Supplementary Material for:

Title: Real-Time MRI-Guided Catheter Tracking Using Hyperpolarized Silicon Particles

Authors: Nicholas Whiting^{1†}, Jingzhe Hu^{1,2†}, Jay V. Shah^{1,3}, Maja C. Cassidy⁴, Erik Cressman⁵, Niki Zacharias Millward¹, David G. Menter⁶, Charles M. Marcus⁷, Pratip K. Bhattacharya¹*

Affiliations:

¹Department of Cancer Systems Imaging, The University of Texas MD Anderson Cancer Center, Houston, TX 77030

²Department of Bioengineering, Rice University, Houston, TX 77030

³Department of Biomedical Engineering, The University of Texas at Austin, Austin, TX 78712

⁴Kavli Institute of NanoScience, Delft University of Technology, Delft, Netherlands

⁵Department of Interventional Radiology, The University of Texas MD Anderson Cancer Center, Houston TX 77030

⁶Department of Gastrointestinal Medical Oncology, The University of Texas MD Anderson Cancer Center, Houston TX, 77030

⁷Niels Bohr Institute, University of Copenhagen, Denmark

*⁾To whom correspondence should be addressed. Electronic mail:

pkbhattacharya@mdanderson.org; fax: 713-563-4894

^{†)}These authors contributed equally to this work.



Supplemental Fig. S1: High resolution HP²⁹**Si particle MRI-tracking** *in vivo.*²⁹Si image (co-registered with single ¹H anatomical scan) showing a high resolution (1 mm x 1 mm) ²⁹Si image of an angiocatheter loaded with silicon particles inside the large intestines of a live normal mouse. Single 90° ²⁹Si RARE image (TR/TE: 500 ms/2.184 ms; RARE factor of 64). Absolute ²⁹Si signal intensities are denoted in arbitrary units on the colored scale; greyscale denotes ¹H intensities. See *inset* of Fig. 2 for example photograph of mouse.

Imaging methods and processing

Fig. 1a shows four images using ²⁹Si FLASH ($\alpha = 8^{\circ}$, 8° , 12°) and RARE ($\alpha = 90^{\circ}$) imaging sequences (at t = 40 min), respectively. The FLASH images used TR/TE values of 2 ms/0.7 ms, while the RARE image used TR/TE values of 60 ms/1.841 ms; all ²⁹Si images were acquired with a 32 x 32 matrix size, FOV = 64 x 64 mm, and resolution of 2 x 2 mm. The ²⁹Si images are co-registered with a ¹H coronal RARE scan ($\alpha = 90^{\circ}$), TR/TE: 1800 ms/9.6 ms with a RARE factor of 8; 256 x 256 matrix size (0.25 x 0.25 mm resolution). **Fig. 1b** was achieved with a series of ²⁹Si FLASH sequences ($\alpha = 8-22^{\circ}$, 32x32) at discrete time intervals, with the last timepoint (28 minutes) corresponding to a 90° ²⁹Si RARE sequence. The picture of the catheter

and phantom was scaled and overlaid in Adobe Illustrator. **Fig. 1c** used a series of ²⁹Si FLASH sequences (3D 32x32x16) with $\alpha = 3-6^{\circ}$, TR/TE: 4 ms/0.662 ms, and resolution of 2 x 2 x 4 mm.

Figure 2 shows a composite of eight ²⁹Si FLASH images ($\alpha = 6-11^{\circ}$, 32x32), TR/TE: 4 ms/0.692 ms, 2 x 2 mm pixel size. Co-registered with an average of three ¹H coronal scans (RARE; $\alpha = 90^{\circ}$) taken after the conclusion of the ²⁹Si imaging protocol, TR/TE: 60 ms/1.841 ms, 2 x 2 mm pixel size.

Figure 3 shows a series of six ²⁹Si FLASH images ($\alpha = 6-10^{\circ}$, 32x32), TR/TE: 4 ms/0.692 ms, 2 x 2 mm pixel size. Co-registered with an average of three ¹H anatomical coronal scans (RARE; $\alpha = 90^{\circ}$), TR/TE: 1800 ms/9.6 ms with a RARE factor of 8, 0.25 x 0.25 mm pixel size, taken immediately after each ²⁹Si acquisition to monitor catheter-induced anatomical movement.

For Figures 1-3, the initial tipping angle was chosen to provide an adequate amount of signal for observation while minimally perturbing the available magnetization. The tipping angle was ramped for subsequent acquisitions to maintain a near-steady signal intensity. The final acquisition used the remaining magnetization with a hard 90° pulse.

Figure 4 used a sequential series of ²⁹Si FLASH sequences (repetition time = 5 ms, number of repetitions = 20, 32x32) with $\alpha = 4^{\circ}$, TR/TE: 5 ms/ 0.692 ms, resolution of 2 x 2 x 2 mm. This series of images took place over 3.2 seconds. Co-registered with a ¹H coronal RARE scan ($\alpha = 90^{\circ}$)

All data was processed in Matlab using the following procedure:

a) perform ²⁹Si image processing routine:

- Zero-filling the original k-space data (2D dataset 32x32, 3D dataset 32x32x8) to 256x256 (x256) before Fourier transformation
- 2. Import images reconstructed by ParaVision into MatlabNormalize the image to [0,1]
- 3.Normalize the image to [0,1]
- 4. Apply a threshold to the image according to Supplemental Table1. We employed a relatively high threshold due to *a priori* knowledge that the hyperpolarized ²⁹Si signals emanate from one concentrated source.

b) perform ¹H image processing routine:

1.Import images reconstructed by ParaVision (default settings) into Matlab

2.Identify relevant slices and increase the contrast of ¹H images by saturating the top and bottom 1%.

c) overlay the ²⁹Si and ¹H image with the "Image Processing Toolbox" in Matlab

Figure	Description	Threshold
Fig. 1a	urinary catheter (large sample)	0.5
Fig. 1b	Y-phantom (small sample)	0.85
Fig. 1c	3-D spiral phantom (small sample)	0.80
	Supplemental video 1	
Fig. 2	<i>in vivo</i> (small sample)	0.75
	Supplemental video 2	
Fig. 3	<i>in vivo</i> , alternating ¹ H, ²⁹ Si images(small sample)	0.75
	Supplemental video 3	
Fig. 4	real time urinary catheter (large sample)	0.5
	Supplemental video 4	
SFig. 1	high resolution HP ²⁹ Si particle MRI-	0.5
	tracking in vivo	

Supplemental Table1: Threshold used for ²⁹Si image processing

Supplemental Video S1: Rotating view of spiral phantom (for Fig. 1c).

Supplemental Video S2: Time lapse video of *in vivo*²⁹Si catheter tracking (for Fig. 2).

Supplemental Video S3: Time lapse video of co-registered *in vivo* ²⁹Si catheter tracking (for Fig. 3).

Supplemental Video S4: Real-time imaging of catheter transit in gelatin phantom (for Fig. 4).