Supplementary Table 3. The Diagnostic Ability of Gd-EOB-MRI with CEUS as a Second-Line Modality to Identify HCC among the at Risk Observations by Reviewer 2

Guidelines	Gd-EOB-MRI			Gd-EOB-MRI, Then CEUS*			Р		
	Sensitivity	Specificity	Accuracy	Sensitivity	Specificity	Accuracy	Sensitivity	Specificity	Accuracy
All (n = 103)									
EASL	74.7 (63.6, 83.8)	100 (85.8, 100)	0.87 (0.79, 0.93)	82.3 (72.1, 89.9)	100 (85.8, 100)	0.91 (0.84, 0.96)	0.01	N/A	0.01
KLCA-NCC	88.6 (79.5, 94.7)	87.5 (67.6, 97.3)	0.88 (0.80, 0.94)	93.7 (85.8, 97.9)	87.5 (67.6, 97.3)	0.91 (0.83, 0.95)	0.04	N/A	0.04
Noninvasive diagnostic criteria of CEUS [†]	CEUS w 59.5 (47.9, 70.4)	ith sulfur hexa 100 (85.8, 100)	0.80 (0.71, 0.87)						
Pathologic proven (n = 57)									
EASL	67.7 (49.5, 82.6)	100 (85.2, 100)	0.84 (0.72, 0.92)	79.4 (62.1, 91.3)	100 (85.2, 100)	0.90 (0.79, 0.96)	0.045	N/A	0.01
KLCA-NCC	76.5 (58.8, 89.3)	86.9 (66.4, 97.2)	0.82 (0.69, 0.91)	93.7 (85.8, 97.9)	87.5 (67.6, 97.3)	0.91 (0.83, 0.95)	0.045	N/A	0.01
Noninvasive	CEUS with sulfur hexafluoride								
diagnostic criteria of CEUS [†]	70.6 (52.5, 84.9)	100 (85.2, 100)	0.85 (0.73, 0.93)						

Numbers in parentheses are 95% confidence intervals. *CEUS was performed when MRI presented inconclusive image features for noninvasive diagnosis of HCC, †Noninvasive diagnostic criteria of CEUS were APHE (≥ 1 cm) with mild and late (≥ 60 seconds) washout in CEUS LI-RADS v2017, EASL and KCLA-NCC guidelines. EASL = European Association for the Study of the Liver, KLCA-NCC = Korean Liver Cancer Association and the National Cancer Center, LI-RADS = Liver Imaging-Reporting and Data System