

Bone reporting and data system on CT (Bone-RADS-CT): a validation study by four readers on 328 cases from three local and two public databases

ELECTRONIC SUPPLEMENTARY MATERIAL

Figure S1:
Graphical representation of peritoneal cancer index score.

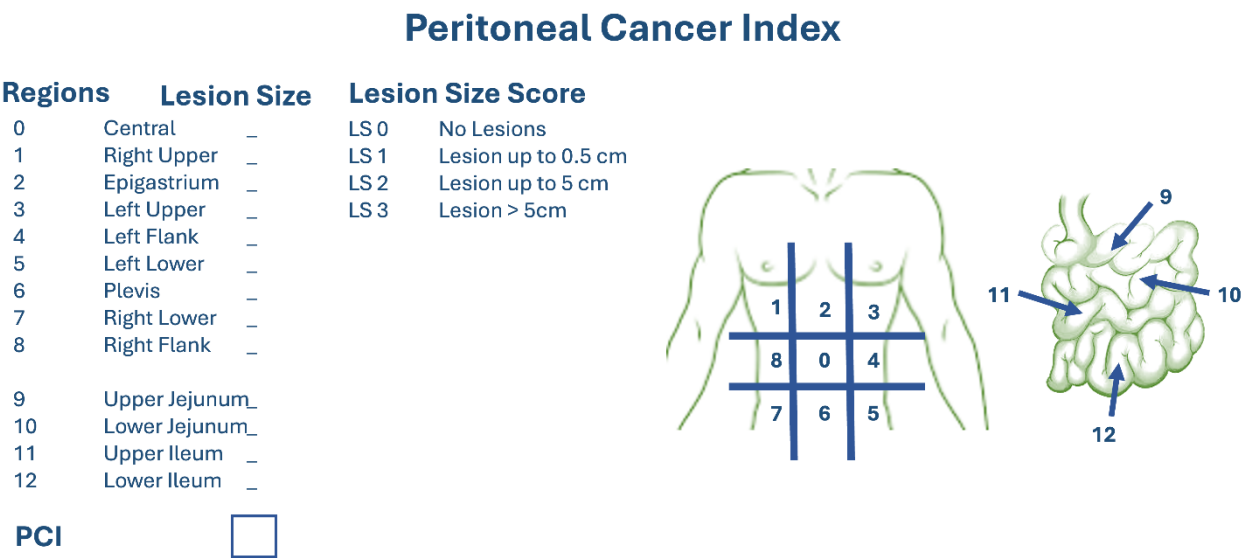


Figure S2:

Tuberculosis reactivation in 72-year-old man affected by lung cancer treated with immunotherapy. CT portal venous phase, axial plane (**A-B**) showed a regular thickening of the peritoneum (**A-B, arrowhead**), in association with ileal thickening (**A, asterisks**) and ileo-ileal fistula (**B circle**). Coronal plane (**C**) confirmed the linear thickening of the peritoneum (**C, arrowhead**), and ileo-ileal fistula (**B circle**). Necrotic nodes were also present in left iliac fossa (**A and C, arrows**).

