American College of Radiology  
ACR Appropriateness Criteria®  

Clinically Suspected Adnexal Mass, No Acute Symptoms

Variant 1: Clinically suspected adnexal mass, no acute symptoms. Premenopausal. Initial imaging.

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| US pelvis transvaginal| Usually appropriate | Moderate | 0 mSv     | 0 mSv [ped] | 9      | n/a    | 0 0 0 0 0 0 0 0 0 |

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**辐射剂量**

- **O 0 mSv**: 0毫西弗
- **☢☢☢ 1-10 mSv**: 1-10毫西弗
- **☢☢☢☢ 3-10 mSv**: 3-10毫西弗
- **☢☢☢☢ 3-10 mSv [ped]**: 3-10毫西弗（儿童用）
Variant 2: Clinically suspected adnexal mass, no acute symptoms. Postmenopausal. Initial imaging.

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- 15 (22095438)
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### Variant 3: Adnexal mass, likely benign, no acute symptoms. Premenopausal. Initial follow-up.

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**Variant 4: Adnexal mass, likely benign, no acute symptoms. Postmenopausal. Initial follow-up.**

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Variant 5: Adnexal mass, indeterminate, no acute symptoms. Premenopausal. Initial follow-up.

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CT pelvis without and with IV contrast | Usually not appropriate | Expert Consensus | ☢☢☢ 1-10 mSv | ☢☢☢ 3-10 mSv [ped] | 2 | 2 | 3 | 9 | 1 | 0 | 1 | 2 | 0 | 0 | 0
FDG-PET/CT skull base to mid-thigh | Usually not appropriate | Expert Consensus | ☢☢☢ 1-10 mSv | ☢☢☢ 3-10 mSv [ped] | 1 | 1 | 15 | 3 | 0 | 0 | 0 | 0 | 0 | 1 | 0

**Variant 6: Adnexal mass, indeterminate, no acute symptoms. Postmenopausal. Initial follow-up.**

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Variant 7:  Adnexal mass, highly suspicious for malignancy, no acute symptoms. Premenopausal and postmenopausal. Initial follow-up.

References: 6 (29724422)

Study Quality: 4
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Variant 8: Clinically suspected adnexal mass, no acute symptoms. Pregnant. Initial imaging and follow-up.
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Appendix Key
A more complete discussion of the items presented below can be found by accessing the supporting documents at the designated hyperlinks.

**Appropriateness Category:** The panel's recommendation for a procedure based on the assessment of the risks and benefits of performing the procedure for the specified clinical scenario.

**SOE:** Strength of Evidence. The assessment of the amount and quality of evidence found in the peer reviewed medical literature for an appropriateness recommendation.

- **References:** The citation number and PMID for the reference(s) associated with the recommendation.
- **Study Quality:** The assessment of the quality of an individual reference based on the number of study quality elements described in the reference.

**RRL:** Relative Radiation Level. A population based assessment of the amount of radiation a typical patient may be exposed to during the specified procedure.

**Rating:** The final rating (1-9 scale) for the procedure as determined by the panel during rating rounds.

**Median:** The median rating (1-9 scale) for the procedure as determined by the panel during rating rounds.

**Final tabulations:** A histogram showing the number of panel members who rated the procedure as noted in the column heading (ie, 1, 2, 3, etc.).

Additional supporting documents about the AC methodology and processes can be found at [www.acr.org/ac](http://www.acr.org/ac).