Table 2. *Radiological characteristics of FNH [7,19,28,29].*

Modality	Radiological Features
US	• Variable echogenicitiy • Doppler depicts increased vascularity in a centrifugal manner from a central vessel
CE-US	• Early arterial phase – Early enhancement with early centrifugal filling • Late arterial phase – Centrifugal filling • Portal venous phase – Enhancement – Scar may be visible (unenhanced)
CT	• Non-contrast – Hypo or isoattenuation – May appear hyperattenuating in cases of NASH • Arterial phase – Enhancement except central scar • Portal venous phase – Hyper or isoattenuation in contrast to the surrounding liver – Central scar retains hypoattenuation
MRI	• T1 – Iso or hypointense – Central scar is hypointense • T2 – Iso or hyperintense – Central scar is hyperintense • Gadolinium – Arterial phase: early enhancement – Portal venous phase: iso-hyperintense – Central scar retains contrast in delayed phases • Primovist – Arterial phase: early enhancement – Delayed arterial phase: enhances – Hepatobiliary phase: iso-tense, centra scar does not enhance
Tc-99m	• Sulfur colloid – Normal or increase uptake • HIDA – Increased uptake and delayed clearance

US: ultrasound; CE-US: Contrast enhanced ultrasonography; CT: Computed tomography; MR: Magnetic Resonance Imaging; Tc-99m: Technetium-99m; HIDA: hepatobiliary iminodiacetic acid