

Enhanced *GAB2* expression is associated with improved survival in high-grade serous ovarian cancer and sensitivity to PI3K inhibition

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Abstract

Identification of genomic alterations defining ovarian carcinoma subtypes may aid the stratification of patients to receive targeted therapies. We characterised high-grade serous ovarian carcinoma (HGSC) for the association of amplified and overexpressed genes with clinical outcome using gene expression data from 499 HGSC patients in the Ovarian Tumor Tissue Analysis cohort for 11 copy number amplified genes: *ATP13A4*, *BMP8B*, *CACNA1C*, *CCNE1*, *DYRK1B*, *GAB2*, *PAK4*, *RAD21*, *TPX2*, *ZFP36* and *URI*. The Australian Ovarian Cancer Study and The Cancer Genome Atlas data sets were also used to assess the correlation between gene expression, patient survival and tumour classification. In a multivariate analysis, high *GAB2* expression was associated with improved overall survival (P=0.03), while high *BMP8B* was associated with improved progression-free survival (P=0.002). High *CACNA1C* and *ZFP36* expression were associated with both poor overall and progression-free survival. High *PAK4* and *URI* were associated with worse overall and progression-free survival respectively. *GAB2* over expression and copy number gain were enriched in the AOCS C4 subgroup. High *GAB2* expression correlated with enhanced sensitivity *in vitro* to the dual phosphoinositide-3-kinase (PI3K)/mTOR inhibitor, PF-04691502, and could be used as a genomic marker for identifying patients that will respond to treatments inhibiting PI3K signalling.

Introduction

Ovarian cancer is the fifth most common cause of cancer death worldwide in women, contributing to 4.3% of all female cancer deaths (1). The poor prognosis of ovarian cancer is generally attributed to a combination of late stage diagnosis and the inherent propensity of some subtypes to be intrinsically resistant or rapidly acquire resistance to chemotherapy (2). This poor prognosis is complicated by the heterogeneous nature of this disease at a cellular, molecular and clinical level: inter-tumour heterogeneity has made it hard to predict response to therapy and to identify good novel molecular targets, while intra-tumour heterogeneity is likely to underpin resistance to current chemotherapies.

Ovarian cancer is defined histologically into the serous (low and high grade), clear cell, endometrioid and mucinous tumour subtypes (3). Importantly, the histologic characteristics that define these ovarian tumour groups do not translate into similar clinical responses or outcomes between patients within subtypes, even when the same treatment regime is administered. Molecular analysis of these tumours has revealed distinct gene expression profiles both within and between the histological subtypes (4, 5). Tothill *et al.* identified 6 ovarian cancer subtypes termed C1 to C6. C1, C2, C4 and C5 comprised mostly high-grade serous and endometrioid cases and were associated with distinct expression profiles summarised as High Stromal Response (C1), High Immune Response (C2), Low Stromal Response (C4) and Mesenchymal (C5). Low-grade serous carcinomas formed a distinct subgroup. A second study by The Cancer Genome Atlas (TCGA) found four related high-grade serous subtypes, comprising Differentiated (D), Immune (I), Mesenchymal (M) and Proliferative (P). Despite the histologic, molecular and clinical diversity of these tumours, current treatment protocols for women with ovarian cancer are not histologic or subtype specific.

High-grade serous ovarian carcinoma (HGSC) account for the majority of ovarian cancer incidence and mortality. These tumours are characterised by near ubiquitous *TP53* mutation and widespread copy number aberrations (5, 6). Approximately 80% of women with HGSC will respond to first line chemotherapy (7, 8). However, the majority of women who respond will relapse within 12 months of the cessation of chemotherapy and no curative treatments are currently available for recurrent disease. The integration of targeted therapeutics into ovarian cancer treatment regimes has the potential to greatly improve patient outcomes. However, the genomic heterogeneity of HGSC makes the identification of appropriate molecular targets challenging.

We previously identified putative oncogenes targeted by copy number amplification in HGSC and showed functional effects of gene knockdown (9). Here we have sought to further characterise the clinical implications of expression of 11 of these genes using large clinical cohorts of HGSC from the Australian Ovarian Cancer Study (AOCS), the Ovarian Cancer Association Consortium (OCAC)/Ovarian Tumor Tissue Analysis Consortium (OTTA) and The Cancer Genome Atlas (TCGA).

Materials and methods

Clinical samples

Ovarian cancer biopsies (n=499) from HGSC patients were obtained as part of the OTTA study from women undergoing surgery for primary ovarian cancer at hospitals in the United States, Canada, United Kingdom and Poland (10) as well as cases that were part of the Arbeitsgemeinschaft Gynäkologische Onkologie (AGO-OVAR3) randomised controlled trial in Germany (11, 12). The AGO-OVAR3 cases were stage IIB-IV, underwent debulking

surgery and were randomised to either paclitaxel plus cisplatin or paclitaxel plus carboplatin, treated every three weeks until disease progression or a minimum of 6 cycles were achieved. The remaining cases were population-based and obtained retrospectively from hospitals and tissue banks. Specific treatment information for these cases is not available but is likely to also be surgery and platinum-taxane based chemotherapy. The central criterion for inclusion in this study was sufficient tissue to extract RNA.

Tumour RNA was extracted from formalin-fixed, paraffin embedded tissue and used for the Nanostring gene expression analysis described below. A small number of fresh-frozen samples were also included in this study. To enhance gene expression analysis, all tumours were evaluated on the frozen section to ensure they contained >50% epithelial tumour content. RNA was extracted from 2-3, 10 µm sections using the miRNeasy FFPE kit (Qiagen) following the manufacturer's instructions with the addition of an elongated 45 minute Proteinase K digest. Appropriate institutional ethics committees approved the collection and use of tissues for this study. All participants gave written informed consent for their tissue to be used for research and publication. The Peter MacCallum Cancer Centre Human Research Ethics Committee approved this study (01/38).

NanoString gene expression analysis

ATP13A4, *BMP8B*, *CACNA1C*, *CCNE1*, *DYRK1B*, *GAB2*, *PAK4*, *RAD21*, *TPX2*, *ZFP36* and *URI* were included in a custom NanoString nCounter CodeSet synthesised at NanoString Technologies as previously described (10, 13). Total RNA (~500 ng) was analysed using the NanoString nCounter analysis system. mRNA quantification was carried out following the manufacturer's instructions including normalisation by nSolver software v1.1 (NanoString Inc.) with *ACTB*, *SDHA*, *RPL19*, *POLR1B* and *PGKI* as control genes. Data were log₂

transformed for analysis (Supplementary Table S1), thus each unit increase corresponds to a two-fold increase in expression.

Cell lines and reagents

Ovarian cancer cell line data treated with small molecule therapeutics were obtained as previously described (14). Cell lines were obtained in 2008 from Stephen Howell (University of California; 2008), European Collection of Cell Culture (59M, A2780, OAW28, OAW42), National Cancer Institute (CAOV3, IGROV, OVCAR3, OVCAR4, OVCAR5, OVCAR8, SKOV3), Lloyd Kelland (Institute of Cancer Research, UK; CH1), Deutsche Sammlung von Mikroorganismen und Zellkulturen (EFO21, EFO27, FUOV1), American Type Culture Collection (ES2, OV90, TOV112D, TOV21G), RIKEN (JHOC5, JHOC7, JHOC9, JHOM1, JHOS3), Health Science Research Resources Bank (KURAMOCHI, MCAS, RMGI, RMGII), and Nuzhat Ahmed (Royal Women's Hospital, Melbourne; OVCA432) (Supplementary Table S2). Cell line identity was routinely confirmed using a panel of six short tandem repeat loci at most 6 months before use.

Statistical analysis

Patient survival of the Nanostring data set was determined by Cox regression analysis of continuous expression data and was performed in Partek Genomics Suite v6.5. Only high-grade serous cases from the OTTA cohort were included (n=499). Tumour FIGO stage, residual disease (optimal/suboptimal), cohort subgroup (i.e. the centre from where the tissue was obtained) and age were assessed as potential confounders. A number of cases lacked stage (n=40) and/or residual disease (n=148) information. Data were assessed for violation of the proportionality assumption using the `cox.zph` function in R; none were significant. Stepwise Akaike Information Criterion model selection was performed in R using `stepAIC`.

Normalised gene expression data were obtained for the AOCS and TCGA patient cohorts (4, 5, 15). AOCS (Affymetrix U133Plus2, GSE9899) and TCGA (Agilent 244K arrays, from the TCGA Data Portal <https://tcga-data.nci.nih.gov/tcga/>) data were pre-processed by \log_2 normalisation and median centring. Expression comparisons were performed in Partek Genomics Suite. Cases in the AOCS cohort were subtyped by the TCGA classifier as described (16). Copy number data as raw CEL files were obtained from TCGA and AOCS (6, 17) (AOCS - GSE13813, TCGA – Data Portal <https://tcga-data.nci.nih.gov/tcga/>) and normalised as previously described (18). Circular Binary Segmentation (19) was used to detect copy number alterations with thresholds of 0.3 for gain and -0.3 for losses. Copy number comparisons were performed using Nexus Copy Number™ 7.5 Discovery Edition (BioDiscovery, Inc.). Normalized (Level 3) Reverse Phase Protein Array (RPPA) data were downloaded from TCGA and was not further processed. The results published here are in part based upon data generated by The Cancer Genome Atlas pilot project established by the NCI and NHGRI. Information about TCGA and the investigators and institutions who constitute the TCGA research network can be found at <http://cancergenome.nih.gov>.

To perform a combined cohort survival analysis, patients from each assay group (AOCS, TCGA, AGO/OTTA) were classified into low- and high-expression subgroups using cut-off values of ± 0.5 median absolute deviations (MADs). The low expression group had values less than the median minus $0.5 \times \text{MAD}$, while the high expression group had values greater than the median plus $0.5 \times \text{MAD}$. Cases with intermediate expression values were excluded. Association of gene expression with survival was analysed using Cox regression and stage and cohort were again included in the model. The MAD classification was done for each data group independently and was also used to define groups for all other comparisons of high

versus low expression of a particular gene in tumour samples. Other statistical analyses were performed using GraphPad Prism software (GraphPad Software) and were considered significant where $P < 0.05$. Multiple testing correction was performed using the `p.adjust` function in R, using “`fdr`” (20).

Results

Expression analysis of 11 putative oncogenes identifies *GAB2* as correlating with improved patient survival

We previously conducted an siRNA screen that evaluated the effect of knocking down 272 genes on cell growth in 18 ovarian cancer cell lines (9). The genes were selected on the basis of their location in minimal regions of copy number amplification. The siRNA screen identified 11 potential driver genes: *BMP8B*, *CACNA1C*, *DYRK1B*, *GAB2*, *PAK4*, *URI*, and *ZFP36* all resulted in decreased cancer cell viability following gene knockdown that was more pronounced in cell lines with copy number amplification of the gene. *TPX2* showed an inverse correlation between amplification and reduction in cell viability after gene knockdown. *ATP13A4* and *RAD21* showed reduction in cell viability upon gene knockdown that was not correlated with copy number amplification and *CCNE1* was added based on previous data indicating an association with poor progression-free survival (17). All genes were analysed using a custom codeset on the Nanostring system in 499 high-grade ovarian serous carcinomas from OTTA/AGO (Table 1, Supplementary Figure S1, Supplementary Figure S2, Supplementary Table S1). Genes were evaluated for association of their mRNA expression with overall and progression-free survival. *DYRK1B*, *URI*, *ZFP36*, *CACNA1C* and *PAK4* showed an association with overall survival in univariate analyses (Supplementary Table S3). Stage, presence of residual disease and the cohort source of the tumour were significant factors influencing overall survival. *CACNA1C*, *PAK4* and *ZFP36* remained

significantly associated with overall survival in a multivariate analysis. *BMP8B*, *URI*, *CACNA1C*, *PAK4*, *TPX2*, *ZFP36* and *ATP13A4* were associated with progression-free survival, and remained significant in a multivariate analysis (Table 2). We also performed step-wise Akaike Information Criterion model selection, which selected FIGO Stage, *CACNA1C*, Cohort, Age, *ATP13A4*, *PAK4*, *ZFP36* and *GAB2* as predictors for overall survival, and FIGO Stage, *ZFP36*, residual disease, *ATP14A4*, *URI*, *TPX2*, and *CACNA1C* as predictors for progression-free survival (Supplementary Table S4).

In order to extend the survival analysis in additional cohorts, gene expression data were obtained as described previously from 236 HG serous and endometrioid tumours from AOCS (4) and 459 HGS tumours from TCGA (5) (except *ATP13A4* data not available from TCGA). Significance testing was performed for key cohort characteristics including age at diagnosis and stage (Table 1). No significant differences in age of onset were observed between the three patient cohorts. The proportion of samples in each stage significantly differed between cohorts ($\chi^2 = 30.1$, $P < 0.001$), driven by the higher proportion of stage I and II patients in the OTTA cohort. As described in the methods, cases were categorised as low expressors (38-39% of each cohort) or high expressors (35-38% of each cohort) and clinical data was combined across the three cohorts. The method of categorising the cases depends on the distribution of the values about the median, and thus the proportions in each group vary slightly for each cohort. (This categorisation is also used for analyses on the AOCS and TCGA expression array data described in subsequent sections). In a multivariate model including stage, age and cohort, *GAB2* expression was significantly associated with overall survival ($p=0.03$, HR 0.83, Figure 1A, Supplementary Figure S3), but was not significant when residual disease was also factored in ($p=0.13$, HR 0.87). *CACNA1C*, *PAK4* and *ZFP36* were also associated with overall survival. *BMP8B*, *CACNA1C*, *URI* and *ZFP36* were

significantly associated with progression-free survival (Supplementary Figures S1, S4), but *BMP8* was not when residual disease was also considered ($p=0.08$, HR 0.85). *ATP13A4* was no longer significant ($p=0.43$). However, the signal for *ATP13A4* and *BMP8B* came mostly from the Nanostring data set, possibly because of low and therefore potentially unreliable expression measurements in the microarray data sets (median \log_2 expression values AOCS *BMP8B* 5.5, *ATP13A4* 3.4; TCGA *BMP8B* 3.1; cf. AOCS *GAB2* 7.7; TCGA *GAB2* 7.2, Supplementary Figure S4).

Aberration of *GAB2* is correlated with C4 and Differentiated HGSC

We sought to further characterise patients with genomic aberrations of *GAB2* using the ovarian tumour classifier proposed by Tothill *et al.* (4). We obtained classification data for the AOCS and TCGA cohorts with expression ($n=642$), copy number data ($n=452$) and those with both CN and expression data available ($n=445$). The distribution of subtypes across the combined expression cohort was C1: 28%; C2: 19%; C3: 4%; C4: 29%; C5: 18% and C6: 1.4%. Excluding the rare C6 subtype, CN gain ($>0.3 \log_2$ ratio) of *GAB2* occurred in 33% of the tumours analysed and showed a statistically significant different distribution across the subtypes ($p<0.005$, chi-squared test) with over-representation in the C4 subtype (41%) and under-representation in the C3 and C5 subtypes (13% and 21%). Samples highly expressing *GAB2* mRNA as defined by the survival analysis above were also distributed non-randomly ($p=0.0002$, chi-squared test), with bias towards the C4 subtype (49%), and under-representation in the C1 and C5 subtypes (29% and 30%). When CN and expression were combined, 50% of cases showed altered *GAB2* by either copy number or expression and the distribution remained uneven ($P=0.01$, chi-squared test) (Figure1B), with over-representation in the C4 subtype (59%), and under-representation the C3 and C5 subtypes (31% and 38%).

Thus the C4 subtype, which has to date been the least well characterised, may be partly defined by increased aberration of *GAB2*.

We also assessed membership of the TCGA classification system, comprising Differentiated (D), Immune (I), Mesenchymal (M) and Proliferative (P) using TCGA data only (Figure 1B). Combining CN and expression data as above, we found a borderline statistically significantly different distribution of *GAB2* status ($P=0.057$, chi-squared test) with over-representation in the D subtype (60%) and under-representation in the P subtype (41%). The D subtype is related to the C4 subtype above (76% of D cases were also classified C4), and comprises a group of tumours with generally better survival outcome, reinforcing our observation of correlation of *GAB2* expression with better survival.

Correlation of *GAB2* expression with copy number events.

We previously observed that *GAB2* mRNA expression was statistically significantly correlated with its copy number in three data sets (r^2 range 0.48 – 0.7) (9). As particular genomic aberrations have been shown to have significant associations with mRNA expression-based ovarian cancer subtypes (5), we evaluated whether *GAB2* expression was correlated with any other copy number events, by using the *GAB2* high and low designations from the survival analysis and assessing differences in copy number events using TCGA data (Figure 1C). We found that *GAB2* high-expressing cases were enriched for 11q gain (as expected) and also 8q gain, 16q loss and Xq loss (at $p<0.001$, at least 20% difference in frequency). This result is consistent with the observation that 8q gain at *MYC* is most common in the Differentiated TCGA subtype (49% (5)), in which we have found *GAB2* overexpression to be more frequent. In addition, *GAB2* low-expressing cases showed

enrichment for gain on 2p and 20q. There was no difference in the percentage of the genome altered by copy number.

***GAB2* CN and overexpression correlates to protein levels**

We utilised the TCGA Reverse Phase Protein Array (RPPA) data to evaluate the effect of *GAB2* aberration on protein levels (Figure 2A). *GAB2* protein was correlated with both *GAB2* CN and RNA ($P < 0.0001$ for both, Pearson $r^2 = 0.31$ for CN and 0.49 for RNA). *GAB2* protein levels were significantly different between both Tothill and TCGA subtypes ($P = 0.006$ and $P = 0.009$, 1-way ANOVA), with elevated protein in the C2 and C4 subtypes and Immune and Differentiated subtypes (Figure 2B, 2C). Consistent with the increase in copy number gain at 8q observed in *GAB2* over expressing tumours, the protein with the most significant association with *GAB2* over expression was c-Myc ($p = 3.9 \times 10^{-5}$, ANOVA of RPPA data using *GAB2* high versus low expressing tumours as defined above).

Previous studies have suggested that *GAB2* functions as a scaffold to facilitate activation of pathways downstream of a receptor tyrosine kinase, such as the PI3 kinase pathway (21). We assessed whether elevated *GAB2* expression correlated with downstream activation of the PI3 kinase pathway by TCGA RPPA protein levels of pAKT-473, pAKT-308 and pPRAS40-246. pAKT-473 was weakly negatively correlated with *GAB2* protein expression ($p = 0.02$, Pearson $r = -0.11$). CN change at *GAB2* did not affect pAKT or p-PRAS40 expression. Thus, increased expression of *GAB2* does not strongly correlate with activation of the PI3 kinase pathway as measured by this assay.

Data mining identifies protein networks associated with *GAB2*

In order to identify any other pathways that could illuminate the role of *GAB2* in ovarian carcinoma, we analysed the AOCS and TCGA expression data sets. Normalised data were first filtered for the most variable genes (standard deviation >0.5) that had median expression levels >3 (TCGA Agilent) or >4 (AOCS Affy Plus2). Each data set was used to compare *GAB2* high versus low expressing cases based on the stratification performed above for the survival analysis. The Tothill C subtypes were included as a factor in the ANOVA. Differentially expressed genes (n=772 for TCGA and n=211 for AOCS) were imported to Metacore v6.19 (Thomson Reuters). Enrichment analysis on each gene list consistently identified cytoskeleton remodelling as the most enriched pathway, encompassing the upregulated genes *PAK1* and *LIMK2*, however the significance was limited (AOCS FDR P=0.16, TCGA FDR P=0.007, Supplementary Table S4). We also used Metacore to undertake network building, in order to identify relevant pathways where proteins whose mRNA were not differentially expressed could still be included as intermediary nodes to link genes that were differentially expressed. Networks were firstly built independently for each dataset by using the 2-step building algorithm with *GAB2* as the starting node (Supplementary Figure S5), and secondly using the commonly differentially expressed genes (n=40) to build a network agnostic to *GAB2* (Supplementary Figure S5). The first analysis identified *STAT3* as a hub in both datasets. The second analysis found a complex network of 206 objects that was enriched for EGFR signalling pathway members (FDR P=4.4x10⁻²¹, Supplementary Table S5). These interrelated networks could be explained by the physical interaction of *GAB2* with *STAT3* (22, 23), leading to downstream changes in transcription and the involvement of *GAB2* in the receptor tyrosine kinase signalling transduction pathway.

Cell lines with high expression of *GAB2* are specifically sensitive to PI3K inhibition

Given that our clinical and genomic data indicated that aberrant *GAB2* expression is characteristic of a subset of HGSC patients that have improved overall survival, we sought to explore the possibility that enhanced *GAB2* expression may provide a marker for sensitivity to targeted therapeutic intervention. As previous studies have implicated *GAB2* in the activation of PI3K signalling through the recruitment of p85 and GRB2 (21, 24), we assessed the relationship between *GAB2* expression and sensitivity of ovarian tumour cell lines to the dual PI3K/mTOR inhibitor, PF-04691502. Using the 50% growth inhibition (GI50) values generated across a panel of 30 ovarian tumour cell lines (14) the response to PF-04691502 was correlated with *GAB2* gene expression (Figure 3A, Table 3). We observed a statistically significant correlation between *GAB2* gene expression and GI50 (Pearson $R = -0.48$; $P = 0.003$) that suggests cell lines with high expression of *GAB2* are more sensitive to PI3K/mTOR inhibition. We repeated the analysis with only those cell lines that had a high probability of being high grade ovarian serous carcinoma in origin (classification value >1 in Domcke et al. (25) or HGSC in Anglesio *et al.* (10)). Only 10 cell lines fulfilled these criteria (59M, CaOv3, Kuramochi, OAW28, OVCAR3, OVCAR4, OVCAR5, OVCAR8, FUOV1 and OV90). The correlation between GI50 and *GAB2* expression was still negative, but no longer statistically significant, perhaps due to the smaller sample size (Pearson $R = -0.49$, $P = 0.12$). To evaluate whether the response observed using PF-04691502 was specific to the PI3K-dependent function of *GAB2*, we also assessed the role of the RAS/ERK pathway in the same panel of 30 ovarian tumour cell lines using the selective MEK inhibitor, PD-0325901 (14). No significant correlation between *GAB2* expression and GI50 was observed (Figure 3B).

We have previously assessed P-PRAS40 across the panel of cell lines (14), and we used this as a marker of AKT activity in the cell lines. Cell lines were defined as either high or low

expressors of *GAB2* and P-PRAS40 (Supplementary Table S6). There was a trend towards an association between *GAB2* high expressors and low P-PRAS40 ($p=0.099$, Fishers exact test), indicating that high *GAB2* expressing cells may have lower AKT signalling.

