WEBVTT

NOTE duration:"01:08:43" NOTE recognizability:0.823

NOTE language:en-us

NOTE Confidence: 0.85639803

 $00:00:00.000 \longrightarrow 00:00:01.680$ I think we'll get started.

NOTE Confidence: 0.91080498

 $00:00:01.690 \longrightarrow 00:00:04.350$ So it's 1230. Thanks all for coming.

NOTE Confidence: 0.91080498

 $00:00:04.350 \longrightarrow 00:00:05.860$ It's my great pleasure to

NOTE Confidence: 0.91080498

00:00:05.860 --> 00:00:07.068 introduce friend and mentor,

NOTE Confidence: 0.91080498

00:00:07.070 --> 00:00:09.790 doctor Syed Ali's world renowned

NOTE Confidence: 0.91080498

 $00:00:09.790 \longrightarrow 00:00:11.966$ cytopathologist and innovative educator.

NOTE Confidence: 0.91080498

00:00:11.970 --> 00:00:13.638 Doctor Ali serves as professor of

NOTE Confidence: 0.91080498

 $00:00:13.638 \longrightarrow 00:00:15.338$ pathology and radiology at the Johns

NOTE Confidence: 0.91080498

 $00:00:15.338 \longrightarrow 00:00:16.952$ Hopkins University School of Medicine as

NOTE Confidence: 0.91080498

 $00{:}00{:}16.952 \dashrightarrow 00{:}00{:}19.145$ well as a director of the Division of

NOTE Confidence: 0.91080498

 $00:00:19.145 \dashrightarrow 00:00:20.890$ Cytopathology at Johns Hopkins Hospital.

NOTE Confidence: 0.91080498

 $00:00:20.890 \longrightarrow 00:00:22.856$ He received his pathology residency

NOTE Confidence: 0.91080498

00:00:22.856 --> 00:00:24.726 training at North Shore University,

 $00:00:24.730 \longrightarrow 00:00:26.735$ Cornell University in New York

NOTE Confidence: 0.91080498

 $00{:}00{:}26.735 \dashrightarrow 00{:}00{:}28.339$ with fellowships and oncologic

NOTE Confidence: 0.91080498

 $00:00:28.339 \longrightarrow 00:00:30.059$ surgical pathology at Memorial.

NOTE Confidence: 0.91080498

 $00:00:30.060 \longrightarrow 00:00:30.750$ In New York,

NOTE Confidence: 0.91080498

00:00:30.750 --> 00:00:32.540 under the mentorship of Doctor Juan Rosai,

NOTE Confidence: 0.91080498

 $00:00:32.540 \longrightarrow 00:00:34.012$ followed by cytopathology at

NOTE Confidence: 0.91080498

00:00:34.012 --> 00:00:35.484 the Johns Hopkins Hospital

NOTE Confidence: 0.79959724

00:00:35.500 --> 00:00:37.788 in Baltimore. Known globally

NOTE Confidence: 0.878961890909091

 $00:00:37.800 \longrightarrow 00:00:39.456$ as an innovative educator and one

NOTE Confidence: 0.878961890909091

00:00:39.456 --> 00:00:41.280 of the most traveled pathologists,

NOTE Confidence: 0.878961890909091

 $00:00:41.280 \longrightarrow 00:00:44.010$ doctor Ali has well over 350

NOTE Confidence: 0.878961890909091

00:00:44.010 --> 00:00:45.892 invited lectures, keynote speeches,

NOTE Confidence: 0.878961890909091

 $00:00:45.892 \longrightarrow 00:00:47.380$ and visiting professorships

NOTE Confidence: 0.878961890909091

 $00:00:47.380 \longrightarrow 00:00:48.780$ all over the world.

NOTE Confidence: 0.878961890909091

 $00:00:48.780 \longrightarrow 00:00:50.572$ In collaboration with international

NOTE Confidence: 0.878961890909091

 $00{:}00{:}50.572 \dashrightarrow 00{:}00{:}53.022$ societies in universities, he directs,

 $00:00:53.022 \longrightarrow 00:00:56.328$ or Co directs several annual major

NOTE Confidence: 0.878961890909091

00:00:56.328 --> 00:00:57.430 cytopathology tutorials.

NOTE Confidence: 0.878961890909091

00:00:57.430 --> 00:00:59.674 He's published extensively with over 300

NOTE Confidence: 0.878961890909091

00:00:59.674 --> 00:01:01.710 articles and major scientific journals,

NOTE Confidence: 0.878961890909091

00:01:01.710 --> 00:01:03.530 over 35 books, book chapters,

NOTE Confidence: 0.878961890909091

 $00:01:03.530 \longrightarrow 00:01:04.658$ and electronic media.

NOTE Confidence: 0.878961890909091

00:01:04.658 --> 00:01:06.914 Known for his expertise in thyroid

NOTE Confidence: 0.878961890909091

 $00{:}01{:}06.914 \dashrightarrow 00{:}01{:}08.930$ and pancreatic cytopathology.

NOTE Confidence: 0.878961890909091

 $00:01:08.930 \longrightarrow 00:01:11.408$ His monograph on the Bethesda system

NOTE Confidence: 0.878961890909091

 $00:01:11.408 \longrightarrow 00:01:13.060$ for reporting thyroid cytopathology

NOTE Confidence: 0.878961890909091

 $00:01:13.123 \longrightarrow 00:01:14.903$ has been translated in seven

NOTE Confidence: 0.878961890909091

 $00:01:14.903 \longrightarrow 00:01:17.063$ languages and is extensively used in

NOTE Confidence: 0.878961890909091

 $00{:}01{:}17.063 \dashrightarrow 00{:}01{:}19.070$ medical practice all over the world.

NOTE Confidence: 0.878961890909091

 $00{:}01{:}19.070 \dashrightarrow 00{:}01{:}20.858$ He's the founding editor in chief of

NOTE Confidence: 0.878961890909091

00:01:20.858 --> 00:01:22.428 the Journal of the American Society

 $00:01:22.428 \longrightarrow 00:01:24.138$ of Cytopathology and has served as

NOTE Confidence: 0.878961890909091

 $00{:}01{:}24.138 \dashrightarrow 00{:}01{:}26.161$ a member of the Executive Board and

NOTE Confidence: 0.878961890909091

00:01:26.161 --> 00:01:27.561 chair of the Scientific Program.

NOTE Confidence: 0.878961890909091

 $00:01:27.570 \longrightarrow 00:01:29.555$ And other committees of the

NOTE Confidence: 0.878961890909091

00:01:29.555 --> 00:01:31.143 American Society of Cytopathology.

NOTE Confidence: 0.878961890909091

00:01:31.150 --> 00:01:33.070 He's past president of the ANC,

NOTE Confidence: 0.878961890909091

 $00:01:33.070 \longrightarrow 00:01:35.325$ presently serves as Vice President

NOTE Confidence: 0.878961890909091

 $00:01:35.325 \longrightarrow 00:01:36.227$ in November,

NOTE Confidence: 0.878961890909091

 $00:01:36.230 \longrightarrow 00:01:38.230$ president-elect of the International

NOTE Confidence: 0.878961890909091

00:01:38.230 --> 00:01:39.730 Academy of Psychology,

NOTE Confidence: 0.878961890909091

 $00{:}01{:}39.730 \dashrightarrow 00{:}01{:}41.878$ and the Chair of the International

NOTE Confidence: 0.878961890909091

 $00{:}01{:}41.878 \dashrightarrow 00{:}01{:}43.850$ Board of Cytopathology of the AIC.

NOTE Confidence: 0.878961890909091

 $00:01:43.850 \longrightarrow 00:01:45.873$ He's a fellow of both the Royal

NOTE Confidence: 0.878961890909091

00:01:45.873 --> 00:01:47.368 College of Pathologists and the IC,

NOTE Confidence: 0.878961890909091

 $00:01:47.370 \longrightarrow 00:01:49.830$ and a recipient of ASC's Warren

NOTE Confidence: 0.878961890909091

00:01:49.830 --> 00:01:51.470 Lang Award in 96,

00:01:51.470 --> 00:01:53.690 the President's award in 2012,

NOTE Confidence: 0.878961890909091

00:01:53.690 --> 00:01:56.306 Excellence in Education award in 2015,

NOTE Confidence: 0.878961890909091

 $00{:}01{:}56.310 \dashrightarrow 00{:}01{:}57.790$ and the Maurice Goldback Board.

NOTE Confidence: 0.878961890909091 00:01:57.790 --> 00:01:59.880 In 2019. NOTE Confidence: 0.878961890909091

00:01:59.880 --> 00:02:01.386 I personally know Doctor Lee for

NOTE Confidence: 0.878961890909091

00:02:01.386 --> 00:02:03.064 over 25 years since my residency

NOTE Confidence: 0.878961890909091

 $00:02:03.064 \longrightarrow 00:02:04.316$ training at Johns Hopkins.

NOTE Confidence: 0.878961890909091

 $00{:}02{:}04.320 \to 00{:}02{:}06.350$ I can personally speak to the impact

NOTE Confidence: 0.878961890909091

 $00{:}02{:}06.350 \dashrightarrow 00{:}02{:}09.018$ he's had on those who he's trained

NOTE Confidence: 0.878961890909091

 $00:02:09.018 \longrightarrow 00:02:11.160$ and cytopathology education overall.

NOTE Confidence: 0.878961890909091

 $00:02:11.160 \longrightarrow 00:02:12.826$ As he shared with our residents this

NOTE Confidence: 0.878961890909091

 $00:02:12.826 \longrightarrow 00:02:14.480$ morning at the diagnostic seminar,

NOTE Confidence: 0.878961890909091

 $00{:}02{:}14.480 \dashrightarrow 00{:}02{:}16.070$ mentors like Doctor Rose I have

NOTE Confidence: 0.878961890909091

 $00:02:16.070 \longrightarrow 00:02:17.660$ a lasting impact on trainees,

NOTE Confidence: 0.878961890909091

 $00:02:17.660 \longrightarrow 00:02:19.328$ pathologists, and the profession.

00:02:19.328 --> 00:02:20.579 Like Doctor Rosai,

NOTE Confidence: 0.878961890909091

 $00{:}02{:}20.580 \dashrightarrow 00{:}02{:}22.476$ Doctor Ali continues to challenge us.

NOTE Confidence: 0.878961890909091

 $00:02:22.480 \longrightarrow 00:02:24.030$ He not only lights up a room,

NOTE Confidence: 0.878961890909091

00:02:24.030 --> 00:02:26.856 but also past Twitter with fascinating cases,

NOTE Confidence: 0.878961890909091

00:02:26.860 --> 00:02:28.286 morphologic observation,

NOTE Confidence: 0.878961890909091

 $00:02:28.286 \longrightarrow 00:02:29.138$ detailed descriptions.

NOTE Confidence: 0.878961890909091

 $00:02:29.138 \longrightarrow 00:02:31.694$ That extend to not only us,

NOTE Confidence: 0.878961890909091

 $00:02:31.700 \longrightarrow 00:02:34.022$ but to over 25,000 of his

NOTE Confidence: 0.878961890909091

 $00:02:34.022 \longrightarrow 00:02:35.330$ international pathology followers.

NOTE Confidence: 0.878961890909091

 $00:02:35.330 \longrightarrow 00:02:36.554$ Without further ado,

NOTE Confidence: 0.878961890909091

 $00{:}02{:}36.554 \dashrightarrow 00{:}02{:}38.289$ I am privileged and delighted

NOTE Confidence: 0.878961890909091

 $00:02:38.289 \longrightarrow 00:02:39.899$ to introduce Doctor Syed Ali.

