### Incidental Adnexal Cystic Mass

*(≥1 cm) on CT or MRI in Post-Menarchal, Non-Pregnant Females* ¹

<table>
<thead>
<tr>
<th>Classification</th>
<th>Pre-menopausal (or &lt;50 yo)</th>
<th>Early post-menopausal (within 5 yr of FMP or 50-55 yo)</th>
<th>Late post-menopausal (&gt;5 yr from FMP or &gt;55 yo)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Size</td>
<td>≤5 cm</td>
<td>&gt;5 cm</td>
<td>≤3 cm ⁵</td>
</tr>
<tr>
<td></td>
<td>US f/u 6-12 wk</td>
<td>US f/u 6-12 mo ³</td>
<td>≥3 cm ⁵</td>
</tr>
<tr>
<td></td>
<td>Benign, no f/u</td>
<td>Benign, no f/u ³</td>
<td>Benign, no f/u</td>
</tr>
</tbody>
</table>

1. **Exclusions**
   - (a) normal findings, including hypodense ovary, crenulated enhancing wall of corpus luteum, asymmetric ovary (within 95% confidence interval for size) with normal shape;
   - (b) unimportant findings, including calcifications without associated noncalcified mass;
   - (c) previous characterization with ultrasound or MRI;
   - (d) documented stability in size and appearance for >2 years.

2. **Benign-appearing cyst**
   - Should have all of the following features: (a) oval or round; (b) unilocular, with uniform fluid attenuation or signal (layering hemorrhage acceptable if premenopausal); (c) regular or imperceptible wall; (d) no solid area, mural nodule; and (e) <10 cm in maximum diameter.

3. **Early post-menopausal hemorrhagic cyst**
   - A benign-appearing cyst ≤5 cm with suspected internal hemorrhage in a patient aged ≤55 years, or within 5 years of menopause, should be followed in 6 to 12 weeks because hemorrhagic cysts in early postmenopause are possible, although rare.

4. **Ultrasound**
   - This indicates that ultrasound should be performed promptly for further evaluation, rather than in follow-up.

5. **Post-menopausal cyst**
   - May decrease threshold from 3 cm to lower values down to 1 cm to increase sensitivity for neoplasm.

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