

GUNDERSEN HEALTH SYSTEM ULTRASOUND DEPARTMENT POLICY AND PROCEDURE MANUAL

SUBJECT: Surveillance for HCC (Hepatocellular Carcinoma) in the Setting of Cirrhosis
SECTION: Radiology Ultrasound
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Exam Protocol: Liver ultrasound is recommended as the primary surveillance modality for HCC. Routine screening is recommended for HCC in adults with cirrhosis.

Imaging Protocol: The following images will make up the “surveillance for HCC” sonogram.

- Transverse liver with all hepatic veins: take more than one image if necessary to be sure all three hepatic veins are imaged.
- Transverse image of the liver with the portal vein.
- Longitudinal liver with images to include:
 - left lobe of liver with prox. aorta.
 - left lobe of liver with left portal vein.
 - liver with IVC labeled.
 - right lobe of liver with right portal vein.
 - right lobe of liver / right kidney interface / RUQ looking for ascites
- Main portal vein with color Doppler as it enters the liver demonstrating the direction of blood flow (into or out of the liver).
- Gallbladder: at least three images to include long and transverse supine and long LLD.
- Color Doppler image of the gallbladder wall if the wall is thickened.
- Long CHD – one image with internal diameter measurement.
- Long CBD – one image with internal diameter measurement.
- Long spleen with maximum length measured.
- Transverse spleen with transverse and AP measurement.
- Long spleen / left kidney interface / LUQ looking for ascites
- RLQ and LLQ looking for ascites
- A cine clip through the RT and LT lobes of the liver should be recorded. This may be performed in either transverse or longitudinal orientation – the method that provides the best documentation.