Discussion

The success of molecular targeted therapeutics for the treatment of HGSC will be dependent upon the identification of the appropriate drug targets and the stratification of patient cohorts that will respond to such therapies. It is widely recognised that ovarian cancer is a highly heterogeneous disease, with a diverse range of histologic and molecular subtypes. As a consequence, the refinement of tumour subtyping will be an important step in the design of clinical trials and downstream integration of molecular targeted agents into treatment regimes of ovarian cancer patients. Our expression analysis of 11 oncogene candidates in a large clinically annotated dataset of high-grade ovarian serous carcinomas identified three with correlation to patient outcome: *GAB2*, *ATP13A4* and *BMP8B*. Surprisingly, *CCNE1* and *UR11* which have previously been reported to show a strong correlation to outcome (17, 26) were not significant in a multivariate analysis. Our analysis was able to take into account the known prognostic factors of age, stage and residual disease, but not BRCA mutation status, which may have contributed to the difference observed with *CCNE1*, as amplification of this gene tends to be exclusive of *BRCA1* mutation (5) .

ATP13A4 is a calcium ion transporter acting in the endoplasmic reticulum and overexpression leads to elevated levels of intra-cellular calcium (27). The gene is located on 3q29 and has not previously been associated with cancer. However, deregulated calcium signalling is considered an important tumorigenic pathway (28). *BMP8B* (bone morphogenic protein 8B) is located on 1p and encodes a secreted signalling molecule that is important in

early embryonic development (29) and may regulate adipogenesis (30). A role in ovarian cancer could be related to the promotion of peritoneal spread by adipocytes, which provide an energy source to the cancer cells (31). In gastric cancer, expression in the bone marrow was associated with metastasis and elevated expression in the primary tumour was related to poor patient outcome (32), in contrast to the results here where higher expression was related to longer progression-free survival.

GAB2 has previously been implicated as an oncogene in multiple cancer types including breast (33, 34), ovarian (5, 35, 36), leukaemia (37) and melanoma (38). We previously reported that *GAB2* is a putative cancer driver gene that is copy number amplified in approximately 15% of HGSC (9, 18) and we extend that analysis here by exploring the correlation of *GAB2* expression with improved overall survival and ovarian cancer subtypes. The gene encodes the scaffolding adaptor GRB2-associated binding protein, a large protein located at the internal cell membrane where it forms a dock for multiple proteins to mediate signals from transmembrane protein kinases (21). *GAB2* binds to the p85 regulatory subunit of PI3K to stimulate PI3K signalling and over expression of *GAB2* has been demonstrated to potentiate ovarian tumourigenesis via the activation of PI3K signalling in an mTOR-dependent manner (36). Other over expression studies have also linked *GAB2* to enhanced epithelial-mesenchymal transition, cell migration and invasiveness (39) and response to follicle-stimulating hormone (FSH) in ovarian granulosa cells (40), again through the PI3K pathway. The PI3K signalling pathway is recognised to be a key driver in the development of a diverse range of epithelial tumours (41-43). Genetic alterations to pathway members such as *PIK3CA*, *PIK3CB*, *AKT1*, *AKT3*, *PTEN* and *PDK1* result in the activation of the pathway, which enhances cellular proliferation and survival. Large-scale genomic studies have indicated that 45% of HGSC exhibit activation of the PI3K signalling pathway (5),

suggesting this pathway could be an ideal target for the development of targeted therapeutic strategies for the treatment of HGSC. Our data from both the tumour samples and cell lines suggest there is no relationship between high *GAB2* expression and elevated PI3 kinase pathway signalling, in contrast to what has been described in studies that have induced over expression of *GAB2*. Nonetheless, we found that high *GAB2* expression was an indicator of sensitivity to a PI3K/mTOR inhibitor whereas our previous studies failed to demonstrate a correlation of PF-04691502 sensitivity with genetic aberrations in PI3K pathway genes (*PIK3CA* and *PTEN* (14)). The mechanism for this sensitivity is unclear, but bears further investigation given the dozens of clinical trials featuring various PI3K and PI3K/mTOR inhibitors (44).

In summary, we have utilised gene expression data from three clinically annotated patient cohorts to identify a correlation between *GAB2* gene expression and improved patient survival. Elevated *GAB2* expression was also correlated with the C4 and Differentiated ovarian cancer subtypes, with differentially expressed genes in relevant signalling pathways. *GAB2* expression can be upregulated by copy number, but it is likely that other mechanisms are also involved. We further correlated *GAB2* gene expression in ovarian tumour cell lines with response to the dual PI3K/mTOR inhibitor, PF-04691502. Collectively, these data led us to postulate that aberrant *GAB2* expression may provide a molecular marker for the characterisation of a subset of HGSC that will be responsive to the targeted inhibition of PI3K signalling.

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Table 1. Patient characteristics and clinicopathologic features of ovarian tumours relative to cohort

Feature	AOCS	OTTA/AGO	TCGA
Tumour cell nuclei (%)	>30	>50	>70
RNA isolation method	T	Q	A
Analysis platform	Affy U133+2	Nanostring	Agilent 244
Median months follow-up (range)	36.2 (0-199)	39.6 (0-283)	33.8 (0-152)
Median PFS/OS (months)	14.8/42.4	16.9/43.5	16.9/45.4
Age at diagnosis			
Median	60.4	60.3	59.66
Range	23-80	29-90	30-89
Stage			
I	11	24	11
II	8	48	20
III	196	327	357
IV	21	60	69
Unknown	-	40	2
Residual disease			
Nil macroscopic	58	92	90
Macroscopic	135	259	317
Unknown	43	148	52
Total	236	499	459

T = TRIZOL and column chromatography (Qiagen); Q = miRNeasy FFPE kit (Qiagen); A = Allprep kit (Qiagen); Affy U133+2 = Affymetrix Gene Chip Human genome U133 Plus 2.0 expression array; Nanostring = Nanostring nCounter Gene Expression Custom CodeSet; Agilent = Agilent 244K

Table 2. Multivariate overall and progression-free survival by Cox proportional hazards in Nanostring (OTTA/AGO) data set

Gene	Overall Survival		Progression-free survival	
	HR (95% CI)	P-value (corr)	HR (95% CI)	P-value (corr)
<i>ATP13A4</i>			0.92 (0.86-1)	0.038 (0.05)
<i>BMP8B</i>			0.89 (0.8-1)	0.047 (0.05)
<i>CACNA1C</i>	1.28 (1.16-1.41)	5.4x10⁻⁷ (3.2x10⁻⁶)	1.23 (1.12-1.35)	1.45x10⁻⁵ (7x10⁻⁵)
<i>DYRK1B</i>	1.12 (0.98-1.27)	0.10 (0.15)	1.11 (0.96-1.28)	0.156
<i>GAB2</i>	0.92 (0.81-1.06)	0.25 (0.3)	0.93 (0.81-1.07)	0.308 (0.31)
<i>PAK4</i>	1.18 (1.02-1.35)	0.02 (0.04)	1.17 (1.01-1.35)	0.043 (0.05)
<i>TPX2</i>			0.82 (0.73-0.93)	0.002 (0.006)
<i>URI</i>	1.06 (0.94-1.2)	0.34 (0.34)	1.21 (1.06-1.37)	0.003 (0.007)
<i>ZFP36</i>	1.19 (1.1-1.29)	2.8x10⁻⁵ (8.4x10⁻⁵)	1.2 (1.11-1.31)	1.8x10⁻⁵ (7x10⁻⁵)

Multivariate analysis combined each significant gene from the univariate analysis with Stage, age and cohort as cofactors (n=458). The results were not different when residual disease was included as a factor (n=350). HR – hazard ratio. CI – confidence interval, corr = corrected p-value by method of Benjamini and Hochberg (20).

Table 3. Cell line sensitivity data to PF-04691502

Cell Line	GI50 PF502 (nM)	Sensitive (S)/Resistant (R)	GAB2 mRNA	PI3K Pathway	MAPK/ERK Pathway
iGROV1	16	S	High	PTEN	
OAW28*	29	S	High		
RMGII	32	S		PTEN	
EFO21	46	S	High	PTEN	
A2780	56	S			
59M*	77	S	High		
OAW42	81	S	High	PIK3CA	
JHOC7	90	S		PIK3CA	
OVCAR3*	90	S			
FUOV1*	108	S	High		
JHOS3	109	S		PTEN	
KURAMOCHI*	112	S	High		
OVCAR5*	112	S			KRAS
JHOC9	117	S			
TOV112D	151	S			
CH1	200	S			
CAOV3*	216	S	High		
JHOM1	246	R		PTEN	
2008	296	R		PIK3CA	
RMGI	311	R			
OVCAR4*	311	R			
MCAS	320	R		PIK3CA	KRAS
OVCAR8*	339	R			
OVCA432	354	R			
OV90*	461	R			BRAF indel
EFO27	464	R		PTEN	
SKOV3	489	R		PIK3CA	
TOV21G	531	R		PIK3CA/PTEN	KRAS
ES2	576	R			BRAF
JHOC5	641	R			

The mean GI50 was used to define sensitive and resistant cell lines. High *GAB2* expression corresponds to greater than the mean of all cell lines. *High grade serous cell lines according to Domcke et al. (25) or Anglesio *et al.* (10). Note that not all cell lines used here were assessed by these studies.

Figure legends

Figure 1. A. *GAB2* expression is associated with overall patient outcome. Kaplan-Meier curve of overall patient survival of the combined AOCS, OTTA/AGO and TCGA cohorts. HR shown is log rank (GraphPad Prism). **B.** Distribution of *GAB2* genomic aberration (for cases with both CN and expression data) across HGSC subtypes, combining AOCS with TCGA data and considering the Tothill classifier (left) and the TCGA classifier on TCGA cases only (right). **C.** Differences in copy number profiles between *GAB2* high and low expressing samples (TCGA data).

Figure 2. Protein expression. TCGA RPPA data **A.** *GAB2* protein correlates with *GAB2* RNA and copy number. **B.** *GAB2* protein levels are different between different Tothill subtypes (1-way ANOVA $P < 0.01$). Number of samples in each group: C1=72 C2=51 C3=11 C4=94 C5=48. **C.** *GAB2* protein levels are different between different TCGA subtypes (1-way ANOVA $P < 0.01$). Number of samples in each group: D=93 I=75 M=81 P=85. Individual points are outliers according to the method of Tukey (45).

Figure 3. Cell lines with high *GAB2* expression are more responsive to a PI3-kinase inhibitor. Correlation of GI50 to *GAB2* expression for **A.** PF-04691502 (PI3-kinase inhibitor) and **B.** PD-0325901 (MEK inhibitor).

Supplementary Data

Supplementary Table S1. Nanostring and clinical data of OTTA cohort. NA= not available. Survival status: 1 = event (recurrence or death), 0 = no event. NC = not called. Residual disease: “Optimal” = zero, “Sub-optimal” = any.

Supplementary Table S2. Cell line information

Supplementary Table S3. Univariate overall and progression-free survival by Cox proportional hazards in Nanostring data set (n=499)

Supplementary Table S4. Stepwise Akaike Information Criterion model selection. Shown are the R outputs of the AIC model selection algorithm, stepAIC for **A.** Overall survival including residual disease. **B.** Overall survival excluding residual disease (includes more cases) and **C.** Progression-free survival including residual disease.

Supplementary Table S5. A. Enrichment analysis from MetaCore showing top 10 enriched pathways for AOCS (n=211) and TCGA (n=772) genes significantly different between *GAB2* High expression samples and *GAB2* Low expression samples. **B.** Enrichment analysis from MetaCore showing top 10 enriched pathways for the network built from the 40 genes overlapping between AOCS and TCGA differentially expressed genes.

Supplementary Table S6. High *GAB2* expression is associated with decreased *P-PRAS40* in ovarian cancer cell lines. The mean was used to define high (above the mean) and low (below the mean) expressors of either *GAB2* or *P-PRAS40*.

Supplementary Figure S1. A. Nanostring data. Error bars are standard deviation. **B.** Combined cohort progression free survival for ATP13A4 and **C.** BMP8B

Supplementary Figure S2. Histograms showing the frequency distribution and inter-quartile range (IQR) of log₂ expression for each Nanostring gene data set.

Supplementary Figure S3. Kaplan-Meier curves for GAB2 overall survival (OS) and progression free survival (PFS) for each cohort (**A.** OTTA/AGO, **B.** TCGA and **C.** AOCS). Tables below indicate results of curve analysis in GraphPad Prism which do not take into account other important prognostic variables such as age, stage and residual disease.

Supplementary Figure S4. Kaplan-Meier curves for BMP8B and ATP13A4 progression free survival (PFS) for each cohort (OTTA/AGO, TCGA and AOCS – not ATP13A4 not available for TCGA data). Bottom right – expression data for each cohort. Note that each cohort is on a different assay platform.

Supplementary Figure S5. Networks A. Built from GAB2 for TCGA data and **B.** AOCS data. Both find STAT3 to be a hub. **C.** Network built without the requirement of starting from GAB2, using only those genes differentially expressed in both TCGA and AOCS data. Circled elements are those that are present in the gene lists entered into the pathway building. Red and blue dots show genes that are up- and down-regulated respectively. Green arrows are positive interactions, red are negative, grey are unspecified interactions. For further information on the various symbol shapes, please refer to <https://portal.genego.com/legends/MetaCoreQuickReferenceGuide.pdf>.

ID	Histological	IGO Stag	Grade	Patient Age	PFS (days)	PFS Status	OS (days)	OS Status	Res Dis code	ZFP36	PAK4	DYRK1B	GAB2
49	Serous	3	3	56	208	1	239	1	Sub-optimal	high	high	high	low
129	Serous	3	3	65	210	1	459	1	Sub-optimal	high	high	high	low
146	Serous	3	3	56	6055	0	6055	0	Sub-optimal	high	high	low	low
152	Serous	3	2	49	539	1	2417	1	NA	high	high	high	high
261	Serous	4	2	55	172	1	404	1	Sub-optimal	high	med	high	low
351	Serous	3	3	53	4861	0	4861	0	Sub-optimal	low	low	low	high
374	Serous	3	2	56	261	1	1310	1	Sub-optimal	high	low	med	high
379	Serous	3	3	55	251	1	1005	1	NA	low	low	low	low
381	Serous	3	2	67	163	1	1425	1	Sub-optimal	low	med	high	high
386	Serous	3	3	52	973	1	1821	1	Sub-optimal	med	low	med	high
387	Serous	3	3	74	406	1	432	1	Sub-optimal	high	med	high	low
424	Serous	4	3	67	1200	1	3735	0	NA	high	high	high	med
427	Serous	3	2	73	986	0	986	0	Optimal	low	med	low	high
434	Serous	3	2	66	449	1	1959	0	NA	med	high	high	high
440	Serous	4	3	59	600	1	1765	0	NA	high	low	low	med
445	Serous	3	3	66	2400	1	3249	1	NA	high	low	low	med
457	Serous	3	3	74	350	1	1001	1	Optimal	high	med	high	med
459	Serous	3	3	51	949	0	949	0	NA	low	med	med	low
469	Serous	1	2	62	344	1	799	1	Optimal	med	high	high	high
474	Serous	3	2	58	126	1	192	1	Sub-optimal	med	high	high	low
479	Serous	4	2	49	318	1	823	1	NA	high	high	high	med
484	Serous	3	2	63	612	1	1503	1	Sub-optimal	high	low	high	low
485	Serous	3	2	70	280	1	985	1	NA	high	low	low	low
487	Serous	3	3	58	292	1	780	1	Sub-optimal	high	med	high	high
488	Serous	3	3	62	820	1	2028	1	Optimal	med	high	high	high
490	Serous	3	3	59	631	1	1358	1	NA	high	low	low	low
493	Serous	3	2	59	1681	1	2365	0	Optimal	high	low	high	high
496	Serous	3	2	48	525	1	1719	1	NA	med	high	high	med
498	Serous	3	2	57	471	1	1141	1	NA	high	low	low	low
500	Serous	3	3	38	623	1	1827	1	Sub-optimal	high	high	high	high
502	Serous	3	3	47	556	1	1962	1	Sub-optimal	low	med	high	high
507	Serous	3	3	56	3345	0	3345	0	Sub-optimal	high	low	low	med
510	Serous	3	3	57	383	1	1140	1	Sub-optimal	high	low	low	high
511	Serous	3	2	51	2944	0	2944	0	Sub-optimal	high	low	low	low
512	Serous	3	3	37	377	1	741	1	Sub-optimal	med	high	med	high
516	Serous	3	2	72	275	1	275	0	Sub-optimal	high	low	low	med
523	Serous	3	3	58	300	1	300	1	Sub-optimal	low	low	low	high
525	Serous	3	2	53	304	1	589	1	Sub-optimal	high	high	high	low
532	Serous	3	3	71	85	1	245	1	Sub-optimal	med	high	high	low
533	Serous	3	2	23	363	1	557	1	NA	low	med	med	high
536	Serous	3	2	71	109	1	141	1	Sub-optimal	low	low	low	low
541	Serous	3	2	64	700	1	1308	1	Sub-optimal	high	high	high	med
550	Serous	3	3	67	616	1	2738	0	NA	high	high	med	low
552	Serous	3	3	59	2156	0	2156	0	NA	low	med	med	high
558	Serous	3	2	77	158	1	665	1	Sub-optimal	low	high	high	high
561	Serous	3	2	39	1281	1	2471	1	Sub-optimal	low	med	low	low
563	Serous	3	2	50	354	1	2582	1	Sub-optimal	med	low	low	med
570	Serous	3	3	66	1535	1	2160	1	Optimal	high	low	low	med
574	Serous	1	3	52	2510	0	2510	0	Optimal	low	med	low	med
575	Serous	3	2	66	297	1	359	1	Sub-optimal	high	med	low	med
580	Serous	3	3	71	209	1	694	1	Sub-optimal	high	low	low	low
582	Serous	4	3	80	252	1	466	1	Sub-optimal	high	med	low	med
20025	Serous	3	3	80	369	1	1292	1	Optimal	high	low	high	med
20032	Serous	4	2	63	208	1	437	1	Sub-optimal	med	high	med	med
20041	Serous	2	3	43	1119	1	2694	0	Optimal	low	low	low	high
20046	Serous	3	2	65	2345	1	2822	0	Optimal	high	low	low	med
20074	Serous	3	3	58	801	1	2314	1	Optimal	low	high	high	med
22012	Serous	3	3	50	809	1	2008	1	Sub-optimal	med	med	low	high
22013	Serous	3	2	55	2963	0	2963	0	Sub-optimal	med	low	low	med
22020	Serous	3	3	41	272	1	594	1	Sub-optimal	high	low	low	high
22023	Serous	3	2	46	2871	0	2871	0	Sub-optimal	high	med	low	high
22029	Serous	4	3	58	546	1	576	1	Sub-optimal	med	low	low	med
22037	Serous	3	2	78	227	1	504	1	Sub-optimal	high	med	low	low
22046	Serous	3	3	71	291	1	431	1	Sub-optimal	low	high	med	high
22047	Serous	3	3	45	275	1	658	1	Sub-optimal	high	low	low	med
22048	Serous	2	2	70	2802	0	2802	0	Optimal	low	med	low	high
22057	Serous	3	2	60	863	1	2139	0	Optimal	low	low	low	low
22058	Serous	4	3	45	198	1	282	1	Sub-optimal	low	low	med	med
23026	Serous	3	3	57	388	1	1748	1	NA	low	low	low	low
23030	Serous	3	3	67	556	1	2510	0	Sub-optimal	high	low	med	med
23053	Serous	3	3	73	621	1	1863	1	Sub-optimal	high	high	high	high
23055	Serous	3	3	57	451	1	1664	1	Sub-optimal	med	high	high	low
23070	Serous	4	2	48	351	1	766	1	Sub-optimal	low	med	low	med
23074	Serous	1	3	77	612	0	612	1	Optimal	low	low	med	low
23077	Serous	3	3	58	221	1	1041	1	Sub-optimal	high	low	low	high

23084	Serous	3	3	59	649	1	831	0	Sub-optimal	low	high	high	high
23098	Serous	2	2	77	2356	0	2356	0	Optimal	low	low	low	low
23106	Serous	3	3	78	520	1	521	1	NA	med	med	med	high
23116	Serous	3	3	68	187	1	310	1	NA	high	low	low	high
23128	Serous	3	3	65	398	1	2026	1	Sub-optimal	med	low	high	high
23139	Serous	3	2	62	261	1	955	1	Optimal	high	med	low	low
23143	Serous	3	2	57	716	1	1155	1	Sub-optimal	high	high	high	med
23162	Serous	3	3	46	1259	1	2658	0	Optimal	low	med	med	low
23165	Serous	3	2	62	498	1	1624	0	Sub-optimal	low	high	med	high
23167	Serous	3	3	59	357	1	1801	0	Sub-optimal	med	high	low	med
23170	Serous	3	3	49	553	1	820	1	Sub-optimal	med	med	med	low
23172	Serous	3	3	59	245	1	492	1	Sub-optimal	med	high	high	med
23182	Serous	2	2	73	1399	1	2471	1	Optimal	low	med	high	high
23187	Serous	3	3	76	400	1	1151	1	Sub-optimal	low	high	high	high
23197	Serous	3	2	66	198	1	460	1	Sub-optimal	high	med	low	high
23202	Serous	3	3	58	540	1	1486	1	Sub-optimal	low	high	med	low
23204	Serous	1	3	67	1804	0	1804	0	Optimal	med	med	med	med
23212	Serous	3	2	75	92	0	92	0	Sub-optimal	high	low	med	med
23221	Serous	3	3	67	148	1	874	1	Sub-optimal	high	med	high	low
26047	Serous	3	2	72	235	1	1049	1	Sub-optimal	low	low	low	low
27006	Serous	3	2	73	331	1	683	1	Sub-optimal	low	high	high	med
27098	Serous	3	2	61	676	1	768	1	Optimal	med	high	med	low
32013	Serous	3	2	68	67	1	67	1	NA	low	med	high	med
32022	Serous	3	3	68	962	1	1864	1	Sub-optimal	med	med	high	high
32032	Serous	2	3	60	2914	0	2914	0	Optimal	high	high	med	high
32034	Serous	3	3	58	260	1	982	1	Sub-optimal	low	high	high	med
32048	Serous	3	3	69	2575	0	2575	0	Optimal	high	low	low	high
32049	Serous	3	3	57	316	1	1097	1	Sub-optimal	med	high	high	low
32054	Serous	3	2	45	331	1	1202	1	Sub-optimal	med	med	med	med
32055	Serous	4	2	59	228	1	480	1	NA	high	high	high	low
32089	Serous	3	3	49	630	1	1222	1	NA	med	high	med	high
32098	Serous	3	2	77	28	1	28	1	Sub-optimal	high	low	low	low
32103	Serous	3	3	75	565	1	877	1	Optimal	low	high	high	high
34019	Serous	3	3	57	319	1	663	1	Sub-optimal	low	med	med	med
34049	Serous	1	3	56	2633	0	2633	0	Optimal	low	high	high	high
34066	Serous	3	2	47	409	1	787	1	Optimal	high	low	med	low
34078	Serous	3	3	53	1221	1	2596	1	Sub-optimal	med	low	low	high
34080	Serous	3	3	60	310	1	417	1	Sub-optimal	med	high	high	low
34086	Serous	3	3	74	119	0	119	1	Sub-optimal	low	high	high	low
34102	Serous	3	3	70	290	1	709	1	Sub-optimal	low	high	low	high
34103	Serous	3	3	33	450	1	1112	1	Sub-optimal	low	low	med	low
34111	Serous	3	3	60	312	1	675	1	Sub-optimal	med	low	med	low
34113	Serous	3	2	54	2723	0	2723	0	Optimal	low	high	med	low
34117	Serous	3	3	60	350	1	1960	1	NA	low	med	low	low
34125	Serous	3	3	44	999	1	1413	1	Sub-optimal	low	high	high	med
34165	Serous	3	2	43	395	1	1297	1	Sub-optimal	high	low	low	med
34168	Serous	3	3	63	112	1	396	1	Sub-optimal	med	med	med	high
34172	Serous	3	3	71	417	1	1262	1	Sub-optimal	low	low	low	low
34186	Serous	3	2	55	2381	0	2381	0	Sub-optimal	low	med	med	high
34202	Serous	3	3	62	330	1	608	1	Sub-optimal	med	low	high	low
41023	Serous	3	3	58	3149	0	3149	0	Sub-optimal	low	high	high	low
41064	Serous	3	2	54	311	1	890	1	Optimal	low	med	low	med
41079	Serous	3	2	54	813	1	1703	1	Optimal	low	med	high	high
41165	Serous	3	2	53	702	1	1594	1	Sub-optimal	low	med	med	high
41170	Serous	3	3	50	288	1	2072	1	Sub-optimal	high	med	med	low
41192	Serous	4	2	63	118	1	1916	1	Sub-optimal	med	low	med	med
41203	Serous	3	2	76	2430	1	2629	0	Optimal	low	med	high	med
41285	Serous	3	2	63	1668	0	1668	1	Optimal	high	high	high	low
41300	Serous	3	2	56	194	1	680	1	Sub-optimal	med	med	low	high
41307	Serous	1	2	71	2315	0	2315	0	Optimal	med	med	high	high
41310	Serous	3	3	44	400	1	880	1	Sub-optimal	low	low	low	high
41324	Serous	3	3	54	150	1	470	1	Sub-optimal	med	low	low	med
41358	Serous	3	2	52	319	1	951	1	Sub-optimal	med	low	med	high
44078	Serous	3	2	57	1306	1	2029	1	Sub-optimal	med	high	high	low
44080	Serous	3	3	71	194	1	487	1	NA	med	low	low	med
44090	Serous	3	3	60	580	1	3074	0	Sub-optimal	med	med	low	low
44102	Serous	3	3	68	483	1	1153	1	Optimal	low	high	high	high
44110	Serous	1	2	63	3270	0	3270	0	Optimal	med	low	med	low
44163	Serous	4	2	60	600	1	2520	1	Sub-optimal	high	low	med	low
44186	Serous	3	3	48	320	1	619	1	Sub-optimal	high	med	high	high
44189	Serous	3	3	65	974	1	2206	1	Sub-optimal	high	med	low	low
44234	Serous	3	3	61	295	1	518	1	Sub-optimal	high	high	high	low
44242	Serous	3	3	49	465	1	1114	1	Optimal	low	low	med	med
44285	Serous	2	2	59	335	1	2504	1	Sub-optimal	med	high	high	med
44286	Serous	4	3	64	220	1	373	1	Sub-optimal	low	high	med	low
44288	Serous	3	3	57	255	1	833	1	Sub-optimal	high	low	low	low

