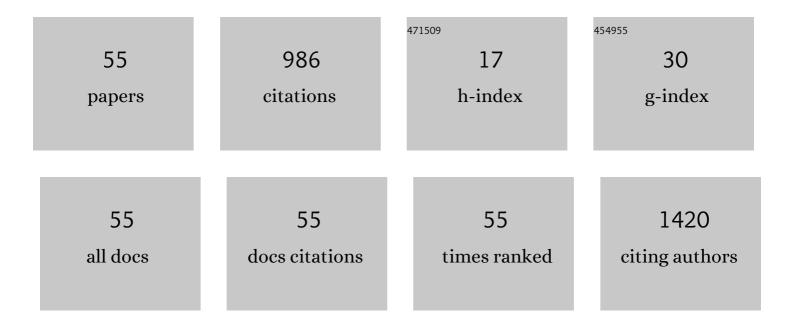
Yiyan Liu

List of Publications by Year in descending order

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<u>Υίνα ΝΙ Π</u>

#	Article	IF	CITATIONS
1	Dominant uptake of fatty acid over glucose by prostate cells: a potential new diagnostic and therapeutic approach. Anticancer Research, 2010, 30, 369-74.	1.1	115
2	Physiology and Pathophysiology of Incidental Findings Detected on FDG-PET Scintigraphy. Seminars in Nuclear Medicine, 2010, 40, 294-315.	4.6	101
3	The Place of FDG PET/CT in Renal Cell Carcinoma: Value and Limitations. Frontiers in Oncology, 2016, 6, 201.	2.8	82
4	Clinical significance of thyroid uptake on F18-fluorodeoxyglucose positron emission tomography. Annals of Nuclear Medicine, 2009, 23, 17-23.	2.2	77
5	Clinical significance of diffusely increased splenic uptake on FDG-PET. Nuclear Medicine Communications, 2009, 30, 763-769.	1.1	68
6	Benign ovarian and endometrial uptake on FDG PET-CT: patterns and pitfalls. Annals of Nuclear Medicine, 2009, 23, 107-112.	2.2	63
7	Adenomyomatosis of the Gallbladder: Another Cause for a "Hot―Gallbladder on18F-FDG PET. American Journal of Roentgenology, 2007, 189, W36-W38.	2.2	51
8	Role of FDG PET-CT in evaluation of locoregional nodal disease for initial staging of breast cancer. World Journal of Clinical Oncology, 2014, 5, 982.	2.3	39
9	¹⁸ F-FDG PET Evaluation of Sinonasal Papilloma. American Journal of Roentgenology, 2009, 193, 214-217.	2.2	35
10	Demonstrations of AIDS-associated malignancies and infections at FDG PET-CT. Annals of Nuclear Medicine, 2011, 25, 536-546.	2.2	28
11	The F + 0 protocol for diuretic renography results in fewer interrupted studies due to voiding than the F - 15 protocol. Journal of Nuclear Medicine, 2005, 46, 1317-20.	5.0	25
12	FDG PET-CT demonstration of metastatic neuroendocrine tumor of prostate. World Journal of Surgical Oncology, 2008, 6, 64.	1.9	24
13	Orthopedic surgery-related benign uptake on FDG-PET: case examples and pitfalls. Annals of Nuclear Medicine, 2009, 23, 701-708.	2.2	21
14	PET-CT Demonstration of Extensive Muscle Metastases From Breast Cancer. Clinical Nuclear Medicine, 2006, 31, 266-268.	1.3	20
15	Characterization of thymic lesions with F-18 FDG PET-CT. Nuclear Medicine Communications, 2011, 32, 554-562.	1.1	20
16	FDG PET/CT for metastatic squamous cell carcinoma of unknown primary of the head and neck. Oral Oncology, 2019, 92, 46-51.	1.5	20
17	Super-Superscan on a Bone Scintigraphy. Clinical Nuclear Medicine, 2011, 36, 227-228.	1.3	18
18	Diagnostic role of fluorodeoxyglucose positron emission tomography-computed tomography in prostate cancer. Oncology Letters, 2014, 7, 2013-2018.	1.8	18

