

This worksheet is solely for the purpose of recording preliminary data and does not constitute a final report of any kind.

COMBINED NECK/ THYROID ULTRASOUND

*****SELF-CORRECT ONLY*****

PATIENT NAME: _____ MR#: _____

DATE: _____ TECH: _____ EXT#: _____

FACILITY: MWH / MIF / ICW / MILH / MINS / MIKG / SH

INDICATION: Abnormal physical exam of neck Abnormal TFTs Thyroid nodules Abnormal radiological finding Lymphadenopathy History of partial Thyroidectomy Other: _____

COMPARISON: None _____

TECHNIQUE: Grayscale and color duplex sonography of the thyroid and neck performed.

FINDINGS (select appropriate):

The echotexture pattern of the thyroid is (subjectively):

Homogeneous.

(Mildly / Moderately / Markedly) heterogeneous throughout.

Hypoechoic with prominence of the echogenic fibrous septations throughout.

RIGHT LOBE: Size (cm): Length _____ AP _____ Width _____ Volume: _____ ml.

LEFT LOBE: Size (cm): Length _____ AP _____ Width _____ Volume: _____ ml.

ISTHMUS: Size (cm): AP _____

*THYROID VOLUME CALCULATION (L x W X H x 0.52).

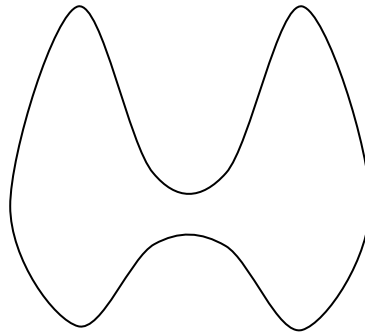
REFERENCE RANGES: NORMAL IS 19.6 ML +/- 4.7 ML FOR MALES AND 17.5 ML +/- 4.2 ML FOR FEMALES

Gland vascularity on color Doppler imaging is subjectively: within normal limits. increased.

THYROID NODULES/ MASSES:

No discrete nodules are identified.

Discrete thyroid nodule(s) are identified. As per TI-RADS, no more than 4 nodules (most suspicious) will be documented.



RIGHT LOBE

NODULE: LONG x WIDTH X AP IMG#

1. _____ x _____ x _____ cm _____

2. _____ x _____ x _____ cm _____

3. _____ x _____ x _____ cm _____

4. _____ x _____ x _____ cm _____

5. _____ x _____ x _____ cm _____

LEFT LOBE

NODULE: LONG x WIDTH X AP IMG#

1. _____ x _____ x _____ cm _____

2. _____ x _____ x _____ cm _____

3. _____ x _____ x _____ cm _____

4. _____ x _____ x _____ cm _____

5. _____ x _____ x _____ cm _____

Isthmus

NODULE: LONG x WIDTH X AP IMG#

1. _____ x _____ x _____ cm _____

2. _____ x _____ x _____ cm _____

3. _____ x _____ x _____ cm _____

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CERVICAL NODES:

RIGHT LEVEL II NODES

- LONG x WIDE x AP IMG #
1. ____ x ____ x ____ cm ____
 2. ____ x ____ x ____ cm ____
 3. ____ x ____ x ____ cm ____

RIGHT LEVEL III NODES:

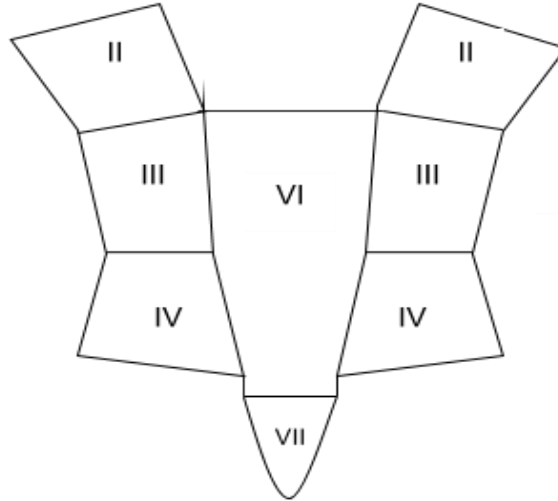
- LONG x WIDE x AP IMG #
1. ____ x ____ x ____ cm ____
 2. ____ x ____ x ____ cm ____
 3. ____ x ____ x ____ cm ____

RIGHT LEVEL IV NODES:

- LONG x WIDE x AP IMG #
1. ____ x ____ x ____ cm ____
 2. ____ x ____ x ____ cm ____
 3. ____ x ____ x ____ cm ____

RIGHT LEVEL VI NODES:

- LONG x WIDE x AP IMG #
1. ____ x ____ x ____ cm ____
 2. ____ x ____ x ____ cm ____
 3. ____ x ____ x ____ cm ____



