – 28.462)\* 0.009975).
2. If the total of the ALBA algorithm was ≥ 0.5 then the patient was predicted to be ‘positive’ for ≥ F2.
3. If the total of the ALBA algorithm as < 0.5 then the patient was predicted to be ‘negative’ for ≥ F2.
4. The patient's predicted positive or negative value was then compared to the patient's actual F2 status.
5. The number of correct predicted values was then calculated for the validation cohort.

1Saunders JB, Aasland OG, Babor TF, *et al*. Development of the Alcohol Use Disorders Identification Test (AUDIT): WHO Collaborative Project on Early Detection of Persons with Harmful Alcohol Consumption--II. Addiction 1993;88(6):791-804.

2https://auditscreen.org/about/scoring-audit