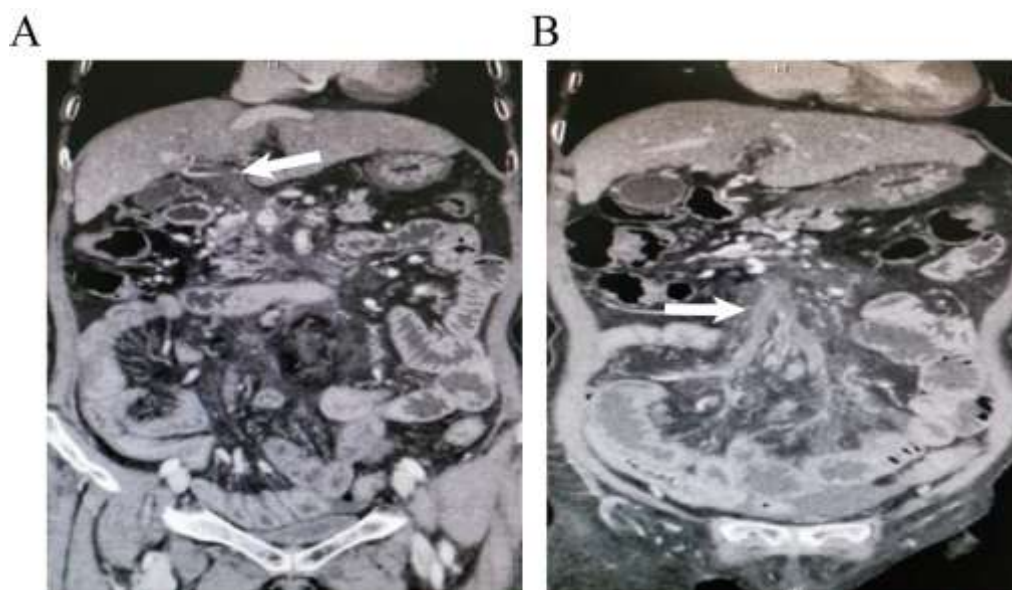
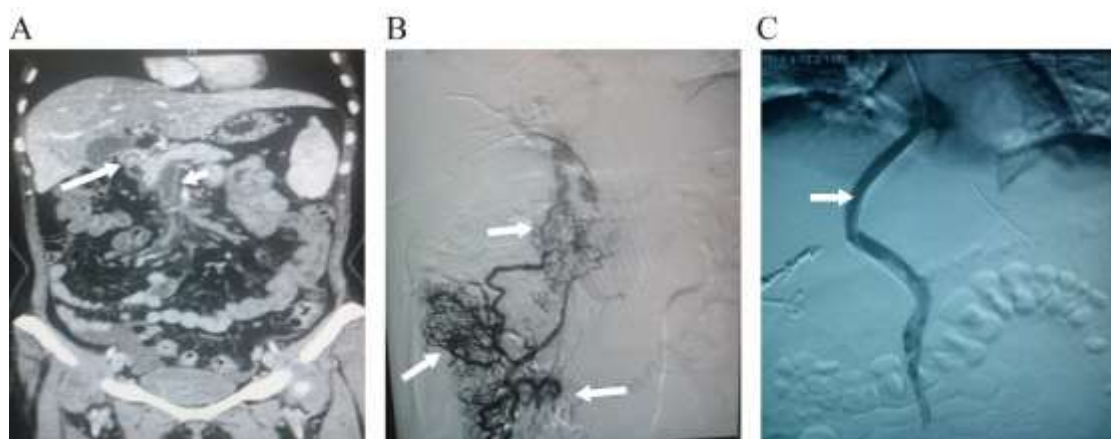


Supplementary Figure 1 Mixed portal vein thrombosis (cavernous transformation with acute thrombosis). A: Contrast-enhanced abdominal CT (axial view): Absence of the normal anatomical structure of the proximal main portal vein, with collateral vessels having formed (white arrow); B: Contrast-enhanced abdominal CT (coronal view): The middle to distal segment of the main portal vein has a very low-density vascular shadow, with uniform density consistent with vascular morphology (white arrow). No collateral formation was observed in the surrounding area. The vascular wall showed no thickening.



