

Major criteria

- hepatic phase enhancement
 - hyperenhancement: enhancement in the arterial phase is definitely greater than that of background liver
 - if unsure, classify as isoenhancing
- "washout"
 - a visual assessment of relative hypointensity of the lesion compared with background liver on the portal venous and delayed phases
- capsule/pseudocapsule
 - peripheral rim of smooth hyperenhancement seen in the portal venous or delayed phases
- threshold growth
 - diameter increase of a mass by a minimum of 5 mm
 - also
 - if prior exam ≤ 6 months, diameter $\geq 50\%$ increase
 - if prior exam > 6 months, diameter $\geq 100\%$ increase
 - a new 10 mm lesion represents threshold growth, regardless of the time interval
 - threshold growth only applies to masses
 - threshold growth should be compared on similar sequences between studies

Ancillary features

- favoring HCC
 - mild-moderate T2 hyperintensity
 - restricted diffusion
 - corona enhancement (rim of peri-lesional enhancement)
 - mosaic architecture
 - nodule-in-nodule architecture
 - intralesional fat
 - lesional iron sparing
 - lesional fat sparing
 - blood products
 - diameter increase (less than threshold growth)
- favoring benignity
 - homogeneous marked T2 hyperintensity
 - homogeneous marked T2 or T2* hypointensity
 - undistorted vessels
 - parallels blood pool enhancement
 - diameter reduction
 - diameter stability > 2 years