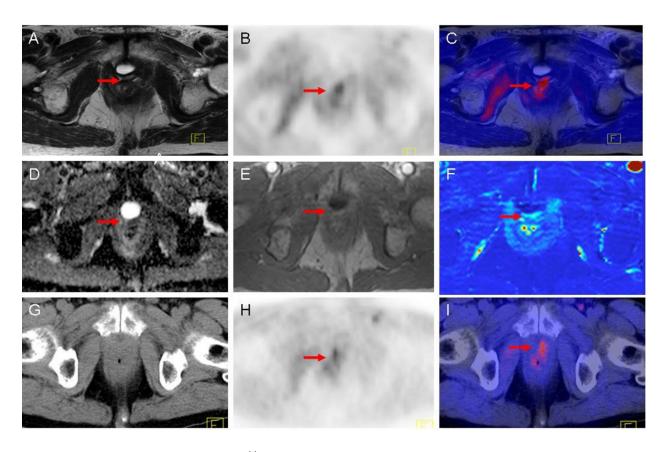
## **SUPPLMENTAL TABLE 1**

Tracer	Uptake time (in minutes	Activity for	MR sequences*
	post injection)	standard patient in MBq	
<sup>68</sup> Ga-DOTATOC	15	100-150	Neck to pelvis: coronal T1 TSE, axial T2 haste fat saturated (4 min/bed position (BP)) Upper abdomen: axial/ coronal T2 haste, diffusion-weighted imaging, dynamic contrast- enhanced imaging (20 min/BP list mode) Thorax to pelvis: axial fat saturated T1 GRE post Gd
<sup>68</sup> Ga-PSMA	45-60	130-200	Neck to pelvis: coronal T1 TSE, axial T2 haste fat saturated
<sup>11</sup> C-Choline	5	750-800	(4 min/BP for <sup>11</sup> C-Choline, 5 min/BP for <sup>68</sup> Ga-PSMA)  Pelvis: axial isotropic (0.6 mm) 3D T2w sequence, diffusion-weighted imaging and dynamic contrastenhanced sequences  Thorax to pelvis: axial fat saturated T1 GRE post Gd (15 min/BP list mode)
<sup>18</sup> F-Fluoride	45-60	300-370	Whole-body: coronal T1 TSE, coronal T2 STIR** (5 min/BP)

<sup>\*</sup> Field of view depending on patient size \*\* Short tau inversion recovery



**SUPPLEMENTAL FIGURE 1:** <sup>11</sup>C-Choline PET/CT and PET/MR images in a 77-year-old patient with recurrent prostate cancer, performed consecutively using a single-injection dual imaging protocol. In both the PET/CT and PET/MR images, there is a moderately intense, increased focal <sup>11</sup>C-Choline uptake in the left paramedian side of the former prostate bed in the PET component of both scans (B, H, red arrow). Corresponding MR images show a hypointense signal on the T2-weighted sequence (A red arrow), low ADC values on DWI indicating diffusion restriction (D red arrow) and moderate contrast enhancement in the subtraction images of CE T1 VIBE images (E red arrow). The parametric map of the initial AUC<sub>60</sub> confirmed a moderate wash-in rate (F red arrow). Fusion of PET and simultaneously acquired T2 TSE imaging (C red arrow) underline the good match of the images of both modalities. PET/CT fused images also show the faint tracer uptake (I red arrow), however note that the tumor cannot be differentiated from the surrounding tissues with CT alone (G).