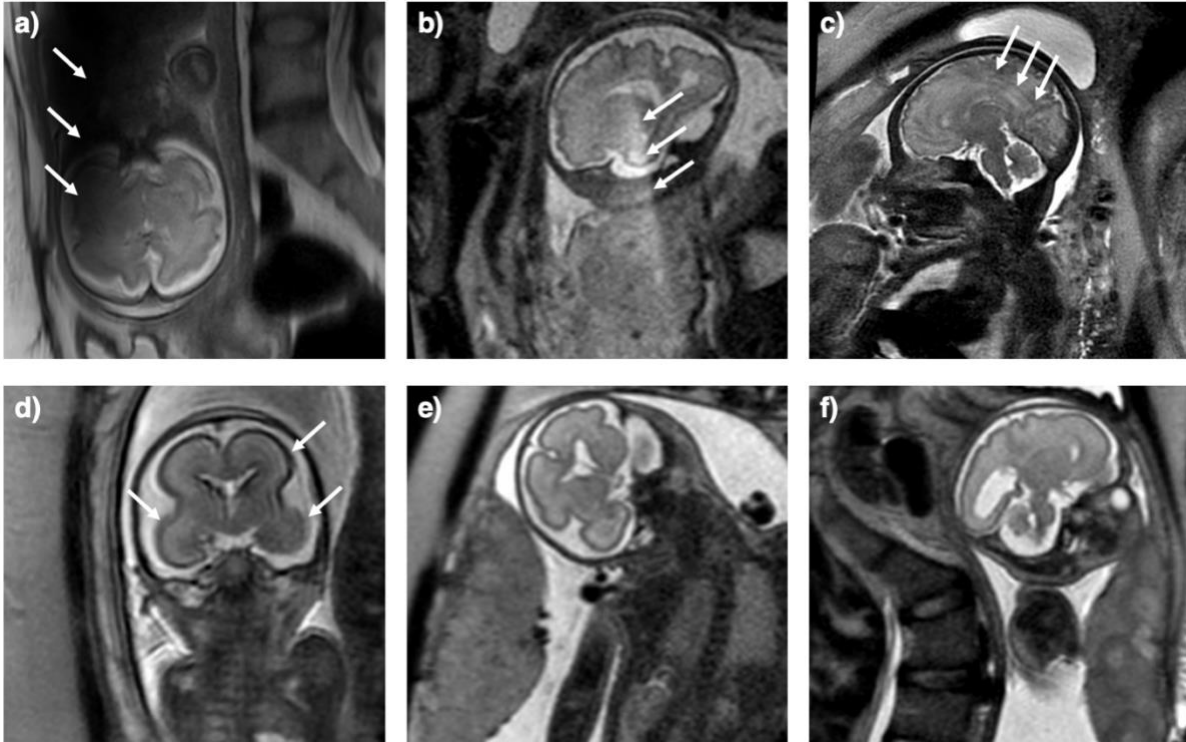


Supplementary Material

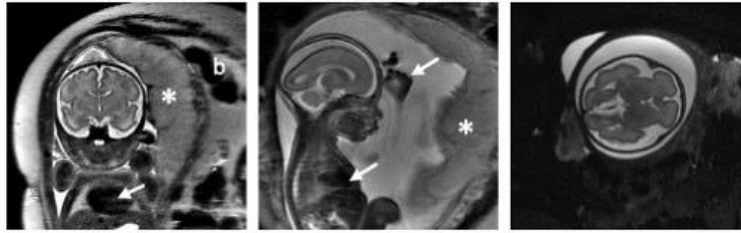
Shen L, Zheng J, Lee EH, Shpanskaya K, McKenna ES, Atluri MH, Plasto D, Mitchell C, Lai LM, Guimaraes CV, Dahmouh H, Chueh J, Halabi SS, Pauly JM, Xing L, Lu Q, Oztekin O, Kline-Fath BM, Yeom KW. Attention-Guided Deep Learning for Gestational Age Prediction using Fetal Brain MRI. *Sci Rep*. Published online December 2021.

