

Supplementary Table 2. LI-RADS 2018 major and ancillary imaging features and LR-M criteria

Major imaging features

Arterial phase hyperenhancement

Nonperipheral "washout"*

Enhancing "capsule"

Size

Threshold growth[†]

Ancillary imaging features

Ancillary features favoring malignancy

Favoring malignancy, not HCC in particular

Ultrasound visibility as discrete nodule

Subthreshold growth[‡]

Corona enhancement

Fat sparing in solid mass

Restricted diffusion

Mild-moderate T2 hyperintensity

Iron sparing in solid mass

Transitional phase hypointensity

Hepatobiliary phase hypointensity

Favoring HCC in particular

Nonenhancing "capsule"

Nodule-in-nodule

Mosaic architecture

Fat in mass, more than adjacent liver

Blood products in mass

Ancillary features favoring benignity

Size stability ≥2 years

Size reduction

Parallels blood pool enhancement

Undistorted vessels

Iron in mass, more than liver

Marked T2 hyperintensity

Hepatobiliary phase isointensity

LR-M criteria

Targetoid mass

Rim arterial phase hyperenhancement

Peripheral "washout"

Delayed central enhancement

Targetoid restriction

Targetoid TP or HBP appearance

Nontargetoid mass

Infiltrative appearance

Marked diffusion restriction

Necrosis or severe ischemia

Other feature that in radiologist's judgment suggests non-HCC malignancy

LI-RADS, Liver Imaging Reporting and Data System; HCC, hepatocellular carcinoma; TP, transitional phase; HBP, hepatobiliary phase.

^{*}Nonperipheral "washout" in the portal venous or delayed phases using MRI with extracellular agents and portal venous phase using MRI with hepatobiliary agents.

 $^{^{\}dagger}$ Size increase of a mass by ≥50% in ≤6 months.

[‡]Unequivocal size increase of a mass, less than threshold growth.