**American College of Radiology**  
**ACR Appropriateness Criteria®**

### Clinically Suspected Adnexal Mass, No Acute Symptoms

**Variant 1:** Adult female. Clinically suspected adnexal mass, no acute symptoms. Premenopausal or postmenopausal. Initial imaging.

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**US pelvis transabdominal and US pelvis transvaginal**

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**US pelvis transabdominal**

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**Usual not appropriate**  
**Expert Consensus**  
☢☢☢ 1-10 mSv  
☢☢☢☢ 3-10 mSv [ped]  
| 1 | 2 | 3 | 5 | 2 | 1 | 2 | 1 | 0 | 0 | 0 |

### CT pelvis without IV contrast

**Usual not appropriate**  
**Expert Consensus**  
☢☢☢ 1-10 mSv  
☢☢☢☢ 3-10 mSv [ped]  
| 1 | 2 | 6 | 5 | 3 | 0 | 0 | 0 | 0 | 0 | 0 |

### CT pelvis without and with IV contrast

**Usual not appropriate**  
**Expert Consensus**  
☢☢☢ 10-30 mSv  
☢☢☢☢ 3-10 mSv [ped]  
| 1 | 1 | 4 | 5 | 3 | 0 | 2 | 0 | 0 | 0 | 0 |

### FDG-PET/CT skull base to mid-thigh

**Usual not appropriate**  
**Expert Consensus**  
☢☢☢ 10-30 mSv  
☢☢☢☢ 3-10 mSv [ped]  
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### Variant 2: Adult female. Adnexal mass, likely benign, no acute symptoms. Premenopausal. Follow-up imaging.

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US duplex Doppler pelvis

| Usual appropriate | Expert Consensus | O 0 mSv | O 0 mSv [ped] | 8 | 8 | 0 0 0 0 2 0 5 1 6 |

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US pelvis transabdominal

| Usual appropriate | Expert Consensus | O 0 mSv | O 0 mSv [ped] | 7 | 7 | 0 0 0 1 0 2 7 3 1 |

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MRI pelvis without and with IV contrast

| Limited appropriate | Limited | O 0 mSv | O 0 mSv [ped] | 6 | 6 | 0 0 0 1 4 8 0 1 0 |

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MRI pelvis without IV contrast

| May be appropriate | Limited | O 0 mSv | O 0 mSv [ped] | 5 | 5 | 0 0 1 6 4 3 0 0 0 |

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**Variant 4:** Adult female. Adnexal mass, indeterminate on initial pelvic US, no acute symptoms. Premenopausal or postmenopausal. Next imaging study for characterization.

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MRI pelvis without and with IV contrast

| Usually appropriate | Limited | O 0 mSv | O 0 mSv [ped] | 8 | 8 | 0 0 0 1 1 1 4 5 2 |

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US duplex Doppler pelvis

| Usually appropriate | Expert Consensus | O 0 mSv | O 0 mSv [ped] | 8 | 8 | 0 0 1 0 1 1 3 2 6 |

MRI pelvis without IV contrast

| May be appropriate | Strong | O 0 mSv | O 0 mSv [ped] | 6 | 6 | 0 0 1 4 1 6 2 0 0 |

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FDG-PET/CT skull base to mid-thigh  | Usually not appropriate | Expert Consensus | ☢☢☢☢ 10-30 mSv | ☢☢☢☢ 3-10 mSv [ped] | 1 | 1 | 10 | 2 | 1 | 0 | 0 | 0 | 0 | 0


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### FDG-PET/CT skull base to mid-thigh

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### Variant 8: Female. Clinically suspected adnexal mass, no acute symptoms. Pregnant. Initial imaging.

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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).