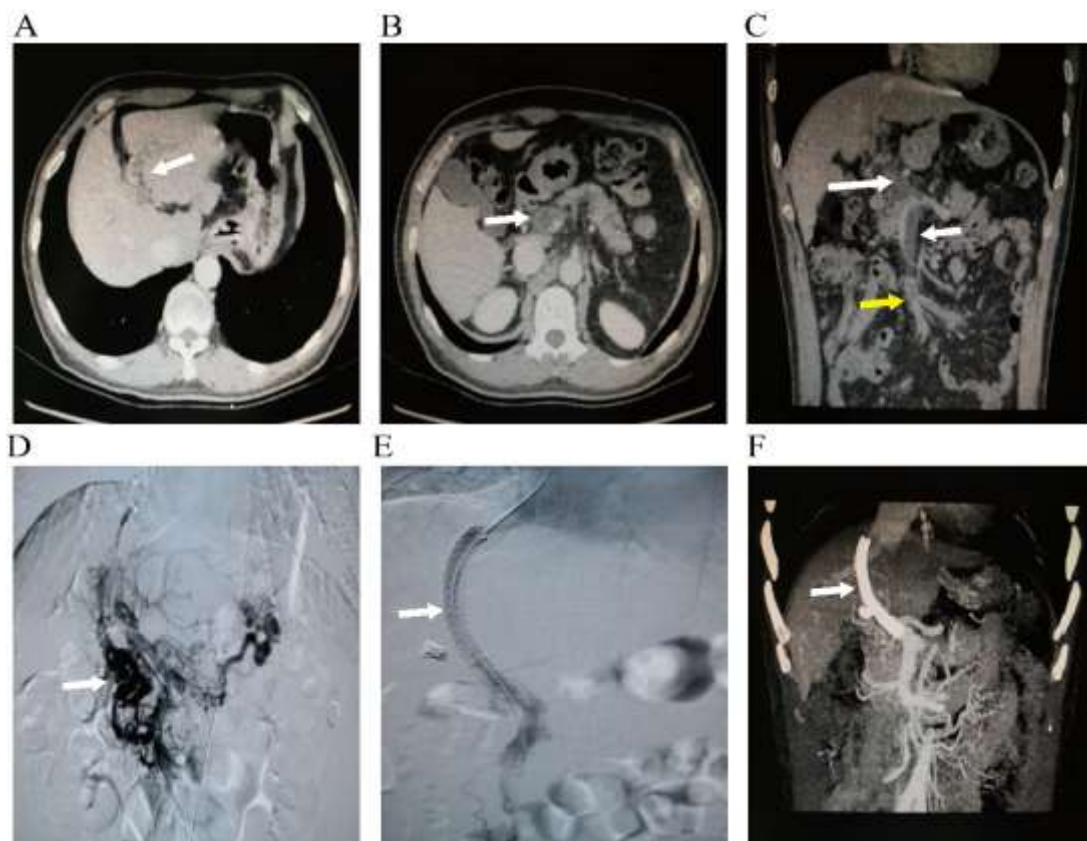
Supplementary Figure 2 Mixed portal vein thrombosis (acute thrombosis)

with chronic thrombosis). A: Contrast-enhanced abdominal CT (coronal view): A very low-density vascular shadow of the main portal vein, with homogeneous density consistent with vascular morphology. No collateral formation was observed in the periphery. There was no thickening of the vascular wall (white arrow); B: Contrast-enhanced abdominal CT (coronal view): A slightly low-density vascular shadow on the superior mesenteric vein, with relatively homogeneous density consistent with vascular morphology. Numerous collateral formations are observed in the periphery. Thickening of the vascular wall (white arrow).



Supplementary Figure 3 Mixed portal vein thrombosis (cavernous transformation with chronic thrombosis). A: Contrast-enhanced abdominal CT (coronal view): The lack of the normal anatomical structure of the proximal main portal vein and branches, with the formation of collateral vessels (long white arrow). The distal main portal vein and superior mesenteric vein exhibit slightly low-density vascular shadows, consistent with the vascular anatomy, with collateral vessel formation in the periphery and thickening of the vascular wall (short white arrow); B: Percutaneous transhepatic portal vein angiography: Complete occlusion of the main portal vein, branches, and superior mesenteric vein, with extensive collateral vessel formation (white arrows); C: Image following TIPS portal vein angiography: Following TIPS placement, thrombolysis, retrieval, and catheter-directed thrombolysis procedures, portal

vein angiography was conducted and demonstrated a patent shunt, main portal vein, and superior mesenteric vein with restored blood flow (white arrow) and disappearance of thrombi and collateral vessels. TIPS: transjugular intrahepatic portosystemic shunt.



Supplementary Figure 4 Mixed portal vein thrombosis (cavernous transformation with chronic and acute thrombosis). A: Contrast-enhanced abdominal CT (axial view): The normal architecture of the portal vein branches and the proximal main portal vein is obliterated, replaced by small, irregular collateral vessels (white arrow); B: Contrast-enhanced abdominal CT (axial view): The middle segment of the main portal vein exhibit slightly low-density morphology consistent with vascular anatomy, with few collateral formations and a thickened vascular wall (white arrow); C: Contrast-enhanced abdominal CT (coronal view): Markedly hypodense thrombus shadows fill the distal main portal vein (long white arrow) and upper-middle segment of the superior mesenteric vein (short white arrow), conforming to vascular contours with

minimal collaterals and no wall thickening. Peripheral blood flow is partially preserved. A heterogeneous, moderately hypodense cast is seen in the distal superior mesenteric vein and branches (yellow arrow), with mild collaterals and wall thickening; D: Image following TIPS portal vein angiography: Complete occlusion of the main portal vein, branches, and superior mesenteric vein with extensive collateral formation (white arrow); E: Image following TIPS portal vein angiography: Following TIPS placement, thrombolysis, clot retrieval, and catheter-directed thrombolysis, portal vein angiography revealing a patent shunt, main portal vein, and superior mesenteric vein with restored blood flow and disappearance of thrombi and collateral vessels (white arrow); F: Postoperative 6-month follow-up contrast-enhanced abdominal CT (coronal view): TIPS shunt stent, distal main portal vein, superior mesenteric vein main trunk and branches show patent blood flow, with complete disappearance of the thrombus (white arrow). TIPS: transjugular intrahepatic portosystemic shunt.