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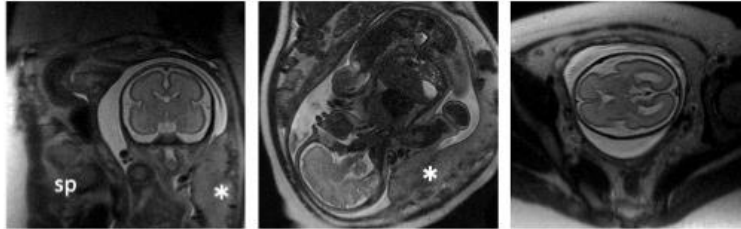
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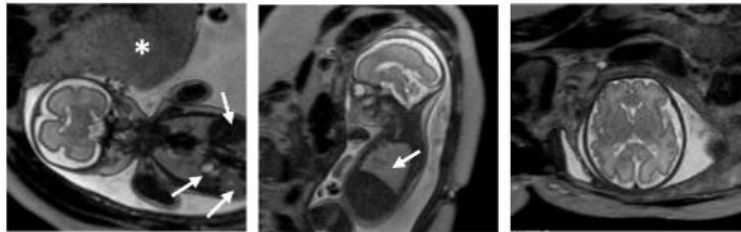
Supplementary Figure S1. Common artifacts and variations in multi-plane fetal brain imaging. (a) Signal drop-out ipsilateral to the fetal brain and body (arrows) is seen stemming from dielectric effect artifact. (b) Linear high signal (arrows) is seen representing wrap-around or aliasing artifact. (c) Multiple curvilinear signal (arrows) could mimic cortical malformation, but most likely represents motion artifacts, as evidenced by the regions below the brain. (d) Fetal motion has resulted in image blurring (arrows) at brain cortical surface. (e, f) Oblique anatomic imaging commonly occurred due to variations in fetal position at image.



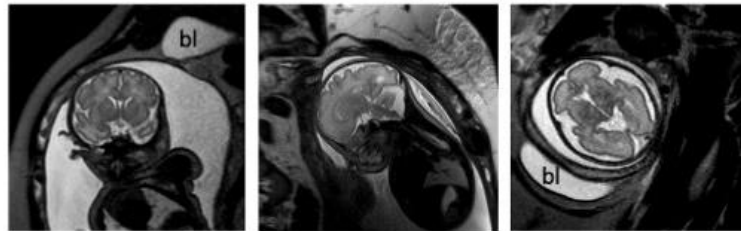
**Stanford Lucile Packard
Children's Hospital**
(N = 741)



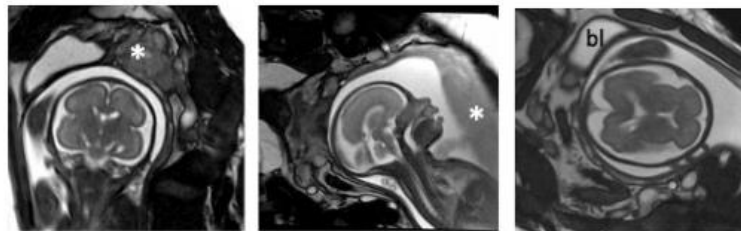
**Dignity Health – St. Joseph's
Hospital and Medical Center**
(N = 25)