44303	Serous	3	3	69	338	1	1234	1	NA	med	med	med	high
44306	Serous	3	2	62	310	1	2720	0	Sub-optimal	low	low	med	high
44341	Serous	3	2	46	124	1	340	1	Sub-optimal	low	low	low	low
44349	Serous	4	2	60	199	1	416	1	Sub-optimal	low	low	med	low
44366	Serous	4	3	61	455	1	709	1	Sub-optimal	low	low	low	med
44377	Serous	3	3	56	601	1	2547	0	Sub-optimal	low	high	med	low
44428	Serous	3	3	70	362	1	617	1	Optimal	low	low	low	high
51005	Serous	4	3	66	445	1	1043	1	Sub-optimal	low	low	low	high
51016	Serous	3	2	75	154	1	154	1	NA	low	low	med	med
51053	Serous	3	3	56	2823	0	2823	0	Sub-optimal	med	med	med	high
51062	Serous	3	2	53	546	0	546	0	Sub-optimal	high	high	high	low
51080	Serous	3	3	64	187	1	748	0	Optimal	low	low	low	low
51083	Serous	3	3	65	407	1	1017	1	Sub-optimal	low	med	med	high
51086	Serous	3	3	61	216	1	376	1	Sub-optimal	high	high	high	med
51093	Serous	3	3	57	449	1	1836	1	Sub-optimal	med	low	med	high
51104	Serous	3	2	55	98	1	1028	1	Sub-optimal	high	med	med	low
51125	Serous	3	3	73	243	1	953	1	NA	med	low	med	med
51171	Serous	3	2	70	1283	1	2146	0	Optimal	high	high	med	low
60016	Serous	3	2	55	587	1	1188	1	Sub-optimal	med	high	high	med
60024	Serous	3	2	52	773	1	1021	1	Optimal	low	high	med	low
60048	Serous	3	2	77	303	1	541	1	Sub-optimal	med	high	high	low
60049	Serous	3	3	75	245	0	245	0	Optimal	high	high	med	med
60065	Serous	3	2	69	525	1	2358	1	Sub-optimal	low	high	high	low
60066	Serous	3	2	52	856	1	1484	1	Optimal	high	med	high	low
60067	Serous	4	2	40	467	1	2952	0	Sub-optimal	med	med	high	high
60090	Serous	3	3	79	117	1	346	1	Sub-optimal	high	high	high	low
60091	Serous	3	3	56	325	1	2140	1	NA	high	low	high	med
60107	Serous	2	3	50	1906	0	1906	0	Optimal	med	high	med	high
60111	Serous	1	2	64	1699	0	1699	0	Optimal	med	med	high	high
60163	Serous	3	3	52	2205	0	2205	0	Optimal	high	high	med	high
60169	Serous	1	3	53	1556	0	1556	0	Optimal	med	med	low	high
60174	Serous	3	3	55	334	1	606	1	NA	low	med	low	high
60175	Serous	3	3	68	2426	0	2426	0	NA	high	med	low	low
60180	Serous	3	2	60	2701	0	2701	0	Optimal	med	low	low	med
60181	Serous	1	3	56	228	1	324	0	Optimal	low	med	low	low
60188	Serous	3	3	73	319	1	752	1	Sub-optimal	high	high	high	low
60211	Serous	4	3	55	2196	0	2196	0	Sub-optimal	low	med	low	med
60214	Serous	3	2	64	456	1	2285	1	Sub-optimal	low	low	low	low
60258	Serous	3	2	73	691	1	2307	0	Optimal	med	high	high	high
60318	Serous	3	3	77	891	1	2006	1	Sub-optimal	low	low	med	low
70003	Serous	3	3	53	724	1	1991	1	Optimal	low	high	high	high
70005	Serous	3	3	64	427	1	1211	1	Sub-optimal	med	high	med	high
70039	Serous	3	3	59	544	1	1426	1	Sub-optimal	med	high	high	med
70045	Serous	3	3	75	2940	0	2940	0	Optimal	med	high	med	low
70048	Serous	3	3	58	386	1	1395	1	Sub-optimal	med	low	high	high
70049	Serous	3	3	50	829	1	1291	1	Sub-optimal	high	high	high	med
70054	Serous	3	3	59	330	1	588	1	Sub-optimal	med	high	high	high
70077	Serous	4	2	72	221	1	1703	1	NA	med	low	low	med
70086	Serous	3	3	54	407	1	825	1	Sub-optimal	high	low	med	high
70088	Serous	3	3	52	465	1	1056	1	Sub-optimal	high	med	med	high
70100	Serous	3	3	69	381	1	1436	1	NA	high	high	high	high
70102	Serous	3	3	68	2618	0	2618	0	Sub-optimal	med	low	low	low
70103	Serous	3	2	67	344	1	836	1	NA	high	low	low	low
70107	Serous	3	2	53	400	1	1416	1	NA	high	low	low	med
70118	Serous	3	3	59	344	1	926	1	NA	med	med	high	med
70119	Serous	3	3	70	300	1	1097	1	Sub-optimal	high	low	med	high
70123	Serous	3	3	79	354	0	354	1	NA	high	low	low	low
70125	Serous	3	2	62	543	1	1952	1	Sub-optimal	med	low	med	low
70148	Serous	3	3	80	886	1	1523	1	Optimal	low	low	high	med
92003	Serous	3	3	68	210	1	393	1	Sub-optimal	high	high	high	low
92004	Serous	3	3	76	1325	1	1744	1	Sub-optimal	med	med	med	med
92065	Serous	4	3	53	402	1	767	1	Sub-optimal	high	med	low	low
92071	Serous	3	3	58	411	1	717	1	Sub-optimal	low	low	low	high
92074	Serous	3	3	72	180	1	375	1	NA	high	high	high	low
93006	Serous	3	3	75	582	1	1433	1	NA	high	high	low	high
93031	Serous	3	3	57	1496	1	2200	1	Sub-optimal	med	med	high	med
93050	Serous	3	3	52	380	1	2070	1	Sub-optimal	med	high	high	high
93075	Serous	2	3	71	803	1	823	1	Sub-optimal	med	high	high	low
94019	Serous	4	3	47	340	1	536	1	NA	high	high	high	low
94025	Serous	3	2	53	252	1	480	1	NA	med	med	low	low
94044	Serous	3	3	54	3046	1	3317	1	Optimal	low	low	med	low
94067	Serous	3	3	63	612	1	1259	1	Sub-optimal	med	low	med	low
94070	Serous	3	3	63	1714	1	3171	1	Optimal	low	high	high	high
94082	Serous	3		52	563	1	946	1	NA	high	low	med	high
94084	Serous	3	3	79	425	1	1049	1	Optimal	low	high	high	low
94093	Serous	3	2	54	462	1	462	1	NA	high	high	high	high

94099	Serous	3	3	43	7	0	7	0	Optimal	high	high	high	med
95002	Serous	3		52	2416	1	3404	0	NA	high	low	low	med
95014	Serous	3	3	73	278	1	570	1	NA	high	high	low	low
S001	High_Grade_Se	3	NA	67	322	1	493	1	Optimal	med	low	low	low
S002	High_Grade_Se	3	NA	49	381	1	1191	1	Sub-optimal	high	high	low	high
S003	High_Grade_Se	3	NA	57	681	1	1188	1	Optimal	low	low	low	high
S004	High_Grade_Se	3	NA	61	537	1	1406	0	Sub-optimal	high	high	low	high
S005	High_Grade_Se	3	NA	71	509	1	702	1	Optimal	med	high	high	high
S006	High_Grade_Se	3	NA	65	267	1	951	1	Sub-optimal	low	high	med	med
S007	High_Grade_Se	4	NA	69	142	1	459	1	Sub-optimal	med	high	med	med
S008	High_Grade_Se	3	NA	45	677	1	1077	1	Sub-optimal	med	low	med	med
S009	High_Grade_Se	3	NA	64	386	1	389	1	Optimal	med	med	med	low
S010	High_Grade_Se	4	NA	58	1364	1	1700	0	Sub-optimal	low	med	med	high
S011	High_Grade_Se	3	NA	71	1516	1	1740	0	Optimal	low	med	med	high
S012	High_Grade_Se	3	NA	61	473	1	837	1	Sub-optimal	low	low	low	med
S013	High_Grade_Se	3	NA	55	510	1	1253	1	Optimal	low	med	high	high
S014	High_Grade_Se	2	NA	61	353	1	632	1	Sub-optimal	high	low	low	high
S015	High_Grade_Se	3	NA	54	314	1	1077	1	Sub-optimal	high	low	low	low
S016	High_Grade_Se	3	NA	45	541	1	655	1	Sub-optimal	high	med	high	low
S017	High_Grade_Se	3	NA	52	480	1	935	1	Sub-optimal	low	high	low	low
S018	High_Grade_Se	3	NA	45	425	1	755	1	Optimal	high	high	high	high
S019	High_Grade_Se	3	NA	45	488	1	1117	0	Optimal	low	high	high	med
S020	High_Grade_Se	4	NA	62	310	1	454	1	Sub-optimal	low	high	high	low
S021	High_Grade_Se	4	NA	51	1730	0	1730	0	Optimal	low	high	low	high
S022	High_Grade_Se	3	NA	58	969	1	1403	1	Sub-optimal	low	high	med	med
S023	High_Grade_Se	3	NA	61	406	1	1527	1	Sub-optimal	low	med	high	med
S024	High_Grade_Se	3	NA	54	373	1	561	1	Sub-optimal	low	med	high	high
S025	High_Grade_Se	4	NA	83	317	1	619	1	Sub-optimal	med	low	high	low
S026	High_Grade_Se	3	NA	58	327	1	556	1	Sub-optimal	low	med	med	med
S027	High_Grade_Se	3	NA	64	166	1	770	1	Sub-optimal	high	low	low	low
S028	High_Grade_Se	3	NA	46	483	1	1110	1	Sub-optimal	high	low	low	low
S029	High_Grade_Se	3	NA	69	342	1	824	1	Sub-optimal	low	high	high	med
S030	High_Grade_Se	3	NA	58	416	1	719	1	Sub-optimal	high	low	low	high
S031	High_Grade_Se	3	NA	56	610	1	1065	1	Optimal	high	high	med	high
S032	High_Grade_Se	4	NA	61	379	1	452	1	Sub-optimal	low	high	high	low
S033	High_Grade_Se	3	NA	61	477	1	1231	1	Sub-optimal	high	high	med	med
S034	High_Grade_Se	3	NA	61	54	1	229	1	Sub-optimal	high	high	high	high
S035	High_Grade_Se	3	NA	58	815	1	1323	1	Sub-optimal	low	low	med	med
S036	High_Grade_Se	3	NA	56	300	1	436	1	Sub-optimal	high	med	high	med
S037	High_Grade_Se	3	NA	68	427	1	901	1	Sub-optimal	high	high	med	low
S038	High_Grade_Se	4	NA	72	839	1	1604	1	Sub-optimal	high	med	med	med
S039	High_Grade_Se	3	NA	60	434	1	875	1	Sub-optimal	high	med	low	low
S040	High_Grade_Se	3	NA	56	5	0	5	0	Sub-optimal	low	high	high	med
S041	High_Grade_Se	3	NA	54	1288	1	2486	0	Sub-optimal	med	med	med	high
S042	High_Grade_Se	3	NA	49	210	1	335	1	Sub-optimal	high	high	med	high
S043	High_Grade_Se	4	NA	69	486	1	1389	1	Sub-optimal	low	high	low	high
S044	High_Grade_Se	3	NA	60	351	1	720	1	Sub-optimal	low	low	high	low
S045	High_Grade_Se	4	NA	66	2135	0	2135	0	Sub-optimal	low	high	high	low
S046	High_Grade_Se	3	NA	57	364	1	1219	0	Sub-optimal	low	low	low	high
S047	High_Grade_Se	3	NA	41	674	1	1147	1	Sub-optimal	low	low	low	low
S048	High_Grade_Se	3	NA	44	601	1	1356	1	Optimal	med	high	med	med
S049	High_Grade_Se	3	NA	39	871	1	1767	1	Optimal	med	high	high	high
S050	High_Grade_Se	3	NA	76	468	1	1046	1	Optimal	high	high	high	low
S051	High_Grade_Se	4	NA	60	1335	1	1937	1	Sub-optimal	low	med	high	med
S052	High_Grade_Se	3	NA	54	655	1	1064	1	Sub-optimal	low	med	med	high
S053	High_Grade_Se	4	NA	62	396	1	1027	1	Sub-optimal	low	high	high	low
S054	High_Grade_Se	3	NA	69	840	0	840	0	Sub-optimal	high	high	med	high
S055	High_Grade_Se	3	NA	51	3115	0	3115	0	Optimal	low	low	low	high
S056	High_Grade_Se	3	NA	72	709	1	726	1	Optimal	high	low	low	low
S057	High_Grade_Se	4	NA	56	304	1	618	1	Sub-optimal	low	low	low	low
S058	High_Grade_Se	3	NA	59	750	1	1565	1	Sub-optimal	med	high	low	low
S059	High_Grade_Se	3	NA	61	585	1	810	1	Sub-optimal	high	high	high	high
S061	High_Grade_Se	3	NA	76	196	1	856	1	Sub-optimal	high	high	med	high
S062	High_Grade_Se	3	NA	50	422	1	879	1	Sub-optimal	high	high	high	high
S063	High_Grade_Se	3	NA	53	889	0	889	0	Sub-optimal	med	med	high	high
S064	High_Grade_Se	3	NA	46	692	1	1375	1	Sub-optimal	low	low	low	low
S065	High_Grade_Se	3	NA	39	458	1	823	1	Sub-optimal	low	low	low	med
S066	High_Grade_Se	3	NA	64	2009	0	2009	0	Optimal	low	med	low	high
S067	High_Grade_Se	3	NA	74	52	1	52	1	Sub-optimal	low	high	med	low
S068	High_Grade_Se	3	NA	57	577	1	1774	1	Sub-optimal	high	high	med	med
S069	High_Grade_Se	3	NA	55	518	1	1131	1	Sub-optimal	low	low	low	med
S070	High_Grade_Se	3	NA	67	1035	1	2219	0	Optimal	low	low	med	med
S071	High_Grade_Se	3	NA	65	893	1	1591	1	Sub-optimal	low	med	high	low
S072	High_Grade_Se	3	NA	50	356	1	560	1	Sub-optimal	low	low	med	high
S073	High_Grade_Se	4	NA	34	540	1	1425	1	Optimal	low	high	high	high
S074	High_Grade_Se	3	NA	74	406	1	1224	1	Sub-optimal	low	high	low	low

S075	High_Grade_Se	2	NA	54	2340	0	2340	0	Sub-optimal	high	high	med	high
S076	High_Grade_Se	3	NA	51	561	1	1546	0	Sub-optimal	med	low	med	med
S077	High_Grade_Se	3	NA	60	1511	0	1511	0	Optimal	med	high	low	high
S078	High_Grade_Se	3	NA	69	452	1	846	1	Sub-optimal	med	low	low	low
S079	High_Grade_Se	3	NA	74	511	1	3086	0	Sub-optimal	med	med	med	low
S080	High_Grade_Se	3	NA	49	792	1	1376	1	Sub-optimal	med	med	high	low
S081	High_Grade_Se	3	NA	56	693	1	1312	1	Optimal	low	low	high	low
S082	High_Grade_Se	3	NA	48	229	1	363	1	Sub-optimal	low	high	high	low
S083	High_Grade_Se	3	NA	58	2519	0	2519	0	Sub-optimal	low	low	low	med
S084	High_Grade_Se	3	NA	55	1222	1	2428	1	Optimal	low	low	low	high
S085	High_Grade_Se	3	NA	60	387	1	554	1	Sub-optimal	low	high	high	med
S086	High_Grade_Se	3	NA	46	567	1	2241	0	Optimal	high	high	high	low
S087	High_Grade_Se	3	NA	56	410	1	1783	1	Sub-optimal	med	med	med	high
S088	High_Grade_Se	3	NA	46	351	1	889	1	Sub-optimal	high	high	high	low
S089	High_Grade_Se	3	NA	58	681	1	1536	1	Sub-optimal	med	high	high	high
S090	High_Grade_Se	3	NA	54	1900	1	2328	0	Sub-optimal	low	low	low	high
S091	High_Grade_Se	3	NA	67	288	1	336	1	Optimal	med	high	high	low
S092	High_Grade_Se	3	NA	35	135	1	752	1	Sub-optimal	med	low	low	high
S093	High_Grade_Se	4	NA	72	588	1	1491	0	Optimal	high	med	low	med
S094	High_Grade_Se	4	NA	54	308	1	931	1	Sub-optimal	med	med	med	low
S095	High_Grade_Se	3	NA	74	539	1	1011	1	Sub-optimal	low	low	med	med
S096	High_Grade_Se	3	NA	52	365	1	1080	1	Sub-optimal	high	high	med	low
S097	High_Grade_Se	3	NA	71	179	1	179	1	Sub-optimal	med	high	med	high
S098	High_Grade_Se	3	NA	58	254	1	419	1	Sub-optimal	high	low	low	low
S099	High_Grade_Se	3	NA	54	2268	0	2268	0	Optimal	low	low	med	low
S100	High_Grade_Se	3	NA	58	545	1	1589	1	Sub-optimal	low	low	low	low
S101	High_Grade_Se	3	NA	53	699	1	2128	0	Sub-optimal	low	low	high	high
S102	High_Grade_Se	3	NA	55	225	1	562	1	Sub-optimal	high	high	high	low
S103	High_Grade_Se	4	NA	69	1151	1	2653	0	Sub-optimal	low	med	high	low
S104	High_Grade_Se	2	NA	38	3617	0	3617	0	Optimal	high	low	low	med
S105	High_Grade_Se	3	NA	60	570	1	1323	1	Sub-optimal	high	low	low	high
S106	High_Grade_Se	3	NA	55	482	1	1040	1	Sub-optimal	low	high	high	low
S107	High_Grade_Se	2	NA	59	899	1	1339	1	Optimal	high	low	high	low
S108	High_Grade_Se	4	NA	56	544	1	1323	1	Sub-optimal	high	low	high	low
S109	High_Grade_Se	2	NA	55	3358	0	3358	0	Optimal	low	low	low	high
S110	High_Grade_Se	3	NA	59	746	1	1389	0	Sub-optimal	low	low	high	high
S111	High_Grade_Se	4	NA	74	308	1	404	1	Sub-optimal	high	high	high	med
S112	High_Grade_Se	4	NA	57	623	1	765	1	Sub-optimal	high	med	med	low
S113	High_Grade_Se	2	NA	73	2229	0	2229	0	Sub-optimal	med	med	high	high
S114	High_Grade_Se	3	NA	75	2435	0	2435	0	Sub-optimal	low	low	low	med
S115	High_Grade_Se	3	NA	54	433	1	1501	1	Sub-optimal	low	med	low	med
S116	High_Grade_Se	3	NA	68	82	1	82	1	Sub-optimal	low	med	high	high
S117	High_Grade_Se	3	NA	71	318	1	344	1	Sub-optimal	low	med	high	high
S118	High_Grade_Se	3	NA	64	404	1	792	1	Sub-optimal	high	high	high	low
S119	High_Grade_Se	3	NA	47	437	1	1127	1	Sub-optimal	low	med	high	high
S120	High_Grade_Se	3	NA	68	279	1	522	1	Sub-optimal	low	med	low	low
S121	High_Grade_Se	4	NA	57	270	1	1252	1	Sub-optimal	low	med	high	high
S122	High_Grade_Se	3	NA	63	1060	1	1386	0	Sub-optimal	low	low	low	low
S123	High_Grade_Se	4	NA	70	460	1	702	1	Sub-optimal	med	med	high	low
S124	High_Grade_Se	4	NA	52	276	1	332	1	Sub-optimal	high	high	low	low
S125	High_Grade_Se	3	NA	72	769	1	1972	1	Sub-optimal	low	med	high	high
S126	High_Grade_Se	3	NA	77	286	1	600	1	Sub-optimal	high	high	med	high
S127	High_Grade_Se	3	NA	60	3457	0	3457	0	Sub-optimal	low	low	med	high
S128	High_Grade_Se	3	NA	64	211	1	348	1	Sub-optimal	low	high	high	high
S129	High_Grade_Se	3	NA	54	581	1	2046	1	Sub-optimal	low	med	med	med
S130	High_Grade_Se	3	NA	57	272	1	959	1	Sub-optimal	high	high	high	low
S131	High_Grade_Se	4	NA	57	408	1	408	1	Sub-optimal	high	med	low	high
S132	High_Grade_Se	2	NA	57	2335	0	2335	0	Optimal	low	med	high	high
S133	High_Grade_Se	3	NA	62	524	1	2329	0	Sub-optimal	med	med	high	med
S134	High_Grade_Se	3	NA	54	371	1	831	1	Sub-optimal	high	high	high	high
S135	High_Grade_Se	3	NA	68	3422	0	3422	0	Sub-optimal	low	high	med	low
S136	High_Grade_Se	2	NA	49	2100	0	2100	0	Optimal	med	high	high	high
S137	High_Grade_Se	3	NA	59	524	1	1503	1	Sub-optimal	high	low	high	low
S138	High_Grade_Se	3	NA	66	416	1	503	1	Sub-optimal	med	high	med	high
S139	High_Grade_Se	3	NA	49	1407	0	1407	0	Optimal	low	low	low	med
S140	High_Grade_Se	3	NA	52	383	1	849	1	Sub-optimal	high	high	low	high
S141	High_Grade_Se	4	NA	61	434	1	2483	1	Sub-optimal	med	high	high	med
S142	High_Grade_Se	3	NA	39	612	1	1085	1	Sub-optimal	low	low	low	low
S143	High_Grade_Se	3	NA	60	251	1	851	1	Sub-optimal	high	med	low	low
S144	High_Grade_Se	3	NA	41	452	1	2229	1	Optimal	high	med	high	med
S145	High_Grade_Se	2	NA	50	3277	0	3277	0	Sub-optimal	med	low	low	low
S146	High_Grade_Se	3	NA	55	424	1	955	1	Sub-optimal	high	high	low	low
S147	High_Grade_Se	4	NA	56	413	1	1386	1	Sub-optimal	med	med	med	high
S148	High_Grade_Se	3	NA	60	476	1	1185	1	Sub-optimal	med	low	med	low
S149	High_Grade_Se	3	NA	63	535	1	801	1	Sub-optimal	high	med	low	low
S150	High_Grade_Se	3	NA	55	511	1	983	1	Sub-optimal	low	med	med	med