NOTE Confidence: 0.878961890909091

00:02:39.900 --> 00:02:42.318 His topic today Quest for perfection,

NOTE Confidence: 0.878961890909091

 $00:02:42.320 \longrightarrow 00:02:44.525$ updating the Bethesda system for

NOTE Confidence: 0.878961890909091

00:02:44.525 --> 00:02:45.848 reporting thyroid cytopathology.

NOTE Confidence: 0.872829148

00:02:48.700 --> 00:02:50.640 Thank you so much, Angelique,

 $00:02:50.640 \longrightarrow 00:02:52.664$ for that kind introduction.

NOTE Confidence: 0.872829148

 $00{:}02{:}52.664 \longrightarrow 00{:}02{:}55.716$ Allow me to say that you were

NOTE Confidence: 0.872829148

 $00:02:55.716 \longrightarrow 00:02:57.522$ one of the best that you trained

NOTE Confidence: 0.872829148

 $00:02:57.522 \longrightarrow 00:02:59.291$ at Hopkins and it's so good to

NOTE Confidence: 0.872829148

00:02:59.291 --> 00:03:01.470 see you do so well here at Yale.

NOTE Confidence: 0.872829148

 $00:03:01.470 \longrightarrow 00:03:03.720$ So we do miss you.

NOTE Confidence: 0.872829148

 $00:03:03.720 \longrightarrow 00:03:04.818$ Good afternoon, everyone.

NOTE Confidence: 0.872829148

 $00:03:04.818 \longrightarrow 00:03:07.014$ It's a pleasure to be here,

NOTE Confidence: 0.872829148

 $00:03:07.020 \longrightarrow 00:03:09.204$ especially presenting a topic to you

NOTE Confidence: 0.872829148

 $00:03:09.204 \longrightarrow 00:03:12.119$ which is very near and dear to my heart.

NOTE Confidence: 0.872829148

00:03:12.120 --> 00:03:13.596 As Angelique mentioned,

NOTE Confidence: 0.872829148

 $00:03:13.596 \longrightarrow 00:03:17.480$ we are in the process of updating the.

NOTE Confidence: 0.872829148

 $00:03:17.480 \longrightarrow 00:03:18.494$ With this system,

NOTE Confidence: 0.872829148

 $00{:}03{:}18.494 \dashrightarrow 00{:}03{:}21.746$ which we will call 2023 Bethesda System or

NOTE Confidence: 0.872829148

 $00:03:21.746 \longrightarrow 00:03:25.940$ the 3rd edition of the Bethesda system.

 $00:03:25.940 \longrightarrow 00:03:28.971$ As my friend Mag Demay often says

NOTE Confidence: 0.872829148

 $00{:}03{:}28.971 \dashrightarrow 00{:}03{:}31.812$ that I don't have any conflicts

NOTE Confidence: 0.872829148

00:03:31.812 --> 00:03:34.692 of interest and I don't have

NOTE Confidence: 0.872829148

00:03:34.692 --> 00:03:37.348 any interest in conflicts.

NOTE Confidence: 0.872829148

 $00:03:37.350 \longrightarrow 00:03:39.014$ So before I proceed,

NOTE Confidence: 0.872829148

 $00{:}03{:}39.014 \dashrightarrow 00{:}03{:}42.797$ I just wanted you to read what the Great

NOTE Confidence: 0.872829148

 $00:03:42.797 \longrightarrow 00:03:46.288$ Leo Post said in his very well known book,

NOTE Confidence: 0.872829148

 $00:03:46.288 \longrightarrow 00:03:47.419$ the 1st edition,

NOTE Confidence: 0.872829148

 $00:03:47.420 \longrightarrow 00:03:50.874$ and it will tell you that the reporting

NOTE Confidence: 0.872829148

 $00:03:50.874 \longrightarrow 00:03:53.730$ or the language that we use when we

NOTE Confidence: 0.872829148

 $00{:}03{:}53.804 \dashrightarrow 00{:}03{:}56.499$ report the psychological findings are

NOTE Confidence: 0.872829148

 $00:03:56.500 \longrightarrow 00:03:59.560$ as important as the diagnosis itself.

NOTE Confidence: 0.872829148

 $00{:}03{:}59.560 \dashrightarrow 00{:}04{:}02.549$ I often tell my own trainees that

NOTE Confidence: 0.872829148

 $00{:}04{:}02.549 \dashrightarrow 00{:}04{:}06.052$ it's 50% of the job that we do as

NOTE Confidence: 0.872829148

 $00:04:06.052 \longrightarrow 00:04:07.590$ cytopathologist diagnosing something.

NOTE Confidence: 0.872829148

 $00{:}04{:}07.590 \dashrightarrow 00{:}04{:}10.110$ The way we properly communicate

 $00{:}04{:}10.110 \dashrightarrow 00{:}04{:}12.630$ that diagnosis to be clinician

NOTE Confidence: 0.872829148

 $00:04:12.630 \longrightarrow 00:04:14.030$ is the remaining 50%,

NOTE Confidence: 0.872829148

 $00:04:14.030 \longrightarrow 00:04:16.130$ because if you don't use the

NOTE Confidence: 0.872829148

00:04:16.206 --> 00:04:18.310 right language or terminology,

NOTE Confidence: 0.872829148

 $00:04:18.310 \longrightarrow 00:04:21.016$ your diagnosis of excellent

NOTE Confidence: 0.872829148

 $00:04:21.016 \longrightarrow 00:04:23.824$ diagnosis could be misinterpreted.

NOTE Confidence: 0.872829148

00:04:23.830 --> 00:04:25.460 It's valid in search path,

NOTE Confidence: 0.872829148

00:04:25.460 --> 00:04:27.964 but it's much more valid inside of pathology,

NOTE Confidence: 0.872829148

 $00:04:27.970 \longrightarrow 00:04:29.842$ where typically no intervening

NOTE Confidence: 0.872829148

 $00:04:29.842 \longrightarrow 00:04:32.650$ biopsy is done and the affinity

NOTE Confidence: 0.872829148

 $00:04:32.735 \longrightarrow 00:04:35.906$ diagnosis most of the time will lead

NOTE Confidence: 0.872829148

 $00:04:35.906 \longrightarrow 00:04:38.180$ to definitive treatment or surgery.

NOTE Confidence: 0.872829148

 $00{:}04{:}38.180 \dashrightarrow 00{:}04{:}40.850$ I'm sure people who sign out

NOTE Confidence: 0.872829148

 $00:04:40.850 \longrightarrow 00:04:43.529$ psychology would know that the tester

NOTE Confidence: 0.872829148

00:04:43.529 --> 00:04:46.322 system was based on a lot of work

 $00:04:46.322 \longrightarrow 00:04:48.720$ which was done in 2007 at the NCI.

NOTE Confidence: 0.872829148

00:04:48.720 --> 00:04:50.927 NCI is located in the town of

NOTE Confidence: 0.872829148

 $00{:}04{:}50.927 \dashrightarrow 00{:}04{:}53.062$ the Test in Maryland and has the

NOTE Confidence: 0.872829148

 $00:04:53.062 \longrightarrow 00:04:55.018$ name of the tester system.

NOTE Confidence: 0.872829148

 $00:04:55.020 \longrightarrow 00:04:56.712$ It took us three years to

NOTE Confidence: 0.872829148

 $00:04:56.712 \longrightarrow 00:04:57.840$ publish the first monograph,

NOTE Confidence: 0.872829148

 $00:04:57.840 \longrightarrow 00:05:01.200$ the 2010 edition, which is shown here.

NOTE Confidence: 0.872829148

 $00:05:01.200 \longrightarrow 00:05:03.888$ And then of course another seven years

NOTE Confidence: 0.872829148

 $00{:}05{:}03.888 \to 00{:}05{:}06.439$ passed before we updated the system,

NOTE Confidence: 0.872829148

 $00:05:06.440 \longrightarrow 00:05:08.240$ which we call the 2017.

NOTE Confidence: 0.872829148

 $00:05:08.240 \longrightarrow 00:05:08.628$ Condition.

NOTE Confidence: 0.872829148

 $00:05:08.628 \longrightarrow 00:05:10.956$ And as you can read here,

NOTE Confidence: 0.872829148

 $00:05:10.960 \longrightarrow 00:05:13.162$ there were there was no significant

NOTE Confidence: 0.872829148

 $00{:}05{:}13.162 \dashrightarrow 00{:}05{:}15.035$ change in the six terminologies

NOTE Confidence: 0.872829148

 $00:05:15.035 \longrightarrow 00:05:17.870$ or six groups that are used to

NOTE Confidence: 0.872829148

 $00:05:17.870 \longrightarrow 00:05:19.650$ report thyroid psychologies,

 $00:05:19.650 \longrightarrow 00:05:21.818$ non diagnostic or unsat.

NOTE Confidence: 0.872829148

00:05:21.818 --> 00:05:26.360 We have benign AUS or plus SFN or FNS,

NOTE Confidence: 0.872829148

 $00:05:26.360 \longrightarrow 00:05:27.650$ FM and malignant.

NOTE Confidence: 0.872829148

 $00:05:27.650 \longrightarrow 00:05:30.950$ I'm just abbreviating to save time.

NOTE Confidence: 0.872829148

00:05:30.950 --> 00:05:32.826 But you would also notice something here,

NOTE Confidence: 0.872829148

 $00:05:32.830 \longrightarrow 00:05:33.964$ which is unprecedented,

NOTE Confidence: 0.872829148

 $00:05:33.964 \longrightarrow 00:05:36.610$ that we were in a consensus meeting

NOTE Confidence: 0.872829148

00:05:36.679 --> 00:05:38.653 at NCI and we did not agree

NOTE Confidence: 0.872829148

00:05:38.653 --> 00:05:39.950 on having single names.

NOTE Confidence: 0.872829148

 $00:05:39.950 \longrightarrow 00:05:42.068$ Three of the six diagnostic categories,

NOTE Confidence: 0.872829148

00:05:42.070 --> 00:05:45.230 and the main reason was that that we

NOTE Confidence: 0.872829148

 $00:05:45.230 \longrightarrow 00:05:48.018$ wanted to be completely inclusive

NOTE Confidence: 0.872829148

 $00{:}05{:}48.018 \dashrightarrow 00{:}05{:}50.256$ of everyone's concept and approach.

NOTE Confidence: 0.872829148

 $00{:}05{:}50.256 \dashrightarrow 00{:}05{:}53.426$ And I build a group of us thought that

NOTE Confidence: 0.872829148

00:05:53.426 --> 00:05:55.946 non diagnostic is better than unset,

 $00:05:55.950 \longrightarrow 00:05:58.446$ or AUS is better than flask,

NOTE Confidence: 0.872829148

 $00:05:58.450 \longrightarrow 00:05:59.450$ so on and so forth.

NOTE Confidence: 0.872829148

 $00:05:59.450 \longrightarrow 00:06:01.610$ So we endorse both terms would

NOTE Confidence: 0.872829148

 $00:06:01.610 \longrightarrow 00:06:03.483$ be strongly recommended to the

NOTE Confidence: 0.872829148

 $00:06:03.483 \longrightarrow 00:06:06.024$ cytopathologist that use one or the other.

NOTE Confidence: 0.872829148

 $00:06:06.030 \longrightarrow 00:06:09.290$ Don't use the two terms

NOTE Confidence: 0.872829148

 $00:06:09.290 \longrightarrow 00:06:10.594$ interchangeably because.

