

Supplemental Table 3. Comparison of changes in recommendations between previous and revised guidelines

	Previous guideline in 2016	Updated guideline in 2019
ERT	5. For patients with acute large artery occlusion in the anterior or posterior circulation presenting after 6 hours, ERT can be considered for patients having favorable multimodal imaging profiles regarding expected benefit and safety. Each center is encouraged to define its own selection criteria (LOE IV, GOR C).	5. In selected patients with acute ischemic stroke due to large vessel occlusion in the anterior circulation presenting within 6 to 24 hours from last seen normal, ERT can be recommended when patients have target mismatch assessed by multimodal imaging and/or clinical deficit & when reperfusion by ERT is expected to improve the outcome of patients. For patient selection, each institution is recommended to have its own criteria, which can help in the timely and reasonable identification of patients with target mismatch in the late time window (LOE III, GOR C).
Neuroimaging evaluation	<p>1. Non-contrast CT or MRI should be conducted to exclude hemorrhagic stroke or other non-stroke etiologies (GPP).</p> <p>2. Non-invasive vascular imaging (CT angiography or MR angiography) is recommended to confirm acute large artery occlusion for patients with major ischemic stroke (GPP).</p>	<p>1. Non-contrast CT or MRI should be conducted to exclude hemorrhagic stroke or other non-stroke etiologies (LOE III, GOR C).</p> <p>2. Non-invasive vascular imaging (CT angiography or MR angiography) is recommended to confirm acute large artery occlusion for patients with major ischemic stroke (LOE III, GOR C)</p> <p>5. In selected patients who present within 6 to 24 hours from last seen normal, multimodal imaging for assessing collaterals, infarct core, or perfusion (or clinical)-diffusion mismatch is recommended to select eligible patients for ERT. Each center is encouraged to define its own imaging modality to timely identify target mismatch (LOE III, GOR C).</p>

ERT, endovascular recanalization therapy; LOE, level of evidence; GOR, grade of recommendation; CT, computed tomography; MRI, magnetic resonance imaging; GPP, good practice point; MR, magnetic resonance.