**Children's Hospital Los
Angeles**
(N = 156)

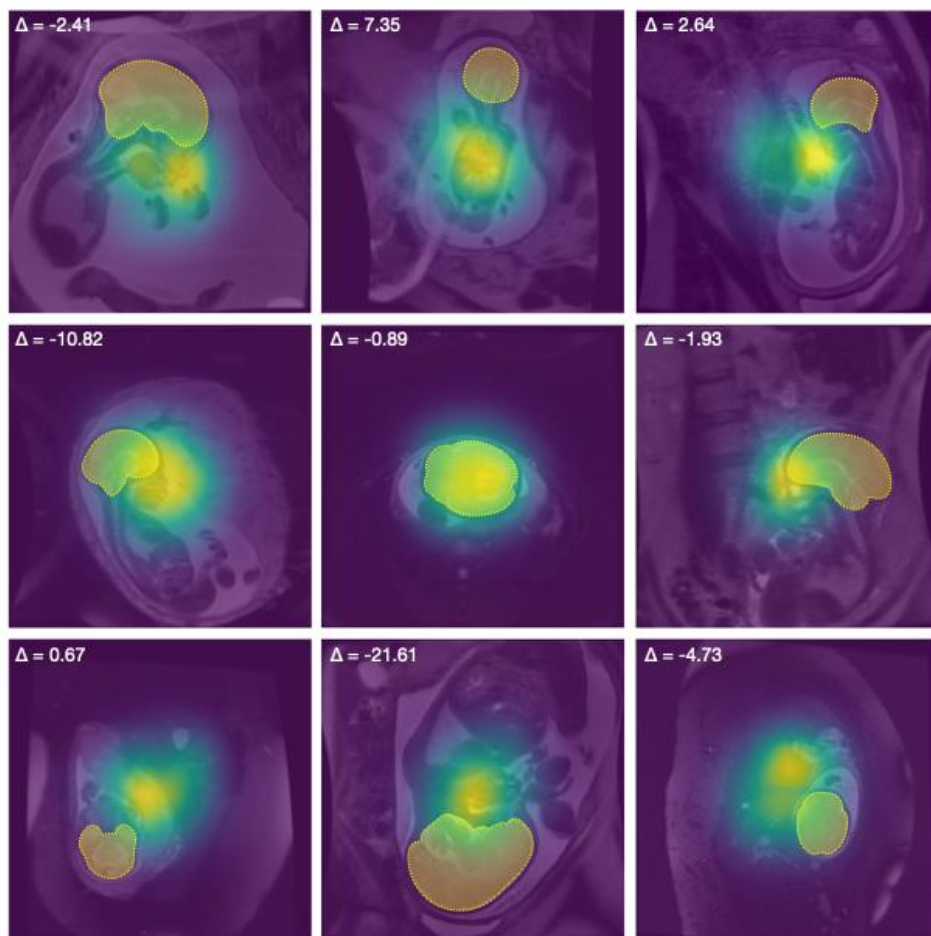
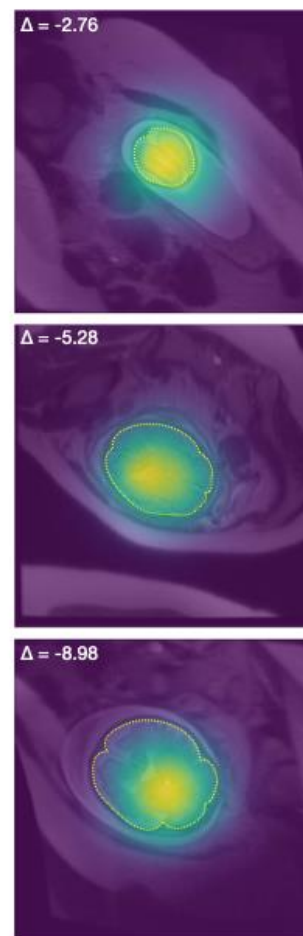
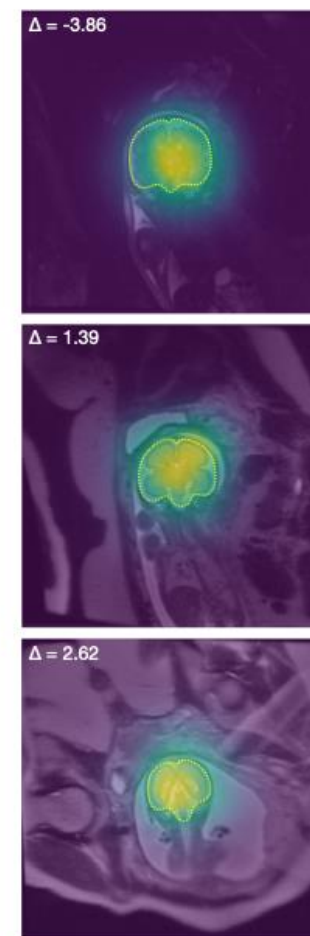