NOTE Confidence: 0.872829148

 $00:06:10.600 \longrightarrow 00:06:12.670$ You will then confuse the

NOTE Confidence: 0.872829148

 $00{:}06{:}12.670 \dashrightarrow 00{:}06{:}14.740$ clinicians and defeat the purpose

NOTE Confidence: 0.840449878333333

00:06:14.811 --> 00:06:16.826 of having a nice reporting

NOTE Confidence: 0.840449878333333

 $00:06:16.826 \longrightarrow 00:06:18.035$ system as Bethesda.

NOTE Confidence: 0.840449878333333

 $00:06:18.040 \longrightarrow 00:06:19.944$ But down the road we realized that

NOTE Confidence: 0.840449878333333

 $00{:}06{:}19.944 \dashrightarrow 00{:}06{:}22.290$ a UAS and frost was causing most

NOTE Confidence: 0.840449878333333

 $00:06:22.290 \longrightarrow 00:06:24.115$ of the diagnostic confusion and

NOTE Confidence: 0.840449878333333

 $00:06:24.115 \longrightarrow 00:06:26.100$ I'll address that in a minute.

NOTE Confidence: 0.840449878333333

 $00:06:26.100 \longrightarrow 00:06:27.780$ The other thing which you will notice

 $00:06:27.780 \longrightarrow 00:06:30.267$ here is that there are no numbers written

NOTE Confidence: 0.840449878333333

 $00:06:30.267 \longrightarrow 00:06:31.635$ before these diagnostic categories.

NOTE Confidence: 0.840449878333333

 $00{:}06{:}31.640 \dashrightarrow 00{:}06{:}33.836$ Bethesda System was never meant to

NOTE Confidence: 0.840449878333333

 $00:06:33.836 \longrightarrow 00:06:35.800$ be a numerical reporting system.

NOTE Confidence: 0.840449878333333

00:06:35.800 --> 00:06:37.960 It has beautiful names, brief names,

NOTE Confidence: 0.840449878333333

 $00:06:37.960 \longrightarrow 00:06:39.700$ easily memorizable.

NOTE Confidence: 0.840449878333333

 $00:06:39.700 \longrightarrow 00:06:42.310$ And and usable,

NOTE Confidence: 0.840449878333333

 $00{:}06{:}42.310 \dashrightarrow 00{:}06{:}44.766$ and hence those of you who use numbers

NOTE Confidence: 0.840449878333333

 $00{:}06{:}44.766 \dashrightarrow 00{:}06{:}47.249$ I would strongly urge that also puts

NOTE Confidence: 0.840449878333333

 $00:06:47.249 \longrightarrow 00:06:49.590$ the proper name after the number.

NOTE Confidence: 0.840449878333333

 $00:06:49.590 \longrightarrow 00:06:52.166$ But this number don't convey much meaning,

NOTE Confidence: 0.840449878333333

 $00:06:52.170 \longrightarrow 00:06:54.875$ and history has shown that

NOTE Confidence: 0.840449878333333

 $00{:}06{:}54.875 \dashrightarrow 00{:}06{:}57.039$ numerical reporting systems often

NOTE Confidence: 0.840449878333333

 $00:06:57.039 \longrightarrow 00:06:59.837$ fail because of of that reason.

NOTE Confidence: 0.840449878333333

 $00:06:59.840 \longrightarrow 00:07:03.458$ So this is the update in 2017 with Tessa.

00:07:03.460 --> 00:07:05.220 So everything which is written

NOTE Confidence: 0.840449878333333

 $00{:}07{:}05.220 --> 00{:}07{:}06.980$ and read was an update.

NOTE Confidence: 0.840449878333333

 $00:07:06.980 \longrightarrow 00:07:08.840$ And as you can see here,

NOTE Confidence: 0.840449878333333

 $00:07:08.840 \longrightarrow 00:07:11.006$ the risk of malignancies which are

NOTE Confidence: 0.840449878333333

 $00:07:11.006 \longrightarrow 00:07:12.940$ implicit in the Bethesda system.

NOTE Confidence: 0.840449878333333

 $00:07:12.940 \longrightarrow 00:07:14.669$ And that's the main reason of the

NOTE Confidence: 0.840449878333333

 $00:07:14.669 \longrightarrow 00:07:16.229$ success of the there's a system

NOTE Confidence: 0.840449878333333

 $00:07:16.229 \longrightarrow 00:07:17.747$ that was built on a framework

NOTE Confidence: 0.840449878333333

00:07:17.747 --> 00:07:19.240 of probabilistic approach,

NOTE Confidence: 0.840449878333333

00:07:19.240 --> 00:07:21.330 meaning probability of finding malignant

NOTE Confidence: 0.840449878333333

 $00:07:21.330 \longrightarrow 00:07:24.281$ tumor or ROM is built-in into each

NOTE Confidence: 0.840449878333333

 $00:07:24.281 \longrightarrow 00:07:26.256$ of the six diagnostic categories.

NOTE Confidence: 0.840449878333333

 $00:07:26.260 \longrightarrow 00:07:28.210$ So it was significantly revised

NOTE Confidence: 0.840449878333333

 $00:07:28.210 \longrightarrow 00:07:29.380$ based on prospectively.

NOTE Confidence: 0.840449878333333

 $00:07:29.380 \longrightarrow 00:07:30.094$ Analyze data,

NOTE Confidence: 0.840449878333333

 $00:07:30.094 \longrightarrow 00:07:33.349$ it went up from 1:00 to 4:00 to 5:00

 $00:07:33.349 \longrightarrow 00:07:36.202$ to 10:00 and and as you can see the

NOTE Confidence: 0.840449878333333

 $00{:}07{:}36.288 \dashrightarrow 00{:}07{:}39.618$ other three categories also showed a

NOTE Confidence: 0.840449878333333

 $00:07:39.618 \longrightarrow 00:07:42.536$ significantly updated ROMs and also

NOTE Confidence: 0.840449878333333

 $00:07:42.536 \longrightarrow 00:07:45.028$ the management algorithm change.

NOTE Confidence: 0.840449878333333

00:07:45.030 --> 00:07:48.131 As you know that ATA American Thyroid

NOTE Confidence: 0.840449878333333

 $00:07:48.131 \longrightarrow 00:07:50.082$ Association has completely endorsed

NOTE Confidence: 0.840449878333333

 $00:07:50.082 \longrightarrow 00:07:53.505$ Bethesda System as as most of their

NOTE Confidence: 0.840449878333333

 $00{:}07{:}53.505 \dashrightarrow 00{:}07{:}54.894$ recommendations management plans

NOTE Confidence: 0.840449878333333

 $00:07:54.894 \longrightarrow 00:07:57.841$ are based on the test a reporting

NOTE Confidence: 0.840449878333333

 $00:07:57.841 \longrightarrow 00:07:59.781$ system and we realized that.

NOTE Confidence: 0.840449878333333

 $00:07:59.790 \longrightarrow 00:08:02.706$ After 2015 when the IATA guidelines

NOTE Confidence: 0.840449878333333

 $00:08:02.706 \longrightarrow 00:08:03.678$ were revised,

NOTE Confidence: 0.840449878333333

 $00{:}08{:}03.680 \dashrightarrow 00{:}08{:}05.588$ molecular testing was introduced,

NOTE Confidence: 0.840449878333333

 $00:08:05.588 \longrightarrow 00:08:07.973$ a more conservative approach lobectomy

NOTE Confidence: 0.840449878333333

 $00:08:07.973 \longrightarrow 00:08:10.500$ was introduced and again molecular

 $00:08:10.500 \longrightarrow 00:08:12.480$ testing for follicular neoplasm.

NOTE Confidence: 0.840449878333333

 $00{:}08{:}12.480 \dashrightarrow 00{:}08{:}15.252$ And one of the recommendation 2015

NOTE Confidence: 0.840449878333333

 $00{:}08{:}15.252 \dashrightarrow 00{:}08{:}17.724$ with Test 80A guidelines was that

NOTE Confidence: 0.840449878333333

 $00:08:17.724 \longrightarrow 00:08:20.592$ if the thyroid tumor or nodule is

NOTE Confidence: 0.840449878333333

 $00{:}08{:}20.592 \dashrightarrow 00{:}08{:}23.424$ 4 centimeters smaller with a well

NOTE Confidence: 0.840449878333333

 $00:08:23.424 \longrightarrow 00:08:25.443$ differentiated thyroid cancer either

NOTE Confidence: 0.840449878333333

00:08:25.443 --> 00:08:28.058 follicular and papillary with no

NOTE Confidence: 0.840449878333333

 $00:08:28.058 \longrightarrow 00:08:30.486$ extracapsular extension or nodal. Disease.

NOTE Confidence: 0.840449878333333

 $00:08:30.486 \longrightarrow 00:08:32.838$ In other words, see and not disease.

NOTE Confidence: 0.840449878333333

 $00:08:32.840 \longrightarrow 00:08:35.336$ The patient can benefit from lobectomy.

NOTE Confidence: 0.840449878333333

 $00{:}08{:}35.340 \dashrightarrow 00{:}08{:}38.265$ So that was a big change and all these

NOTE Confidence: 0.840449878333333

 $00:08:38.265 \longrightarrow 00:08:41.249$ were incorporated in the 2017 Bethesda.

NOTE Confidence: 0.840449878333333

 $00:08:41.250 \longrightarrow 00:08:44.130$ So now after the publishing

NOTE Confidence: 0.840449878333333

 $00:08:44.130 \longrightarrow 00:08:45.806$ publication of the 2017,

NOTE Confidence: 0.840449878333333

 $00:08:45.806 \longrightarrow 00:08:48.840$ we realized that still we have new

NOTE Confidence: 0.840449878333333

 $00:08:48.840 \longrightarrow 00:08:51.885$ data which was coming in based on

 $00:08:51.885 \longrightarrow 00:08:54.130$ newer prospectively analyzed studies.

NOTE Confidence: 0.840449878333333

 $00:08:54.130 \longrightarrow 00:08:56.138$ Molecular testing although was

NOTE Confidence: 0.840449878333333

 $00:08:56.138 \longrightarrow 00:08:58.673$ available in 2017, the menu expanded.

NOTE Confidence: 0.840449878333333

00:08:58.673 --> 00:09:01.060 So now we have much more complex

NOTE Confidence: 0.840449878333333

 $00:09:01.136 \longrightarrow 00:09:03.646$ elaborate molecular tests not only

NOTE Confidence: 0.840449878333333

00:09:03.646 --> 00:09:06.156 providing information and diagnostic but

NOTE Confidence: 0.840449878333333

 $00:09:06.230 \longrightarrow 00:09:08.710$ prognostics and therapeutics as well.

NOTE Confidence: 0.840449878333333

 $00:09:08.710 \longrightarrow 00:09:11.254$ And as I mentioned the ATF guidelines are.

NOTE Confidence: 0.840449878333333

00:09:11.260 --> 00:09:13.700 Being revised later this year,

NOTE Confidence: 0.840449878333333

 $00:09:13.700 \longrightarrow 00:09:16.240$ there is some category named

NOTE Confidence: 0.840449878333333

 $00:09:16.240 \longrightarrow 00:09:17.537$ revision in 2023,

NOTE Confidence: 0.840449878333333

 $00:09:17.537 \dashrightarrow 00:09:20.030$ the Tessa and we all know The Who Blue

NOTE Confidence: 0.840449878333333

 $00{:}09{:}20.098 \dashrightarrow 00{:}09{:}22.083$ book for histologic classification of

NOTE Confidence: 0.840449878333333

 $00:09:22.083 \longrightarrow 00:09:24.875$ tumours just came out and we wanted

NOTE Confidence: 0.840449878333333

00:09:24.875 --> 00:09:27.095 to incorporate those changes as well.

