

RISK LEVEL	DEFINITION (BASED ON CV STRATEGY, PATIENT INDEPENDENCE, AND EEG/FEATURE SPLIT TIMING)	EXAMPLES
HIGH RISK	- No explicit patient-wise splitting	- k-fold over EEG segments without subject control generation
	- Subject overlap possible or likely. - Data split occurs after feature extraction, especially if using spectrograms or time-frequency images.	- CNN trained on spectrograms, randomly split after image
	- Sliding window methods applied globally before splitting, causing information bleed across time or patients.	
	- Cross-validation over samples or windows only, not subjects.	
MEDIUM RISK	- Cross-validation may be patient-independent, but not clearly stated or fully enforced.	- 80/20 random split of generated features/images
	- Split occurs after feature/image generation, risking shared patterns across sets.	- Lack of clarity on whether same patient contributes to both train/test
	- Sliding windows or segment overlaps may unintentionally create shared temporal structure across folds.	
	- Possibly random splits of instances/images without subject stratification.	
LOW RISK	- Cross-validation is patient-independent (e.g., LOPO, LOSO, patient-wise k-fold).	- LOPO / LOSO- External validation on held-out patients
	- Data splitting is done before feature extraction (i.e., on raw EEG).	- Raw EEG segmented and split at subject-level
	- No patient overlaps between training, validation, and test sets.	
	- Data augmentation or sliding windows occur only within training folds.	