

Supplemental Figure 1. Generation of a human PC mouse model harboring orthotopic xenografts of xPA-1-DC cells. The cells were inoculated into the tail of the mouse pancreas. The injection was performed slowly with a 27-gauge needle to avoid leakage. The pancreas was then returned to the abdomen, and the peritoneum and skin were closed in two layers using surgical sutures. There were no procedural or anesthesia-related fatalities.



Supplemental Figure 2. Expression of EGFR in xPA-1-DC orthotopic xenograft tumors.

Images of immunohistochemical staining for EGFR and negative control in xPA-1-DC tumors (upper and lower panels, respectively).



Supplemental Figure 3. Hematoxylin/eosin-stained image of an xPA-1-DC orthotopic xenograft tumor. The green arrowhead indicates tumor lesions invading the boundary of the normal pancreas.



Supplemental Figure 4. Surgical resection of an xPA-1-DC xenograft tumor. Representative bright-field (left), red fluorescence (xPA-1-DC tumor, middle), and merged view (right) images of the surgically resected pancreas with an xPA-1-DC xenograft (white arrowhead) as observed with a stereoscopic fluorescence microscope. P, pancreas; PC, pancreatic cancer; Sp, spleen.



Supplemental Figure 5. Body weight dynamics in tumor-free mice after partial

pancreatectomy and splenectomy. The surgery was conducted in tumor-free mice (n = 3) in a manner similar to that conducted in mice with orthotopic xPA-1-DC cell xenografts. There was no reduction in body weight after the surgery. Values are shown as the mean \pm SD.



Supplemental Figure 6. Characterization of ⁶⁴Cu-PCTA-cetuximab uptake by xPA-1-DC cell xenografts. The extent of uptake of ⁶⁴Cu-PCTA-cetuximab by xPA-1-DC orthotopic xenografts (n = 8) at 24 h after intraperitoneal injection compared to the previously reported values of uptake by the intraperitoneal HCT116-RFP tumors and normal mouse pancreata (8). Values are shown as the mean ± SD. Means marked by different letters (a and b) are significantly different (P < 0.05).

Supplemental Table 1.

PC recurrence patterns in the xPA-1-DC orthotopic mouse model at 2 weeks after

surgical resection.

Detterm of monument of	Number of mice	$\mathbf{D}_{\text{encountry}} = (0/1)$
Pattern of recurrence	(out of a total of 9)	Percentage (%)
Local recurrence	3	33
Hepatic metastasis	1	11
Peritoneal dissemination	9	100

Supplemental Table 2.

Treatment	Initial body weight $(g)^1$
0 MBq	17.56 ± 0.91
11.1 MBq	17.71 ± 0.45
22.2 MBq	18.59 ± 0.57
37 MBq	17.90 ± 1.77
74 MBq	18.08 ± 0.61

Initial body weight of mice in the study of Fig 3A.

¹There were no significant differences among groups.

Supplemental Table 3.

	MST				
Group	Adjuvant ⁶⁴ Cu- ipRIT	Surgery-only control	Gemcitabine	Surgery-only control	
	52.5	13.0	17.0	15.0	
	%MST (⁶⁴ Cu-ipRIT) = 403.8		%MST (gemcitabine) = 113.3		

Median survival time (MST) in different treatment groups.