 $00:09:27.100 \longrightarrow 00:09:29.512$ And we wanted to make Bethesda

NOTE Confidence: 0.840449878333333

 $00{:}09{:}29.512 \dashrightarrow 00{:}09{:}31.120$ reporting system more global,

NOTE Confidence: 0.840449878333333

 $00:09:31.120 \longrightarrow 00:09:33.020$ although it's global as such.

NOTE Confidence: 0.840449878333333

 $00:09:33.020 \longrightarrow 00:09:35.450$ But we wanted to invite more

NOTE Confidence: 0.840449878333333

 $00:09:35.450 \longrightarrow 00:09:37.070$ international authors and all

NOTE Confidence: 0.840449878333333

 $00:09:37.140 \longrightarrow 00:09:39.779$ of these led to us rewriting the

NOTE Confidence: 0.840449878333333

 $00:09:39.779 \longrightarrow 00:09:40.910$ Bethesda system which

NOTE Confidence: 0.872965422727273

 $00:09:40.981 \longrightarrow 00:09:44.144$ will be. All the 2023 that has the system.

NOTE Confidence: 0.872965422727273

00:09:44.150 --> 00:09:46.328 I know a lot of you will be attending

NOTE Confidence: 0.872965422727273

 $00:09:46.328 \longrightarrow 00:09:47.979$ the International Congress of

NOTE Confidence: 0.872965422727273

 $00{:}09{:}47.979 \dashrightarrow 00{:}09{:}50.229$ Psychology in Baltimore next month.

NOTE Confidence: 0.872965422727273

 $00:09:50.230 \longrightarrow 00:09:52.771$ I would be moderating a special session

NOTE Confidence: 0.872965422727273

00:09:52.771 --> 00:09:55.359 called Quest for Perfection Sack title,

NOTE Confidence: 0.872965422727273

 $00{:}09{:}55.360 \dashrightarrow 00{:}09{:}57.328$ which I'm presenting to you today.

NOTE Confidence: 0.872965422727273

 $00:09:57.330 \longrightarrow 00:09:59.754$ And we'll be discussing the changes that we

NOTE Confidence: 0.872965422727273

 $00:09:59.754 \longrightarrow 00:10:02.684$ will be implementing in the 2023 the tester.

 $00:10:02.684 \longrightarrow 00:10:04.952$ So this is where we are

NOTE Confidence: 0.872965422727273

 $00:10:04.952 \longrightarrow 00:10:06.752$ heading with the 2023 Bethesda.

NOTE Confidence: 0.872965422727273

 $00:10:06.752 \longrightarrow 00:10:09.600$ One change you will notice is that doctor

NOTE Confidence: 0.872965422727273

 $00:10:09.666 \longrightarrow 00:10:12.018$ at Seabus is no longer the Co editor.

NOTE Confidence: 0.872965422727273

 $00:10:12.020 \longrightarrow 00:10:14.488$ I think, he said.

NOTE Confidence: 0.872965422727273

00:10:14.490 --> 00:10:16.338 Trying to make life easier now,

NOTE Confidence: 0.872965422727273

 $00:10:16.340 \longrightarrow 00:10:17.688$ so I Paul Vanderlaan,

NOTE Confidence: 0.872965422727273

00:10:17.688 --> 00:10:19.710 who's a very well known psychologist

NOTE Confidence: 0.872965422727273

00:10:19.769 --> 00:10:21.932 in the Howard system, will help me.

NOTE Confidence: 0.872965422727273

 $00{:}10{:}21.932 \dashrightarrow 00{:}10{:}25.240$ I Co edit the book and since the book is

NOTE Confidence: 0.872965422727273

00:10:25.240 --> 00:10:28.400 expanded a little bit with two new chapters,

NOTE Confidence: 0.872965422727273

 $00{:}10{:}28.400 \dashrightarrow 00{:}10{:}30.878$ I needed some good associate editors.

NOTE Confidence: 0.872965422727273

 $00{:}10{:}30.880 \dashrightarrow 00{:}10{:}33.760$ So bad blows from Upenn theatrics

NOTE Confidence: 0.872965422727273

 $00:10:33.760 \longrightarrow 00:10:36.160$ go shaft relay from France,

NOTE Confidence: 0.872965422727273

 $00:10:36.160 \longrightarrow 00:10:37.724$ Fernando Schmidt from Portugal

 $00:10:37.724 \longrightarrow 00:10:39.679$ and Philip Beal from Paris,

NOTE Confidence: 0.872965422727273 00:10:39.680 --> 00:10:40.165 France. NOTE Confidence: 0.872965422727273

00:10:40.165 --> 00:10:42.590 All well known cytopathologist with

NOTE Confidence: 0.872965422727273

 $00:10:42.590 \longrightarrow 00:10:44.530$ expertise in thyroid will.

NOTE Confidence: 0.872965422727273

 $00:10:44.530 \longrightarrow 00:10:48.170$ Will assist US associate additives.

NOTE Confidence: 0.872965422727273

 $00:10:48.170 \longrightarrow 00:10:50.870$ We will have a complete endorsement

NOTE Confidence: 0.872965422727273

 $00:10:50.870 \longrightarrow 00:10:52.670$ by Yorgan Federation psychologist

NOTE Confidence: 0.872965422727273

 $00:10:52.736 \longrightarrow 00:10:55.706$ societies authorship is increasing to 65.

NOTE Confidence: 0.872965422727273

 $00{:}10{:}55.706 \dashrightarrow 00{:}10{:}57.930$ There's becoming more complex.

NOTE Confidence: 0.872965422727273

00:10:57.930 --> 00:11:00.156 For the first time we are involving

NOTE Confidence: 0.872965422727273

 $00{:}11{:}00.156 \dashrightarrow 00{:}11{:}01.930$ more clinicians and radiologists.

NOTE Confidence: 0.872965422727273

 $00:11:01.930 \longrightarrow 00:11:04.834$ The two new chapters would be one on

NOTE Confidence: 0.872965422727273

 $00:11:04.834 \longrightarrow 00:11:07.427$ molecular testing and ancillary studies and

NOTE Confidence: 0.872965422727273

 $00{:}11{:}07.427 \dashrightarrow 00{:}11{:}10.127$ one on clinical perspectives and imaging.

NOTE Confidence: 0.872965422727273

00:11:10.130 --> 00:11:11.282 As I mentioned,

NOTE Confidence: 0.872965422727273

 $00:11:11.282 \longrightarrow 00:11:13.970$ the risk of malignancies would be revised.

 $00:11:13.970 \longrightarrow 00:11:16.060$ Pediatrics thyroid disease is managed

NOTE Confidence: 0.872965422727273

 $00:11:16.060 \longrightarrow 00:11:19.119$ very differently and if you look at their.

NOTE Confidence: 0.872965422727273 00:11:19.120 --> 00:11:19.408 ROM's, NOTE Confidence: 0.872965422727273

 $00:11:19.408 \longrightarrow 00:11:21.424$ they are very different from adult patients.

NOTE Confidence: 0.872965422727273

 $00:11:21.430 \longrightarrow 00:11:24.671$ So for the first time we are

NOTE Confidence: 0.872965422727273

00:11:24.671 --> 00:11:27.038 addressing the issues of Rome's in

NOTE Confidence: 0.872965422727273

00:11:27.038 --> 00:11:28.783 pediatric patients and the management

NOTE Confidence: 0.872965422727273

00:11:28.783 --> 00:11:30.658 plan which is quite aggressive and

NOTE Confidence: 0.872965422727273

00:11:30.658 --> 00:11:32.920 I'll show it to you in a minute.

NOTE Confidence: 0.872965422727273

00:11:32.920 --> 00:11:34.824 The other thing for the first time

NOTE Confidence: 0.872965422727273

 $00:11:34.824 \longrightarrow 00:11:36.777$ we were able to convince everyone

NOTE Confidence: 0.872965422727273

 $00:11:36.777 \longrightarrow 00:11:38.572$ involved with the business system

NOTE Confidence: 0.872965422727273

 $00{:}11{:}38.572 \dashrightarrow 00{:}11{:}41.085$ to have a single name for the

NOTE Confidence: 0.872965422727273

 $00:11:41.085 \longrightarrow 00:11:42.126$ six diagnostic categories.

NOTE Confidence: 0.872965422727273

 $00:11:42.130 \longrightarrow 00:11:44.965$ So I'm happy to report that we are keeping

00:11:44.965 --> 00:11:47.619 non diagnostic unsatisfactory is out,

NOTE Confidence: 0.872965422727273

 $00:11:47.620 \longrightarrow 00:11:49.180$ we are keeping a USB.

NOTE Confidence: 0.872965422727273

 $00:11:49.180 \longrightarrow 00:11:51.502$ Which is a much more acceptable

NOTE Confidence: 0.872965422727273

00:11:51.502 --> 00:11:52.663 term than plus,

NOTE Confidence: 0.872965422727273

00:11:52.670 --> 00:11:54.890 which is out and suspicious for

NOTE Confidence: 0.872965422727273

 $00:11:54.890 \longrightarrow 00:11:56.370$ follicular neoplasm is out,

NOTE Confidence: 0.872965422727273

 $00:11:56.370 \longrightarrow 00:11:59.065$ and it will simply be follicular neoplasm.

NOTE Confidence: 0.872965422727273

 $00:11:59.070 \longrightarrow 00:12:00.729$ So I think this is a major,

NOTE Confidence: 0.872965422727273

 $00:12:00.730 \longrightarrow 00:12:03.532$ major change the way the six

NOTE Confidence: 0.872965422727273

 $00:12:03.532 \longrightarrow 00:12:05.400$ terminologies will be used.

NOTE Confidence: 0.872965422727273

 $00{:}12{:}05.400 \dashrightarrow 00{:}12{:}08.094$ I strongly believed when I started

NOTE Confidence: 0.872965422727273

 $00:12:08.094 \longrightarrow 00:12:11.195$ to work on this with Paul that

NOTE Confidence: 0.872965422727273

 $00:12:11.195 \longrightarrow 00:12:13.520$ AUS has to be simplified.

NOTE Confidence: 0.872965422727273

00:12:13.520 --> 00:12:16.400 Previously we had two big groups,

NOTE Confidence: 0.872965422727273

00:12:16.400 --> 00:12:17.900 nuclear and architectural,

NOTE Confidence: 0.872965422727273

 $00:12:17.900 \longrightarrow 00:12:19.400$ the micro follicular,

 $00:12:19.400 \longrightarrow 00:12:20.540$ and then we have a long,

NOTE Confidence: 0.872965422727273

 $00:12:20.540 \longrightarrow 00:12:22.960$ long list of miscellaneous that

NOTE Confidence: 0.872965422727273

00:12:22.960 --> 00:12:24.896 put rare plasmacytoid cells,

NOTE Confidence: 0.872965422727273

 $00:12:24.900 \longrightarrow 00:12:26.238$ hurthle cell, atypia.

NOTE Confidence: 0.872965422727273

 $00:12:26.238 \longrightarrow 00:12:28.812$ We had cyst, lining cell,

NOTE Confidence: 0.872965422727273

 $00:12:28.812 \longrightarrow 00:12:31.276$ racimo bodies, atypical lymphocytes.

NOTE Confidence: 0.872965422727273

 $00:12:31.280 \longrightarrow 00:12:34.112$ So studies have shown that there

NOTE Confidence: 0.872965422727273

 $00:12:34.112 \longrightarrow 00:12:35.528$ are two distinct.

NOTE Confidence: 0.872965422727273

 $00:12:35.530 \longrightarrow 00:12:36.850$ Were low risk and high risk,

NOTE Confidence: 0.872965422727273

 $00:12:36.850 \longrightarrow 00:12:38.645$ and I'll mention those in

NOTE Confidence: 0.872965422727273

 $00:12:38.645 \longrightarrow 00:12:40.440$ more detail in a minute.