S151	High_Grade_Se	4	NA	53	444	1	599	1	Sub-optimal	high	high	high	high
S152	High_Grade_Se	3	NA	56	613	1	2189	1	Sub-optimal	low	low	low	low
S153	High_Grade_Se	3	NA	65	2636	0	2636	0	Optimal	low	low	low	low
S154	High_Grade_Se	3	NA	54	315	1	422	1	Sub-optimal	high	low	med	high
S155	High_Grade_Se	3	NA	55	357	1	1464	1	Optimal	high	med	high	high
S156	High_Grade_Se	3	NA	54	2584	0	2584	0	Sub-optimal	med	med	med	low
S157	High_Grade_Se	3	NA	62	380	1	827	1	Optimal	high	low	low	med
S158	High_Grade_Se	3	NA	44	457	1	1422	1	Sub-optimal	high	high	high	low
S159	High_Grade_Se	3	NA	61	847	1	3237	0	Sub-optimal	med	med	low	low
S160	High_Grade_Se	3	NA	53	383	1	1069	1	Optimal	med	med	high	high
S161	High_Grade_Se	3	NA	61	5852	0	5852	0	Sub-optimal	low	low	low	med
S162	High_Grade_Se	3	NA	65	71	1	262	1	Sub-optimal	low	low	high	med
S163	High_Grade_Se	4	NA	59	511	1	661	1	Sub-optimal	low	med	med	high
S164	High_Grade_Se	3	NA	59	2139	0	2139	0	Optimal	low	low	low	med
S165	High_Grade_Se	4	NA	62	583	1	938	1	Optimal	high	med	high	high
S167	High_Grade_Se	3	NA	75	1407	1	2604	1	Optimal	low	high	high	med
S168	High_Grade_Se	3	NA	67	128	1	2742	1	Sub-optimal	high	high	high	med
S169	High_Grade_Se	3	NA	81	2323	1	2505	1	Sub-optimal	high	high	high	low
S170	High_Grade_Se	3	NA	76	452	1	758	1	Sub-optimal	high	high	low	med
S171	High_Grade_Se	3	NA	70	645	1	890	1	Sub-optimal	high	high	high	low
S172	High_Grade_Se	3	NA	62	715	1	2543	1	Sub-optimal	high	low	med	med
S173	High_Grade_Se	4	NA	73	642	1	1485	1	Sub-optimal	high	med	med	high
S174	High_Grade_Se	3	NA	69	790	1	1056	1	Sub-optimal	med	low	med	low
S175	High_Grade_Se	4	NA	58	71	1	877	1	Sub-optimal	high	high	high	high
S176	High_Grade_Se	3	NA	71	3165	1	3165	1	Optimal	high	high	low	low
S177	High_Grade_Se	3	NA	72	365	1	603	1	Sub-optimal	high	low	med	med
S178	High_Grade_Se	3	NA	62	349	1	937	1	Optimal	low	low	low	med
S179	High_Grade_Se	3	NA	56	318	1	539	1	Sub-optimal	high	low	low	med
S180	High_Grade_Se	4	NA	52	505	1	1489	1	Sub-optimal	high	low	low	med
S181	High_Grade_Se	3	NA	47	422	1	704	1	Sub-optimal	med	med	med	high
S182	High_Grade_Se	3	NA	60	766	1	2021	1	Sub-optimal	high	high	high	high
S183	High_Grade_Se	3	NA	65	1886	1	2009	1	Sub-optimal	low	high	low	high
S184	High_Grade_Se	3	NA	67	335	1	663	1	Sub-optimal	med	med	low	high
S185	High_Grade_Se	3	NA	54	387	1	1206	1	Sub-optimal	med	med	med	high
S186	High_Grade_Se	3	NA	59	4498	1	4498	1	Sub-optimal	med	low	low	med
S187	High_Grade_Se	3	NA	58	490	1	585	1	Sub-optimal	low	low	med	high
S188	High_Grade_Se	2	NA	53	1825	0	1825	0	Optimal	low	med	high	med
S189	High_Grade_Se	3	NA	66	601	1	1326	1	Sub-optimal	high	high	high	high
S190	High_Grade_Se	3	NA	49	742	1	1072	0	Sub-optimal	med	low	low	low
S191	High_Grade_Se	3	NA	61	352	1	1337	1	Sub-optimal	low	low	med	med
S192	High_Grade_Se	3	NA	29	1771	1	4222	0	Optimal	low	low	low	low
S193	High_Grade_Se	3	NA	51	431	1	745	1	Sub-optimal	med	med	med	high
S194	High_Grade_Se	3	NA	63	616	1	801	1	Sub-optimal	high	high	high	low
S195	High_Grade_Se	3	NA	55	822	1	2152	1	Sub-optimal	low	med	high	high
S196	High_Grade_Se	3	NA	41	268	1	1848	1	Sub-optimal	low	med	med	low
S197	High_Grade_Se	3	NA	46	2327	1	2404	0	Optimal	med	low	med	high
S198	High_Grade_Se	2	NA	49	1313	0	1313	0	Optimal	low	med	high	low
S199	High_Grade_Se	4	NA	70	700	0	700	0	Sub-optimal	med	med	high	high
S200	High_Grade_Se	3	NA	54	393	1	776	1	Sub-optimal	low	med	low	high
S201	High_Grade_Se	3	NA	66	596	1	695	1	Sub-optimal	high	high	high	med
S202	High_Grade_Se	4	NA	55	244	1	387	1	Sub-optimal	high	med	high	high
S203	High_Grade_Se	3	NA	51	1044	1	1735	1	Optimal	high	med	med	high
S350	High_Grade_Se	3	NA	49	422	1	1534	1	Optimal	med	low	low	low
S351	High_Grade_Se	3	NA	39	623	1	702	1	Optimal	med	med	low	low
S352	High_Grade_Se	2	NA	77	700	1	1653	1	Optimal	low	med	high	high
S353	High_Grade_Se	3	NA	74	6573	0	6573	1	Optimal	med	med	med	low
S354	High_Grade_Se	2	NA	80	990	0	990	0	Optimal	low	high	high	high
S355	High_Grade_Se	2	NA	76	3169	0	3169	1	Optimal	med	med	med	med
S356	High_Grade_Se	1	NA	79	1279	0	1279	1	Optimal	low	med	low	high
S357	High_Grade_Se	2	NA	64	488	1	732	1	Optimal	low	low	high	high
S358	High_Grade_Se	1	NA	80	714	1	808	1	Optimal	low	med	med	low
S359	High_Grade_Se	3	NA	64	658	1	1675	1	Optimal	med	low	low	high
S360	High_Grade_Se	2	NA	85	1875	0	1875	1	Optimal	low	low	low	low
S361	High_Grade_Se	2	NA	66	2295	1	4341	1	Optimal	high	high	high	high
S362	High_Grade_Se	2	NA	59	7729	0	7729	0	Optimal	med	med	high	low
S363	High_Grade_Se	2	NA	67	3625	0	3625	0	Optimal	low	low	low	high
S364	High_Grade_Se	2	NA	58	1787	1	3042	1	Optimal	low	med	low	high
S365	High_Grade_Se	2	NA	66	4509	0	4509	0	Optimal	low	high	high	high
S366	High_Grade_Se	3	NA	64	610	1	1203	1	Optimal	low	high	high	low
S367	High_Grade_Se	2	NA	63	4693	0	4693	0	Optimal	low	low	med	high
S368	High_Grade_Se	2	NA	78	4618	0	4618	1	Optimal	med	high	high	med
S369	High_Grade_Se	3	NA	48	256	0	256	0	Optimal	low	med	low	med
S370	High_Grade_Se	2	NA	55	3429	0	3429	1	Optimal	low	med	med	high
S371	High_Grade_Se	1	NA	53	4449	0	4449	0	Optimal	low	high	med	high
S372	High_Grade_Se	3	NA	47	213	1	759	1	Optimal	high	low	low	high
S373	High_Grade_Se	3	NA	48	381	1	1145	1	Optimal	low	med	high	low

S374	High_Grade_Se	2	NA	48	1296	1	2003	1	Optimal	low	med	med	high
S375	High_Grade_Se	1	NA	52	1799	0	1799	0	Optimal	low	high	med	low
S376	High_Grade_Se	3	NA	49	513	1	3358	1	Optimal	med	low	high	med
S377	High_Grade_Se	2	NA	41	1378	1	2063	1	Optimal	low	low	low	low
S378	High_Grade_Se	1	NA	38	8606	0	8606	0	Optimal	low	low	low	low
S379	High_Grade_Se	2	NA	49	3250	0	3250	1	Optimal	high	low	low	low
S380	High_Grade_Se	1	NA	75	4115	0	4115	1	Optimal	low	low	med	med
S381	High_Grade_Se	2	NA	52	4171	1	4734	1	Optimal	med	high	high	high
S382	High_Grade_Se	3	NA	52	3527	0	3527	1	Optimal	med	low	low	high
S383	High_Grade_Se	3	NA	44	350	1	665	1	Sub-optimal	low	high	low	low
S384	High_Grade_Se	3	NA	61	378	0	378	1	Sub-optimal	low	med	high	med
S385	High_Grade_Se	3	NA	71	394	1	769	1	Sub-optimal	high	low	low	med
S386	High_Grade_Se	3	NA	63	294	1	445	1	Sub-optimal	low	low	med	low
S387	High_Grade_Se	3	NA	60	504	1	1052	1	Sub-optimal	high	high	high	med
S388	High_Grade_Se	3	NA	59	403	1	815	1	Sub-optimal	high	high	high	low
S389	High_Grade_Se	3	NA	64	471	1	983	1	Sub-optimal	high	low	low	low
S390	High_Grade_Se	3	NA	55	67	1	283	1	Sub-optimal	low	low	med	low
S391	High_Grade_Se	3	NA	56	307	1	707	1	Sub-optimal	high	high	med	med
S392	High_Grade_Se	3	NA	90	639	0	639	1	Sub-optimal	high	high	high	low
S393	High_Grade_Se	3	NA	75	1341	0	1341	1	Sub-optimal	low	high	high	low
S394	High_Grade_Se	3	NA	61	407	1	1696	1	Sub-optimal	med	high	high	high
S395	High_Grade_Se	3	NA	72	328	1	507	1	Sub-optimal	high	high	med	med
S396	High_Grade_Se	3	NA	84	236	1	646	1	Sub-optimal	med	high	high	low
S397	High_Grade_Se	3	NA	47	4520	0	4520	0	Sub-optimal	low	low	high	low
S398	High_Grade_Se	3	NA	47	413	1	848	1	Sub-optimal	low	low	low	high
S399	High_Grade_Se	3	NA	61	735	1	2531	1	Sub-optimal	low	high	high	med
S400	High_Grade_Se	3	NA	77	599	1	938	1	Sub-optimal	high	med	high	med
S401	High_Grade_Se	3	NA	65	740	0	740	1	Sub-optimal	high	high	high	med
S402	High_Grade_Se	4	NA	60	539	1	1556	1	Sub-optimal	med	low	high	low
S403	High_Grade_Se	3	NA	62	224	1	240	1	Sub-optimal	med	med	med	low
S404	High_Grade_Se	3	NA	80	45	1	104	1	Sub-optimal	med	med	med	low
S405	High_Grade_Se	3	NA	68	779	1	2163	1	Sub-optimal	high	low	med	high
S406	High_Grade_Se	3	NA	70	516	1	661	1	Sub-optimal	high	med	med	low
S407	High_Grade_Se	3	NA	61	466	1	4495	0	Sub-optimal	med	med	low	med
S408	High_Grade_Se	3	NA	54	699	1	943	1	Sub-optimal	high	high	high	low
S409	High_Grade_Se	3	NA	48	283	1	430	1	Sub-optimal	high	med	high	low
S410	High_Grade_Se	3	NA	71	1207	1	1383	1	Sub-optimal	high	med	med	med
S411	High_Grade_Se	3	NA	69	952	1	1411	1	Sub-optimal	med	low	low	med
S412	High_Grade_Se	3	NA	42	505	0	3972	1	Sub-optimal	low	low	low	high
S413	High_Grade_Se	3	NA	59	203	1	446	1	Sub-optimal	high	high	med	med
S414	High_Grade_Se	3	NA	60	226	1	295	1	Sub-optimal	med	low	low	med
S415	High_Grade_Se	2	NA	72	168	1	187	1	Sub-optimal	high	high	med	high
S416	High_Grade_Se	4	NA	67	131	1	2282	1	Optimal	high	low	low	low
S417	High_Grade_Se	3	NA	53	116	1	347	1	Sub-optimal	high	med	low	med
S419	High_Grade_Se	3	NA	57	204	1	1884	1	Sub-optimal	low	high	high	high
S420	High_Grade_Se	3	NA	70	222	1	821	1	Sub-optimal	high	low	low	med
S421	High_Grade_Se	4	NA	60	357	1	734	1	Sub-optimal	med	med	med	high
S422	High_Grade_Se	4	NA	47	179	1	2035	1	Sub-optimal	high	low	low	low
S423	High_Grade_Se	3	NA	53	2045	1	2045	0	Sub-optimal	high	low	low	low
S424	High_Grade_Se	4	NA	70	260	1	916	0	Sub-optimal	med	high	high	low
S427	High_Grade_Se	3	NA	67	2166	1	2211	0	Sub-optimal	high	low	low	high
S428	High_Grade_Se	3	NA	52	316	1	739	1	Optimal	med	low	low	high
S429	High_Grade_Se	3	NA	42	836	1	3430	0	Sub-optimal	high	low	low	low
S431	High_Grade_Se	3	NA	68	166	1	1095	1	Sub-optimal	high	high	high	med
S432	High_Grade_Se	3	NA	43	442	1	1786	1	Sub-optimal	high	med	low	med
S434	High_Grade_Se	3	NA	74	224	1	262	1	NA	high	med	low	low
S435	High_Grade_Se	3	NA	73	227	1	283	1	Sub-optimal	high	high	high	low
S437	High_Grade_Se	3	NA	63	308	1	781	0	Sub-optimal	med	low	low	low
S438	High_Grade_Se	3	NA	50	332	1	647	1	Sub-optimal	high	low	low	high
S439	High_Grade_Se	3	NA	62	779	0	2829	0	NA	high	med	low	low
S441	High_Grade_Se	3	NA	53	1159	0	2391	0	Optimal	low	low	low	high
S442	High_Grade_Se	3	NA	57	288	0	1422	1	Sub-optimal	low	low	low	med
S444	High_Grade_Se	3	NA	63	247	1	824	1	Sub-optimal	high	low	low	low
S446	High_Grade_Se	3	NA	65	176	1	960	0	Sub-optimal	high	med	med	high
S447	High_Grade_Se	2	NA	61	345	1	972	1	Sub-optimal	high	high	med	low
S448	High_Grade_Se	3	NA	56	831	1	2274	0	Sub-optimal	high	high	high	med
S449	High_Grade_Se	3	NA	67	999	0	2262	0	Sub-optimal	med	low	low	low
S450	High_Grade_Se	3	NA	59	267	1	354	1	Sub-optimal	high	med	med	low
S451	High_Grade_Se	3	NA	38	321	1	399	1	Sub-optimal	high	med	low	med
S452	High_Grade_Se	3	NA	49	362	0	700	1	Sub-optimal	low	med	med	high
S453	High_Grade_Se	3	NA	59	496	1	2012	0	Sub-optimal	med	low	low	low
S454	High_Grade_Se	3	NA	53	390	0	846	1	Sub-optimal	high	med	med	low
S455	High_Grade_Se	3	NA	52	308	1	1515	0	Sub-optimal	high	high	high	high
S456	High_Grade_Se	4	NA	64	203	1	420	1	Sub-optimal	low	med	high	low
S457	High_Grade_Se	2	NA	79	357	1	441	1	Sub-optimal	low	low	low	high
S458	High_Grade_Se	4	NA	62	274	1	806	0	Sub-optimal	med	med	low	low

S459	High_Grade_Se	3	NA	66	408	1	2264	1	Sub-optimal	low	high	high	med
S460	High_Grade_Se	3	NA	57	365	1	1853	1	Sub-optimal	low	med	med	low
S461	High_Grade_Se	3	NA	66	400	1	1189	1	Sub-optimal	high	high	high	med
S462	High_Grade_Se	3	NA	38	217	1	615	1	Sub-optimal	med	low	low	low
S463	High_Grade_Se	3	NA	54	3692	0	3692	0	Sub-optimal	low	med	low	low
S464	High_Grade_Se	3	NA	54	1153	1	3904	0	Sub-optimal	low	low	med	low
S465	High_Grade_Se	1	NA	43	3539	0	3539	0	Optimal	med	low	low	med
S466	High_Grade_Se	3	NA	46	824	1	3090	1	Sub-optimal	med	high	high	med
S467	High_Grade_Se	3	NA	55	3112	1	3634	0	Sub-optimal	low	low	low	low
S468	High_Grade_Se	3	NA	67	917	1	2427	1	Sub-optimal	low	low	low	med
S469	High_Grade_Se	1	NA	60	2834	1	3298	0	Optimal	high	low	low	med
S471	High_Grade_Se	3	NA	52	554	1	906	1	Sub-optimal	med	low	med	low
S472	High_Grade_Se	3	NA	83	70	1	70	1	Sub-optimal	med	low	med	low
S473	High_Grade_Se	3	NA	76	1076	1	1932	1	Sub-optimal	high	low	low	med
S474	High_Grade_Se	3	NA	57	731	1	2076	1	Optimal	med	high	low	high
S475	High_Grade_Se	3	NA	43	3239	0	3239	0	Optimal	low	low	low	low
S476	High_Grade_Se	2	NA	77	1479	1	3261	0	Optimal	high	med	low	med
S477	High_Grade_Se	3	NA	75	620	1	1253	1	Sub-optimal	low	high	low	med
S478	High_Grade_Se	3	NA	44	1567	1	2380	1	Sub-optimal	high	med	low	high
S479	High_Grade_Se	3	NA	64	461	1	2804	0	Sub-optimal	low	low	low	med
S480	High_Grade_Se	3	NA	69	3957	0	3957	0	Sub-optimal	low	high	high	high
S481	High_Grade_Se	3	NA	56	189	1	241	1	Sub-optimal	low	high	high	low
S482	High_Grade_Se	3	NA	83	246	1	246	1	Sub-optimal	med	low	low	low
S483	High_Grade_Se	3	NA	56	2160	0	2160	0	Optimal	low	low	low	high
S484	High_Grade_Se	1	NA	72	2868	0	2868	0	Sub-optimal	low	high	low	low
S485	High_Grade_Se	3	NA	48	327	1	833	1	Sub-optimal	low	high	low	high
S486	High_Grade_Se	3	NA	76	817	1	2168	1	Sub-optimal	high	high	high	high
S487	High_Grade_Se	3	NA	70	476	1	1944	1	Sub-optimal	low	high	high	low
S488	High_Grade_Se	3	NA	49	648	1	2444	1	Sub-optimal	low	high	med	med
S489	High_Grade_Se	3	NA	53	520	1	1158	1	Sub-optimal	high	high	med	med
S490	High_Grade_Se	3	NA	54	375	1	695	1	Optimal	low	high	high	high
S491	High_Grade_Se	4	NA	64	310	1	1074	1	Sub-optimal	low	low	high	high
S492	High_Grade_Se	3	NA	50	294	1	802	1	Sub-optimal	high	low	low	med
S493	High_Grade_Se	3	NA	69	324	1	1665	1	Sub-optimal	high	low	med	high
S494	High_Grade_Se	3	NA	49	1447	0	1447	1	Sub-optimal	med	med	med	high
S495	High_Grade_Se	3	NA	82	482	1	737	1	Sub-optimal	high	low	low	high
S496	High_Grade_Se	3	NA	52	125	1	721	1	Sub-optimal	med	low	low	low
S497	High_Grade_Se	2	NA	64	695	1	1312	1	Optimal	med	med	low	low
S498	High_Grade_Se	3	NA	62	752	1	1353	1	Sub-optimal	low	high	high	low
S499	High_Grade_Se	3	NA	58	468	1	1643	1	Sub-optimal	low	low	med	low
S500	High_Grade_Se	3	NA	67	338	1	2137	1	Sub-optimal	low	low	low	low
S501	High_Grade_Se	3	NA	72	526	1	1464	1	Sub-optimal	low	low	low	high
S502	High_Grade_Se	4	NA	52	546	1	2226	1	Sub-optimal	high	high	high	low
S503	High_Grade_Se	3	NA	54	435	1	1206	1	Optimal	low	med	low	low
S504	High_Grade_Se	3	NA	55	303	1	1145	1	Sub-optimal	high	low	low	med
S505	High_Grade_Se	2	NA	76	446	1	2018	1	Optimal	high	low	med	low
TCGA-04-1331	Serous	3	3	78	459	1	1336	1	Sub-optimal	med	med	high	low
TCGA-04-1332	Serous	3	3	70	393	1	1247	1	Sub-optimal	high	high	high	high
TCGA-04-1335	Serous	1	NA	60	55	1	55	1	NA	low	low	high	low
TCGA-04-1336	Serous	3	3	55	1495	0	1495	0	Optimal	med	med	high	high
TCGA-04-1337	Serous	3	2	78	61	1	61	1	Optimal	med	med	med	low
TCGA-04-1338	Serous	3	3	78	380	1	1418	0	Sub-optimal	high	med	med	high
TCGA-04-1342	Serous	4	2	80	563	1	563	1	Sub-optimal	high	high	med	med
TCGA-04-1343	Serous	4	3	72	361	1	361	1	Sub-optimal	high	low	high	high
TCGA-04-1346	Serous	3	2	73	1993	0	1993	0	NA	low	med	high	high
TCGA-04-1347	Serous	4	3	81	1919	0	1919	0	Optimal	low	high	high	low
TCGA-04-1348	Serous	3	3	44	575	1	1483	1	Sub-optimal	high	med	high	low
TCGA-04-1349	Serous	4	3	69	428	1	656	1	NA	high	low	high	med
TCGA-04-1350	Serous	3	3	46	111	1	1946	1	Sub-optimal	low	med	high	high
TCGA-04-1356	Serous	2	3	62	156	1	1499	1	NA	low	low	high	low
TCGA-04-1361	Serous	3	3	57	927	1	989	0	Optimal	high	high	med	high
TCGA-04-1362	Serous	2	3	59	223	1	1348	1	Sub-optimal	high	med	med	high
TCGA-04-1364	Serous	3	3	61	288	1	1024	1	Sub-optimal	low	med	high	low
TCGA-04-1365	Serous	3	3	87	1328	1	2329	0	NA	low	low	high	low
TCGA-04-1367	Serous	3	3	50	2174	0	2174	0	Optimal	med	low	high	high
TCGA-04-1371	Serous	3	NA	58	2506	0	2506	0	Sub-optimal	low	high	high	low
TCGA-04-1514	Serous	3	2	45	1221	1	1720	1	Optimal	high	high	low	low
TCGA-04-1517	Serous	3	3	79	349	1	608	1	Sub-optimal	low	high	high	low
TCGA-04-1525	Serous	3	3	47	213	1	1167	1	Sub-optimal	med	med	high	med
TCGA-04-1530	Serous	3	3	68	350	1	3622	1	Sub-optimal	high	med	low	high
TCGA-04-1536	Serous	4	3	60	498	1	885	1	Sub-optimal	low	high	med	med
TCGA-04-1542	Serous	3	2	52	1020	1	2561	1	Sub-optimal	low	low	high	high
TCGA-04-1638	Serous	4	3	57	298	1	1686	1	Optimal	med	low	low	med
TCGA-04-1646	Serous	3	3	60	508	1	848	1	Sub-optimal	low	high	high	low
TCGA-04-1648	Serous	3	2	57	412	1	871	1	Sub-optimal	low	low	low	low
TCGA-04-1649	Serous	3	3	74	1672	1	1966	0	Sub-optimal	low	high	high	med

