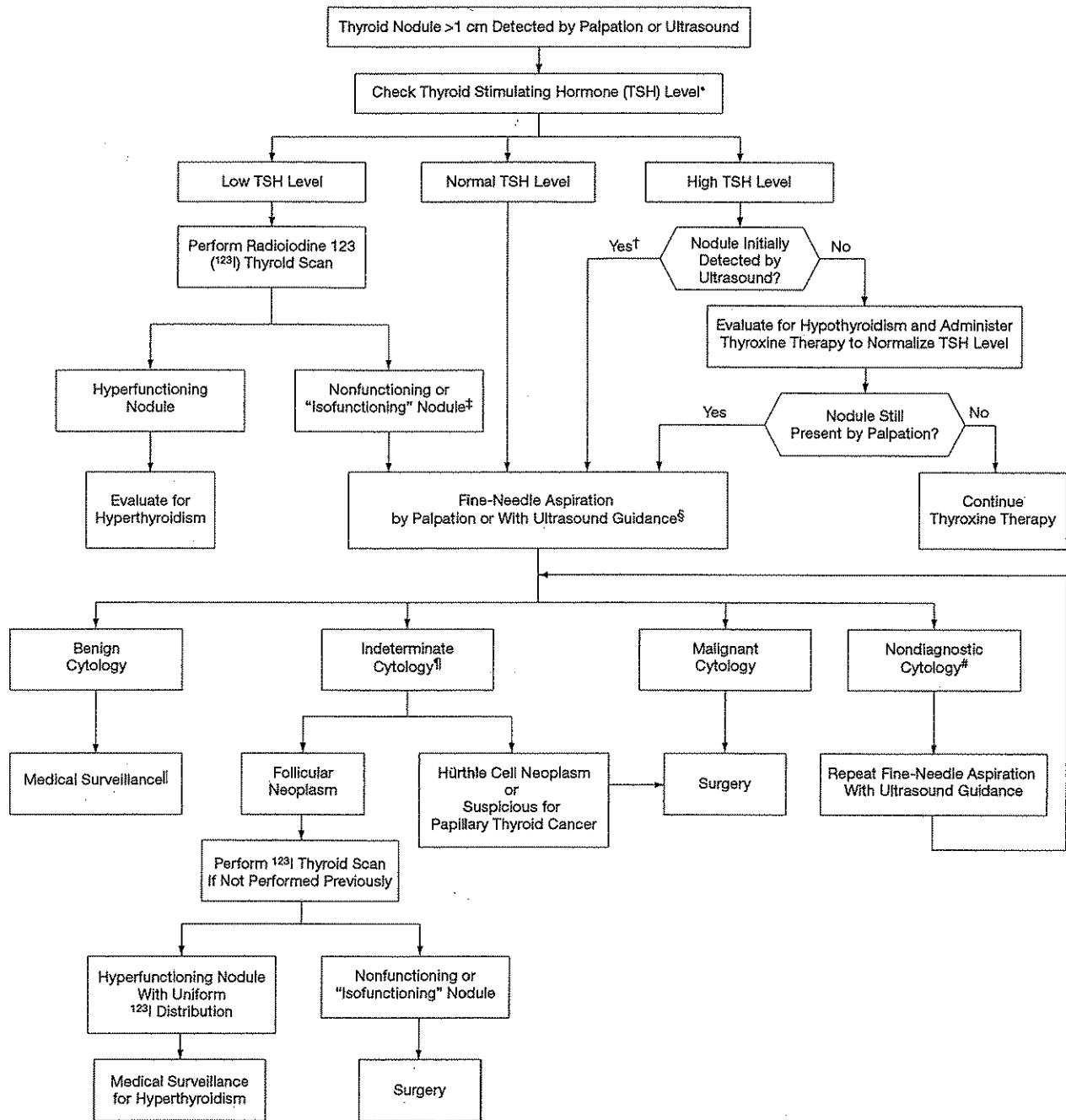


Figure 1. Initial Laboratory Evaluation of a Patient With a Thyroid Nodule >1 cm Detected by Palpation or Ultrasound



*Cutpoints for low, normal, and high TSH levels vary according to laboratory.

†Evaluate for hypothyroidism.

‡Evaluate for hyperthyroidism.

§Indications for fine-needle aspiration guided by ultrasound include palpable nodule greater than 50% cystic, difficult to palpate or nonpalpable nodules, and nondiagnostic cytology on previous fine-needle aspiration.

¶Perform diagnostic thyroid ultrasound if not previously performed.

¶Follicular neoplasm, Hürthle cell neoplasm, suspicious for papillary thyroid cancer.

#Insufficient quantity of follicular thyroid cells.