NOTE Confidence: 0.872965422727273

 $00{:}12{:}40.440 \dashrightarrow 00{:}12{:}42.666$ We also wanted our reporting system

NOTE Confidence: 0.872965422727273

 $00{:}12{:}42.666 \dashrightarrow 00{:}12{:}45.476$ to be in alignment with The Who

NOTE Confidence: 0.872965422727273

 $00{:}12{:}45.476 \dashrightarrow 00{:}12{:}47.571$ classification and happy to report

NOTE Confidence: 0.872965422727273

 $00:12:47.571 \longrightarrow 00:12:49.204$ that although the publication

00:12:49.204 --> 00:12:51.295 date would be June of 2023,

NOTE Confidence: 0.872965422727273

 $00{:}12{:}51.295 \dashrightarrow 00{:}12{:}53.220$ we are way ahead of the scheduled

NOTE Confidence: 0.872965422727273

 $00:12:53.220 \longrightarrow 00:12:54.777$ time and we should definitely

NOTE Confidence: 0.872965422727273

00:12:54.777 --> 00:12:56.982 have the box sometime in spring of

NOTE Confidence: 0.895975035454545

00:12:57.046 --> 00:12:59.020 next year. So in most simple words

NOTE Confidence: 0.895975035454545

00:12:59.020 --> 00:13:01.120 this is how it would look like,

NOTE Confidence: 0.895975035454545

 $00:13:01.120 \longrightarrow 00:13:03.000$ as I mentioned non diagnostic

NOTE Confidence: 0.895975035454545

 $00:13:03.000 \longrightarrow 00:13:05.788$ benign AUS which is a much more

NOTE Confidence: 0.895975035454545

 $00{:}13{:}05.788 \dashrightarrow 00{:}13{:}08.266$ flexible term accepted by a majority

NOTE Confidence: 0.895975035454545

 $00:13:08.266 \longrightarrow 00:13:10.648$ of people as opposed to floss.

NOTE Confidence: 0.895975035454545

 $00{:}13{:}10.650 \dashrightarrow 00{:}13{:}12.715$ Because the the term follicular

NOTE Confidence: 0.895975035454545

 $00:13:12.715 \longrightarrow 00:13:15.373$ sometime would not cover the atypical

NOTE Confidence: 0.895975035454545

 $00:13:15.373 \longrightarrow 00:13:17.958$ lymphocytes or atypical cyst lining

NOTE Confidence: 0.895975035454545

 $00:13:17.958 \longrightarrow 00:13:20.510$ cells or atypical plasmacytoid cells.

NOTE Confidence: 0.895975035454545

 $00:13:20.510 \longrightarrow 00:13:23.330$ When you think of medullary carcinoma

NOTE Confidence: 0.895975035454545

 $00:13:23.330 \longrightarrow 00:13:25.210$ follicular neoplasm would stay.

00:13:25.210 --> 00:13:26.820 But we will definitely recommend

NOTE Confidence: 0.895975035454545

 $00:13:26.820 \longrightarrow 00:13:29.167$ to add a statement that 1/3 of

NOTE Confidence: 0.895975035454545

00:13:29.167 --> 00:13:30.862 the cases which are diagnosed

NOTE Confidence: 0.895975035454545

 $00:13:30.862 \longrightarrow 00:13:32.587$ floccular neoplasm and follow up

NOTE Confidence: 0.895975035454545

 $00:13:32.587 \longrightarrow 00:13:34.525$ turn out to be hyperplastic nodule.

NOTE Confidence: 0.895975035454545

 $00{:}13{:}34.530 \dashrightarrow 00{:}13{:}37.258$ No matter how good you are and experience

NOTE Confidence: 0.895975035454545

00:13:37.258 --> 00:13:39.315 you are and thyroid psychology

NOTE Confidence: 0.895975035454545

 $00{:}13{:}39.315 \dashrightarrow 00{:}13{:}41.913$ and SFM and malignant would stay.

NOTE Confidence: 0.895975035454545

 $00:13:41.920 \longrightarrow 00:13:44.573$ So now this is a table which

NOTE Confidence: 0.895975035454545

00:13:44.573 --> 00:13:47.330 essentially shows you the 2010 in

NOTE Confidence: 0.895975035454545

 $00:13:47.330 \longrightarrow 00:13:52.305$ Red 2017 and the in green the 2023,

NOTE Confidence: 0.895975035454545

 $00:13:52.305 \longrightarrow 00:13:54.230$ the upcoming risk of malignancies.

NOTE Confidence: 0.895975035454545

 $00{:}13{:}54.230 \dashrightarrow 00{:}13{:}56.734$ And for the first time we have also

NOTE Confidence: 0.895975035454545

 $00:13:56.734 \longrightarrow 00:13:59.117$ calculated the average for for each group.

NOTE Confidence: 0.895975035454545

 $00:13:59.120 \longrightarrow 00:14:01.872$ So as you can see there is some

 $00:14:01.872 \longrightarrow 00:14:05.500$ revision and especially with with the

NOTE Confidence: 0.895975035454545

 $00{:}14{:}05.500 \dashrightarrow 00{:}14{:}09.556$ benign ones slightly up to 6% from

NOTE Confidence: 0.895975035454545

 $00:14:09.556 \longrightarrow 00:14:12.272$ 3 and some change in the management.

NOTE Confidence: 0.895975035454545 00:14:12.280 --> 00:14:12.811 Profile, NOTE Confidence: 0.895975035454545

00:14:12.811 --> 00:14:15.466 again a more conservative approach

NOTE Confidence: 0.895975035454545

 $00{:}14{:}15.466 \dashrightarrow 00{:}14{:}18.751$ because we have seen that the low

NOTE Confidence: 0.895975035454545

 $00:14:18.751 \longrightarrow 00:14:21.598$ risk AUS the one which has which is

NOTE Confidence: 0.895975035454545

 $00:14:21.598 \longrightarrow 00:14:23.318$ based on micro follicular architecture

NOTE Confidence: 0.895975035454545

 $00:14:23.318 \longrightarrow 00:14:25.133$ or or other miscellaneous features

NOTE Confidence: 0.895975035454545

 $00:14:25.133 \longrightarrow 00:14:27.299$ as opposed to the nuclear one

NOTE Confidence: 0.895975035454545

00:14:27.299 --> 00:14:28.730 carries a lower risk.

NOTE Confidence: 0.895975035454545

00:14:28.730 --> 00:14:30.928 And if patient does not have suspicious

NOTE Confidence: 0.895975035454545

00:14:30.928 --> 00:14:32.410 imaging or clinical findings,

NOTE Confidence: 0.895975035454545

 $00:14:32.410 \longrightarrow 00:14:34.146$ a lot of times they don't do even,

NOTE Confidence: 0.895975035454545

 $00:14:34.150 \longrightarrow 00:14:36.610$ don't even repeat the efinancial

NOTE Confidence: 0.895975035454545

00:14:36.610 --> 00:14:38.578 animations and patients simply

00:14:38.578 --> 00:14:40.753 followed up by clinical examination

NOTE Confidence: 0.895975035454545

 $00:14:40.753 \longrightarrow 00:14:43.380$ or possibly with the addition of a.

NOTE Confidence: 0.895975035454545

00:14:43.380 --> 00:14:44.320 Repeat FNA,

NOTE Confidence: 0.895975035454545

 $00:14:44.320 \longrightarrow 00:14:46.200$ but diagnostic lobectomy is

NOTE Confidence: 0.895975035454545

 $00:14:46.200 \longrightarrow 00:14:48.080$ something which is strongly

NOTE Confidence: 0.895975035454545

00:14:48.154 --> 00:14:50.398 discouraged follicular neoplasm,

NOTE Confidence: 0.895975035454545

00:14:50.400 --> 00:14:52.505 again molecular testing is taking

NOTE Confidence: 0.895975035454545

 $00{:}14{:}52.505 \dashrightarrow 00{:}14{:}55.862$ the the front seat when it comes

NOTE Confidence: 0.895975035454545

00:14:55.862 --> 00:14:58.208 to working out these patients since

NOTE Confidence: 0.895975035454545

00:14:58.208 --> 00:15:00.182 we now have targeted treatments

NOTE Confidence: 0.895975035454545

 $00:15:00.182 \longrightarrow 00:15:02.437$ available and it's included in

NOTE Confidence: 0.895975035454545

 $00:15:02.437 \longrightarrow 00:15:04.850$ the manual of most of these.

NOTE Confidence: 0.895975035454545

 $00{:}15{:}04.850 \dashrightarrow 00{:}15{:}06.176$ Commercially available molecular

NOTE Confidence: 0.895975035454545

 $00:15:06.176 \longrightarrow 00:15:08.386$ tests for the first time,

NOTE Confidence: 0.895975035454545

 $00:15:08.390 \longrightarrow 00:15:10.544$ the recommendation is to only to

 $00:15:10.544 \longrightarrow 00:15:13.558$ also do it in SFM and in some

NOTE Confidence: 0.895975035454545

 $00:15:13.558 \longrightarrow 00:15:15.423$ cases of malignant as well.

NOTE Confidence: 0.895975035454545

 $00:15:15.430 \longrightarrow 00:15:17.806$ So these are the pediatric stroms,

NOTE Confidence: 0.895975035454545

 $00:15:17.810 \longrightarrow 00:15:20.717$ the green one is would be for adults and

NOTE Confidence: 0.895975035454545

 $00:15:20.717 \longrightarrow 00:15:23.685$ the red one are for pediatric patients.

NOTE Confidence: 0.895975035454545

00:15:23.690 --> 00:15:26.812 And you can see there are significantly

NOTE Confidence: 0.895975035454545

00:15:26.812 --> 00:15:30.374 higher for example a US 50% upper end,

NOTE Confidence: 0.895975035454545

 $00:15:30.374 \longrightarrow 00:15:32.630 \ 100\%$ for political neoplasm,

NOTE Confidence: 0.895975035454545

 $00:15:32.630 \longrightarrow 00:15:35.058$ near 100% for SFM and malignant

NOTE Confidence: 0.895975035454545

 $00:15:35.058 \longrightarrow 00:15:36.643$ and this is what happened.

NOTE Confidence: 0.895975035454545

 $00:15:36.650 \longrightarrow 00:15:38.580$ They are treated very aggressively

NOTE Confidence: 0.895975035454545

 $00:15:38.580 \longrightarrow 00:15:41.359$ with most of the time these patients

NOTE Confidence: 0.895975035454545

 $00:15:41.359 \longrightarrow 00:15:43.675$ are going for a total thyroidectomy

NOTE Confidence: 0.895975035454545

 $00:15:43.675 \longrightarrow 00:15:45.629$ or at least lobectomy.

NOTE Confidence: 0.895975035454545

 $00:15:45.630 \longrightarrow 00:15:47.560$ So this would be adequately

NOTE Confidence: 0.895975035454545

 $00:15:47.560 \longrightarrow 00:15:50.200$ covered in in the new edition.

 $00:15:50.200 \longrightarrow 00:15:52.390$ So as we all know that the World Cup of

NOTE Confidence: 0.895975035454545

00:15:52.452 --> 00:15:54.372 thyroid patient would would start with

NOTE Confidence: 0.895975035454545

 $00:15:54.372 \longrightarrow 00:15:56.729$ the looking at the clinical features,

NOTE Confidence: 0.895975035454545

00:15:56.730 --> 00:15:59.839 someone will palpate an audio in

NOTE Confidence: 0.895975035454545

 $00:15:59.839 \longrightarrow 00:16:01.932$ in a patient and then the patient

NOTE Confidence: 0.895975035454545

 $00:16:01.932 \longrightarrow 00:16:03.620$ is sent for ultrasound.

