



Thyroid, Parathyroid, and Neck Case Submission Requirements



For initial accreditation applications only: *no case studies are required if the Physician Director of Ultrasound obtained the ECNU credential within the past 12 months.* ECNU's imaging protocols were changed to align with the AIUM; refer to imaging checklist on page 2.

From the <u>main site</u>	From <u>each additional site</u> or <u>mobile machine</u>
<p>Submit a total of 4 cases with their corresponding final report(s) as described below:</p> <ul style="list-style-type: none"> Submit 2 abnormal diagnostic thyroid/parathyroid cases, one of which <u>also includes</u> an ultrasound-guided fine needle aspiration (*UGFNA). Additionally, submit 2 abnormal diagnostic neck cases from any of the categories listed below, one of which <u>also includes</u> an ultrasound-guided fine needle aspiration (*UGFNA). <p>Neck Categories</p> <ol style="list-style-type: none"> Salivary Glands Lymph Nodes Congenital Lesions Miscellaneous Mass Lesions Infection and Trauma Endocrine (Thyroid/Parathyroid) 	<p>Submit 1 abnormal diagnostic neck case which <u>also includes</u> an ultrasound-guided fine needle aspiration (*UGFNA) from any one of the categories listed below along with its corresponding final report(s):</p> <p>Neck Categories</p> <ol style="list-style-type: none"> Salivary Glands Lymph Nodes Congenital Lesions Miscellaneous Mass Lesions Infection and Trauma Endocrine (Thyroid/Parathyroid)

Additional Notes:

- Cases in which a patient has had a thyroidectomy (partial or complete) are **NOT ACCEPTABLE** for submission.
- *UGFNAs** may be performed on a different date than the diagnostic ultrasound, but *must be performed on the same patient and include a separate report for the procedure.* The needle must be shown within the lesion.
- For the purpose of accreditation, all anatomy must be appropriately labeled (e.g., LONG RT THY MID).
- All cases must follow the [General Requirements for the Submission of Case Studies](#).



Thyroid/Parathyroid Imaging Checklist

Labeled images of the following:

RIGHT LOBE		LEFT LOBE	
	1. Transverse superior portion		8. Transverse superior portion
	2. Transverse midportion		9. Transverse midportion
	3. Transverse inferior portion		10. Transverse inferior portion
	4. Longitudinal medial portion		11. Longitudinal medial portion
	5. Longitudinal midportion		12. Longitudinal midportion
	6. Longitudinal lateral portion		13. Longitudinal lateral portion
	7. RIGHT lobe measurements in 3 dimensions		14. LEFT lobe measurements in 3 dimensions
ISTHMUS			
	15. Transverse isthmus		
	16. AP measurement of isthmus		
ABNORMALITIES (if applicable)			
	17. Thyroid abnormality measurements in 3 dimensions		
	18. If multiple thyroid nodules are noted - location, size, and number of nodules imaged and documented		
	19. Overall gland vascularity		
	20. Abnormal adjacent soft tissues		
	21. If cervical lymph nodes evaluated - size (at least 2 dimensions) and location		
PARATHYROID (if indicated)			
	22. Transverse images of anticipated parathyroid locations		
	23. Longitudinal images of anticipated parathyroid locations		
	24. Parathyroid gland(s) measured in 3 dimensions, when enlarged		
UGFNA (if indicated)			
	25. Lesion(s) with measurements demonstrated before biopsy/biopsies		
	26. Needle demonstrated within lesion(s)		