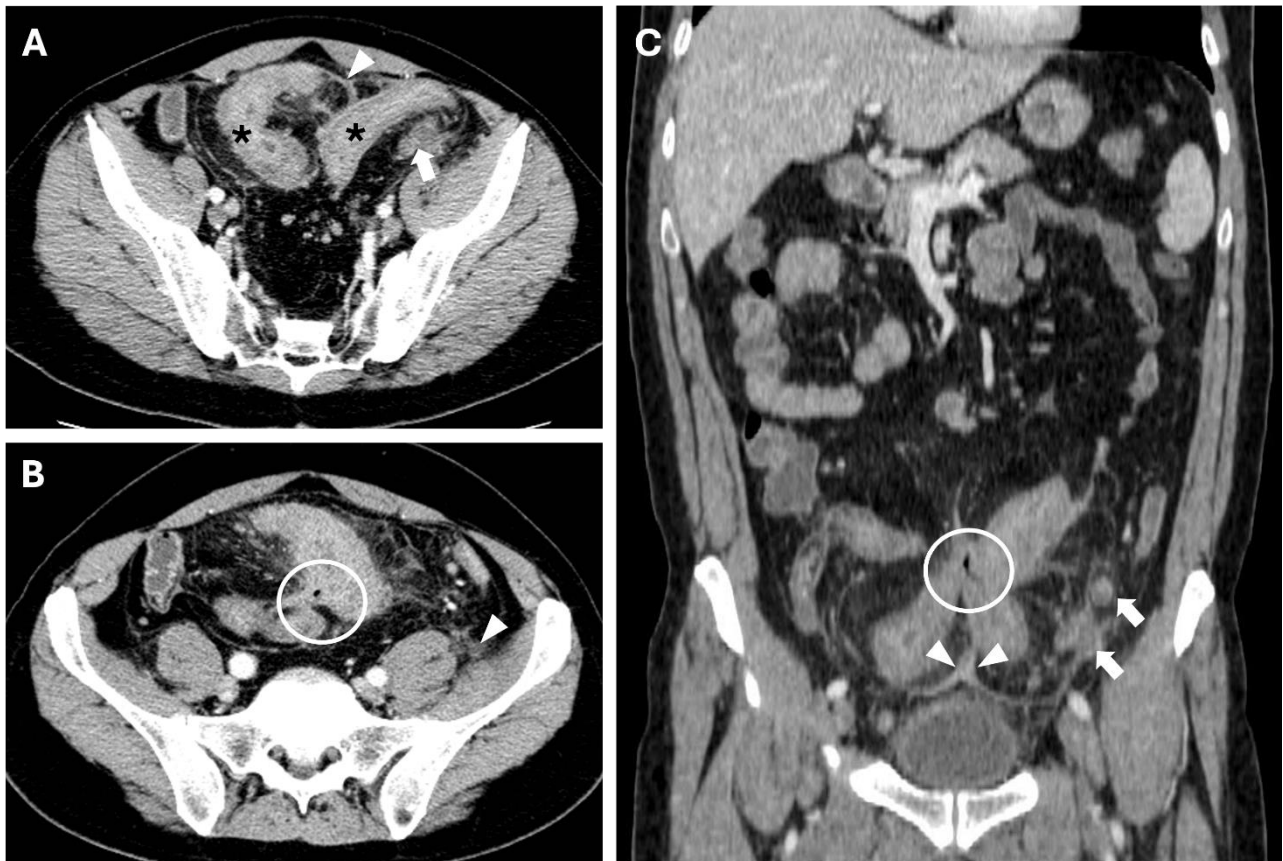


Figure S3:

Abdominal splenosis in 57-year-old man affected by lung cancer treated with surgery. CT late arterial (**A-C**) and portal venous phases (**D-F**) on axial plane showed nodular implants following the typical spleen enhancement (**A-F, arrows**).

