## SUPPLEMENTS

## MATERIALS AND METHODS

### Human Subject/Patient Selection

Patients included in the present study participated in the phase II clinical trial analyzing the characteristics of Flurpiridaz in PET MPI (clinicaltrials.gov identifier: NCT00849108), with inclusion/exclusion criteria previously detailed (*1*). All the patients included in the present study were enrolled at the Ronald Reagan UCLA Medical Center and signed an informed consent approved by the local institutional review board. There were a total of 7 normal subjects and 8 CAD patients (Table 1). Participants were instructed to have no caffeine intake for 24h prior to pharmacological stress testing. As previously described (*2*) (*1*), normal subjects were recruited on the basis of their low likelihood of having myocardial ischemia based on a standard questionnaire which includes age, sex, presence or absence of angina pectoris and characteristics of anginal symptoms, when present. None of the normal subjects underwent coronary angiography. In patients who underwent coronary angiography (CAD patients), vascular territories were separated based on a diameter stenosis < 50% or ≥ 50%. For each participant, two Flurpiridaz PET studies were performed, one at rest and one with adenosine stress.

### Preparation of Flurpiridaz F 18

The radiotracer Flurpiridaz was prepared by Lantheus according to a procedure published previously (*2*).

### Statistical Analysis

All results are expressed as means and standard deviations. An analysis of variance and repeated measures analysis was performed. The natural logarithm of the territories was used in the repeated measures analysis for variance stability and sphericity assumption. A Bonferroni multiple comparison adjustment was performed. A P-value of less than 0.05 was considered statistically significant. IBM SPSS Statistics for Windows, Version 20.0 was used for the statistical analyses.

## REFERENCES

**1.** Berman DS, Maddahi J, Tamarappoo BK, et al. Phase II safety and clinical comparison with single-photon emission computed tomography myocardial perfusion imaging for detection of coronary artery disease: flurpiridaz F 18 positron emission tomography. *J Am Coll Cardiol.* 2013;61:469-477.

**2.** Maddahi J, Czernin J, Lazewatsky J, et al. Phase I, first-in-human study of BMS747158, a novel 18F-labeled tracer for myocardial perfusion PET: dosimetry, biodistribution, safety, and imaging characteristics after a single injection at rest. *J Nucl Med.* 2011;52:1490-1498.