

**Supplemental Table 1.** Strengths and limitations of the various imaging modalities in assessing the right ventricle.

	2DE	3DE	CMR	CT
<b>Technical aspects</b>				
Availability	High	Moderate	Moderate	Low
Cost	Low	Low	High	Moderate
Typical scan duration (min)	25-30	30-35	40-60	10-15
Safety	High	High	Contraindicated in patients with metallic implants Claustrophobia Potentially nephrotoxic contrast Allergic reaction to contrast Restricted only to hemodynamically stable patients	<ul style="list-style-type: none"> <li>• Ionizing radiations</li> <li>• Potentially nephrotoxic contrast</li> <li>• Allergic reaction to contrast</li> </ul>
Imaging window dependence	Present	Present	Absent	Absent
Temporal resolution	+++	++	++	+
Spatial resolution	+++	++	+++	++++
3D acquisition	No	Yes	Only in selected sequences	Yes
Real-time 3D imaging	No	Yes	Yes, but with limitations	No
<b>Assessment of RV geometry, size and function</b>				
Evaluation of RV wall thickness	Yes	Yes	Yes	Yes

Determination of RV diameters	++	+++	++++	++++
Accuracy of RV volume	-	+++	++++	++++
Accuracy of RV EF	-	+++	++++	++++
Parameters of RV systolic function	FAC, TAPSE, TDI S	EF	EF	EF
Estimation of RV diastolic function	Rarely used in clinical practice	Not used	Not used	Not used
<b>Evaluation of RV mechanics</b>	+++	+	++++	+++
<b>Major limitations</b>	<ul style="list-style-type: none"> <li>• Inability to acquire the whole RV in one view</li> <li>• Geometric assumptions</li> <li>• Poor visualization of RV endocardial border</li> <li>• Lack of spatial orientation</li> <li>• Need of stable cardiac rhythm and cooperative patients</li> <li>• Visualization of RV endocardial border</li> <li>• No data about RV mass</li> <li>• Costs</li> <li>• Low availability</li> <li>• Challenging identification of the RVOT boundaries</li> <li>• Thin RV wall</li> <li>• Ionizing radiation</li> <li>• Potentially nephrotoxic contrast</li> <li>• Stable cardiac rhythm with a low heart rate for image acquisition</li> </ul>			

**Abbreviations:** +, low; ++, moderate; +++, high; +++, very high; -, major limitation of the modality; 3D, three-dimensional; EF, ejection fraction; FAC, fractional area change; R, right ventricle; s, systolic velocity of the myocardium of the basal segment of the free-wall; TAPSE, tricuspid annular plane systolic excursion