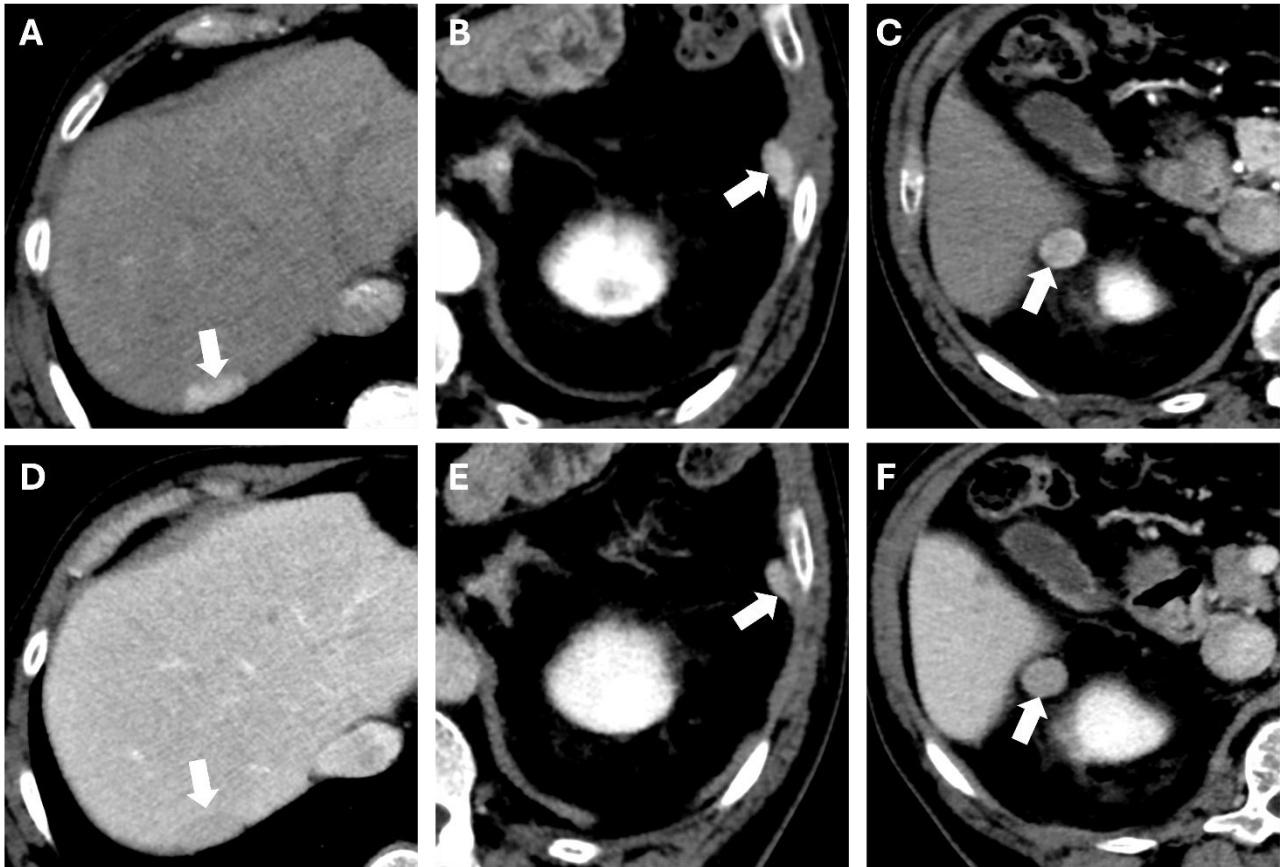


Figure S4:

Ileal lymphoma in 48-year-old woman with peritoneal lymphomatosis. CT portal venous phase, axial plane (**A-C**) showed a linear (**A**, **arrowheads**) and nodular (**A and C**, **circle**) thickening of the peritoneum, in association with ileal thickening (**B**, **arrows**) with pseudoaneurysmatic pattern and necrotic adenopathy (**A**, **asterisk**).



Figure S5:

Malignant mesothelioma in 55-year-old woman. CT portal venous phase (**A-D**), axial plane (**A and E**) showed cystic (**A**, **asterisk**) and nodular implants (**E**, **arrow**). Cystic implant was hyperintense in MRI T2w (**D**, **asterisk**) without restricted diffusion on DWI ($b=800 \text{ mm}^2/\text{s}$) and ADC map (**B and C**, **asterisks**). Nodular implant was hypointense in MRI T2w (**H**, **asterisk**) with restricted diffusion on DWI ($b=800 \text{ mm}^2/\text{s}$) and ADC map (**F and G**, **asterisks**).

