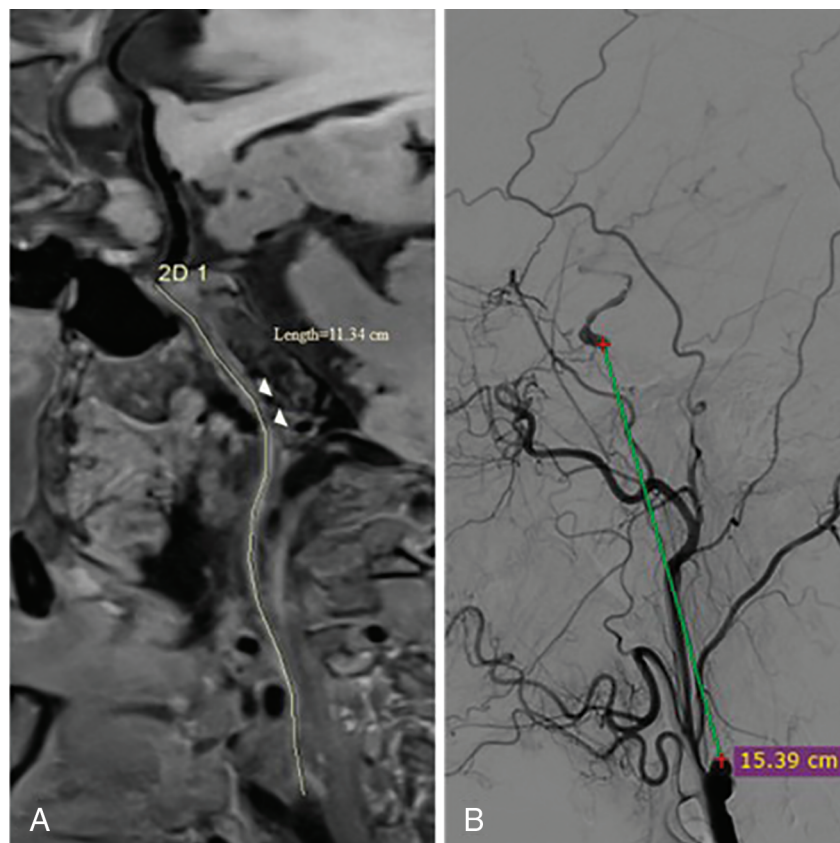
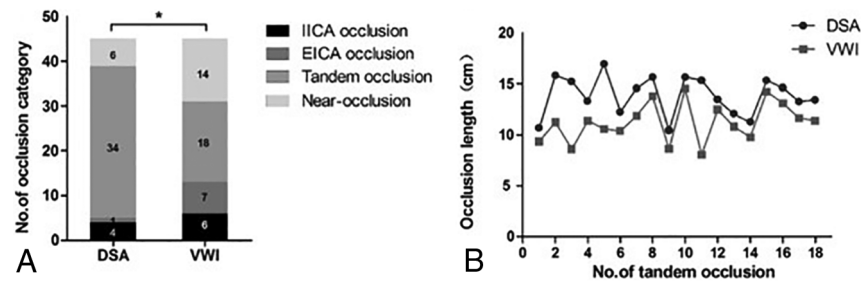


ON-LINE FIG 1. Sagittal reconstruction images for each occlusion type on HR-VWI. A, IICA occlusion at the supraclinoid segment of the ICA (*arrow*). B, EICA occlusion at the cervical segment with intraplaque hemorrhage (*arrow*). C, Tandem occlusion from the carotid bulb to the clinoid segment (*arrow*). D, Near-occlusion (*arrow*) with carotid bulb plaque.



ON-LINE FIG 2. The Measurement method of occlusion length on HR-VWI and DSA. The length of occlusion measured on HR-VWI was 11.34 cm (A), shorter than that of DSA (15.39 cm) (B).



ON-LINE FIG 3. Comparison between HR-VWI and DSA in the occlusion category (A) and length (B) of the ICA. The length of the occlusion measured on HR-VWI was shorter than that on DSA ($P < .001$).

On-line Table 1: MR imaging parameters

	DWI	TOF-MRA	IR-SPACE
FOV (mm ²)	220 × 220	250 × 204	240 × 210
Matrix size	180 × 180	320 × 223	384 × 336
Thickness (mm)	5.00	0.90	0.55
TR/TE (ms)	4000/93	21/3.42	900/15
Bandwidth (Hz/Px)	1262	185	465
Scan time (s)	62	369	463

On-line Table 2: Patient baseline demographics and characteristics^a

Demographics/Characteristics	Total (n = 45)
Age (yr)	62 (53.5–66.5)
Men	39 (86.7)
Hypertension	26 (57.8)
Hyperlipidemia	8 (17.8)
Diabetes mellitus	16 (35.6)
Coronary disease	6 (13.3)
Smoking	22 (48.9)
Drinking (alcohol)	17 (37.8)
Prior stroke	19 (42.2)
ALS	12 (26.7)
Baseline NIHSS	1 (0–2.5)
Interval from of HR-VWI to symptom onset (day)	26 (15–67)
Interval between HR-VWI and DSA (day)	6 (1–15)

Note:—ALS indicates acute ischemic stroke.

^a Values are presented as No. (%) or median (range).

On-line Table 3: Interobserver agreement coefficients regarding the occlusion category, reconstitution, and suitability for recanalization on HR-VWI and DSA^a

	Interobserver Agreement κ (95% CI)		P Value
	HR-VWI	DSA	
Occlusion types	0.968 (0.907–1.000)	0.897 (0.758–1.000)	<.0001
Reconstitution	0.970 (0.913–1.000)	0.971 (0.915–1.000)	<.0001
Suitability for recanalization	0.892 (0.746–1.000)	0.947 (0.845–1.000)	<.0001

^a Occlusion types include IICA occlusion, EICA occlusion, tandem occlusion, and near-occlusion. “Reconstitution” was defined as the ICA distal to the occlusion being visible. Agreement coefficients were interpreted according to methods described by Kundel and Polansky²⁵ ($\kappa < 0$, poor; $\kappa = -0.20$, slight; $\kappa = 0.21$ –0.40, fair; $\kappa = 0.41$ –0.60, moderate; $\kappa = 0.61$ –0.80, substantial; and $\kappa = 0.81$ –1.00, almost perfect).