

Supplementary Material

Table S1: Algorithm performances across all subgroups of imaging acquisitions and scan parameters, and patients' groups (US regions, patients' age and sex).

PARAMETER	CATEGORY	TP	FN	TN	FP	Sensitivity [95% CI]	Specificity [95% CI]
TYPE	All	170	16	184	17	91.4% [86.4% – 95.0%]	91.5% [86.8% – 95.0%]

GENDER	Male	85	106	8	6	93.41% [86.2% - 97.5%]	92.98% [86.6% - 96.9%]
	Female	85	78	9	10	89.47% [81.5% - 94.8%]	89.66% [81.3% - 95.2%]

AGE	18 ≤ Age < 40	23	0	14	3	100% [85.2% - 100%]	82.35% [56.6% - 96.2%]
	40 ≤ Age ≤ 60	61	3	45	4	95.31% [86.9% - 99.0%]	91.84% [80.4% - 97.7%]
	Age > 60	86	13	125	10	86.87% [78.6% - 92.8%]	92.59% [86.8% - 96.4%]

SLICE THICKNESS	ST < 1.5 mm	75	6	71	8	92.59% [84.6% - 97.2%]	89.87% [81.0% - 95.5%]
	1.5 mm ≤ ST ≤ 2.5 mm	95	10	113	9	90.48% [83.2% - 95.3%]	92.62% [86.5% - 96.6%]

DETECTOR ROWS	4 < NDR ≤ 8	0	0	0	0	NA	NA
	8 < NDR ≤ 16	24	0	14	1	100% [85.8% - 100%]	93.33% [68.1% - 99.8%]
	16 < NDR ≤ 32	22	3	31	2	88% [68.8% - 97.5%]	93.94% [79.8% - 99.3%]
	32 < NDR ≤ 64	94	10	105	12	90.38% [83.0% - 95.3%]	89.74% [82.8% - 94.6%]
	64 < NDR ≤ 128	19	2	21	1	90.48% [69.6% - 98.8%]	95.45% [77.2% - 99.9%]
	128 < NDR ≤ 256	0	0	0	0	NA	NA
	256 < NDR ≤ 320	1	0	0	0	100% [2.5% - 100%]	NA

US REGIONS	Continental	23	3	25	2	88.46% [69.9% - 97.6%]	92.59% [75.7% - 99.1%]
	Northeast	83	6	93	5	93.26% [85.9% - 97.5%]	94.9% [88.5% - 98.3%]
	Pacific	16	1	26	3	94.12% [71.3% - 99.9%]	89.66% [72.7% - 97.8%]
	Southeast	48	6	40	7	88.89% [77.4% - 95.8%]	85.11% [71.7% - 93.8%]

MANUFACTURER	GE MEDICAL SYSTEMS	105	12	100	10	89.74% [82.8% - 94.6%]	90.91% [83.9% - 95.6%]
	PHILIPS	15	0	15	2	100% [78.2% - 100%]	88.24% [63.6% - 98.5%]
	SIEMENS	36	2	51	4	94.74% [82.3% - 99.4%]	92.73% [82.4% - 98.0%]
	TOSHIBA/ CANON	13	2	18	1	86.67% [59.5% - 98.3%]	94.74% [74.0% - 99.9%]
	PNMS	1	0	0	0	100% [2.5% - 100%]	NA

Table S2: CINA–PE standalone validation study: Details regarding the found false negative (FN) cases.

CASE N°	False negatives' descriptions
FN #1	Missed right very small segmental Chronic PE This case was subject of consensus Presence of vena cava artifacts Presence bronchiolitis
FN #2	Missed right lobar and segmental Chronic PE Presence of linear filling defect within the PE (more peripheral filling defect) Presence of ground glass opacity Presence of pleural fluid
FN #3	Missed right very small segmental PE Presence of tots of lung nodules
FN #4	Missed left small segmental PE located close to a partial volume effect artifact The location of this PE is limit subsegmental Presence of bilateral pleural effusions
FN #5	Missed right very small segmental Chronic PE Presence of acquisition artifacts Presence of atelectasis
FN #6	Missed very small left lobar and segmental Chronic PE close to partial volume effect artifacts This case was subject of consensus Presence of multiple noncalcified pulmonary nodules Presence of calcified mediastinal/subcarinal lymph node
FN #7	Missed right interlobar Chronic PE Presence of linear filling defect within the PE This case was subject of consensus
FN #8	Missed left segmental PE Presence of bad contrast filling