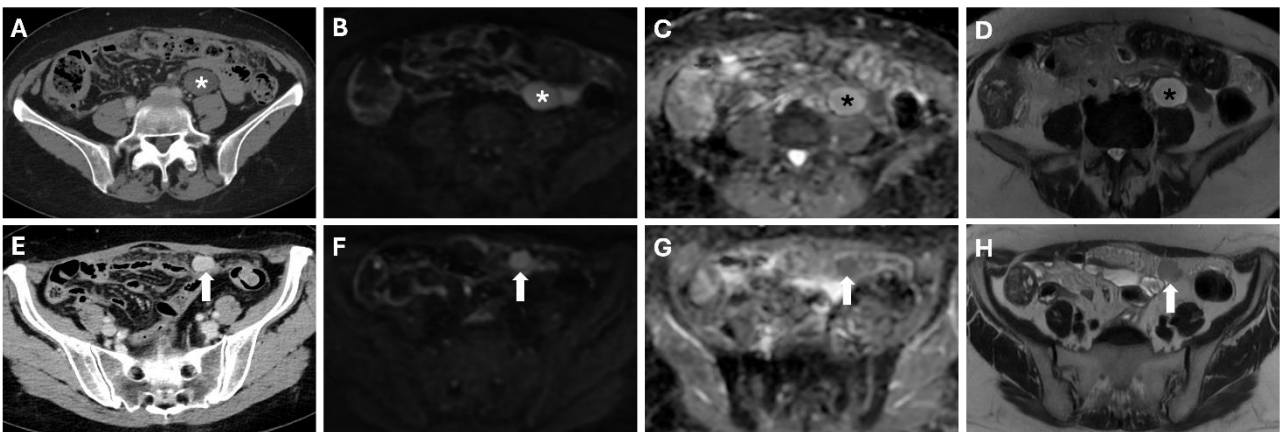


Figure S6:
 Endometriosis in 42-year-old woman with history of appendiceal tumor. MRI T2w (A) and T1fs (B) showed ovarian endometriomas with recent (A and B, asterisks) and remote (A and B, arrowheads) signs of bleeding in association with nodule of adenomyosis (A, circle).

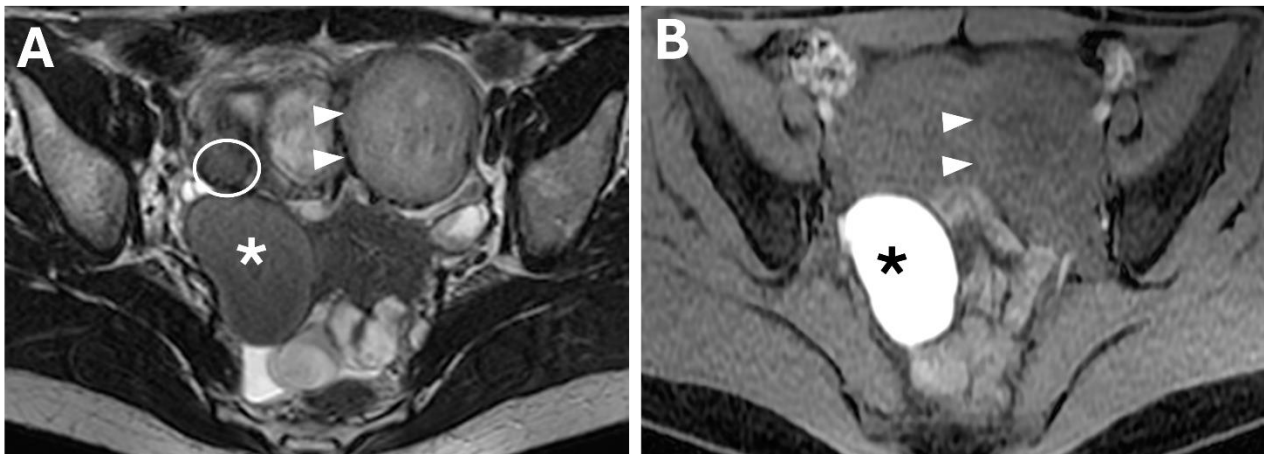


Figure S7:
 Graphical representation of the four main surgical needs.

