

DIFFERENTIAL DIAGNOSIS

- Acute Appendicitis
- Mesenteric Adenitis
- Ileocolitis
- Cecal Diverticulitis
- Appendiceal Tumor
- Cecal Carcinoma

Acute Appendicitis

- Abnormal mural enhancement of appendix
- Periappendiceal fat stranding
- Dilated appendix $>6\text{mm}$, abnormal enhancement of appendiceal wall.
Appendicolith may be present, focal bowel wall thickening of cecal tip

Mesenteric Adenitis

- Enlarged and clustered lymphadenopathy in mesentery and RLQ
- Normal appendix
- May have ileal wall thickening due to gastrointestinal involvement
- Pain when US transducer pressure applied over nodes

Ileocolitis

- Crohn disease or infectious(e.g.Yersinia)
- US: Mural thickening of cecum and terminal ileums.increased mural flow on color Doppler
- CECT: Submucosal edema of cecum and terminal ileum, surrounding cecal inflammation

Cecal Diverticulitis

- Cecal diverticulum with mural thickening
- Pericecal inflammatory changes
- Thickening of lateral conal fascia
- Abscess in anterior pararenal space

Appendiceal Tumor

- Soft tissue density mass infiltrating &/or obstructing appendix
- Usually little surrounding infiltration
- Carcinoma, lymphoma, carcinoid

Cecal Carcinoma

- May obstruct appendiceal orifice
- Dilated appendix, no periappendiceal inflammation.
- Circumferential cecal mass and lymphadenopathy suggest tumor rather than appendicitis

Final Diagnosis

- Acute Appendicitis
- Carcinoid tumor