**Cincinnati Children's
Hospital**
(N = 64)



**Tepecik Training and
Research Hospital**
(N = 189)

Supplementary Figure S2. Example of cropped multi-plane fetal images from external institutions. From top to bottom: Stanford Lucile Packard Children's Hospital, St. Joseph's Hospital and Medical Center, Children's Hospital Los Angeles, Cincinnati Children's Hospital, and Tepecik Training and Research Hospital. In addition to maternal structures, such as bladder (bl), bowel (b), and spine (sp), placenta (*), non-neural fetal structures (arrows), such as lung, kidney, heart, liver, gallbladder, and limbs were often included in the image field of view. Fetus position, size, and background noise varied widely within and across datasets.

a) Brain Position**b) Brain Size****c) Background Noise**

Supplementary Figure S3. Variability in attention masking based on (a) fetal brain position, (b) size, and (c) background noise. The difference between estimated and true gestational ages in days, as predicted by the corresponding single-plane 1-slice model, is displayed in the upper left corner of each image (Δ prediction – ground truth). As visualized, the attention mechanism performs variably across different degrees of non-uniformity, showing the most resilience to background noise and the least to positional variation. Inclusion of the global branch (i.e., entire image) promotes performance stability by guaranteeing semantic feature extraction from the fetal brain despite imprecise localization.

Supplementary Table S1. Overview of Stanford Fetal Cohort (N=741) and MRI Indications

Top indications for MRI, by category^a	N (%)^b		N (%)
<i>Pregnancy Conditions</i>	43 (5.8)	<i>Cardiovascular</i>	27 (3.6)
Oligo- or anhydramnios	15	Congenital heart defect (TOF, VSD, ASD, etc.)	14
Polyhydramnios	14	Dextrocardia	2
IUGR	4	Ectopia cordis	2
Other	10	Echogenic intracardiac focus	2
		Other	7
<i>Family History</i>	13 (1.8)	<i>Gastrointestinal</i>	140 (18.9)
Hereditary hemorrhagic telangiectasia	2	Bowel dilation	44
Joubert syndrome	2	Abdominal mass or cyst	29
Polymicrogyria	2	Increased bowel echogenicity	11
Other	7	Small stomach	10
		Ascites	8
<i>Central Nervous System</i>	134 (18.1)	Other	38
Absence of cavum septum pellucidum	29	<i>Renal / Genitourinary</i>	119 (16.1)
Enlarged cisterna magna	29	Multicystic dysplastic kidney	16
Ventriculomegaly	15	Pelvic / ovarian cyst	16
Cerebellar / cerebellar vermis hypoplasia	8	Hydronephrosis / renal pelviectasis	14
Dandy-Walker malformation	6	Renal agenesis	13
Other	47	Other	60
<i>Orofacial</i>	41 (5.5)	<i>Musculoskeletal</i>	106 (14.3)
Cleft lip and/or palate	20	Congenital diaphragmatic hernia	40
Microcephaly	13	Omphalocele / gastroschisis	19
Micrognathia / retrognathia	7	Other	47
Other	1	<i>Miscellaneous</i>	65 (8.8)
<i>Pulmonary</i>	142 (19.2)	Heterotaxy	6
Lung mass or cyst	48	Poor ultrasound visualization	6
CCAM / CPAM	43	Other	53
Bronchopulmonary sequestration	30		
Other	21		

Abbreviation: IUGR, intrauterine growth restriction; CCAM, congenital cystic adenomatoid malformation; CPAM, congenital pulmonary airway malformation; EDD, estimated date of delivery; TOF, Tetralogy of Fallot; VSD, ventricular septal defect; ASD, atrial septal defect

^a Indications above represent suspected pathologies by ultrasound but do not indicate final radiologist interpretation.

^b Percent of unique patients with a given indication. Some patients had two or more indications for MRI.