

# PROIECTUL THYROSCREEN – ROMANIA- SERBIA.

## DESIGN-UL STUDIULUI



1. **POPULATIA CU RISC CRESCUT PENTRU PATOLOGIE TIROIDIANA.**



2. **CHESTIONAR DE EVALUARE RISC TIROIDIAN – POZITIV**  
**MEDICI DE FAMILIE – JUDETUL TIMIS (200 MF)**



3. **MEDICI DE FAMILIE INVESTIGATORI**  
**(4 MF INVESTIGATORI X 4 LOTURI = 16 MF- INVESTIGATORI)**  
**ECOGRAFIE TIROIDIANA – SCREENING ECOGRAFIC – INTRODUCEREA SI EVALUAREA**  
**DATELOR PE BAZA - SMART THYROID ULTRASOUND SOFTWARE.**





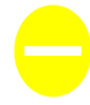
APPROVED



UNDER REVIEW



REJECTED



#### 4. STABILIREA GRUP DE RISC – CLASIFICAREA TIRADS – ALGORITM COMPUTERIZAT

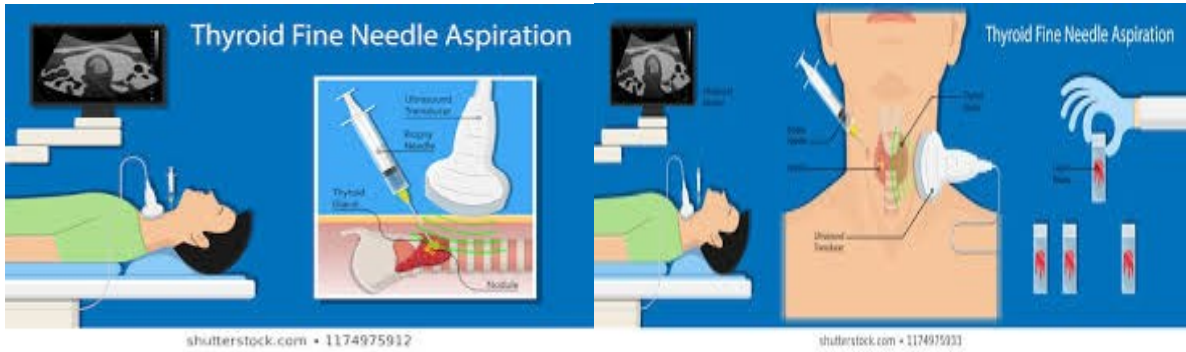


#### 5. EVALUAREA PACIENTILOR – MEDIC SPECIALIST ENDOCRINOLOG. INVESTIGATII PARACLINICE SUPLIMENTARE



#### 6. REEVALUAREA GRUPELOR DE RISC. PACIENTII CU RISC CRESCUT – TIRADS 4-5 CU RECOMANDARE DE FNAB.





7. SPECIALISTI CHIRURGIE ONCOLOGICA / ENDOCRINOLOGI – FNAC / BIOPSIE.



2017 Bethesda System for Reporting Thyroid Cytopathology

Diagnostic Category	ROM if NIFTP not cancer	ROM if NIFTP is cancer	Management
<b>Nondiagnostic/unsatisfactory</b> Cyst fluid only Acellular specimen Other: Obscuring factors	5–10%	5–10%	Repeat fine needle aspiration under ultrasound guidance
<b>Benign</b> Benign follicular nodule Chronic lymphocytic (Hashimoto) thyroiditis, in proper clinical setting Granulomatous (subacute) thyroiditis	0–3%	0–3%	Clinical and US follow-up until two negative
<b>Atypia of undetermined significance/ follicular lesion of undetermined significance</b>	6–18%	10–30%	Repeat FNA, molecular testing, or lobectomy
<b>Follicular neoplasm/ suspicious for a follicular neoplasm (Specify if Hürthle cell type)</b>	10–40%	25–40%	Molecular testing, lobectomy
<b>Suspicious for malignancy</b>	45–60%	50–75%	Lobectomy or near-total thyroidectomy
<b>Malignant</b> Papillary thyroid carcinoma Medullary thyroid carcinoma Poorly differentiated carcinoma Undifferentiated (anaplastic) carcinoma Squamous cell carcinoma Carcinoma with mixed features Metastatic malignancy Non-Hodgkin lymphoma Other	94–96%	97–99%	Lobectomy or near-total thyroidectomy

8. SUSPICIUNE PATOLOGIE ONCOLOGICA TIROIDIANA



9. INTERVENTIE CHIRURGICALA – EVALUARE REZULTATE HISTOPATOLOGICE

