

## Adrenal nodule 2017 (Guidance for incidentally detected adrenal nodules on CT)

This module provides recommendations on managing incidentally-detected adrenal masses. Entering size, features, attenuation and elements of patient history generates recommendations for further evaluation, including biochemical and imaging with CT or MRI, follow-up or for intervention. This represents a 2017 update from recommendations published in 2010.

Reference:

- Mayo-Smith WW, et al. Management of Incidental Adrenal Masses: A White Paper of the American College of Radiology Incidental Findings Committee. JACR 2017 Aug;14(8):1038-1044.

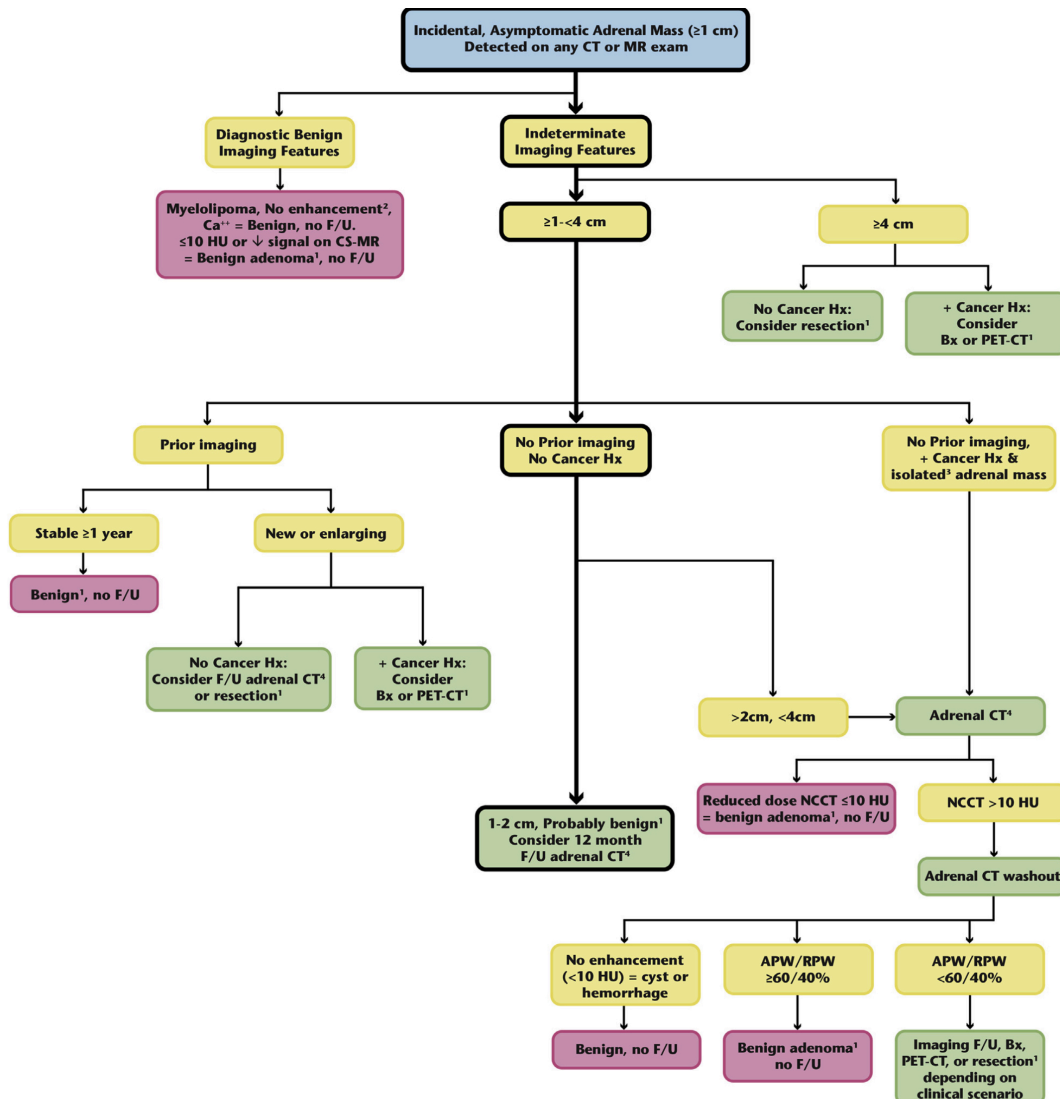


Fig 1. Algorithm for evaluation of an incidentally detected adrenal mass. (1) Consider biochemical assays to determine functional status and exclude pheochromocytoma before biopsy/resection. (2) "No enhancement" applies if an examination without and with intravenous contrast is available. (3) "Isolated" defined as no other metastatic disease identified. (4) May consider chemical-shift MRI (CS-MR). APW = absolute percentage washout; Ca<sup>++</sup> = calcification; F/U = follow-up; HU = Hounsfield units; Hx = history; NCCT = CT without intravenous contrast; RPW = relative percentage washout; + = positive.