**Supplementary Appendix: CTV margin recommendations from consensus guideline atlases**.

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| --- | --- | --- | --- | --- | --- |
|  | Superior margin | Inferior margin | Lateral margin | Anterior margin | Posterior margin |
| RTOG | Level of cut endof vas deferensor 3–4 cm abovetop of symphysis(Vas may retractpostoperatively).Include seminalvesicles ifpathologicallyinvolved. | 8–12 mm belowVUA (may include more if concern forApical margin). Can extend to slice above penile bulb ifVUA not well visualized. | Levator ani andobturator internus(caudal);Sacrorectogenito pubic fascia (cranial). If concern aboutextraprostatic disease at base may extend toobturator internus. | Posterior edge of pubic bone(caudal);Post 1-2 cmof bladderwall (cranial). | Anterior rectal wall (caudal) -May needto be concavearound lateralaspects;MesorectalFascia (cranial). |
| EORTC | Bladder neckand up to baseof seminalvesicles. Include seminal vesicles if pathologicallyinvolved. | 15 mm craniallyfrom the penilebulb or at theapex. | Include up to theneurovascular bundles (if removed up to the ilio-obturatic muscles). | Includeanastomosisand the urethralaxis. | Up to butnot includingthe outer rectal wall (caudal);Most posteriorpart of thebladder (cranial). |
| FROGG | Encompass allof the seminalvesicle bed asdefined by non vascular clips and should include the distal portion of the vas deferens.Include seminalvesicles ifpathologicallyinvolved. | 5–6 mm below the VUA(extended lowerto include allsurgical clips).When VUA is poorly defined,inferior border will be the slice above the penile bulb. | Medial border of the levator ani or obturator internus. | Posterioredge ofsymphysispubis (caudal)Posterior1.5 cm ofthe bladder(cranial). | Anteriorrectal walland levator ani (caudal);Anteriormesorectalfascia (cranial) |

**Abbreviations:** PMH = Princess Margaret Hospital; EORTC = European Organization for

Research and Treatment of Cancer; RTOG = Radiation Therapy Oncology Group; FROGG=Faculty of Radiation Oncology Genito-Urinary Group, VUA= vesicourethral anastomosis