TCGA-04-1651	Serous	3	3	53	990	1	1102	1	Sub-optimal	high	high	high	low
TCGA-04-1652	Serous	3	2	76	880	1	969	1	NA	high	high	high	high
TCGA-04-1654	Serous	3	2	69	808	1	1451	1	Sub-optimal	med	low	high	low
TCGA-04-1655	Serous	3	2	49	819	1	1380	1	Optimal	high	med	med	low
TCGA-09-0364	Serous	2	3	80	395	1	887	1	Sub-optimal	low	high	high	high
TCGA-09-0365	Serous	3	NA	70	251	1	288	1	Optimal	low	high	med	low
TCGA-09-0366	Serous	3	3	55	190	1	1757	1	Sub-optimal	high	low	low	high
TCGA-09-0367	Serous	3	3	67	547	1	547	1	Sub-optimal	high	med	low	high
TCGA-09-0369	Serous	3	3	56	274	1	1082	1	Optimal	med	high	low	high
TCGA-09-1659	Serous	3	3	51	304	1	304	1	Sub-optimal	med	low	med	med
TCGA-09-1661	Serous	3	3	75	1169	1	1169	1	Sub-optimal	low	low	med	low
TCGA-09-1662	Serous	4	3	58	1046	1	2717	1	Sub-optimal	low	med	low	high
TCGA-09-1664	Serous	3	NA	37	2279	1	2279	1	Sub-optimal	low	low	low	low
TCGA-09-1665	Serous	3	2	73	468	1	1266	1	Optimal	low	low	high	med
TCGA-09-1666	Serous	3	3	57	480	1	1752	0	Optimal	low	low	low	high
TCGA-09-1667	Serous	2	2	61	460	1	1882	0	Optimal	low	low	low	high
TCGA-09-1670	Serous	3	3	57	547	1	547	0	Optimal	med	low	low	high
TCGA-09-1672	Serous	3	NA	78	178	0	178	0	NA	low	med	low	med
TCGA-09-1675	Serous	1	NA	50	2967	0	2967	0	Optimal	low	low	med	low
TCGA-09-2053	Serous	3	3	72	1209	0	1209	0	Optimal	med	high	high	med
TCGA-09-2054	Serous	3	3	58	637	1	637	1	Sub-optimal	high	med	low	low
TCGA-09-2056	Serous	3	3	62	379	0	379	0	Optimal	low	low	low	low
TCGA-10-0925	Serous	3	NA	58	558	1	1652	1	Sub-optimal	high	low	high	low
TCGA-10-0926	Serous	3	3	63	287	1	788	1	Sub-optimal	high	high	low	med
TCGA-10-0927	Serous	3	2	65	1001	1	2490	1	Sub-optimal	high	high	high	med
TCGA-10-0928	Serous	3	3	71	563	1	563	1	Sub-optimal	low	med	med	high
TCGA-10-0930	Serous	3	3	70	680	1	1040	1	Sub-optimal	high	high	high	low
TCGA-10-0931	Serous	3	3	44	300	1	1000	1	Sub-optimal	high	med	high	high
TCGA-10-0933	Serous	3	3	77	356	1	446	1	Optimal	low	high	high	low
TCGA-10-0934	Serous	3	3	50	111	1	204	1	Sub-optimal	high	med	med	low
TCGA-10-0935	Serous	3	3	68	1078	1	1078	1	Sub-optimal	low	high	high	med
TCGA-10-0936	Serous	3	3	69	1089	1	1123	1	Sub-optimal	med	low	low	high
TCGA-10-0937	Serous	3	3	44	235	1	608	1	Sub-optimal	med	med	med	high
TCGA-10-0938	Serous	3	3	80	362	1	636	1	Sub-optimal	med	low	med	low
TCGA-13-0714	Serous	4	3	55	110	1	189	1	Sub-optimal	high	high	high	high
TCGA-13-0717	Serous	3	3	54	294	1	748	1	Sub-optimal	high	high	high	high
TCGA-13-0720	Serous	3	3	48	292	1	1355	1	Sub-optimal	high	high	med	high
TCGA-13-0723	Serous	3	3	63	210	1	1204	1	Sub-optimal	med	med	low	high
TCGA-13-0724	Serous	4	3	72	83	1	83	1	Sub-optimal	high	high	high	low
TCGA-13-0725	Serous	3	3	44	190	1	377	1	Sub-optimal	med	med	low	med
TCGA-13-0726	Serous	3	NA	55	392	1	949	1	Sub-optimal	low	med	low	high
TCGA-13-0727	Serous	3	3	71	253	1	462	1	Sub-optimal	med	high	med	low
TCGA-13-0730	Serous	3	3	71	542	1	542	1	Sub-optimal	high	high	high	low
TCGA-13-0751	Serous	3	NA	44	653	1	1678	1	Sub-optimal	high	high	med	high
TCGA-13-0755	Serous	4	3	75	34	1	76	1	Sub-optimal	high	low	low	high
TCGA-13-0757	Serous	3	3	71	293	1	340	1	Sub-optimal	high	high	high	low
TCGA-13-0758	Serous	4	NA	60	212	1	346	1	Sub-optimal	high	low	low	low
TCGA-13-0760	Serous	4	3	63	351	1	351	1	Optimal	high	high	med	high
TCGA-13-0761	Serous	4	3	51	424	1	1036	0	Optimal	high	high	high	high
TCGA-13-0762	Serous	3	3	65	981	0	981	0	Optimal	low	low	med	high
TCGA-13-0764	Serous	4	3	62	272	1	944	0	Sub-optimal	low	high	med	high
TCGA-13-0765	Serous	3	3	50	668	1	869	0	Sub-optimal	low	low	med	high
TCGA-13-0766	Serous	3	3	42	628	1	651	0	Sub-optimal	low	med	med	low
TCGA-13-0768	Serous	3	3	73	257	0	257	0	Sub-optimal	high	med	low	low
TCGA-13-0791	Serous	3	3	58	281	1	1184	0	Optimal	med	med	low	low
TCGA-13-0792	Serous	3	3	40	816	1	1117	0	Optimal	low	low	high	med
TCGA-13-0793	Serous	4	3	40	351	1	873	0	Sub-optimal	med	med	med	low
TCGA-13-0794	Serous	3	3	60	845	1	923	0	Sub-optimal	low	high	med	low
TCGA-13-0795	Serous	3	3	66	325	1	596	0	Sub-optimal	high	high	med	low
TCGA-13-0797	Serous	3	3	49	265	0	265	0	Sub-optimal	high	high	med	high
TCGA-13-0799	Serous	3	3	44	237	0	237	0	Optimal	high	high	low	low
TCGA-13-0800	Serous	3	3	52	247	0	247	0	Optimal	med	high	high	low
TCGA-13-0801	Serous	3	3	46	252	0	252	0	Optimal	med	med	low	low
TCGA-13-0802	Serous	3	3	79	249	0	249	0	Optimal	low	high	high	high
TCGA-13-0803	Serous	3	3	81	337	1	1334	1	Optimal	low	high	high	med
TCGA-13-0804	Serous	3	3	73	329	1	1073	1	Sub-optimal	med	low	low	med
TCGA-13-0805	Serous	3	3	57	177	1	1074	1	Sub-optimal	low	low	med	low
TCGA-13-0807	Serous	3	3	54	414	1	414	1	Sub-optimal	high	high	high	med
TCGA-13-0883	Serous	3	3	61	819	1	2097	1	Sub-optimal	med	med	med	high
TCGA-13-0884	Serous	3	3	39	1251	1	3260	1	Sub-optimal	low	med	high	high
TCGA-13-0885	Serous	3	3	70	2780	0	2780	0	Sub-optimal	low	med	high	med
TCGA-13-0886	Serous	3	3	67	2259	0	2259	0	Sub-optimal	high	low	med	med
TCGA-13-0887	Serous	3	3	42	514	1	2028	1	Sub-optimal	high	med	high	med
TCGA-13-0888	Serous	3	3	78	2141	0	2141	0	Optimal	med	high	high	med
TCGA-13-0889	Serous	4	NA	75	1881	0	1881	0	Sub-optimal	low	med	med	low
TCGA-13-0890	Serous	3	3	56	2068	0	2068	0	Sub-optimal	med	high	med	low

TCGA-13-0891	Serous	4	3	73	762	1	2099	0	Optimal	low	med	low	high
TCGA-13-0893	Serous	3	3	48	461	1	1319	1	Sub-optimal	med	low	high	high
TCGA-13-0894	Serous	3	3	53	565	1	1509	1	Sub-optimal	med	high	high	med
TCGA-13-0897	Serous	3	3	54	554	1	1748	0	Sub-optimal	low	med	low	high
TCGA-13-0899	Serous	3	3	60	547	1	1708	0	Sub-optimal	med	low	med	high
TCGA-13-0900	Serous	3	3	59	1736	0	1736	0	NA	med	med	med	high
TCGA-13-0901	Serous	3	3	41	390	1	589	0	Sub-optimal	med	med	high	low
TCGA-13-0904	Serous	3	3	63	330	1	1470	0	Sub-optimal	low	low	high	low
TCGA-13-0905	Serous	3	3	51	1455	0	1455	0	NA	med	high	low	high
TCGA-13-0906	Serous	3	3	50	1367	0	1367	0	Sub-optimal	low	high	med	med
TCGA-13-0908	Serous	4	3	58	552	1	1364	0	Sub-optimal	med	low	med	high
TCGA-13-0910	Serous	3	3	58	1128	0	1128	0	Sub-optimal	high	med	low	high
TCGA-13-0911	Serous	4	3	55	279	1	843	0	Sub-optimal	high	low	med	med
TCGA-13-0912	Serous	3	3	58	469	1	1036	0	Optimal	low	high	high	low
TCGA-13-0913	Serous	3	3	53	871	1	912	0	Optimal	low	high	med	low
TCGA-13-0916	Serous	3	3	49	644	0	644	0	Optimal	high	high	high	high
TCGA-13-0919	Serous	3	3	52	453	0	453	0	Optimal	high	low	med	med
TCGA-13-0920	Serous	3	3	65	297	1	420	0	Sub-optimal	low	med	high	high
TCGA-13-0921	Serous	3	3	72	141	0	141	0	Optimal	low	low	high	low
TCGA-13-0923	Serous	3	3	74	195	0	195	0	Optimal	high	low	med	low
TCGA-13-0924	Serous	4	3	45	185	0	185	0	Sub-optimal	high	high	low	med
TCGA-13-1403	Serous	3	3	48	331	0	331	0	NA	high	low	high	high
TCGA-13-1404	Serous	3	3	48	201	0	201	0	Sub-optimal	low	low	high	high
TCGA-13-1405	Serous	4	3	49	224	0	224	0	Sub-optimal	med	med	med	low
TCGA-13-1407	Serous	3	3	51	184	0	184	0	NA	low	high	high	low
TCGA-13-1410	Serous	4	NA	57	143	0	143	0	NA	high	high	med	med
TCGA-13-1412	Serous	4	3	41	162	0	162	0	Sub-optimal	low	med	high	med
TCGA-13-1477	Serous	4	2	49	235	1	1662	1	Sub-optimal	low	med	med	high
TCGA-13-1482	Serous	4	2	52	602	1	1877	1	Sub-optimal	high	low	low	low
TCGA-13-1483	Serous	3	3	61	297	1	895	1	Sub-optimal	med	low	low	med
TCGA-13-1484	Serous	3	3	62	497	1	2982	0	NA	low	med	med	high
TCGA-13-1485	Serous	4	2	48	170	1	629	1	Sub-optimal	high	low	low	med
TCGA-13-1487	Serous	4	NA	74	412	1	681	1	NA	low	med	med	high
TCGA-13-1488	Serous	4	3	59	351	1	2154	1	Sub-optimal	med	low	med	high
TCGA-13-1489	Serous	3	2	70	806	1	2521	0	NA	low	low	low	high
TCGA-13-1491	Serous	3	3	55	508	1	1595	1	NA	low	low	low	high
TCGA-13-1492	Serous	3	3	66	2237	0	2237	0	NA	low	high	high	low
TCGA-13-1494	Serous	4	3	43	693	1	1162	0	NA	high	low	low	high
TCGA-13-1495	Serous	3	2	60	977	1	1498	0	Sub-optimal	low	med	high	high
TCGA-13-1496	Serous	3	3	65	129	1	129	1	Sub-optimal	high	high	high	low
TCGA-13-1497	Serous	3	3	47	813	1	1652	0	NA	med	low	low	med
TCGA-13-1498	Serous	3	3	73	534	1	1144	0	Sub-optimal	high	low	low	high
TCGA-13-1499	Serous	3	3	56	583	1	1168	0	NA	high	med	high	med
TCGA-13-1500	Serous	3	3	71	253	1	425	1	Sub-optimal	low	high	high	med
TCGA-13-1501	Serous	4	3	50	392	1	999	0	Sub-optimal	med	high	med	high
TCGA-13-1504	Serous	3	3	68	504	0	504	0	NA	med	low	med	high
TCGA-13-1505	Serous	3	3	63	128	0	128	0	Sub-optimal	low	low	low	med
TCGA-13-1506	Serous	3	3	45	134	0	134	0	NA	low	high	med	low
TCGA-13-1507	Serous	3	3	77	145	0	145	0	Sub-optimal	med	low	med	low
TCGA-13-1509	Serous	4	3	64	127	0	127	0	Sub-optimal	high	med	low	high
TCGA-13-1510	Serous	3	3	62	78	0	78	0	Optimal	med	low	low	low
TCGA-13-1512	Serous	3	3	49	94	0	94	0	Optimal	low	med	high	high
TCGA-20-0987	Serous	3	3	61	442	1	701	1	Sub-optimal	high	high	low	med
TCGA-20-0990	Serous	3	3	74	871	1	789	0	NA	low	med	med	high
TCGA-20-0991	Serous	2	3	78	797	0	797	0	Optimal	high	med	low	high
TCGA-20-1682	Serous	3	NA	56	837	0	837	0	Sub-optimal	high	med	low	low
TCGA-20-1683	Serous	3	3	65	618	1	772	0	Optimal	low	high	low	low
TCGA-20-1684	Serous	3	3	51	581	0	581	0	Sub-optimal	low	high	high	high
TCGA-20-1685	Serous	3	3	45	508	0	508	0	Sub-optimal	med	high	med	high
TCGA-20-1686	Serous	3	3	75	89	0	89	0	Optimal	med	high	med	low
TCGA-20-1687	Serous	4	3	46	81	0	81	0	Optimal	high	high	med	med
TCGA-23-1021	Serous	4	3	45	1446	1	1446	1	Sub-optimal	low	low	med	med
TCGA-23-1022	Serous	3	3	67	450	1	1511	1	Sub-optimal	low	high	high	high
TCGA-23-1023	Serous	3	3	65	490	1	1233	0	Sub-optimal	high	med	low	med
TCGA-23-1024	Serous	4	3	52	468	0	468	0	Sub-optimal	low	high	high	med
TCGA-23-1026	Serous	3	3	45	797	1	816	0	Sub-optimal	med	low	low	med
TCGA-23-1027	Serous	3	3	48	114	1	976	1	Sub-optimal	high	high	high	high
TCGA-23-1028	Serous	3	3	43	133	1	1503	0	Sub-optimal	high	med	low	high
TCGA-23-1029	Serous	3	3	46	268	0	268	0	Sub-optimal	low	high	high	high
TCGA-23-1030	Serous	3	3	64	544	1	886	0	Sub-optimal	high	high	low	high
TCGA-23-1031	Serous	4	3	60	575	1	575	1	Sub-optimal	high	med	high	high
TCGA-23-1032	Serous	4	3	73	68	1	84	1	Sub-optimal	low	high	high	med
TCGA-23-1109	Serous	3	3	62	987	1	1562	1	Sub-optimal	low	low	low	high
TCGA-23-1110	Serous	3	3	42	326	1	1658	0	Optimal	low	high	high	high
TCGA-23-1111	Serous	3	3	63	98	0	98	0	Sub-optimal	med	high	med	low
TCGA-23-1113	Serous	4	3	48	949	1	949	1	Sub-optimal	low	high	high	med