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#	Article	IF	CITATIONS
19	The role of 18F-FDG PET/CT in staging and restaging primary bone lymphoma. Nuclear Medicine Communications, 2017, 38, 319-324.	1.1	18
20	Invalidity of SUV Measurements of Lesions in Close Proximity to Hot Sources due to "Shine-Through― Effect on FDG PET-CT Interpretation. Radiology Research and Practice, 2012, 2012, 1-4.	1.3	12
21	The role of 18F-FDG PET/CT in the follow-up of well-differentiated thyroid cancer with negative thyroglobulin but positive and/or elevated antithyroglobulin antibody. Nuclear Medicine Communications, 2016, 37, 577-582.	1.1	12
22	Metastatic Female Adnexal Tumor of Possible Wolffian Origin (FATWO) of the Appendix Demonstrated by FDG PET/CT. Clinical Nuclear Medicine, 2011, 36, 136-137.	1.3	10
23	Radiolabelled somatostatin analog therapy in prostate cancer: current status and future directions. Cancer Letters, 2006, 239, 21-26.	7.2	9
24	Lung Neoplasms with Low F18-Fluorodeoxyglucose Avidity. PET Clinics, 2018, 13, 11-18.	3.0	9
25	???Shine Through??? on Dual Tracer Parathyroid Scintigraphy: A Potential Pitfall in Interpretation. Clinical Nuclear Medicine, 2005, 30, 145-149.	1.3	8
26	Fluorodeoxyglucose uptake in absence of CT abnormality on PET-CT: What is it?. World Journal of Radiology, 2013, 5, 460.	1.1	8
27	Postoperative reactive lymphadenitis: A potential cause of false-positive FDG PET/CT. World Journal of Radiology, 2014, 6, 890.	1.1	8
28	Primary Umbilical Neoplasm Demonstrated on FDG PET/CT. Clinical Nuclear Medicine, 2011, 36, e67-e68.	1.3	6
29	Concurrent FDG Avid Nasopharyngeal Lesion and Generalized Lymphadenopathy on PET-CT Imaging Is Indicative of Lymphoma in Patients with HIV Infection. AIDS Research and Treatment, 2012, 2012, 1-6.	0.7	6
30	Scintigraphic Images of Massive Tumoral Calcinosis. Clinical Nuclear Medicine, 2016, 41, 504-505.	1.3	6
31	Bone Marrow Granulomatous Inflammation. Clinical Nuclear Medicine, 2008, 33, 707-708.	1.3	5
32	Metastatic Brain Lesions May Demonstrate Photopenia on FDG-PET. Clinical Nuclear Medicine, 2008, 33, 255-257.	1.3	4
33	Focal mass-like cardiac uptake on oncologic FDG PET/CT: Real lesion or atypical pattern of physiologic uptake?. Journal of Nuclear Cardiology, 2019, 26, 1205-1211.	2.1	4
34	Actinomycosis-induced adnexal and uterine masses mimicking malignancy on FDG PET/CT. American Journal of Obstetrics and Gynecology, 2019, 220, 281.	1.3	4
35	Uterine Myoma Identified on a Tc-99m MAG3 Scan of a Renal Transplant. Clinical Nuclear Medicine, 2002, 27, 801-802.	1.3	3
36	Nodal Metastasis From Occult Thyroid Cancer Detected by FDG PET-CT in a Patient With 2 Known Malignancies. Clinical Nuclear Medicine, 2009, 34, 371-373.	1.3	3

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37	Setting an SUV cut-off value is misleading and meaningless in the differentiation between physiological and pathological accumulations in the head and neck. Nuclear Medicine Communications, 2009, 30, 895.	1.1	3
38	Chronic Sialadenitis With Marked Lymphadenopathy Mimicking Lymphoma on FDG PET/CT. Clinical Nuclear Medicine, 2014, 39, 738-739.	1.3	3
39	Pseudomyogenic Hemangioendothelioma. Clinical Nuclear Medicine, 2020, 45, 248-249.	1.3	3
40	Use of Radionuclides to Study Renal Function. , 2003, 86, 79-118.		2
41	FDG PET/CT and Renal Scan Demonstrations of Carcinoma in the Urinary Bladder and Bladder Diverticulum. Clinical Nuclear Medicine, 2013, 38, 580-581.	1.3	2
42	Migrating Tumor Thrombus Trapped Within the Greenfield Filter of the Inferior Vena Cava and Depicted by FDG PET/CT. Clinical Nuclear Medicine, 2014, 39, 214-216.	1.3	2
43	Multiple distant adenomyosis mimicking carcinomatosis on FDG PET/CT. American Journal of Obstetrics and Gynecology, 2014, 210, 486.e1-486.e2.	1.3	2
44	Chronic Nonbacterial Osteomyelitis With FDG Avid Rib Destruction and Extensive Lymphadenopathy. Clinical Nuclear Medicine, 2016, 41, 730-731.	1.3	2
45	Lung Hot Spot Without Corresponding Computed Tomography Abnormality on Fluorodeoxyglucose Positron Emission Tomography/Computed Tomography: Artifactual or Real, latrogenic or Pathologic?. Current Problems in Diagnostic Radiology, 2017, 46, 200-203.	1.4	2
46	Large Idiopathic Mesenteric Necrotizing Granuloma Mimicking Metastatic Disease on FDG PET/CT. Clinical Nuclear Medicine, 2020, 45, 314-315.	1.3	2
47	A level III sentinel lymph node in breast cancer. World Journal of Surgical Oncology, 2006, 4, 31.	1.9	1
48	F18‑fluorodeoxyglucose positron emission tomography/computed tomography for bone hemangiopericytoma. Molecular and Clinical Oncology, 2017, 7, 1147-1151.	1.0	1
49	Diagnostic value of fluorine‑18 fluorodeoxyglucose positron emission tomography/computed tomography in sublingual and submandibular salivary gland tumors. Molecular and Clinical Oncology, 2020, 13, 27.	1.0	1
50	FDG PET Differentiation of Tumor Recurrence From Post-Stereotactic Radiosurgical Scar in a Central Neurocytoma. Clinical Nuclear Medicine, 2013, 38, 469-470.	1.3	0
51	Massive Idiopathic Oropharyngeal and Laryngeal Granulomatosis on FDG PET/CT. Clinical Nuclear Medicine, 2017, 42, 325-326.	1.3	0
52	The role of FDG uptake intensity in pericardial effusion. Journal of Nuclear Cardiology, 2017, 24, 1440-1441.	2.1	0
53	Septic and tumor thrombosis caught by inferior vena cava filters and demonstrated on FDG PET/CT. Vascular Medicine, 2018, 23, 491-492.	1.5	0
54	Giant primary breast Burkitt's lymphoma demonstrated on FDG PET/CT. Breast Journal, 2020, 26, 1039-1040.	1.0	0

#	Article	IF	CITATIONS
55	Fluorodeoxyglucose positron emission tomography/CT for primary malignant intraosseous neoplasms of the mandible. Molecular and Clinical Oncology, 2021, 16, 16.	1.0	ο