Supplementary Materials:



Fig. S1. Flowchart study protocol. PK = pharmacokinetics. In addition, blood sampling for safety analysis was performed 2 to 3 weeks after surgery.



Fig. S2. Patient #1: Fluorescence imaging of a slice of a radical nephrectomy specimen visualized considerable intratumoral heterogeneity in the uptake of ¹¹¹In-DOTA-

girentuximab-IRDye800CW. A high tumor-to-normal fluorescent contrast was seen at the tumor borders and lower uptake in the center of the tumor. (A) Macroscopic photograph. (B) Fluorescence image obtained with the Odyssey flatbed fluorescence scanner.

Table S1. Overview of AE that were possibly related					
Patient #	Protein dose	Duration of hospital admission (days)	Adverse event	Intervention	CTCAE Grade
2	5	2	Increased creatinin day 4 p.i.**	-	Ι
6	10	4	Malaise day after injection	-	Ι
9	30	6	Thrombocytosis day 4 p.i.**	-	Ι
11	50	4	Increased amylase day 7 p.i.	-	Ι
14*	50	2	Increase amylase day 4 p.i.	-	Ι

Blood for safety analyses was tested for the following parameters; hemocytometry (Hb, Ht, leucocytes, thrombocytes), kidney function and electrolytes (creatinin, sodium, potassium, phosphate and calcium), liver chemistry (ALAT, ASAT, GGT LDH, ALP, bilirubin, amylase), albumin and C-reactive protein. p.i.= post injection. All lab changes were transient.*Patient with a CAIX-negative tumor. ** Unlikely to be related.

Movie S1. Intraoperative gamma probe detection during radical nephrectomy 7 days after administration of ¹¹¹In-girentuximab-IRDye800CW in a ccRCC patient.

Movie S2. Real-time intraoperative fluorescence imaging 7 days after administration of ¹¹¹Ingirentuximab-IRDye800CW during open partial nephrectomy in a ccRCC patient.