NOTE Confidence: 0.895975035454545

00:16:03.620 --> 00:16:05.445 So clinical features and imaging

NOTE Confidence: 0.895975035454545

 $00{:}16{:}05.445 \dashrightarrow 00{:}16{:}07.904$ finding would be the pre afna workup

NOTE Confidence: 0.895975035454545

 $00:16:07.904 \longrightarrow 00:16:10.160$ and then based on if there is an

NOTE Confidence: 0.895975035454545

 $00{:}16{:}10.226 \rightarrow 00{:}16{:}12.333$ indication to do an FDA patient will

NOTE Confidence: 0.895975035454545

00:16:12.333 --> 00:16:14.419 get an FNA cytopathology these days

NOTE Confidence: 0.895975035454545

 $00:16:14.419 \longrightarrow 00:16:17.170$ most of the time with the additional

NOTE Confidence: 0.8862809525

00:16:17.236 --> 00:16:18.460 molecular analysis.

NOTE Confidence: 0.8862809525

 $00:16:18.460 \longrightarrow 00:16:20.140$ So this is the most important.

NOTE Confidence: 0.8862809525

00:16:20.140 --> 00:16:21.790 One part of the equation,

 $00:16:21.790 \longrightarrow 00:16:24.380$ because you will be the one deciding

NOTE Confidence: 0.8862809525

 $00{:}16{:}24.380 \to 00{:}16{:}26.535$ whether patient should be left with

NOTE Confidence: 0.8862809525

 $00{:}16{:}26.535 \dashrightarrow 00{:}16{:}28.817$ for clinical follow-up alone or needs a

NOTE Confidence: 0.8862809525

 $00:16:28.884 \longrightarrow 00:16:31.269$ lobectomy or near total thyroidectomy.

NOTE Confidence: 0.8862809525

00:16:31.270 --> 00:16:33.418 Again to emphasize that all thyroid

NOTE Confidence: 0.8862809525

 $00:16:33.418 \longrightarrow 00:16:35.663$ hyphenates should be done under image

NOTE Confidence: 0.8862809525

 $00:16:35.663 \longrightarrow 00:16:37.548$ guidance if imaging is available.

NOTE Confidence: 0.8862809525

 $00:16:37.550 \longrightarrow 00:16:39.975$ And these days every institution

NOTE Confidence: 0.8862809525

 $00:16:39.975 \longrightarrow 00:16:41.430$ has ultrasound available.

NOTE Confidence: 0.8862809525

00:16:41.430 --> 00:16:42.750 As I said, seeing,

NOTE Confidence: 0.8862809525

 $00{:}16{:}42.750 \longrightarrow 00{:}16{:}45.069$ seeing is believing you can see the

NOTE Confidence: 0.8862809525

 $00:16:45.069 \longrightarrow 00:16:47.229$ tip of the needle when the FN is

NOTE Confidence: 0.8862809525

00:16:47.229 --> 00:16:49.490 done because it appears echogenic,

NOTE Confidence: 0.8862809525

 $00:16:49.490 \longrightarrow 00:16:51.054$ you know for sure.

NOTE Confidence: 0.8862809525

 $00:16:51.054 \longrightarrow 00:16:53.400$ Where you are painting the sample

NOTE Confidence: 0.8862809525

 $00:16:53.400 \longrightarrow 00:16:55.410$ and the other important thing would

 $00:16:55.410 \longrightarrow 00:16:57.923$ be to stay away from vessels which

NOTE Confidence: 0.8862809525

 $00{:}16{:}57.923 \to 00{:}17{:}00.499$ you can do often with palpation only.

NOTE Confidence: 0.8862809525

00:17:00.500 --> 00:17:03.512 And also it's interesting fact very

NOTE Confidence: 0.8862809525

 $00:17:03.512 \longrightarrow 00:17:06.344$ widely published at 50% of the time

NOTE Confidence: 0.8862809525

00:17:06.344 --> 00:17:08.892 when you do image guided FA you

NOTE Confidence: 0.8862809525

00:17:08.892 --> 00:17:10.804 discover more significant finding

NOTE Confidence: 0.8862809525

 $00:17:10.804 \longrightarrow 00:17:13.690$ other one or several new nodules

NOTE Confidence: 0.8862809525

 $00:17:13.690 \longrightarrow 00:17:16.602$ or you discover nodes in the neck

NOTE Confidence: 0.8862809525

 $00:17:16.602 \longrightarrow 00:17:18.830$ which assume a lot of importance in

NOTE Confidence: 0.8862809525

 $00:17:18.830 \longrightarrow 00:17:20.919$ a patient with a with a primary.

NOTE Confidence: 0.8862809525

 $00:17:20.920 \longrightarrow 00:17:21.656$ Other nodule.

NOTE Confidence: 0.8862809525

 $00:17:21.656 \longrightarrow 00:17:23.496$ So it's important that imaging

NOTE Confidence: 0.8862809525

 $00:17:23.496 \longrightarrow 00:17:25.996$ should be done in all cases which

NOTE Confidence: 0.8862809525

 $00:17:25.996 \longrightarrow 00:17:27.651$ are going for thyroid affinity

NOTE Confidence: 0.8862809525

00:17:27.651 --> 00:17:29.648 and ideally the thyroid affinity

 $00:17:29.648 \longrightarrow 00:17:32.048$ itself should be done with imaging.

NOTE Confidence: 0.8862809525

 $00:17:32.050 \longrightarrow 00:17:34.978$ The other fact is that one of six

NOTE Confidence: 0.8862809525

 $00:17:34.978 \longrightarrow 00:17:37.232$ patients when you do image guided

NOTE Confidence: 0.8862809525

 $00:17:37.232 \longrightarrow 00:17:40.010$ fnas you will not find the nodule.

NOTE Confidence: 0.8862809525

 $00:17:40.010 \longrightarrow 00:17:42.047$ And I often give my own example.

NOTE Confidence: 0.8862809525

00:17:42.050 --> 00:17:44.255 A couple of years ago my internist

NOTE Confidence: 0.8862809525

 $00{:}17{:}44.255 \dashrightarrow 00{:}17{:}46.336$ discovered a nodule in my thyroid and

NOTE Confidence: 0.8862809525

 $00:17:46.336 \longrightarrow 00:17:48.769$ and he knows that thyroid is my main area.

NOTE Confidence: 0.8862809525

 $00{:}17{:}48.770 \longrightarrow 00{:}17{:}50.978$ So smilingly said off you go.

NOTE Confidence: 0.8862809525

00:17:50.980 --> 00:17:51.598 Parathyroid F&H.

NOTE Confidence: 0.8862809525

 $00{:}17{:}51.598 \dashrightarrow 00{:}17{:}54.070$ So I showed up in ultrasound as a

NOTE Confidence: 0.8862809525

 $00:17:54.132 \longrightarrow 00:17:56.172$ patient and the radiologist who was

NOTE Confidence: 0.8862809525

 $00:17:56.172 \longrightarrow 00:17:58.830$ doing the FDA could not find the nodule.

NOTE Confidence: 0.8862809525

00:17:58.830 --> 00:18:03.267 So that really takes out a lot of burden,

NOTE Confidence: 0.8862809525

 $00:18:03.270 \longrightarrow 00:18:05.517$ a lot of pressure from the patient

NOTE Confidence: 0.8862809525

 $00:18:05.517 \longrightarrow 00:18:06.964$ and clinician because then there

 $00:18:06.964 \longrightarrow 00:18:09.030$ is no need to do an FHA if there

NOTE Confidence: 0.8862809525

 $00:18:09.030 \longrightarrow 00:18:10.266$ is no nodule present.

NOTE Confidence: 0.8862809525

 $00:18:10.270 \longrightarrow 00:18:12.180$ So these are important factors

NOTE Confidence: 0.8862809525

00:18:12.180 --> 00:18:13.708 which should convince everyone

NOTE Confidence: 0.8862809525

 $00:18:13.708 \longrightarrow 00:18:15.652$ that all thyroid affinity should

NOTE Confidence: 0.8862809525

00:18:15.652 --> 00:18:17.532 be done under ultrasound guidance

NOTE Confidence: 0.8862809525

00:18:17.532 --> 00:18:19.994 and potentially you can also locate

NOTE Confidence: 0.8862809525

 $00:18:19.994 \longrightarrow 00:18:21.209$ complications which are.

NOTE Confidence: 0.8862809525 00:18:21.210 --> 00:18:21.560 Yeah, NOTE Confidence: 0.8862809525

 $00{:}18{:}21.560 \dashrightarrow 00{:}18{:}23.660$ like hematoma formation here you can

NOTE Confidence: 0.8862809525

 $00:18:23.660 \longrightarrow 00:18:25.804$ see between the calipers a isoechoic

NOTE Confidence: 0.8862809525

00:18:25.804 --> 00:18:27.868 hematoma you can actually see if

NOTE Confidence: 0.8862809525

 $00{:}18{:}27.868 \dashrightarrow 00{:}18{:}29.688$ you got and the colour Doppler

NOTE Confidence: 0.8862809525

 $00:18:29.688 \longrightarrow 00:18:31.612$ on the source of the bleeding.

NOTE Confidence: 0.8862809525

 $00:18:31.612 \longrightarrow 00:18:33.620$ And these patients need

00:18:33.620 --> 00:18:34.624 conservative management,

NOTE Confidence: 0.8862809525

 $00{:}18{:}34.630 \dashrightarrow 00{:}18{:}36.982$ just cold compresses that

NOTE Confidence: 0.8862809525

 $00:18:36.982 \longrightarrow 00:18:39.334$ will treat the hematoma.

NOTE Confidence: 0.8862809525

 $00:18:39.340 \longrightarrow 00:18:40.342$ So non diagnostic.

NOTE Confidence: 0.8862809525

 $00:18:40.342 \longrightarrow 00:18:43.227$ As you can see it's not a trivial

NOTE Confidence: 0.8862809525

00:18:43.227 --> 00:18:46.011 diagnosis because it does carry a

NOTE Confidence: 0.8862809525

 $00{:}18{:}46.011 \dashrightarrow 00{:}18{:}49.025$ significant risk of malignancies and hence

NOTE Confidence: 0.8862809525

 $00:18:49.025 \longrightarrow 00:18:52.115$ these cases should always be repeated.

NOTE Confidence: 0.8862809525

 $00:18:52.120 \longrightarrow 00:18:54.120$ And ideally like I said

NOTE Confidence: 0.8862809525

 $00:18:54.120 \longrightarrow 00:18:55.320$ under ultrasound guidance.

NOTE Confidence: 0.8862809525

 $00{:}18{:}55.320 \dashrightarrow 00{:}18{:}57.455$ The contentious thing around 2017

NOTE Confidence: 0.8862809525

 $00:18:57.455 \longrightarrow 00:19:00.000$ was which we actually corrected in

NOTE Confidence: 0.8862809525

 $00:19:00.000 \longrightarrow 00:19:02.387$ 2017 edition was what should be the

NOTE Confidence: 0.8862809525

00:19:02.387 --> 00:19:04.404 time interval between the first non

NOTE Confidence: 0.8862809525

 $00:19:04.404 \longrightarrow 00:19:06.763$ diagnostic F and A and the repeat

NOTE Confidence: 0.8862809525

 $00:19:06.763 \longrightarrow 00:19:09.333$ FA and everyone agreed in 2010.

