

Supplementary File S1: Gadoteric acid MRI protocol

The gadoteric acid-enhanced MRI protocol consisted of T1-weighted gradient echo sequences (T1-w GRE), 2D (axial, slice thickness ≤ 6 mm) and T1-w GRE, and 3D (axial, slice thickness ≤ 5 mm) pre-contrast sequences. Injection of gadoteric acid was performed via rapid hand or power injector (1.5 mL/s) at a dose of 0.025 mmol/kg body weight followed by a 30 mL saline flush. After injection, dynamic T1-w GRE 3D sequences were acquired in the late arterial phase (start of sequence via bolus tracking, start of central k-space readout 15s after bolus detected in the descending aorta), portovenous phase (start 60–70s after contrast injection), and venous phase (120s after contrast injection); all axial, slice thickness ≤ 5 mm. These acquisitions were followed by a T2-weighted turbo spin-echo (T2-w TSE), 2D sequence with and without fat suppression (axial, slice thickness ≤ 8 mm). DWI was added with recommended b-values of 0, 100, 600, and 1000 s/mm². In the HBP at 20 min post-contrast injection, two T1-w GRE 3D sequences were performed (coronal, slice thickness ≤ 6 mm, and axial, slice thickness ≤ 5 mm), followed by a T1-w GRE 2D (axial, slice thickness ≤ 6 mm). Independent reading included the following mandatory sequences: axial T1-w GRE 3D pre-contrast, arterial, portovenous, venous, and hepatobiliary phases; coronal T1w GRE 3D, hepatobiliary phase; and axial T2-w TSE, with/without fat saturation.