## On-line Table 1: Brain abnormalities diagnosed on iuMR in the gestational age range of 20-24 weeks

Case	Gestation (weeks)	Trigones (mm)	Other Diagnosis on iuMR	Effect on Management	
				Rev 1ª	Rev 2ª
1	24	11,10	Cerebellar hypoplasia	3	1
2	24	11,6	Unilateral schizencephaly	4	4
3	20	11,9	Agenesis CC, neocortical malformation	4	4
4	22	12,12	Absent septum pellucidum, turricephaly	3	1
5	22	12,9	Agenesis CC	4	4
6	23	13,13	Agenesis CC	4	4
7	21	15,15	Agenesis CC	2	2
8	24	19,17	Agenesis CC	2	2
9	24	26,27	Hydranencephaly	2	1

Note:—CC indicates corpus callosum; iuMR, in utero MR imaging; Rev 1, reviewer 1; Rev 2, reviewer 2. <sup>a</sup> The 4 grades of effects on management listed in the last 2 columns were defined as follows: 1, iuMR provided information that did not change the management or the information given to the woman; 2, iuMR provided additional information about the fetal brain that was discussed with the woman but did not alter management; 3, iuMR gave additional information that affected either management/treatment and/or prognosis, but not to a degree to warrant offering termination of pregnancy; 4, iuMR gave additional information that significantly altered numeration to a degree that hereing the programmer when the formal comparison of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantly altered numeration of pregnancy; 4, iuMR gave additional information that significantl prognosis to a degree that termination of pregnancy was offered.

Case	Gestation (weeks)	Trigones (mm)	Other Diagnosis on iuMR	Effect on Management	
				Rev 1ª	Rev 2ª
1	31	12,10	Agenesis CC, neocortical malformation	4	4
2 <sup>b</sup>	28	15,12	Bilateral schizencephaly, SOD	2	2
3	30	16,16	Agenesis CC	2	1
4 <sup>c</sup>	25	17,4	Hemimegalencephaly	4	4
5	35	17:16	Multicystic PVL	2	2
6	33	17,17	Agenesis CC	2	2
7	25	17,17	Agenesis CC, neocortical malformation	2	2
8	31	18,18	Schizencephaly	2	2
9	34	19,12	IC and IV hemorrhage	2	2
10	33	19,15	Agenesis CC, neocortical malformation	2	2
11	34	23,21	Agenesis CC	2	2
12	30	23,22	IC and IV hemorrhage	2	2
13	38	26,4	Hemimegalencephaly	2	1
14	31	26,6	Hemimegalencephaly	2	2
15	34	29,15	IC and IV hemorrhage	2	2
16	37	Severed	Hydranencephaly	2	2

Note:—IC indicates intracerebral; IV, intraventricular; SOD, septo-optic dysplasia; PVL, periventricular leukomalacia. <sup>a</sup> The 4 grades of effects on management listed in the last 2 columns were defined as follows: 1, iuMR provided information that did not change the management or the information given to the woman; 2, iuMR provided additional information about the fetal brain that was discussed with the woman but did not alter management; 3, iuMR gave additional information that significantly altered are represented to the thet hereing and/or prognosis, but not to a degree to warrant offering termination of pregnancy; 4, iuMR gave additional information that significantly altered are represented to the total termination of the total termination of the pregnancy; 4, iuMR gave additional information that significantly altered are represented as a decree of the total termination of the pregnancy; 4, iuMR gave additional information that significantly altered are presented as a decree of the total termination of pregnancy; 4, iuMR gave additional information that significantly altered are presented as a decree of the total termination of pregnancy; 4, iuMR gave additional information that significantly altered are presented as a decree of the total termination of pregnancy; 4, iuMR gave additional information that significantly altered are presented as a decree of the total termination of pregnancy; 4, iuMR gave additional information that significantly altered are presented as a decree of the total termination of pregnancy; 4, iuMR gave additional information that significantly altered are presented as a decree of the total termination of pregnancy; 4, iuMR gave additional information that significantly altered are presented as a decree of the termination of pregnancy; 4, iuMR gave additional information that significantly altered are presented as a decree of the termination of pregnancy; 4, iuMR gave additional information termination of pregnancy; 4, iuMR gave additional information termination of pregnancy; 4 prognosis to a degree that termination of pregnancy was offered. <sup>b</sup> A woman with documented oligohydramnios, which may have affected sonographic visualization. <sup>c</sup> This case was referred with a 'hypoechoic lesion' and it was not possible to distinguish between unilateral ventriculomegaly or a cyst. No cyst was seen on iuMR, only unilateral

ventriculomegaly due to hemimegalencephaly. d Not possible to measure.