 $00:19:09.333 \longrightarrow 00:19:11.104$ There should be 3 months or 12

NOTE Confidence: 0.8862809525

 $00:19:11.104 \dashrightarrow 00:19:12.607$ weeks because you want to give

NOTE Confidence: 0.8862809525

 $00:19:12.607 \longrightarrow 00:19:13.787$ thyroid a chance to heal.

NOTE Confidence: 0.8862809525

00:19:13.790 --> 00:19:15.998 The trauma of the previous FN,

NOTE Confidence: 0.8862809525

00:19:16.000 --> 00:19:17.167 which in 2017,

NOTE Confidence: 0.8862809525

 $00:19:17.167 \longrightarrow 00:19:19.112$ based on several series which

NOTE Confidence: 0.8862809525

 $00:19:19.112 \longrightarrow 00:19:21.080$ were published was proven wrong.

NOTE Confidence: 0.8862809525

00:19:21.080 --> 00:19:22.710 You can actually bring back

NOTE Confidence: 0.8862809525

 $00:19:22.710 \longrightarrow 00:19:24.014$ the patient much sooner.

NOTE Confidence: 0.848515704285714

 $00:19:24.020 \longrightarrow 00:19:26.449$ At my institution I often get calls

NOTE Confidence: 0.848515704285714

00:19:26.449 --> 00:19:28.413 from radiologists when to bring the

NOTE Confidence: 0.848515704285714

 $00{:}19{:}28.413 \dashrightarrow 00{:}19{:}30.422$ patient back and I always tell them

NOTE Confidence: 0.848515704285714

 $00{:}19{:}30.486 \dashrightarrow 00{:}19{:}32.934$ three weeks or four weeks would be ideal.

NOTE Confidence: 0.848515704285714

 $00:19:32.940 \longrightarrow 00:19:35.564$ A patients would show up for repeat FA.

NOTE Confidence: 0.848515704285714

 $00:19:35.570 \longrightarrow 00:19:37.796$ Three months is a long time

 $00:19:37.800 \longrightarrow 00:19:39.890$ to put for the patient.

NOTE Confidence: 0.848515704285714

 $00{:}19{:}39.890 \dashrightarrow 00{:}19{:}41.936$ To undergo the agony of waiting.

NOTE Confidence: 0.848515704285714

 $00:19:41.940 \longrightarrow 00:19:43.584$ Sometimes they don't even show up

NOTE Confidence: 0.848515704285714

 $00:19:43.584 \longrightarrow 00:19:45.538$ after such a long period of time.

NOTE Confidence: 0.848515704285714

 $00:19:45.540 \longrightarrow 00:19:48.217$ So again the conclusion in 2023

NOTE Confidence: 0.848515704285714

 $00:19:48.217 \longrightarrow 00:19:50.436$ Bethesda which you will see is that

NOTE Confidence: 0.848515704285714

 $00:19:50.436 \longrightarrow 00:19:52.537$ you can have much shorter interval

NOTE Confidence: 0.848515704285714

 $00{:}19{:}52.537 \dashrightarrow 00{:}19{:}55.440$ to repeat the FDA in terms of the

NOTE Confidence: 0.848515704285714

 $00:19:55.440 \longrightarrow 00:19:57.280$ incidence of non diagnostic 10%.

NOTE Confidence: 0.848515704285714

 $00:19:57.280 \longrightarrow 00:19:59.939$ Still the cut off that not more than

NOTE Confidence: 0.848515704285714

 $00{:}19{:}59.939 \dashrightarrow 00{:}20{:}02.388$ 10% of all your thyroid FDA should be

NOTE Confidence: 0.848515704285714

 $00:20:02.388 \longrightarrow 00:20:04.380$ non diagnostic was higher than 10%.

NOTE Confidence: 0.848515704285714

00:20:04.380 --> 00:20:07.495 You have to modify the technique which

NOTE Confidence: 0.848515704285714

 $00:20:07.495 \longrightarrow 00:20:10.090$ typically based on too much blood.

NOTE Confidence: 0.848515704285714

 $00:20:10.090 \longrightarrow 00:20:11.630$ And very few cells.

NOTE Confidence: 0.848515704285714

 $00:20:11.630 \longrightarrow 00:20:13.170$ So modify the technique,

 $00:20:13.170 \longrightarrow 00:20:14.900$ shorten the needle dwell time

NOTE Confidence: 0.848515704285714

 $00:20:14.900 \longrightarrow 00:20:16.630$ to 6 seconds of faster,

NOTE Confidence: 0.848515704285714

 $00:20:16.630 \longrightarrow 00:20:18.910$ use a thin needle and Hopkins we use

NOTE Confidence: 0.848515704285714

00:20:18.910 --> 00:20:21.887 a 26 gauge ideal needle and also we

NOTE Confidence: 0.848515704285714

00:20:21.887 --> 00:20:24.339 don't apply suction which is common

NOTE Confidence: 0.848515704285714

 $00:20:24.339 \longrightarrow 00:20:27.202$ sense thing because thyroid is so vascular.

NOTE Confidence: 0.848515704285714

 $00:20:27.210 \longrightarrow 00:20:29.405$ Adequacy criteria remains the same

NOTE Confidence: 0.848515704285714

 $00{:}20{:}29.405 \dashrightarrow 00{:}20{:}32.410$ although we had a very strong urge

NOTE Confidence: 0.848515704285714

 $00:20:32.410 \longrightarrow 00:20:35.306$ to change it from six group with 10

NOTE Confidence: 0.848515704285714

 $00:20:35.391 \longrightarrow 00:20:38.086$ cells each or roughly 60 cells and

NOTE Confidence: 0.848515704285714

 $00:20:38.086 \longrightarrow 00:20:40.642$ almost till the chapter was finalized.

NOTE Confidence: 0.848515704285714

 $00:20:40.642 \longrightarrow 00:20:41.570$ On adequacy,

NOTE Confidence: 0.848515704285714

 $00{:}20{:}41.570 \longrightarrow 00{:}20{:}43.850$ we wanted to revise it to say three

NOTE Confidence: 0.848515704285714

 $00:20:43.850 \longrightarrow 00:20:46.449$ groups of four groups were unfortunately,

NOTE Confidence: 0.848515704285714

 $00:20:46.450 \longrightarrow 00:20:48.280$ although most people agree that

 $00:20:48.280 \longrightarrow 00:20:50.702$ it should be revised to a much

NOTE Confidence: 0.848515704285714

00:20:50.702 --> 00:20:51.886 smaller count of cells,

NOTE Confidence: 0.848515704285714

 $00:20:51.890 \longrightarrow 00:20:54.590$ there are no validation studies available.

NOTE Confidence: 0.848515704285714

 $00:20:54.590 \longrightarrow 00:20:57.595$ So then in the end we concluded that the

NOTE Confidence: 0.848515704285714

 $00:20:57.595 \longrightarrow 00:21:00.010$ criteria will remain the same as 2017,

NOTE Confidence: 0.848515704285714

00:21:00.010 --> 00:21:03.886 although if it's clinically benign appearing,

NOTE Confidence: 0.848515704285714

00:21:03.890 --> 00:21:05.213 imaging benign appearing,

NOTE Confidence: 0.848515704285714

00:21:05.213 --> 00:21:07.859 you could certainly call something benign

NOTE Confidence: 0.848515704285714

 $00{:}21{:}07.859 \dashrightarrow 00{:}21{:}10.257$ with fewer than six groups of cells.

NOTE Confidence: 0.848515704285714

00:21:10.260 --> 00:21:13.536 The contentious issue of cyst food only

NOTE Confidence: 0.848515704285714

 $00{:}21{:}13.536 \dashrightarrow 00{:}21{:}16.537$ remains for 2020 with test as well.

NOTE Confidence: 0.848515704285714 00:21:16.540 --> 00:21:17.080 For example,

NOTE Confidence: 0.848515704285714

 $00:21:17.080 \longrightarrow 00:21:19.653$ here you see a 10 Volt cyst which is

NOTE Confidence: 0.848515704285714

 $00:21:19.653 \longrightarrow 00:21:21.765$ almost an aquatic because the ultrasound

NOTE Confidence: 0.848515704285714

00:21:21.765 --> 00:21:24.058 waves are passed through and through,

NOTE Confidence: 0.848515704285714

 $00:21:24.060 \longrightarrow 00:21:25.188$ they assist through it.

00:21:25.188 --> 00:21:26.034 Not no protein,

NOTE Confidence: 0.848515704285714

 $00:21:26.040 \longrightarrow 00:21:27.372$ no solid component.

NOTE Confidence: 0.848515704285714

 $00:21:27.372 \longrightarrow 00:21:30.480$ What to call these cases and when

NOTE Confidence: 0.848515704285714

 $00:21:30.564 \longrightarrow 00:21:33.058$ you look at it under the microscope

NOTE Confidence: 0.848515704285714

 $00:21:33.058 \longrightarrow 00:21:35.512$ you will see these hemosider in laden

NOTE Confidence: 0.848515704285714

 $00:21:35.512 \longrightarrow 00:21:38.051$ macrophages with these big clear zones on

NOTE Confidence: 0.848515704285714

 $00:21:38.051 \longrightarrow 00:21:40.250$ the slide signifying 10 watery colloid.

NOTE Confidence: 0.848515704285714

 $00:21:40.250 \longrightarrow 00:21:42.250$ Which will not stick to the to the

NOTE Confidence: 0.848515704285714

 $00:21:42.250 \longrightarrow 00:21:44.240$ slide but no follicular epithelium.

NOTE Confidence: 0.848515704285714

 $00{:}21{:}44.240 \dashrightarrow 00{:}21{:}47.414$ So we again emphasize that you

NOTE Confidence: 0.848515704285714

 $00{:}21{:}47.414 \dashrightarrow 00{:}21{:}50.780$ call these cases non diagnostic,

NOTE Confidence: 0.848515704285714

 $00:21:50.780 \longrightarrow 00:21:52.684$ but you will write a note to the

NOTE Confidence: 0.848515704285714

00:21:52.684 --> 00:21:54.575 clinician that if there are no

NOTE Confidence: 0.848515704285714

 $00:21:54.575 \longrightarrow 00:21:55.595$ suspicious clinical ultrasound,

NOTE Confidence: 0.848515704285714

 $00:21:55.600 \longrightarrow 00:21:57.470$ finding them will nodule no

 $00:21:57.470 \longrightarrow 00:21:58.966$ calcification in the world,

NOTE Confidence: 0.848515704285714

00:21:58.970 --> 00:21:59.974 no irregularly thickened wall,

NOTE Confidence: 0.848515704285714

 $00:21:59.974 \longrightarrow 00:22:01.229$ so on and so forth.

NOTE Confidence: 0.848515704285714

 $00:22:01.230 \longrightarrow 00:22:02.985$ These cases could be deemed

NOTE Confidence: 0.848515704285714

 $00:22:02.985 \longrightarrow 00:22:04.038$ adequate and benign,

NOTE Confidence: 0.848515704285714

 $00:22:04.040 \longrightarrow 00:22:06.378$ but the decision should be with the

NOTE Confidence: 0.848515704285714

 $00:22:06.378 \longrightarrow 00:22:08.458$ clinicians from your end you will

NOTE Confidence: 0.848515704285714

 $00:22:08.458 \longrightarrow 00:22:10.486$ still call them non diagnostic system.

NOTE Confidence: 0.848515704285714

 $00{:}22{:}10.490 \dashrightarrow 00{:}22{:}12.596$ Wrongly, and the reason is simple.

