

Case report form for the assessment of gallbladder polyps on TAUS

Probe:

Curved 3.5 -5.0 MHz

Linear 10-14 MHz

Parietal lesion	1	2	3	4	5
Size (mm)					
Mobile (yes/no)					
Acoustic shadow (yes/no)					
Reverberation (yes/no)					
Echogenicity (with reference to gallbladder wall)					
<i>Hypo</i>					
<i>Iso</i>					
<i>Hyper</i>					
Internal structure					
<i>Homogeneous</i>					
<i>Heterogeneous</i>					
<i>Hyperechogeneous spots</i>					
Microcysts (yes/no)					
Microcalcifications (yes/no)					
<i>Comet tail</i>					
Shape					
<i>Pedunculated</i>					
<i>Sessile</i>					
Surface					
<i>Smooth</i>					
<i>Irregular</i>					
<i>Nodular</i>					
Gallbladder wall					
<i>Uninterrupted</i>					
<i>Interrupted</i>					
Diagnosis					
<i>Non-neoplastic</i>					
<i>Cholesterolpolyp</i>					
<i>Inflammatory</i>					
<i>Adenomyomatosis</i>					
<i>Neoplastic</i>					
<i>Adenoma</i>					
<i>Carcinoma</i>					
<i>Other, :</i>					

Gallstones present

Amount:.....

Size (mm):.....

Table 3: Differential diagnosis of gallbladder polyps on TAUS; lesion characteristics potentially correlated with polyp type*

Characteristic	<i>Cholesterol polyp</i>	<i>Adenomyomatosis</i>	<i>Inflammatory polyp</i>	<i>Adenoma</i>	<i>Carcinoma</i>
Echogenicity (with reference to gallbladder wall)					
<i>Hypo</i>			+/-		+
<i>Iso</i>	+		+	+	+
<i>Hyper</i>	+		+/-		
Internal structure					
<i>Homogeneous</i>			+	+	
<i>Heterogeneous</i>	+				+
<i>Hyperechogeneous spots</i>	+				
Microcysts		+			
Microcalcifications					+
<i>Comet tail</i>		+			
Shape					
<i>Pedunculated</i>	+			+	+
<i>Sessile</i>		+	+	+	+
Surface					
<i>Smooth</i>		+	+	+	
<i>Irregular</i>	+	+		+	+
<i>Nodular</i>					+
Gallbladder wall					
<i>Uninterrupted</i>	+	+	+	+	+
<i>Interrupted</i>					+

+ present

+/- may be present, but not specific

*Based on characteristics as reported by (26-28)

Table 4: Definitions of polyp types and their characteristics on transabdominal ultrasonography

<i>Cholesterol polyp</i>	“Pedunculated” lesion with an irregular, granular surface. Internal echo is hyperechogenic to isoechogenic. Hyperechogeneous spots are frequently present.
<i>Adenomyomatosis</i>	Sessile echogenic lesion with a smooth or slightly irregular surface. Internal echo contains multiple microcysts or comet tail artefact (V-shaped reverberation artefact).
<i>Inflammatory polyp</i>	Sessile lesion with a smooth surface. Lesion may be hypo-, iso- or hyperechogeneous with a homogeneous internal pattern. Other signs of gallbladder inflammation are frequently present.
<i>Adenoma</i>	Pedunculated or sessile lesion. Homogeneous isoechogenic internal echo pattern without any spots, microcysts or comet tail artefacts.
<i>Carcinoma</i>	Pedunculated or sessile lesion with an irregular/nodular surface. Heterogeneous internal echo pattern (hypo-/isoechogenic) without any spots, microcysts or comet tail artefacts. There can be signs of invasion into the gallbladder wall.