Supplementary Materials



Figure S1. Representative photomicrographs of atherosclerotic lesions of type I, type III, and type VI stained with H&E or APT_{FN-EDB} (for FN-EDB), or for FN. (**A**) Left: Low-magnification images of H&E-stained sections. Scale bar = 1 mm. Right: Magnified views corresponding to the black rectangles in adjacent H&E images. Scale bars = 100 μ m. (**B**) Left: Low-magnification images of APT_{FN-EDB} staining results. Scale bar = 100 μ m. Right: Magnified views corresponding to the black rectangles at a staining results. Scale bar = 50 μ m. Arrows, FN-EDB–positive areas. (**C**) FN staining results. Scale bar = 100 μ m. TH, thrombus.



Figure S2. FN-EDB–positive areas stained with APT_{FN-EDB} were compared with the corresponding areas stained with APT_{SCR} (negative control). Left: Low-power image. Scale bar = 100 µm. Right: Magnified images of black rectangles labeled 'y' in adjacent images. Scale bar = 50 µm.



Figure S3. Representative images of atherosclerotic lesions from type I–VI lesions analyzed for FN-EDB were stained for CD68, vWF, or HIF1 α . Scale bar = 100 μ m.



Figure S4. (A-C) Quantitative assessment of areas positive for CD68, vWF, or HIF1 α in different types of human atherosclerotic lesions. (Type I and II, n = 71; type III, n = 30; type IV, n = 9; type V, n = 32; type VI, n = 5). Data are for individual tissue sections; means are shown as horizontal lines.



Figure S5. APT_{FN-EDB} -NPs and APT_{SCR} -NPs with different densities of APT_{FN-EDB} and APT_{SCR} , respectively, were prepared and their hydrodynamic sizes measured by DLS.



Figure S6. Atherosclerotic lesion detection efficiencies by NPs (*red*) and comparison with normal arteries. Confocal microscopic images show that human atherosclerotic lesions are effectively detected by APT_{FN-EDB} -NPs (1% or 2.5% molar ratios of APT_{FN-EDB} -DSPE-PEG2000). In contrast, binding of APT_{FN-EDB} -NPs (5% molar ratio of APT_{FN-EDB} -DSPE-PEG2000) and APT_{SCR} -NPs (1% or 2.5% molar ratio of APT_{SCR} -DSPE-PEG2000) with atherosclerotic lesions and binding of NPs with normal arteries are negligible. Scale bar = 60 µm.



Figure S7. *In vivo* MRI of APT_{FN-EDB} -[Gd]NPs in hypercholesterolemic apoE-KO mice and in WT mice (C57BL/6J) on a normal chow diet. CNR*wL* values of apoE-KO mice on a 16-wk WD treated with APT_{FN-EDB} -[Gd]NPs (n = 15) were compared with those of WT mice treated with APT_{FN-EDB} -[Gd]NPs (n = 6).



Figure S8. FN-EDB mediated plaque accumulation of APT_{FN-EDB} -NPs. Immunofluorescent staining of endothelial cells (CD31), FN-EDB, and macrophages (Mac2) in the atherosclerotic plaques of apoE-KO mice (n=4) injected with APT_{FN-EDB} -NPs revealed that plaque accumulation of the NPs was mainly co-localized with FN-EDB expression (*arrows*) rather than with endothelial cell or macrophage expression. Left: 6x magnification of aortic root. Visualization of nuclei (*upper image*) and APT_{FN-EDB} -NPs (*lower image*). Right: 20x magnification of aortic roots show immunofluorescent staining of CD31, FN-EDB, and Mac2 (*green, upper images*), or merged images with APT_{FN-EDB} -NPs (*red*) and nuclei (*blue*) (*lower images*). Scale bar = 80 µm.



Figure S9. *In vivo* biodistribution of APT_{FN-EDB} -[Gd]NPs and APT_{SCR} -[Gd]NPs. Confocal microscopic images of DAPI-stained lung, liver, kidney, and spleen sections showing NPs (*red*) and nuclei (*blue*) in apoE-KO mice consumed a WD for (**A**) 8 wk or (**B**) 16 wk. (**C-D**) Comparison of corresponding organs from apoE-KO mice (consumed a WD for 16 wk) pre-injected with free APT_{FN-EDB} prior to APT_{FN-EDB} -[Gd]NPs injection and WT mice injected with APT_{FN-EDB} -[Gd]NPs. Scale bar = 60 µm.