TCGA-23-1114	Serous	3	3	55	634	1	2089	1	Optimal	high	high	low	low
TCGA-23-1116	Serous	3	3	83	139	0	139	0	Sub-optimal	high	high	high	low
TCGA-23-1117	Serous	3	3	42	418	1	1013	1	Sub-optimal	high	med	high	low
TCGA-23-1118	Serous	3	3	45	2616	0	2616	0	Sub-optimal	med	low	low	med
TCGA-23-1119	Serous	3	3	64	3378	1	3953	0	Sub-optimal	low	low	low	low
TCGA-23-1120	Serous	3	3	60	130	0	130	0	Sub-optimal	low	low	low	high
TCGA-23-1121	Serous	3	3	51	194	0	194	0	Sub-optimal	low	high	med	low
TCGA-23-1122	Serous	3	3	53	447	1	1189	1	Sub-optimal	high	low	low	high
TCGA-23-1123	Serous	3	3	59	1018	1	1018	1	Sub-optimal	low	low	med	low
TCGA-23-1124	Serous	3	3	62	641	1	1768	1	Optimal	high	low	high	high
TCGA-23-1809	Serous	2	3	63	16	0	16	0	Sub-optimal	med	high	low	low
TCGA-23-2072	Serous	4	3	58	476	1	759	1	Sub-optimal	high	high	med	high
TCGA-23-2077	Serous	3	3	45	1232	1	3525	0	Optimal	low	med	low	med
TCGA-23-2078	Serous	3	3	66	2661	0	2661	0	Optimal	med	med	med	med
TCGA-23-2079	Serous	3	3	46	283	1	2788	0	Optimal	low	low	low	high
TCGA-23-2081	Serous	4	3	49	2342	1	2342	1	Sub-optimal	med	high	low	med
TCGA-23-2084	Serous	4	3	45	619	1	1516	1	Optimal	med	high	low	high
TCGA-24-0968	Serous	3	3	59	598	1	598	1	Sub-optimal	high	low	med	high
TCGA-24-0970	Serous	3	3	63	280	1	354	1	Sub-optimal	med	high	low	low
TCGA-24-0975	Serous	3	3	58	663	1	663	1	Sub-optimal	low	med	low	high
TCGA-24-0979	Serous	4	3	53	428	1	1264	1	Sub-optimal	high	high	med	high
TCGA-24-0980	Serous	3	3	53	145	1	233	1	Sub-optimal	high	low	low	low
TCGA-24-0982	Serous	3	3	77	153	1	679	1	Sub-optimal	med	low	med	med
TCGA-24-1103	Serous	3	3	50	678	1	1646	1	Sub-optimal	high	high	high	high
TCGA-24-1104	Serous	4	3	56	959	1	1933	1	Sub-optimal	high	med	low	high
TCGA-24-1105	Serous	3	3	36	470	1	1442	1	Sub-optimal	med	med	high	high
TCGA-24-1413	Serous	3	3	51	192	0	192	0	Sub-optimal	low	low	high	med
TCGA-24-1416	Serous	4	3	34	194	0	194	0	Sub-optimal	high	med	low	high
TCGA-24-1417	Serous	4	3	54	238	0	238	0	Sub-optimal	high	low	low	med
TCGA-24-1418	Serous	3	3	68	243	0	243	0	Sub-optimal	high	high	high	high
TCGA-24-1419	Serous	3	3	62	239	0	239	0	Sub-optimal	low	med	low	low
TCGA-24-1422	Serous	3	3	82	23	1	23	1	Sub-optimal	high	low	low	low
TCGA-24-1423	Serous	3	3	61	190	0	190	0	Sub-optimal	med	low	med	high
TCGA-24-1424	Serous	3	3	67	183	0	183	0	Sub-optimal	high	high	high	low
TCGA-24-1425	Serous	3	3	45	181	0	181	0	Sub-optimal	high	low	low	high
TCGA-24-1426	Serous	3	3	43	163	0	163	0	Sub-optimal	med	high	high	low
TCGA-24-1428	Serous	3	3	50	448	1	529	0	Sub-optimal	med	med	med	high
TCGA-24-1430	Serous	3	3	68	449	1	863	1	Sub-optimal	low	med	med	high
TCGA-24-1431	Serous	3	3	67	199	1	583	1	Sub-optimal	med	low	high	med
TCGA-24-1434	Serous	3	3	59	337	1	568	1	Sub-optimal	high	low	low	low
TCGA-24-1435	Serous	3	3	57	505	1	1324	1	Sub-optimal	med	low	med	low
TCGA-24-1436	Serous	3	3	57	260	1	260	1	Sub-optimal	high	low	med	high
TCGA-24-1463	Serous	3	3	70	971	1	2218	1	Sub-optimal	low	low	med	med
TCGA-24-1464	Serous	3	3	70	323	1	379	1	Sub-optimal	low	low	high	high
TCGA-24-1466	Serous	3	3	74	491	1	1373	1	Sub-optimal	med	high	high	high
TCGA-24-1467	Serous	3	3	51	1253	1	3224	1	Sub-optimal	low	low	low	med
TCGA-24-1469	Serous	3	3	71	277	0	277	0	Sub-optimal	low	high	med	high
TCGA-24-1470	Serous	3	3	54	105	0	105	0	Sub-optimal	high	low	low	med
TCGA-24-1471	Serous	3	3	60	36	0	36	0	Sub-optimal	high	low	med	high
TCGA-24-1474	Serous	3	3	57	332	1	676	1	Sub-optimal	high	med	low	med
TCGA-24-1544	Serous	3	3	71	643	1	820	1	Sub-optimal	low	high	high	low
TCGA-24-1545	Serous	3	3	69	861	1	1746	1	Sub-optimal	low	low	high	high
TCGA-24-1546	Serous	3	3	46	1955	1	1955	1	Sub-optimal	high	low	med	med
TCGA-24-1548	Serous	3	3	57	207	1	493	1	Sub-optimal	low	high	high	low
TCGA-24-1549	Serous	3	3	58	1042	1	1721	1	NA	med	high	low	med
TCGA-24-1550	Serous	3	3	49	892	1	1249	1	Sub-optimal	high	high	low	low
TCGA-24-1551	Serous	3	3	53	764	1	1579	1	Sub-optimal	high	med	low	high
TCGA-24-1552	Serous	3	3	77	403	1	1259	1	Sub-optimal	high	high	high	high
TCGA-24-1553	Serous	3	3	53	553	1	1767	1	Sub-optimal	med	high	low	high
TCGA-24-1555	Serous	3	3	50	1577	1	2692	1	NA	low	low	high	med
TCGA-24-1556	Serous	2	3	50	539	1	2148	1	Sub-optimal	med	low	high	high
TCGA-24-1557	Serous	3	3	49	447	1	1213	1	Sub-optimal	med	high	high	high
TCGA-24-1558	Serous	3	3	73	273	1	594	1	Sub-optimal	med	high	high	high
TCGA-24-1560	Serous	3	3	51	143	1	1341	1	Sub-optimal	low	low	high	low
TCGA-24-1562	Serous	3	3	67	229	1	1384	1	Sub-optimal	high	low	med	med
TCGA-24-1563	Serous	3	3	66	396	1	1451	1	Sub-optimal	high	low	low	high
TCGA-24-1564	Serous	3	3	67	221	1	787	1	Sub-optimal	high	low	low	med
TCGA-24-1565	Serous	3	3	74	145	1	312	1	Sub-optimal	low	low	low	med
TCGA-24-1567	Serous	3	3	54	319	1	524	1	Sub-optimal	low	med	med	low
TCGA-24-1603	Serous	3	3	53	992	1	2742	1	NA	low	med	med	low
TCGA-24-1604	Serous	3	3	66	2688	1	2688	1	NA	high	low	low	high
TCGA-24-1614	Serous	3	3	57	644	1	1470	1	Sub-optimal	med	high	high	low
TCGA-24-1616	Serous	3	3	56	405	1	1163	1	Sub-optimal	low	med	low	low
TCGA-24-1842	Serous	3	3	49	253	0	253	0	Sub-optimal	high	med	low	high
TCGA-24-1843	Serous	3	3	66	106	0	106	0	Sub-optimal	high	high	med	low
TCGA-24-1844	Serous	3	3	64	113	0	113	0	Sub-optimal	low	med	low	high

TCGA-24-1845	Serous	3	3	42	116	0	116	0	Sub-optimal	low	high	med	high
TCGA-24-1846	Serous	3	3	45	133	0	133	0	Sub-optimal	high	low	med	high
TCGA-24-1847	Serous	4	3	45	343	0	343	0	Sub-optimal	high	high	med	high
TCGA-24-1849	Serous	3	3	80	176	0	176	0	Sub-optimal	high	high	low	med
TCGA-24-1850	Serous	3	3	72	168	0	168	0	Sub-optimal	med	high	high	low
TCGA-24-1920	Serous	3	3	74	298	0	298	0	Sub-optimal	low	low	low	low
TCGA-24-1923	Serous	3	3	51	343	1	690	1	Sub-optimal	high	high	med	high
TCGA-24-1924	Serous	3	3	65	320	1	919	1	Sub-optimal	high	low	low	med
TCGA-24-1928	Serous	3	3	77	70	1	336	1	Sub-optimal	high	low	med	low
TCGA-24-1930	Serous	3	3	53	544	1	2467	1	Sub-optimal	med	low	high	med
TCGA-24-2019	Serous	3	3	46	148	0	148	0	Sub-optimal	low	med	low	low
TCGA-24-2020	Serous	3	3	67	723	1	4624	1	Sub-optimal	low	high	high	low
TCGA-24-2023	Serous	3	3	54	1069	1	1364	1	Sub-optimal	high	med	high	med
TCGA-24-2024	Serous	3	3	72	421	1	1769	1	Sub-optimal	high	med	high	high
TCGA-24-2026	Serous	3	3	79	1059	1	1059	1	Sub-optimal	high	low	high	high
TCGA-24-2027	Serous	4	3	51	617	1	3337	1	Sub-optimal	low	high	high	med
TCGA-24-2029	Serous	3	3	75	372	1	439	1	Sub-optimal	med	low	med	low
TCGA-24-2030	Serous	3	3	87	646	1	1701	1	Sub-optimal	low	high	med	high
TCGA-24-2033	Serous	3	3	87	351	1	562	1	Sub-optimal	high	med	high	high
TCGA-24-2035	Serous	3	3	65	287	1	857	1	Sub-optimal	high	med	low	high
TCGA-24-2036	Serous	3	3	50	914	1	1947	1	Sub-optimal	med	med	low	high
TCGA-24-2038	Serous	3	NA	68	1169	1	1354	1	Sub-optimal	high	high	high	low
TCGA-24-2254	Serous	3	3	66	606	1	1736	1	Sub-optimal	high	low	low	high
TCGA-24-2260	Serous	3	3	74	667	1	1100	1	Sub-optimal	high	high	high	med
TCGA-24-2261	Serous	3	3	76	24	1	24	1	Sub-optimal	high	high	high	high
TCGA-25-1312	Serous	4	3	69	31	1	31	1	Sub-optimal	high	high	high	low
TCGA-25-1313	Serous	4	3	62	394	1	820	1	Sub-optimal	med	med	med	high
TCGA-25-1314	Serous	4	3	42	274	1	1004	1	Sub-optimal	low	med	high	high
TCGA-25-1315	Serous	3	3	50	153	1	1583	1	Sub-optimal	low	low	med	low
TCGA-25-1316	Serous	3	3	55	276	1	1279	1	Sub-optimal	low	low	high	low
TCGA-25-1317	Serous	3	3	66	31	1	68	1	NA	high	high	high	high
TCGA-25-1318	Serous	3	3	54	185	1	1064	1	Sub-optimal	high	med	high	high
TCGA-25-1319	Serous	3	3	73	730	1	1977	1	Sub-optimal	low	low	high	high
TCGA-25-1320	Serous	3	3	65	424	1	1155	1	Sub-optimal	high	med	high	med
TCGA-25-1321	Serous	3	3	65	454	1	1033	1	Optimal	med	med	high	high
TCGA-25-1322	Serous	4	3	62	91	1	91	1	Sub-optimal	high	high	high	high
TCGA-25-1323	Serous	3	3	72	365	1	395	1	Sub-optimal	high	high	high	low
TCGA-25-1324	Serous	3	3	74	1035	1	1035	1	Sub-optimal	low	high	high	low
TCGA-25-1326	Serous	3	3	61	396	1	1249	1	Sub-optimal	high	low	high	med
TCGA-25-1328	Serous	3	3	38	244	1	2009	1	Sub-optimal	high	low	high	med
TCGA-25-1329	Serous	3	3	76	90	1	457	1	Sub-optimal	med	high	high	low
TCGA-25-1623	Serous	4	3	71	342	1	565	1	Optimal	high	high	med	low
TCGA-25-1625	Serous	3	3	66	526	1	840	1	Sub-optimal	high	med	low	low
TCGA-25-1626	Serous	3	3	65	318	1	518	1	Sub-optimal	high	low	low	low
TCGA-25-1627	Serous	3	3	73	11	1	394	1	Sub-optimal	med	high	high	high
TCGA-25-1628	Serous	3	3	67	287	1	627	1	Sub-optimal	low	med	low	low
TCGA-25-1630	Serous	3	3	73	239	1	1162	1	Sub-optimal	low	low	high	low
TCGA-25-1632	Serous	4	3	68	537	1	1799	1	Sub-optimal	high	high	high	high
TCGA-25-1633	Serous	3	3	64	616	1	1891	1	Sub-optimal	high	med	low	low
TCGA-25-1634	Serous	3	3	75	380	1	1091	1	Optimal	low	low	med	low
TCGA-25-1635	Serous	3	3	71	614	1	1583	1	Sub-optimal	high	high	high	high
TCGA-25-1870	Serous	3	3	59	243	1	455	1	Sub-optimal	high	low	med	low
TCGA-25-1871	Serous	3	3	70	230	1	760	1	Sub-optimal	low	high	high	low
TCGA-25-1877	Serous	3	3	81	549	1	730	1	Sub-optimal	low	low	high	low
TCGA-25-1878	Serous	3	3	60	971	1	2587	1	Sub-optimal	low	low	high	med
TCGA-29-1688	Serous	3	2	39	184	1	2400	1	NA	med	med	low	med
TCGA-29-1690	Serous	3	2	66	1360	1	1448	1	Sub-optimal	low	low	low	low
TCGA-29-1691	Serous	3	2	51	613	1	1470	1	Sub-optimal	low	high	med	med
TCGA-29-1693	Serous	3	3	72	694	1	3096	0	Sub-optimal	med	low	low	high
TCGA-29-1694	Serous	3	NA	45	1172	1	1187	1	Sub-optimal	med	med	low	low
TCGA-29-1695	Serous	3	2	62	24	1	1229	1	Sub-optimal	med	high	low	med
TCGA-29-1696	Serous	3	2	43	342	1	1032	1	Sub-optimal	high	med	high	low
TCGA-29-1697	Serous	3	3	62	500	1	949	1	Sub-optimal	low	high	high	low
TCGA-29-1698	Serous	3	3	53	181	1	2078	0	Sub-optimal	high	high	low	low
TCGA-29-1699	Serous	3	3	57	16	1	1106	1	Sub-optimal	high	high	high	high
TCGA-29-1701	Serous	3	3	56	298	1	515	1	NA	high	high	low	low
TCGA-29-1702	Serous	3	3	84	286	1	728	1	Sub-optimal	low	high	low	med
TCGA-29-1703	Serous	3	2	56	324	1	1815	1	Sub-optimal	high	med	low	low
TCGA-29-1705	Serous	3	2	47	283	1	555	1	Sub-optimal	high	high	med	med
TCGA-29-1707	Serous	2	3	41	1201	1	1277	0	Optimal	med	high	low	low
TCGA-29-1710	Serous	3	2	54	315	1	951	1	Sub-optimal	high	low	low	low
TCGA-29-1711	Serous	3	2	45	1053	0	1053	0	Optimal	high	low	low	med
TCGA-29-1761	Serous	3	3	80	517	1	528	1	Sub-optimal	low	med	low	low
TCGA-29-1762	Serous	4	2	59	1375	1	2634	1	Sub-optimal	med	high	med	low
TCGA-29-1763	Serous	2	2	43	428	1	2032	0	Sub-optimal	high	high	high	med
TCGA-29-1764	Serous	3	2	49	792	1	1914	0	Sub-optimal	high	low	low	low

TCGA-29-1766	Serous	3	2	74	672	1	1199	1	Sub-optimal	med	med	low	low
TCGA-29-1768	Serous	4	3	50	547	1	952	1	Sub-optimal	med	med	low	low
TCGA-29-1769	Serous	3	3	40	699	0	699	0	Sub-optimal	low	med	low	low
TCGA-29-1770	Serous	3	2	54	377	1	741	0	Sub-optimal	high	high	med	high
TCGA-29-1771	Serous	3	2	76	595	1	686	0	Sub-optimal	high	low	low	high
TCGA-29-1774	Serous	3	3	82	234	1	527	0	Sub-optimal	low	high	high	low
TCGA-29-1775	Serous	3	2	51	341	1	376	0	Sub-optimal	high	low	high	low
TCGA-29-1778	Serous	3	3	77	454	0	454	0	Optimal	high	high	high	high
TCGA-29-1781	Serous	3	3	69	255	0	255	0	Optimal	low	med	low	low
TCGA-29-1783	Serous	3	3	58	220	0	220	0	Sub-optimal	med	low	low	med
TCGA-29-1784	Serous	3	3	55	163	0	163	0	Optimal	low	high	low	med
TCGA-29-1785	Serous	3	3	55	473	1	1104	1	Sub-optimal	low	high	med	med
TCGA-30-1714	Serous	4	3	68	241	1	1158	1	Sub-optimal	high	high	high	low
TCGA-30-1718	Serous	3	3	44	896	1	1579	1	Sub-optimal	high	high	med	low
TCGA-30-1853	Serous	3	3	58	634	1	1103	1	Sub-optimal	low	high	high	high
TCGA-30-1855	Serous	3	3	61	75	1	75	1	Sub-optimal	low	low	low	high
TCGA-30-1856	Serous	3	3	56	220	1	477	1	Sub-optimal	high	med	low	low
TCGA-30-1857	Serous	4	3	64	8	1	8	1	NA	med	high	low	med
TCGA-30-1859	Serous	NA	3	56	1463	1	1463	1	Sub-optimal	med	med	high	med
TCGA-30-1860	Serous	3	3	58	397	1	1366	1	Sub-optimal	low	med	low	low
TCGA-30-1861	Serous	3	3	74	1058	1	1058	1	Sub-optimal	low	low	low	high
TCGA-30-1862	Serous	4	2	65	186	1	186	1	Sub-optimal	high	low	low	high
TCGA-30-1866	Serous	4	2	61	285	1	1114	1	Sub-optimal	low	high	high	high
TCGA-30-1867	Serous	4	NA	46	37	1	37	1	NA	med	med	low	low
TCGA-30-1880	Serous	3	3	56	348	1	1751	1	Optimal	low	med	med	low
TCGA-30-1887	Serous	3	2	67	738	1	738	1	Sub-optimal	low	low	high	low
TCGA-30-1891	Serous	3	2	61	181	1	914	1	Sub-optimal	low	low	low	low
TCGA-30-1892	Serous	3	3	52	253	1	1484	1	Sub-optimal	med	low	high	med
TCGA-31-1944	Serous	3	3	47	678	1	1386	0	Optimal	low	low	high	med
TCGA-31-1946	Serous	3	3	30	664	1	918	0	Optimal	high	low	low	med
TCGA-31-1950	Serous	3	2	76	349	1	571	0	Sub-optimal	med	high	high	low
TCGA-31-1951	Serous	3	3	58	659	1	684	0	Optimal	high	low	low	med
TCGA-31-1953	Serous	3	3	52	70	1	204	0	NA	high	low	low	low
TCGA-36-1568	Serous	3	3	52	548	1	875	0	NA	high	high	med	high
TCGA-36-1569	Serous	3	3	52	885	0	885	0	Sub-optimal	high	low	med	high
TCGA-36-1570	Serous	3	3	49	375	1	655	0	Sub-optimal	med	low	med	high
TCGA-36-1571	Serous	3	3	53	375	1	695	1	Optimal	low	high	high	low
TCGA-36-1574	Serous	3	3	48	648	1	686	0	Sub-optimal	med	low	med	med
TCGA-36-1575	Serous	3	3	83	260	0	260	0	Optimal	low	low	low	low
TCGA-36-1576	Serous	3	3	76	817	1	915	0	Sub-optimal	high	high	med	med
TCGA-36-1577	Serous	2	2	43	783	0	783	0	Optimal	low	low	med	low
TCGA-36-1578	Serous	4	3	63	310	1	847	0	Sub-optimal	high	low	med	high
TCGA-36-1580	Serous	3	3	82	440	1	737	1	Sub-optimal	med	low	med	high
TCGA-36-1581	Serous	2	3	63	702	1	751	0	Optimal	low	low	low	low
TCGA-57-1582	Serous	3	3	50	731	1	731	1	Sub-optimal	low	high	high	low
TCGA-57-1583	Serous	3	3	57	346	1	346	1	Optimal	low	med	high	high
TCGA-57-1584	Serous	3	3	47	530	1	643	0	Sub-optimal	low	low	med	low
TCGA-57-1585	Serous	3	3	57	53	1	53	1	Sub-optimal	high	low	med	high
TCGA-57-1586	Serous	3	3	66	259	1	679	0	Sub-optimal	low	med	low	med
TCGA-57-1992	Serous	1	NA	62	882	0	882	0	Optimal	high	med	med	low
TCGA-57-1993	Serous	3	3	56	763	0	763	0	Optimal	med	med	med	high
TCGA-57-1994	Serous	NA	NA	63	761	0	761	0	NA	med	high	med	high
TCGA-61-1724	Serous	3	3	47	637	1	637	1	Optimal	high	high	low	low
TCGA-61-1725	Serous	3	3	40	844	1	956	0	Sub-optimal	low	low	low	low
TCGA-61-1727	Serous	1	NA	74	564	0	564	0	Optimal	low	low	med	low
TCGA-61-1728	Serous	4	3	59	533	1	848	0	Sub-optimal	med	low	high	high
TCGA-61-1730	Serous	1	NA	78	132	1	132	1	Sub-optimal	low	high	high	low
TCGA-61-1733	Serous	3	3	71	175	1	967	0	Optimal	high	high	med	low
TCGA-61-1734	Serous	1	NA	52	866	0	866	0	NA	med	med	high	med
TCGA-61-1736	Serous	3	3	45	764	1	1484	1	NA	high	high	med	high
TCGA-61-1737	Serous	4	3	42	1364	0	1364	0	Sub-optimal	med	high	low	low
TCGA-61-1738	Serous	3	3	60	276	1	1089	1	Sub-optimal	high	high	med	low
TCGA-61-1740	Serous	3	3	71	74	1	74	1	Sub-optimal	high	high	low	med
TCGA-61-1741	Serous	3	3	76	488	1	1024	1	Sub-optimal	med	high	high	med
TCGA-61-1743	Serous	2	2	53	809	1	1329	1	Optimal	low	med	high	high
TCGA-61-1895	Serous	3	3	52	44	0	44	0	Optimal	med	med	low	low
TCGA-61-1899	Serous	3	3	81	256	0	256	0	Optimal	low	high	med	med
TCGA-61-1900	Serous	3	3	51	176	0	176	0	Optimal	high	high	low	low
TCGA-61-1901	Serous	4	3	65	329	1	347	1	NA	high	high	low	low
TCGA-61-1903	Serous	1	NA	55	396	0	396	0	NA	low	med	low	low
TCGA-61-1904	Serous	3	3	60	276	0	276	0	Sub-optimal	high	high	med	med
TCGA-61-1906	Serous	3	3	55	236	1	1038	1	Sub-optimal	high	med	low	low
TCGA-61-1907	Serous	3	3	63	743	1	952	0	Sub-optimal	low	med	low	med
TCGA-61-1910	Serous	2	3	56	1127	0	1127	0	Sub-optimal	med	med	low	high
TCGA-61-1911	Serous	2	3	55	844	1	1293	0	NA	high	high	low	high
TCGA-61-1913	Serous	3	3	48	1488	0	1488	0	Sub-optimal	low	med	med	high

TCGA-61-1914	Serous	3	3	65	1674	1	1722	0	Sub-optimal	med	med	low	low
TCGA-61-1915	Serous	2	3	50	2061	0	2061	0	NA	low	low	med	low
TCGA-61-1917	Serous	3	3	60	1321	1	1321	1	NA	low	med	high	high
TCGA-61-1918	Serous	4	3	45	413	1	479	1	Optimal	med	low	low	high
TCGA-61-1919	Serous	3	2	58	439	1	1161	1	NA	low	low	med	med
TCGA-61-2000	Serous	3	3	67	339	1	441	0	Optimal	med	low	med	low
TCGA-61-2008	Serous	2	2	40	818	1	932	0	Optimal	med	med	low	high
TCGA-61-2009	Serous	3	3	65	101	1	1212	0	Sub-optimal	low	low	low	med
TCGA-61-2012	Serous	2	2	81	932	0	932	0	NA	low	med	med	high
TCGA-61-2016	Serous	3	3	51	36	1	36	1	Optimal	low	low	low	low
TCGA-61-2017	Serous	3	NA	64	1006	1	1398	0	Sub-optimal	low	low	med	low
TCGA-61-2018	Serous	1	NA	62	1381	0	1381	0	Optimal	low	low	low	low
TCGA-61-2087	Serous	1	NA	49	146	0	146	0	Optimal	high	high	med	high
TCGA-61-2088	Serous	3	3	51	145	0	145	0	Optimal	med	high	med	med
TCGA-61-2092	Serous	3	3	57	1573	0	1573	0	Optimal	low	med	high	low
TCGA-61-2094	Serous	3	3	63	2182	0	2182	0	NA	med	low	low	high
TCGA-61-2095	Serous	3	2	54	445	1	1875	1	Optimal	high	med	low	low
TCGA-61-2097	Serous	2	2	71	1844	0	1844	0	Sub-optimal	high	med	med	med
TCGA-61-2098	Serous	3	2	62	1993	0	1993	0	Sub-optimal	high	high	high	low
TCGA-61-2101	Serous	3	2	55	1688	1	1688	1	Sub-optimal	med	med	med	med
TCGA-61-2102	Serous	3	3	74	197	1	197	1	NA	med	med	low	low
TCGA-61-2104	Serous	2	2	53	1680	1	2338	0	Optimal	high	high	low	high
TCGA-61-2109	Serous	3	3	40	465	1	629	1	Sub-optimal	med	high	high	high
TCGA-61-2110	Serous	3	NA	56	213	1	1354	1	Optimal	low	high	med	low
TCGA-61-2111	Serous	4	3	61	2205	1	3825	0	NA	med	high	high	low
TCGA-61-2113	Serous	2	3	53	291	1	676	1	NA	high	high	high	low

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med	med	med	high	med	high	low	AGO-OVAR3
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high	med	low	med	low	NA	high	TCGA
med	low	med	high	low	NA	low	TCGA
med	med	high	high	high	NA	low	TCGA
high	high	med	med	high	NA	high	TCGA