LEVEL VII NODES:
LONG x WIDE x AP IMG #

1. ____ x ____ x ____ cm ____
2. ____ x ____ x ____ cm ____
3. ____ x ____ x ____ cm ____

LEFT LEVEL II NODES:

- LONG x WIDE x AP IMG #
1. ____ x ____ x ____ cm ____
 2. ____ x ____ x ____ cm ____
 3. ____ x ____ x ____ cm ____

LEFT LEVEL III NODES:

- LONG x WIDE x AP IMG #
1. ____ x ____ x ____ cm ____
 2. ____ x ____ x ____ cm ____
 3. ____ x ____ x ____ cm ____

LEFT LEVEL IV NODES:

- LONG x WIDE x AP IMG #
1. ____ x ____ x ____ cm ____
 2. ____ x ____ x ____ cm ____
 3. ____ x ____ x ____ cm ____

LEFT LEVEL VI NODES:

- LONG x WIDE x AP IMG #
1. ____ x ____ x ____ cm ____
 2. ____ x ____ x ____ cm ____
 3. ____ x ____ x ____ cm ____

IMPRESSION: Preliminary findings/impression subject to radiologist review.

- [] Thyroid Ultrasound within normal limits.
- [] Nodular Thyroid gland (Radiologist to dictate)
- [] Cervical nodes (Radiologist to dictate)

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ACR TI-RADS

<p>COMPOSITION (Choose 1)</p> <p>Cystic or almost completely cystic 0 points</p> <p>Spongiform 0 points</p> <p>Mixed cystic and solid 1 point</p> <p>Solid or almost completely solid 2 points</p>	<p>ECHOGENICITY (Choose 1)</p> <p>Anechoic 0 points</p> <p>Hyperechoic or isoechoic 1 point</p> <p>Hypoechoic 2 points</p> <p>Very hypoechoic 3 points</p>	<p>SHAPE (Choose 1)</p> <p>Wider-than-tall 0 points</p> <p>Taller-than-wide 3 points</p>	<p>MARGIN (Choose 1)</p> <p>Smooth 0 points</p> <p>Ill-defined 0 points</p> <p>Lobulated or irregular 2 points</p> <p>Extra-thyroidal extension 3 points</p>	<p>ECHOGENIC FOCI (Choose All That Apply)</p> <p>None or large comet-tail artifacts 0 points</p> <p>Macrocalcifications 1 point</p> <p>Peripheral (rim) calcifications 2 points</p> <p>Punctate echogenic foci 3 points</p>
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Add Points From All Categories to Determine TI-RADS Level

0 Points	2 Points	3 Points	4 to 6 Points	7 Points or More
TR1 Benign No FNA	TR2 Not Suspicious No FNA	TR3 Mildly Suspicious FNA if ≥ 2.5 cm Follow if ≥ 1.5 cm	TR4 Moderately Suspicious FNA if ≥ 1.5 cm Follow if ≥ 1 cm	TR5 Highly Suspicious FNA if ≥ 1 cm Follow if ≥ 0.5 cm*

COMPOSITION	ECHOGENICITY	SHAPE	MARGIN	ECHOGENIC FOCI
<p><i>Spongiform</i>: Composed predominantly (>50%) of small cystic spaces. Do not add further points for other categories.</p> <p><i>Mixed cystic and solid</i>: Assign points for predominant solid component.</p> <p>Assign 2 points if composition cannot be determined because of calcification.</p>	<p><i>Anechoic</i>: Applies to cystic or almost completely cystic nodules.</p> <p><i>Hyperechoic/isoechoic/hypoechoic</i>: Compared to adjacent parenchyma.</p> <p><i>Very hypoechoic</i>: More hypoechoic than strap muscles.</p> <p>Assign 1 point if echogenicity cannot be determined.</p>	<p><i>Taller-than-wide</i>: Should be assessed on a transverse image with measurements parallel to sound beam for height and perpendicular to sound beam for width.</p> <p>This can usually be assessed by visual inspection.</p>	<p><i>Lobulated</i>: Protrusions into adjacent tissue.</p> <p><i>Irregular</i>: Jagged, spiculated, or sharp angles.</p> <p><i>Extrathyroidal extension</i>: Obvious invasion = malignancy.</p> <p>Assign 0 points if margin cannot be determined.</p>	<p><i>Large comet-tail artifacts</i>: V-shaped, >1 mm, in cystic components.</p> <p><i>Macrocalcifications</i>: Cause acoustic shadowing.</p> <p><i>Peripheral</i>: Complete or incomplete along margin.</p> <p><i>Punctate echogenic foci</i>: May have small comet-tail artifacts.</p>

*Refer to discussion of papillary microcarcinomas for 5-9 mm TR5 nodules.