FN #9	<p>Missed right main Chronic PE PE located inside of important motion artifacts and cava vena artifacts</p>
FN #10	<p>Missed right segmental PE in presence of volume partial effect artifacts Presence of bad contrast filling</p>
FN #11	<p>Missed left small segmental PE Noisy images Presence of bad contrast filling Presence of pulmonary edema, pneumonia, and pleural effusion</p>
FN #12	<p>Missed right segmental PE The location of this PE is limit subsegmental Complete occlusion of the artery</p>
FN #13	<p>Missed bilateral small segmental PE The location of this PE is limit subsegmental</p>
FN #14	<p>Missed right segmental PE close to hilar lymph node and partial volume effect artefacts Presence of bunch of nodules, pleural effusion, and ground glass opacity Presence of metastasis</p>
FN #15	<p>Missed left main PE in presence of tumor near to the occlusion Presence of metastatic nodules Presence of Pneumonia and complex pleural effusion</p>
FN #16	<p>Missed right main PE at the limits of chronic PE transformation Presence of an important pneumothorax in the right lung.</p>

Table S3: CINA–PE standalone validation study: Details regarding the found false positive (FP) cases.

CASE N°	False positives' descriptions
FP #1	<p>PE wrongly detected within a pulmonary vein Important vena cava artifacts Contrast mixing</p>
FP #2	<p>Large subsegmental PE correctly detected This case was subject of consensus Presence of atelectasis, consolidation, and pleural effusion</p>
FP #3	<p>Very bad quality images: PE wrongly detected in the pleural effusion in presence of very noisy images and important streak artifacts Presence of atelectasis, pneumothorax, and pleural effusion</p>
FP #4	<p>PE wrongly detected in the vena cava artifacts. This case was subject of consensus Presence of nodule, atelectasis, and pneumonia Presence of pneumothorax and pleural effusion Presence of drainage catheter</p>
FP #5	<p>PE wrongly detected in the hilar lymph node Presence of emphysema, consolidation, and atelectasis Presence of pneumothorax and pleural effusion</p>
FP #6	<p>PE wrongly detected in the vena cava artifacts. Poor contrast filling and anatomic distortion Presence of ground glass opacity and lung infiltration Presence of pneumothorax, and atelectasis Presence of emphysema</p>
FP #7	<p>Small PE correctly detected within a subsegmental artery Presence of atelectasis</p>
FP #8	<p>PE wrongly detected in the cava vein artefacts. Presence of emphysema Presence of nodule</p>
FP #9	<p>PE wrongly detected within a saccular aneurysm stuck to the main pulmonary artery. Presence of central venous catheter with the tip in the brachiocephalic vein Presence of atelectasis/consolidation, and pleural effusion</p>
FP #10	<p>PE correctly detected within a subsegmental artery This case was subject of consensus Contrast mixing Presence of streak artifacts and important motion artifacts There is an aortic repair (graft) An endotracheal tube is in place Presence of atelectasis and lung infiltration</p>

FP #11	<p>PE correctly detected within subsegmental artery with partial volume effect artifacts</p> <p>Presence of bad contrast filling</p> <p>Noisy images</p> <p>Presence of atelectasis, and nodules</p>
FP #12	<p>Partial volume effect artifacts (crossing between a vein and an artery)</p> <p>Presence of bad contrast filling, and motion artifacts</p> <p>Presence of calcified pleural plaques</p>
FP #13	<p>Streak artifact (graft)</p> <p>Presence of streak artifacts, bad contrast filling, and motion artifacts</p> <p>This case was subject of consensus</p>
FP #14	<p>PE correctly detected in a subsegmental artery</p> <p>This case was subject of consensus</p> <p>Presence of pulmonary nodules</p>
FP #15	<p>PE correctly detected in a subsegmental artery, although very close to the segmental artery</p> <p>This case was subject of consensus</p>
FP # 16	<p>PE within a pulmonary vein</p> <p>Presence of ground glass opacity</p>
FP #17	<p>PE within vena cava artifacts</p>