Supplementary Table 2

Cell Line	Histotype	Source
2008	Endometrioid	Stephen Howell at University of California, San Diego
59M	Endometrioid	European Collection of Cell Cultures
A2780	mixed histology	European Collection of Cell Cultures
CAOV3	Serous	National Cancer Institute
CH1	Serous	Lloyd Kelland at the Institute of Cancer Research, Sutton, UK
EFO21	Serous	Deutsche Sammlung von Mikroorganismen und Zellkulturen
EFO27	Mucinous	Deutsche Sammlung von Mikroorganismen und Zellkulturen
ES2	Clear Cell	American Type Culture Collection
FUOV1	Serous	Deutsche Sammlung von Mikroorganismen und Zellkulturen
iGROV	Serous	National Cancer Institute
JHOC5	Clear Cell	RIKEN
JHOC7	Clear Cell	RIKEN
JHOC9	Clear Cell	RIKEN
JHOM1	Mucinous	RIKEN
JHOS3	Serous	RIKEN
KURAMOCHI	Serous	Health Science Research Resources Bank
MCAS	Mucinous	Health Science Research Resources Bank
OAW28	Serous	European Collection of Cell Cultures
OAW42	Serous	European Collection of Cell Cultures
OV90	Serous	American Type Culture Collection
OVCA432	Serous	Dr Nuzhat Ahmed at the Womens Cancer Research Centre, Royal Women's Hospital, Melbourne
OVCAR3	Serous	National Cancer Institute
OVCAR4	Serous	National Cancer Institute
OVCAR5	Unknown	National Cancer Institute
OVCAR8	Serous	National Cancer Institute
RMGI	Clear Cell	Health Science Research Resources Bank
RMGII	Clear Cell	Health Science Research Resources Bank
SKOV3	Serous	National Cancer Institute
TOV112D	Endometrioid	American Type Culture Collection
TOV21G	Clear Cell	American Type Culture Collection

Supplementary Table 3. Univariate overall and progression-free survival by Cox proportional hazards in Nanostring data set (n=499)

Factor	Overall survival		Progression-free survival	
	HR	p-value	HR	p-value
Stage		2.6x10⁻¹²		4.3x10⁻¹⁵
I	0.15	1.3x10⁻⁵	0.07	0.0003
II	0.32	7.5x10 ⁻⁶	0.17	7.7x10⁻⁹
III	0.86	0.34	0.71	0.05
IV	1	1	1	1
Residual disease		8.5x10⁻⁹		3.4x10⁻¹⁴
None	0.44	7.7x10⁻⁸	0.35	3.55x10⁻¹²
Macroscopic	1	1	1	1
Cohort		0.03		0.09
AGO	1.39	0.009	1.23	0.09
OTTA	1.14	0.36	NA	NA
VAN	1	1	1	1
Age	1.01	0.009	1.00	0.85
Gene	HR (95% CI)	p-value (corr)	HR (95% CI)	p-value (corr)
ATP13A4	0.95 (0.9-1)	0.057	0.88 (0.83-0.94)	6.9x10⁻⁵
BMP8B	0.95 (0.88-1.04)	0.26	0.80 (0.73-0.89)	2.5x10⁻⁵
CACNA1C	1.29 (1.18-1.41)	1.3x10⁻⁸	1.28 (1.17-1.4)	2.8x10⁻⁸
CCNE1	1.03 (0.95-1.13)	0.44	0.94 (0.85-1.05)	0.29
DYRK1B	1.17 (1.04-1.33)	0.01	1.14 (0.99-1.32)	0.08
GAB2	0.9 (0.8-1.02)	0.12	0.90 (0.78-1.04)	0.14
PAK4	1.26 (1.11-1.43)	0.0005	1.20 (1.04-1.39)	0.015
RAD21	1.08 (0.91-1.28)	0.40	1.11 (0.92-1.33)	0.28
TPX2	1.01 (0.91-1.12)	0.90	0.84 (0.74-0.95)	0.006
URI	1.16 (1.04-1.29)	0.01	1.29 (1.15-1.44)	9.8x10⁻⁶
ZFP36	1.22 (1.13-1.33)	1.1x10⁻⁶	1.22 (1.12-1.33)	3.9x10⁻⁶

NA - No progression data available, HR – hazard ratio, corr = corrected p-value by

method of Benjamini and Hochberg

Supplementary Table 4. Stepwise Akaike Information Criterion model selection

A. Overall survival including residual disease (n=350)

Surv(OS.days, OS.Status)	AIC
FIGO.Stage + GAB2 + Cohort + FIGO.Stage:Cohort	2612.07
<none>	2612.1
+ DYRK1B	2612.5
+ PAK4	2612.7
+ CCNE1	2612.7
+ CACNA1C	2613.2
+ BMP8B	2613.2
+ ATP13A4	2613.3
+ Patient.Age.Years	2613.4
+ GAB2:FIGO.Stage	2613.8
+ RAD21	2613.8
+ GAB2:Cohort	2613.9
+ URI	2614.0
+ ZFP36	2614.1
+ Res.Dis.code	2614.1
+ TPX2	2614.1
- GAB2	2614.1
- FIGO.Stage:Cohort	2615.5

B. Overall survival not including residual disease (n=458)

Surv(OS.days, OS.Status)	AIC
FIGO.Stage + GAB2	3456.46
<none>	3456.5
+ Patient.Age.Years	3456.5
+ Cohort	3456.7
+ CCNE1	3457.0
+ CACNA1C	3457.1
- GAB2	3457.5
+ DYRK1B	3457.5
+ PAK4	3457.7
+ ZFP36	3457.8
+ URI	3458.1
+ GAB2:FIGO.Stage	3458.3
+ RAD21	3458.4
+ ATP13A4	3458.4
+ BMP8B	3458.4
+ TPX2	3458.5
- FIGO.Stage	3480.7

C. Progression-free survival (n=350)

Surv(PFS.days, PFS.Status)	AIC
FIGO.Stage + BMP8B + GAB2	2746.71
<none>	2746.7
+ GAB2:FIGO.Stage	2746.8
+ CCNE1	2748.0
+ TPX2	2748.1
+ ATP13A4	2748.2
+ Cohort	2748.3
+ BMP8B:FIGO.Stage	2748.3
+ URI	2748.3
+ PAK4	2748.4
+ ZFP36	2748.5
+ GAB2:BMP8B	2748.5
+ RAD21	2748.6
+ Patient.Age.Years	2748.7
+ Res.Dis.code	2748.7
+ DYRK1B	2748.7
+ CACNA1C	2748.7
- GAB2	2751.3
- BMP8B	2753.6
- FIGO.Stage	2763.3

Supplementary Table 5

A Enrichment by Pathway Maps		AOCS GAB2 HvL 211			
#	Maps	p-value	FDR	In Data	Network Objects from Active Data
1	Cytoskeleton remodeling Regulation of actin cytoskeleton by Rho GTPases	7.604E-03	1.979E-01	2	LIMK2, PAK1
2	Cell cycle Influence of Ras and Rho proteins on G1/S Transition	3.712E-02	2.656E-01	2	LIMK2, PAK1
3	Cytoskeleton remodeling CDC42 in cellular processes	6.968E-03	1.979E-01	2	LIMK2, PAK1
4	Cytoskeleton remodeling Fibronectin-binding integrins in cell motility	7.212E-04	1.979E-01	3	LIMK2, Talin, PAK1
5	Development Regulation of cytoskeleton proteins in oligodendrocyte differentiation	2.851E-01	3.274E-01	1	PAK1
6	Development SSTR1 in regulation of cell proliferation and migration	1.194E-02	2.379E-01	2	LIMK2, GAB2
7	Role of alpha-6/beta-4 integrins in carcinoma progression	2.291E-01	3.218E-01	1	PAK1
8	Cell adhesion Integrin-mediated cell adhesion and migration	2.590E-03	1.979E-01	3	LIMK2, Talin, PAK1
9	LRRK2 in neurons in Parkinson's disease	1.736E-01	3.218E-01	1	PAK1
10	Development Growth factors in regulation of oligodendrocyte precursor cell proliferation	3.215E-01	3.437E-01	1	ErbB4

B Enrichment by Pathway Maps		AOCS TCGA intersection40 network (n=206)			
#	Maps	p-value	FDR	In Data	Network Objects from Active Data
1	Development EGFR signaling pathway	1.317E-23	7.917E-21	23	EGFR, ERK1 (MAPK3), c-Raf-1, HB-EGF, MEK1(MAP2K1), PKC-gamma, PKC-alpha, PKC-theta, NF-kB, PKC-beta, JAK2, ErbB2, STAT1, ERK1/2, PAK1, c-Src, GRB2, ERK2 (MAPK1), PKC-epsilon, EGF, AKT(PKB), PI3K reg class IA (p85), PLC-gamma
2	Development Gastrin in cell growth and proliferation	1.344E-20	4.039E-18	20	EGFR, ERK1 (MAPK3), c-Raf-1, HB-EGF, MEK1(MAP2K1), PI3K reg class IA (p85-alpha), PKC-alpha, PKC-beta, PKC-delta, JAK2, ERK1/2, PAK1, c-Src, GRB2, ERK2 (MAPK1), PKC-epsilon, CCKBR, PKC-mu, PI3K reg class IA (p85), PLC-gamma 1
3	Signal transduction Activation of PKC via G-Protein coupled receptor	2.831E-19	5.672E-17	18	c-Abl, c-Raf-1, NF-AT1(NFATC2), PKC-zeta, MEK1(MAP2K1), PKC-eta, PKC-gamma, PKC-alpha, PKC-lambda/iota, PKC-theta, NF-kB, PKC-beta, PKC-delta, G-protein beta/gamma, ERK1/2, c-Src, PKC-epsilon, PKC-mu
4	Signal transduction Additional pathways of NF-kB activation (in the cytoplasm)	4.223E-19	6.345E-17	18	c-Raf-1, NF-kB p50/p65, AKT1, PKC-zeta, RelA (p65 NF-kB subunit), PKC-alpha, PKC-lambda/iota, PKC-theta, PKC-beta, PKC-delta, ERK1/2, c-Src, PKC-epsilon, PKC-mu, AKT(PKB), AKT2, PI3K reg class IA, NF-kB1 (p50)
5	Development Delta-type opioid receptor mediated cardioprotection	1.818E-17	2.185E-15	15	EGFR, ERK1 (MAPK3), c-Raf-1, HB-EGF, AKT1, MEK1(MAP2K1), Delta-type opioid receptor, PKC-delta, G-protein beta/gamma, JAK2, c-Src, ERK2 (MAPK1), AKT(PKB), PLC-gamma 1, PI3K reg class IA
6	Development Gastrin in differentiation of the gastric mucosa	2.958E-17	2.962E-15	15	c-Raf-1, MEK1(MAP2K1), PKC-eta, PKC-gamma, PKC-alpha, PKC-theta, PKC-beta, EGR1, ERK1/2, PKC, c-Src, PKC-epsilon, CCKBR, cPKC (conventional), PLC-gamma 1
7	Development Ligand-independent activation of ESR1 and ESR2	5.927E-16	5.088E-14	15	EGFR, ESR1 (nuclear), ERK1 (MAPK3), c-Raf-1, MEK1(MAP2K1), NCOA3 (pCIP/SRC3), ESR2, ErbB2, Neuregulin 1, ERK1/2, GRB2, ERK2 (MAPK1), EGF, AKT(PKB), PI3K reg class IA
8	Development ERBB-family signaling	1.726E-15	1.296E-13	14	EGFR, c-Raf-1, HB-EGF, ErbB4, MEK1(MAP2K1), NF-kB, ErbB2, Neuregulin 1, ERK1/2, GRB2, EGF, AKT(PKB), PLC-gamma 1, PI3K reg class IA
9	G-protein signaling Proinsulin C-peptide signaling	6.923E-15	4.623E-13	15	c-Raf-1, NF-kB p50/p65, MEK1(MAP2K1), PI3K reg class IA (p85-alpha), PKC-alpha, NF-kB, PKC-delta, G-protein beta/gamma, Bcl-2, ERK1/2, c-Src, PKC-epsilon, AKT(PKB), PI3K reg class IA (p85), PI3K reg class IA
10	Apoptosis and survival Anti-apoptotic action of Gastrin	8.436E-15	5.070E-13	14	c-Raf-1, MEK1(MAP2K1), PKC-gamma, PKC-alpha, PKC-beta, JAK2, Bcl-2, ERK1/2, PAK1, c-Src, CCKBR, AKT(PKB), PI3K reg class IA (p85), PLC-gamma 1

Supplementary Table 6 :

Cell Line	GAB2 mRNA	P-PRAS40
ES2	Low	Low
JHOC5	Low	High
A2780	Low	High
OVCAR5	Low	Low
JHOM1	Low	High
EFO27	Low	High
RMGI	Low	Low
JHOC9	Low	Low
2008	Low	High
JHOC7	Low	Low
OVCAR3	Low	High
SKOV3	Low	High
RMGI	Low	Low
CH1	Low	High
OV90	Low	Low
TOV112D	Low	Low
JHOS3	Low	Low
OVCAR8	Low	Low
OVCa432	Low	Low
TOV21G	Low	High
MCAS	Low	High
OVCAR4	Low	High
OAW28	High	Low
CAOV3	High	Low
OAW42	High	Low
59M	High	Low
KURAMOCHI	High	Low
EFO21	High	Low
FUOV1	High	Low
IGROV	High	High

Figure 1

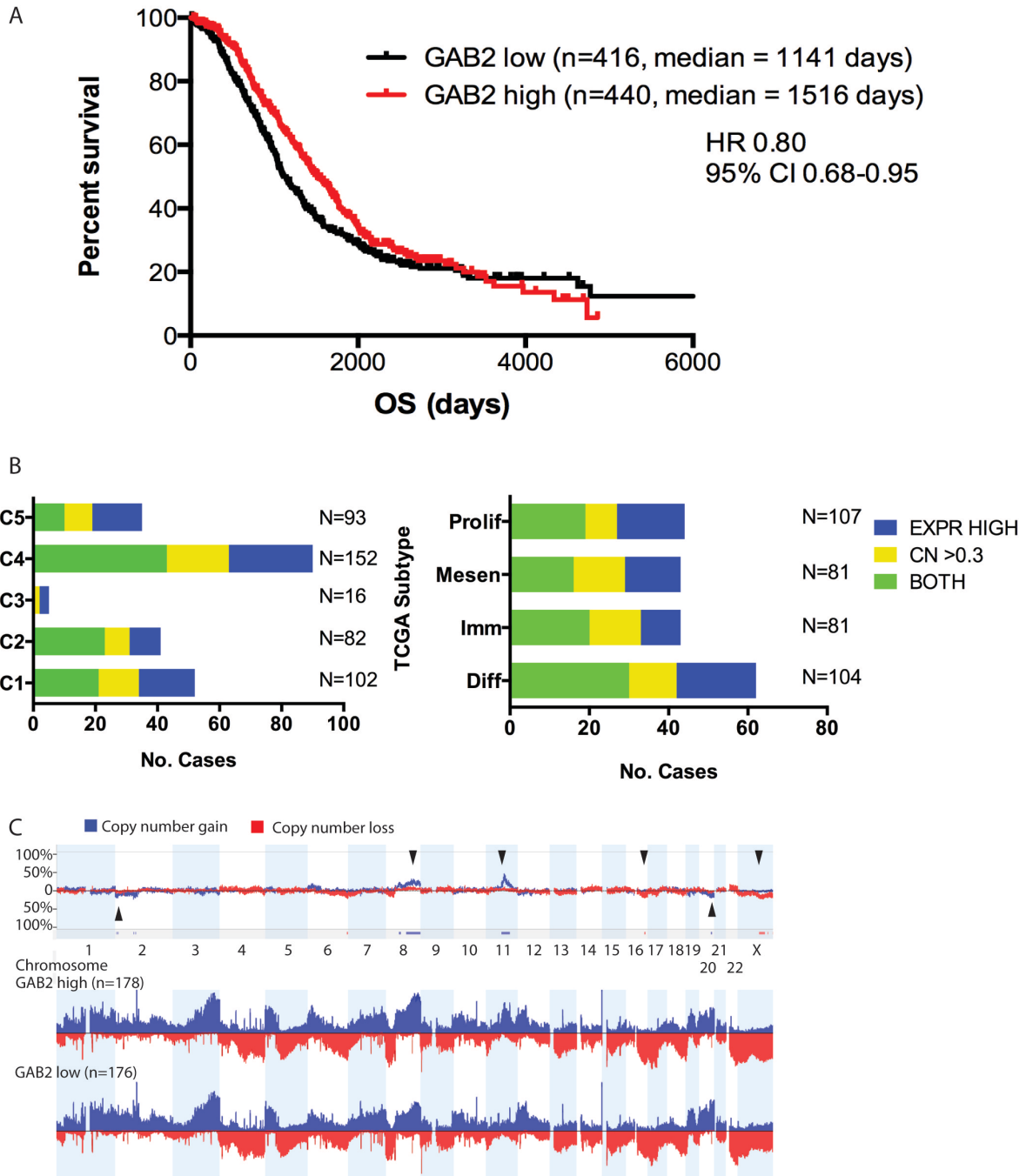
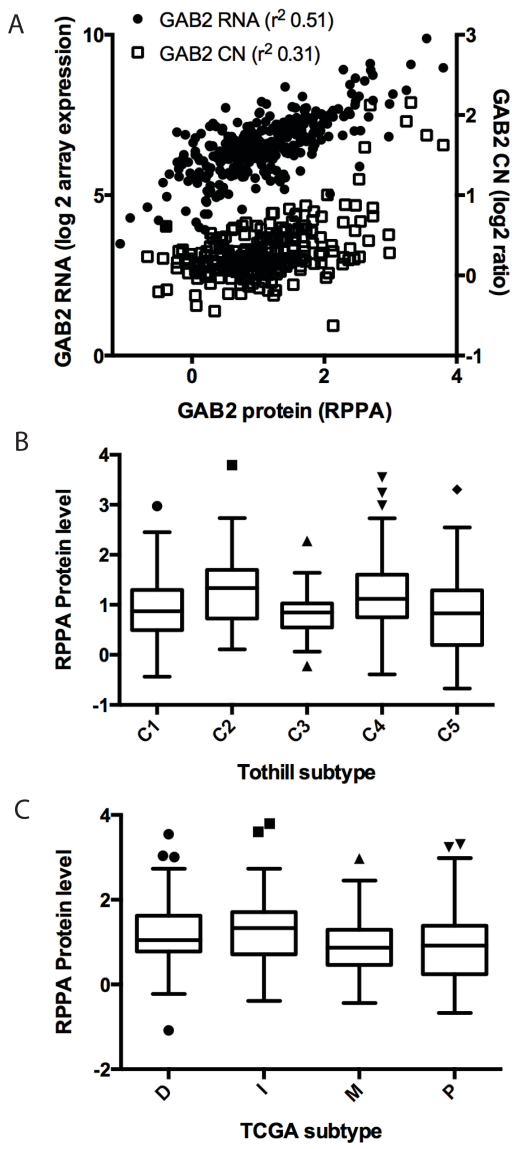
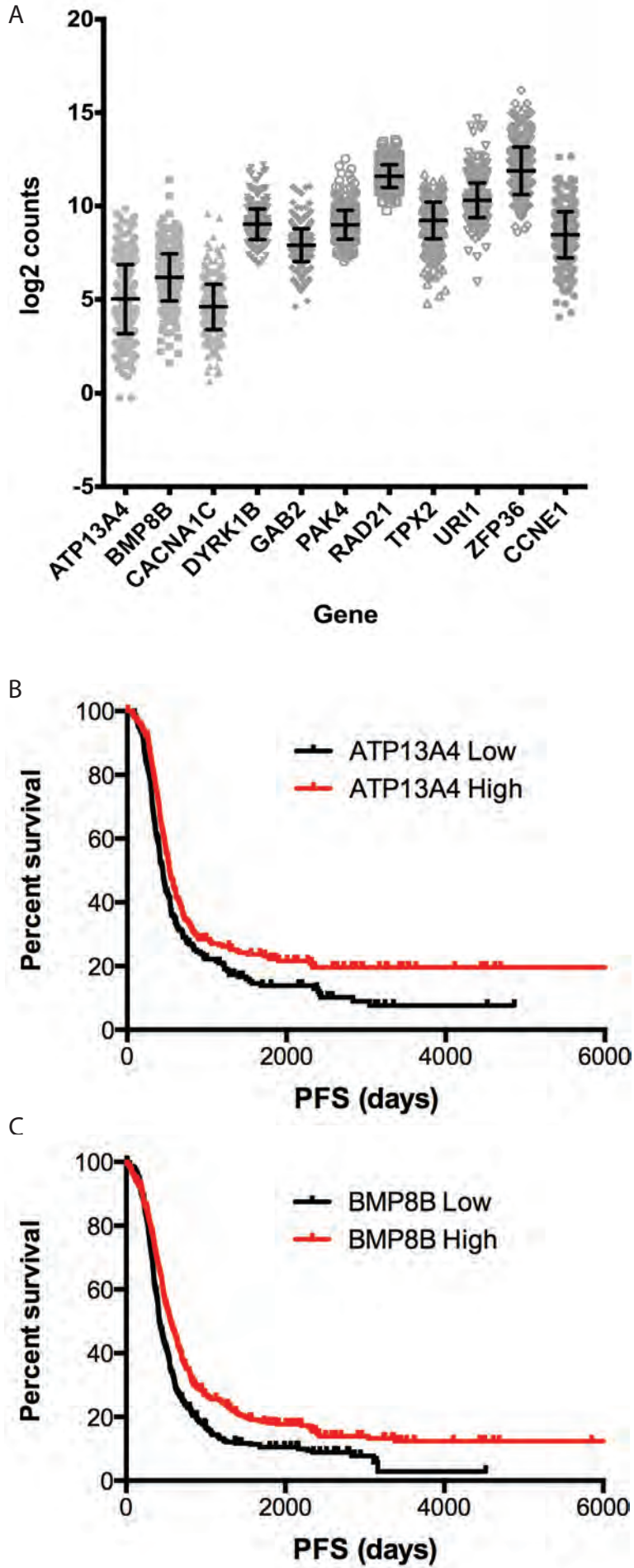
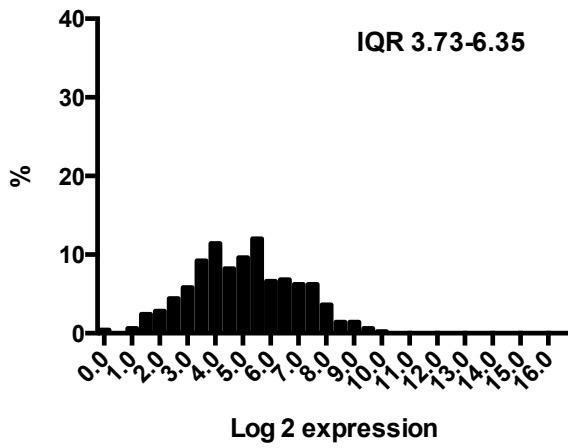
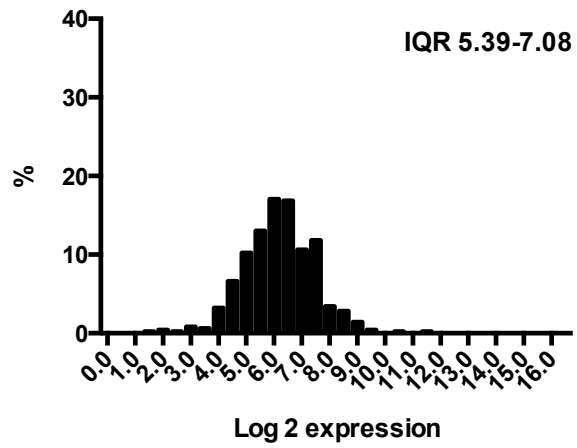
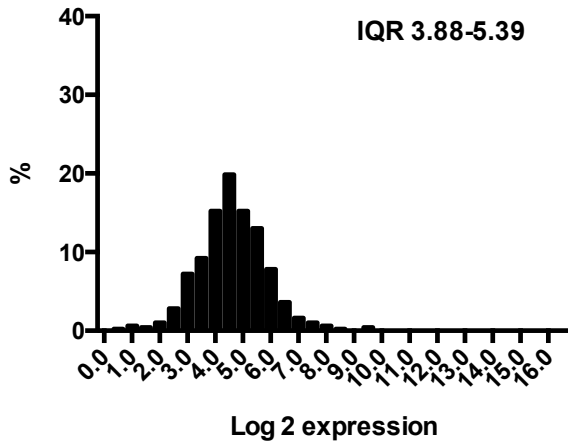
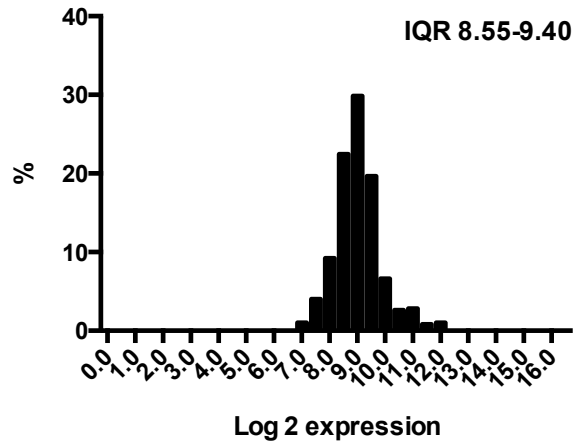
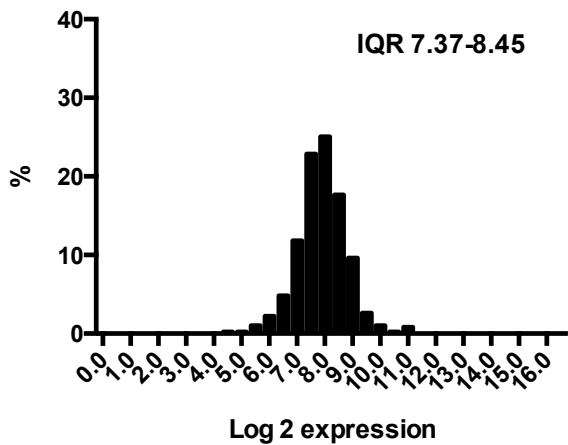
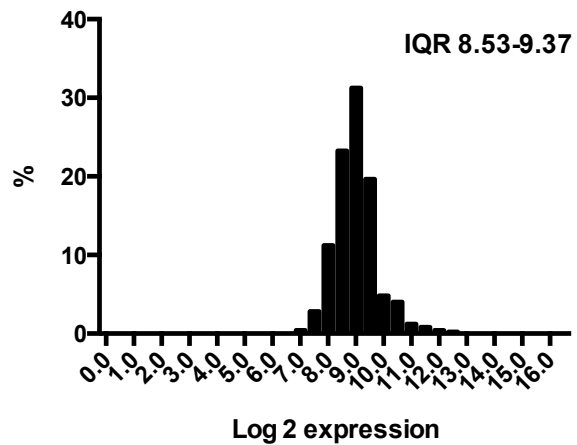


