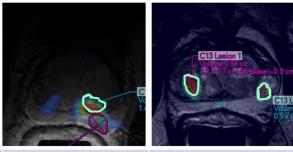
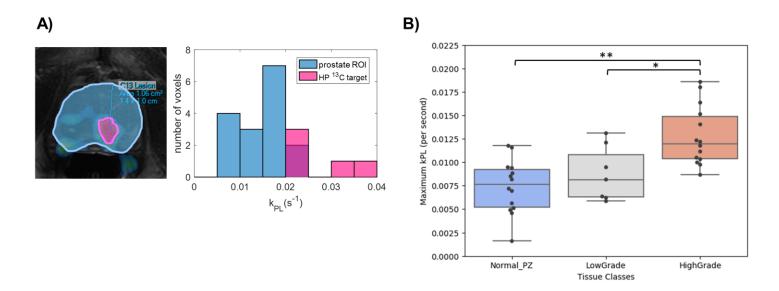
## Improving Multiparametric MR - TRUS Guided Fusion Prostate Biopsies with Hyperpolarized <sup>13</sup>C Pyruvate Metabolic Imaging : A Technical Development Study

## **Supporting Information**



Patient #	Patient 4	Patient 5
PSA	1.3	17
UCSF CAPRA Score	2	1
Risk Group	Low	Low
# of <sup>13</sup> C Targets	1	2
k <sub>PL</sub> at <sup>13</sup> C Target(s <sup>-1</sup> )	$0.0410$ ( $\sigma = 0.0012$ )	$0.0279/0.0312$ ( $\sigma = 0.0019$ )
# of (+) cores/total cores in targeted + systematic biopsy	8/23	3/19
Overall Grade	3+3	3+3
# of (+) <sup>13</sup> C cores/ total <sup>13</sup> C cores	2/2	2/3 (left), See below(right)
<sup>13</sup> C Core Grade	3+3	3+3 (left), ASAP/HGPIN(right)

**Supporting Information Table S1.** Summary of the clinical characteristics and biopsy findings from Patient 4 and 5.



**Supporting Information Figure S1. A)** An example case showing the comparison of  $k_{PL}$  in the  $^{13}$ C targeted lesion versus segmented prostate outside of the lesion. Pathological diagnosis of the biopsy tissue was Gleason 3+3 tumor with 16% involvement. **B)**  $k_{PL}$  dichotomy between pathologist-defined low-grade prostate cancer (PCa) (Gleason  $\leq$  3+4), and high-grade prostate cancer (Gleason score  $\geq$  4+3). \*p = 0.034; \*\*p = 0.0003. The recommended  $k_{PL}$  threshold = 0.02(s<sup>-1</sup>) used in our study was corrected for the different MR sequence echo times between the EPSI acquisition in the cited reference versus the EPI in our study [24]. Figure reproduced with permission [17].