

Supplemental Material

**Streamlining the Annotation Process by Radiologists in Volumetric Medical Images
with Few-Shot Learning**

Alina Ryabtsev¹ MSc, Richard Lederman² MD, Jacob Sosna² MD, Leo Joskowicz^{1*} PhD

1. School of Computer Science and Engineering, The Hebrew University of Jerusalem, Israel.

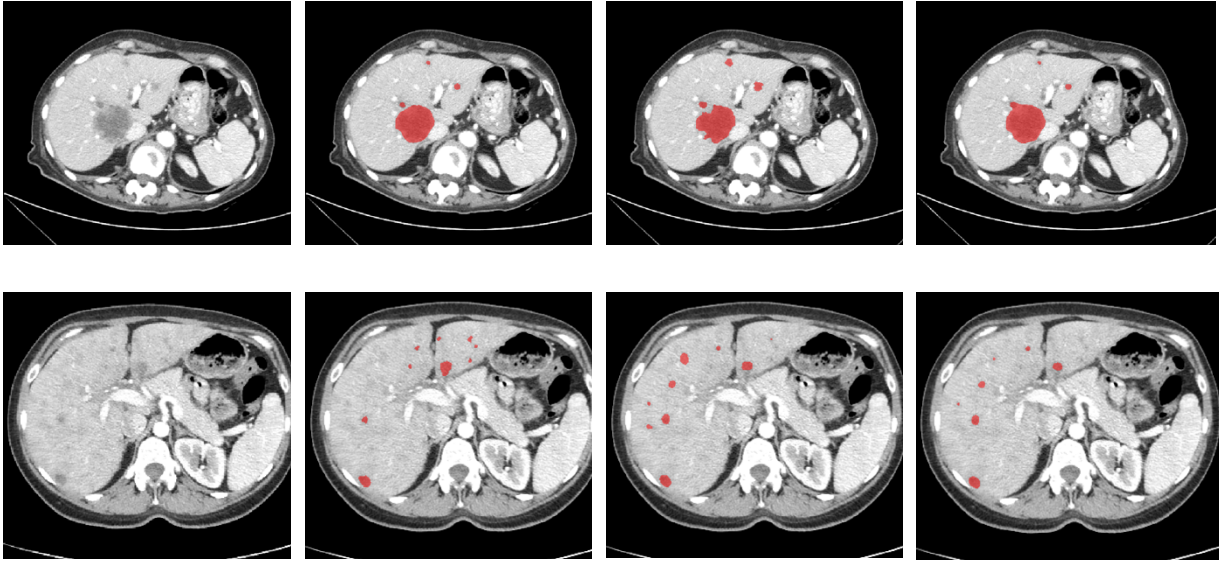
2. Dept. of Radiology, Hadassah University Medical Center, Jerusalem, Israel.

4. Experimental results

Study 3: Evaluation of the prioritization strategy for manual radiologist correction.

nnU-Net models trained with support set patch selection		Detection			Segmentation	
		<i>Precision</i>	<i>Recall</i>	<i>F1-Score</i>	<i>Dice</i>	<i>Dice_with_FN</i>
<i>Random</i>	Mean Std	1.00 (0.00)	0.80 (0.36)	0.83 (0.35)	0.79 (0.24)	0.62 (0.38)
<i>Prioritized</i>	Mean Std	1.00 (0.02)	0.78 (0.35)	0.81 (0.34)	0.79 (0.26)	0.61 (0.39)

Table S1: Results of Study 3. Performance of two nnU-Net models, one trained on randomly and the other trained on prioritized manually corrected scans on the *DLIVER_TEST* dataset. The detection results include precision, recall, F1-score averages, and standard deviations. The segmentation results include the mean and std for the *Dice* and *Dice_with_FN* scores.



(a) slice

(b) Ground truth
segmentation

(c) nnU-Net model trained
on random selection

(d) nnU-Net model trained
on prioritized selection

Fig. S1: Illustration of the results of Study 3. Two examples of test scan axial images with ground truth annotations and their corresponding liver lesions (red) computed by two nnU-Net models, trained on random and prioritized support set patch selection.