Figure 2

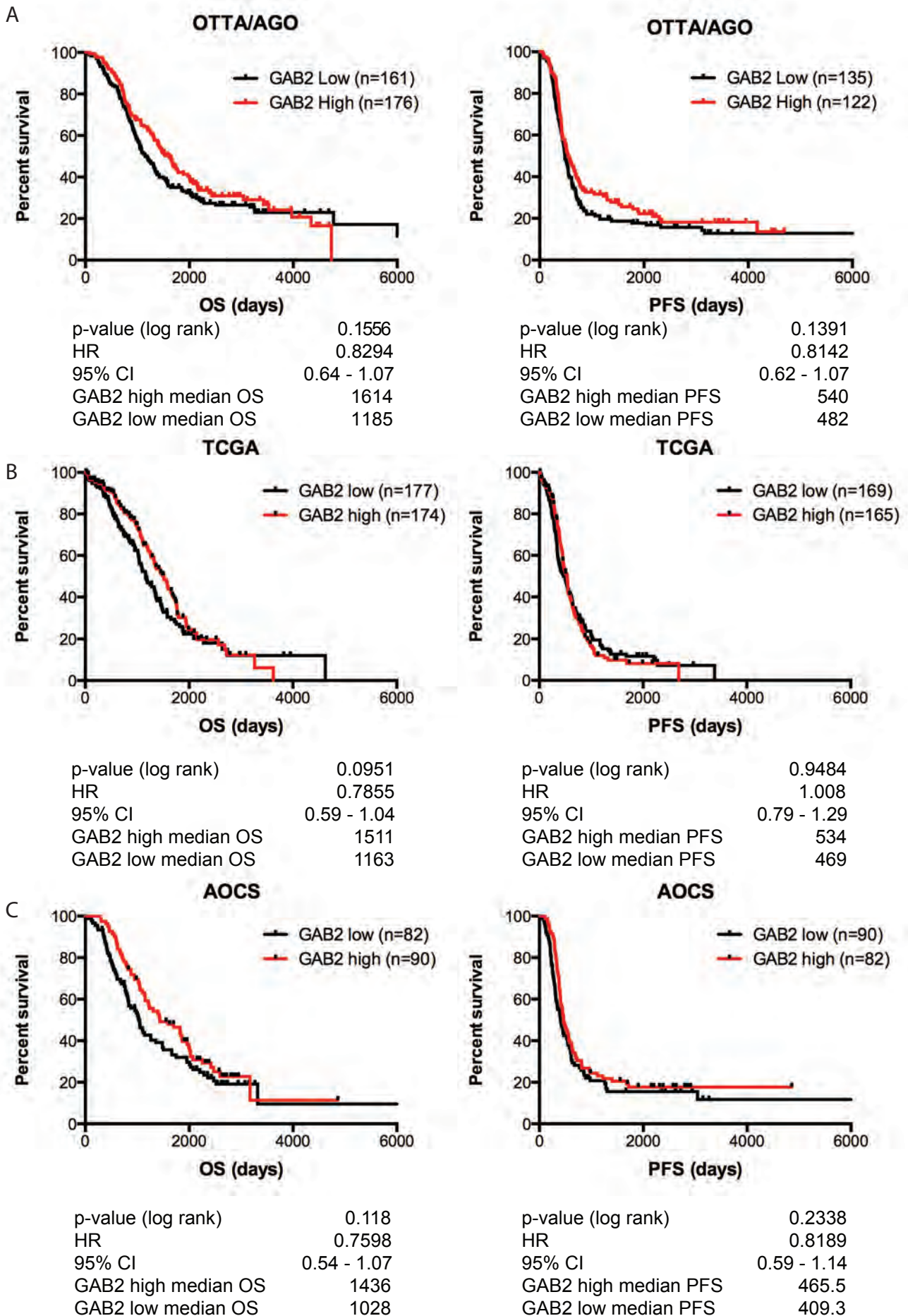


Supplementary Figure 1

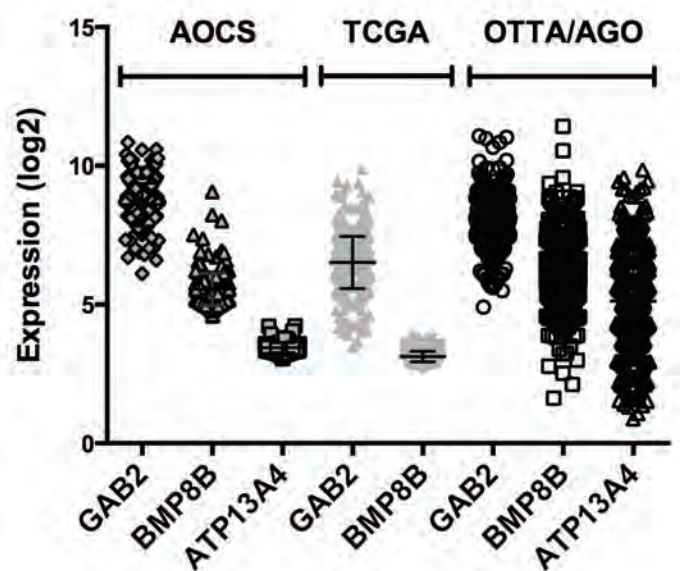
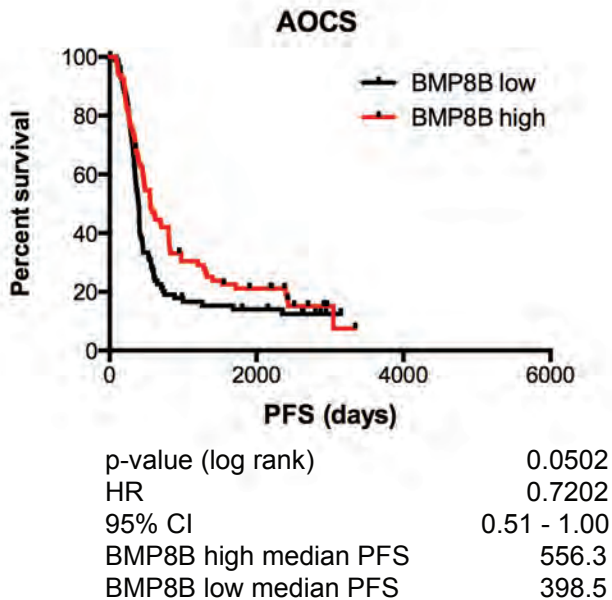
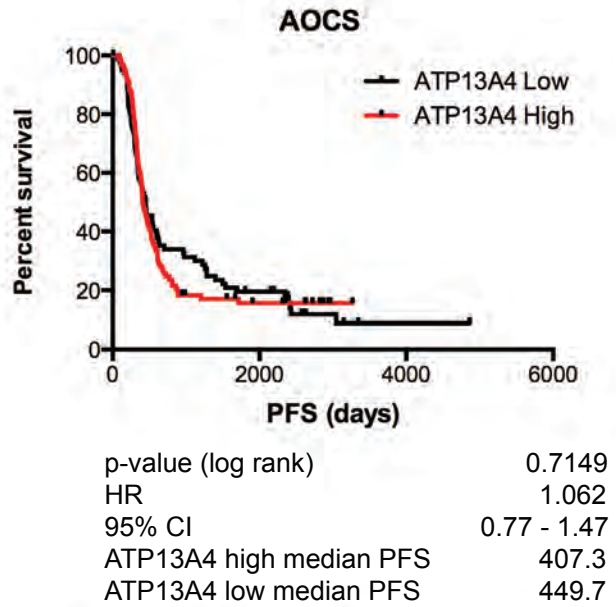
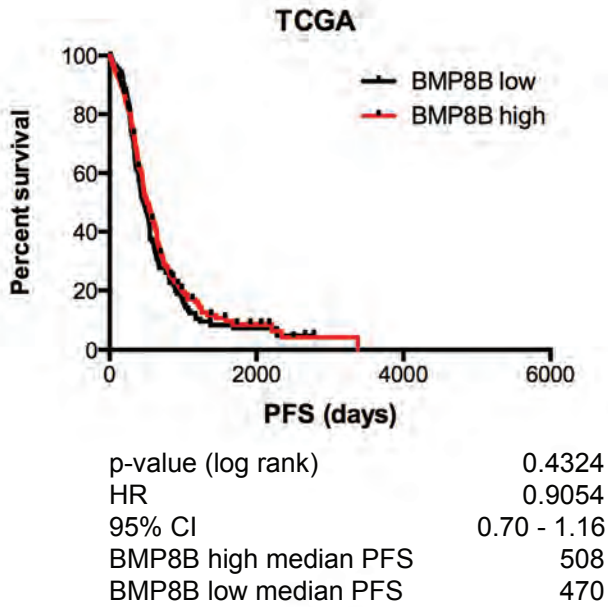
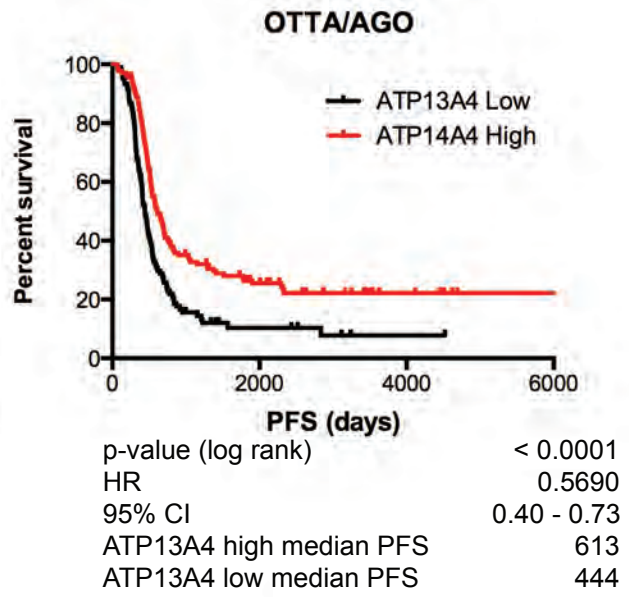
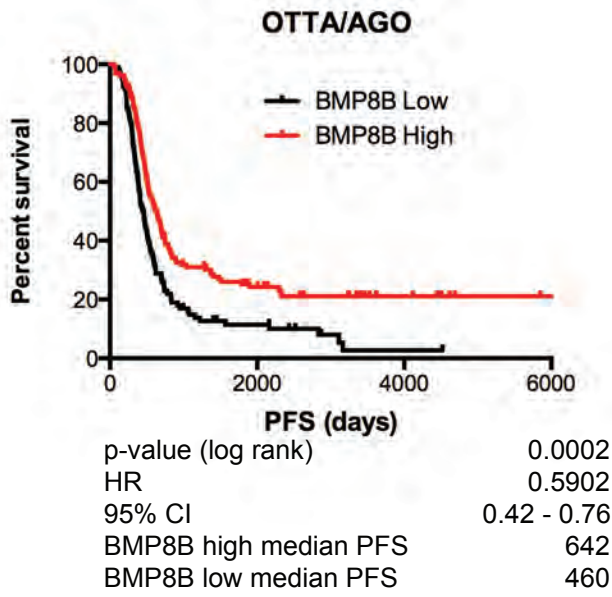


ATP13A4**BMP8B****CACNA1C****DYRK1B****GAB2****PAK4**

Supplementary Figure 3

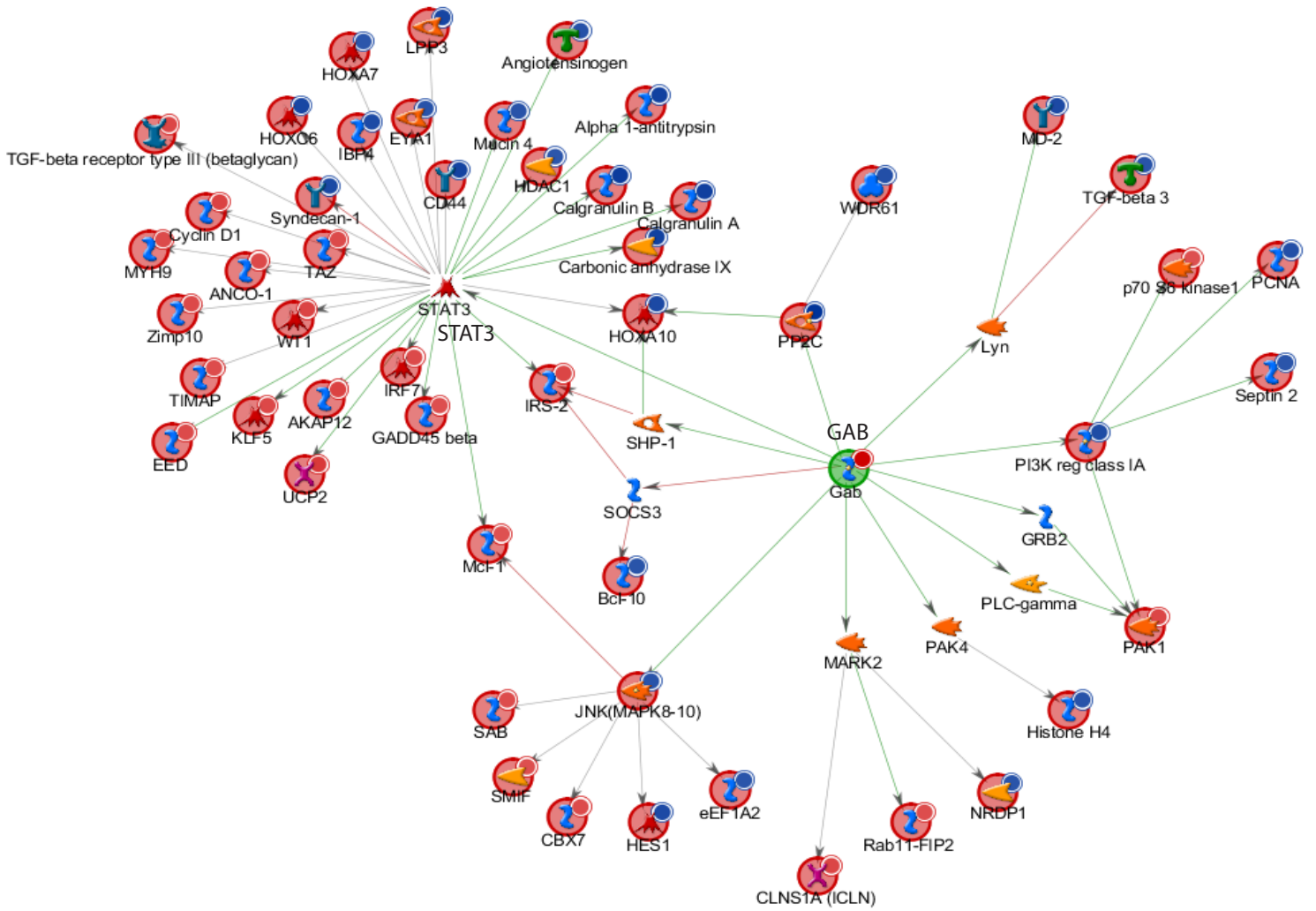


Supplementary Figure 4

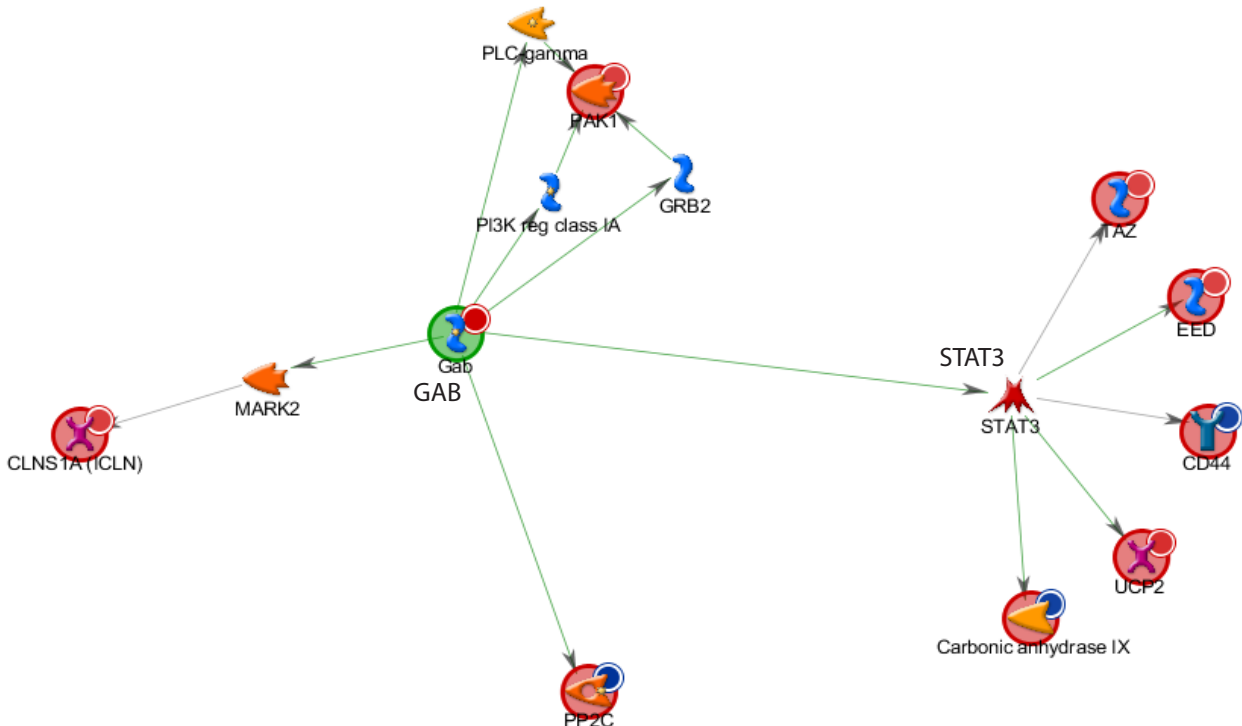


Supplementary Figure 5

A TCGA GAB2 differentially expressed gene network



B AOCs GAB2 differentially expressed gene network



Correction: Enhanced GAB2 Expression Is Associated with Improved Survival in High-Grade Serous Ovarian Cancer and Sensitivity to PI3K Inhibition

In this article, which appeared in the June 2015 issue of *Molecular Cancer Therapeutics* (1), the authors regret that the extracted data from the Arbeitsgemeinschaft Gynäkologische Onkologie (AGO-OVAR3) randomized controlled trial in Germany is incorrect.

The authors correctly extracted data with the correct sample key on December 22nd, 2015, and have now repeated the survival analysis. The corrected data, which comprises 40% of the dataset for the first survival analysis and 17% of the combined second survival analysis, changes p-values for all genes, as would be expected, and some genes have altered statistical significance (Table 2, Supplementary Table 3).

The association of *GAB2* expression with survival is reduced in the first subset analysis, but importantly, the association of *GAB2* with overall survival by both Akaike Information Criterion analysis and in the large combined expression cohort is still statistically significant. Thus, the overall conclusions of the paper remain unchanged.

Figure 1A, Table 2, Supplementary Figures 1, 3 and 4, Supplementary Table 3, the abstract, and the results section have been corrected in this version.