NOTE Confidence: 0.848515704285714

 $00:22:12.600 \longrightarrow 00:22:15.048$ For example this this nodule was

NOTE Confidence: 0.848515704285714

 $00{:}22{:}15.048 \dashrightarrow 00{:}22{:}17.039$ done under palpation guidance and

NOTE Confidence: 0.848515704285714

 $00:22:17.039 \longrightarrow 00:22:19.375$ hence the cystic part was of an aid.

NOTE Confidence: 0.848515704285714

 $00{:}22{:}19.380 \dashrightarrow 00{:}22{:}21.540$ The mural nodule and the solid

NOTE Confidence: 0.848515704285714

 $00:22:21.540 \longrightarrow 00:22:23.200$ component was not FN 8.

NOTE Confidence: 0.848515704285714

 $00:22:23.200 \longrightarrow 00:22:24.800$ Typically these are complexes

NOTE Confidence: 0.848515704285714

 $00:22:24.800 \longrightarrow 00:22:26.400$ with solid cystic areas,

 $00:22:26.400 \longrightarrow 00:22:29.599$ but look at these punctate echogenic foci.

NOTE Confidence: 0.671388142416667

 $00{:}22{:}29.600 \to 00{:}22{:}31.624$ Translating, translating to my

NOTE Confidence: 0.671388142416667

 $00:22:31.624 \longrightarrow 00:22:34.154$ calcification or aggregates of some

NOTE Confidence: 0.671388142416667

 $00:22:34.154 \longrightarrow 00:22:36.454$ bodies are very specific imaging

NOTE Confidence: 0.671388142416667

 $00:22:36.454 \longrightarrow 00:22:38.604$ sign of apparitia carcinoma and

NOTE Confidence: 0.671388142416667

 $00:22:38.604 \longrightarrow 00:22:40.769$ when you aspirate such cases.

NOTE Confidence: 0.671388142416667

00:22:40.770 --> 00:22:42.216 Again you will end up with

NOTE Confidence: 0.671388142416667

00:22:42.216 --> 00:22:43.610 a lot of cyst fluid,

NOTE Confidence: 0.671388142416667

 $00{:}22{:}43.610 \dashrightarrow 00{:}22{:}46.250$ very transparent zones on the slide,

NOTE Confidence: 0.671388142416667

 $00{:}22{:}46.250 \dashrightarrow 00{:}22{:}47.372$ hemosiderin laden macrophages.

NOTE Confidence: 0.671388142416667

 $00:22:47.372 \longrightarrow 00:22:49.990$ And if you look at these cells,

NOTE Confidence: 0.671388142416667

 $00:22:49.990 \longrightarrow 00:22:52.275$ which look very histiocytic because

NOTE Confidence: 0.671388142416667

 $00{:}22{:}52.275 \dashrightarrow 00{:}22{:}54.103$ of their cytoplasmic appearance,

NOTE Confidence: 0.671388142416667

 $00{:}22{:}54.110 \longrightarrow 00{:}22{:}56.588$ the nuclei are not those of histiocyte,

NOTE Confidence: 0.671388142416667

 $00:22:56.590 \longrightarrow 00:22:57.532$ these are over,

 $00:22:57.532 \longrightarrow 00:22:59.416$ they show grooves and in some

NOTE Confidence: 0.671388142416667

 $00{:}22{:}59.416 \longrightarrow 00{:}23{:}01.882$ cases you will see these beautiful

NOTE Confidence: 0.671388142416667

 $00:23:01.882 \longrightarrow 00:23:03.554$ intranuclear inclusion despite the

NOTE Confidence: 0.671388142416667

 $00:23:03.554 \longrightarrow 00:23:05.946$ fact that they look mysterious sick.

NOTE Confidence: 0.671388142416667

 $00:23:05.950 \longrightarrow 00:23:08.750$ So this is a book picture of cystic

NOTE Confidence: 0.671388142416667

 $00:23:08.750 \longrightarrow 00:23:11.658$ variant of papillary thyroid carcinoma.

NOTE Confidence: 0.671388142416667

00:23:11.660 --> 00:23:13.680 Sometimes people who do only

NOTE Confidence: 0.671388142416667

 $00:23:13.680 \longrightarrow 00:23:15.296$ histopathology as the question,

NOTE Confidence: 0.671388142416667

 $00:23:15.300 \longrightarrow 00:23:17.568$ well, WHO does not endorse the

NOTE Confidence: 0.671388142416667

00:23:17.568 --> 00:23:19.575 cystic variant of papillary carcinoma

NOTE Confidence: 0.671388142416667

 $00{:}23{:}19.575 \longrightarrow 00{:}23{:}22.119$ where we as syrup pathologists and

NOTE Confidence: 0.671388142416667

00:23:22.119 --> 00:23:24.255 radiologists like to consider it

NOTE Confidence: 0.671388142416667

 $00:23:24.255 \longrightarrow 00:23:26.643$ separately because it helps us with

NOTE Confidence: 0.671388142416667

 $00:23:26.643 \longrightarrow 00:23:28.556$ our diagnosis and differential diagnosis.

NOTE Confidence: 0.671388142416667

00:23:28.556 --> 00:23:30.788 We try to exclude the possibility

NOTE Confidence: 0.671388142416667

 $00{:}23{:}30.788 \dashrightarrow 00{:}23{:}32.759$ of cystic change in an abnormal

00:23:32.759 --> 00:23:34.765 roid nodule when we talk about

NOTE Confidence: 0.671388142416667

 $00:23:34.765 \longrightarrow 00:23:36.800$ cystic variant of papatya carcinoma.

NOTE Confidence: 0.671388142416667

 $00:23:36.800 \longrightarrow 00:23:37.916$ And just to let you know,

NOTE Confidence: 0.671388142416667

 $00:23:37.920 \longrightarrow 00:23:40.185$ I have never seen intranuclear

NOTE Confidence: 0.671388142416667

00:23:40.185 --> 00:23:41.544 inclusions in histiocytes.

NOTE Confidence: 0.671388142416667

 $00:23:41.550 \longrightarrow 00:23:44.105$ So the moment I start to see

NOTE Confidence: 0.671388142416667

 $00:23:44.105 \longrightarrow 00:23:45.654$ Intranuclear inclusion and histiocytic

NOTE Confidence: 0.671388142416667

00:23:45.654 --> 00:23:47.589 cells in a thyroid FNA,

NOTE Confidence: 0.671388142416667

 $00{:}23{:}47.590 \dashrightarrow 00{:}23{:}49.300$ I think of parathyroid carcinoma

NOTE Confidence: 0.671388142416667

 $00:23:49.300 \longrightarrow 00:23:51.010$ and these are further examples.

NOTE Confidence: 0.671388142416667

00:23:51.010 --> 00:23:54.266 Even on air dried beef which stain smear,

NOTE Confidence: 0.671388142416667

 $00{:}23{:}54.270 \dashrightarrow 00{:}23{:}56.250$ you will see beautiful intranuclear

NOTE Confidence: 0.671388142416667

 $00{:}23{:}56.250 \dashrightarrow 00{:}23{:}58.587$ inclusions and these cells imbibe fluid

NOTE Confidence: 0.671388142416667

 $00:23:58.587 \longrightarrow 00:24:00.345$ when they are in fluid environment

NOTE Confidence: 0.671388142416667

 $00:24:00.345 \longrightarrow 00:24:02.573$ for a long period of time and they

00:24:02.573 --> 00:24:05.758 begin to look like so bubble cells

NOTE Confidence: 0.671388142416667

 $00{:}24{:}05.758 \operatorname{--}{>} 00{:}24{:}09.631$ the classic appearance but because of

NOTE Confidence: 0.671388142416667

 $00:24:09.631 \longrightarrow 00:24:11.713$ the nuclear features it's it's papillary.

NOTE Confidence: 0.671388142416667

00:24:11.720 --> 00:24:13.512 Liquid based cytology further

NOTE Confidence: 0.671388142416667

 $00:24:13.512 \longrightarrow 00:24:15.752$ complicates the issue because everything

NOTE Confidence: 0.671388142416667

 $00:24:15.752 \longrightarrow 00:24:17.619$ looks ascitic in these cases.

NOTE Confidence: 0.671388142416667

 $00:24:17.620 \longrightarrow 00:24:19.112$ So that's a histiocyte.

NOTE Confidence: 0.671388142416667

00:24:19.112 --> 00:24:21.350 Histiocyte where most of these cells

NOTE Confidence: 0.671388142416667

 $00:24:21.417 \longrightarrow 00:24:23.457$ with beautiful internuclear inclusions

NOTE Confidence: 0.671388142416667

00:24:23.457 --> 00:24:26.517 are cystic variant of Appalachia carcinoma.

NOTE Confidence: 0.671388142416667

 $00{:}24{:}26.520 \dashrightarrow 00{:}24{:}28.368$ They're simply undergoing this

NOTE Confidence: 0.671388142416667

 $00:24:28.368 \longrightarrow 00:24:30.678$ phenomenon what is called hyper

NOTE Confidence: 0.671388142416667

00:24:30.678 --> 00:24:32.580 regularization that they absorb fluid,

NOTE Confidence: 0.671388142416667

 $00:24:32.580 \longrightarrow 00:24:34.815$ develop vacuoles and begin to

NOTE Confidence: 0.671388142416667

 $00:24:34.815 \longrightarrow 00:24:36.156$ look like histiocytes.

NOTE Confidence: 0.671388142416667 00:24:36.160 --> 00:24:36.537 Benign,

 $00:24:36.537 \longrightarrow 00:24:38.045$ very satisfying category because

NOTE Confidence: 0.671388142416667

 $00:24:38.045 \longrightarrow 00:24:40.719$ we know the risk of being agency

NOTE Confidence: 0.671388142416667

 $00:24:40.719 \longrightarrow 00:24:42.514$ is low these four entities.

NOTE Confidence: 0.671388142416667

 $00:24:42.520 \longrightarrow 00:24:43.860$ Are diagnosed on FNA.

NOTE Confidence: 0.671388142416667

00:24:43.860 --> 00:24:45.870 The most common one we know

NOTE Confidence: 0.671388142416667

 $00:24:45.944 \longrightarrow 00:24:47.450$ is a denomatoid nodule.

NOTE Confidence: 0.671388142416667

 $00:24:47.450 \longrightarrow 00:24:49.030$ Again the same recommendation

NOTE Confidence: 0.671388142416667

 $00:24:49.030 \longrightarrow 00:24:51.770$ that these patients do not need a

NOTE Confidence: 0.671388142416667

 $00:24:51.770 \longrightarrow 00:24:53.863$ repeat FNA or a biopsy or anything,

NOTE Confidence: 0.671388142416667

00:24:53.870 --> 00:24:56.330 simply followed up by clinical

NOTE Confidence: 0.671388142416667

 $00:24:56.330 \longrightarrow 00:24:59.120$ with or without imaging follow up.

NOTE Confidence: 0.671388142416667

 $00:24:59.120 \longrightarrow 00:25:01.238$ We all know that imaging helps.

NOTE Confidence: 0.671388142416667

 $00:25:01.240 \longrightarrow 00:25:02.564$ This is a number.

NOTE Confidence: 0.671388142416667

 $00:25:02.564 \longrightarrow 00:25:04.219$ Nodule is a disfiguring disease.

NOTE Confidence: 0.671388142416667

00:25:04.220 --> 00:25:05.768 Multinodular, often bilateral,

 $00:25:05.768 \longrightarrow 00:25:08.348$ often can have eggshell calcification

NOTE Confidence: 0.671388142416667

 $00{:}25{:}08.348 \dashrightarrow 00{:}25{:}10.240$ and gross examination.

NOTE Confidence: 0.671388142416667

00:25:10.240 --> 00:25:12.616 We have all seen how it looks like.

NOTE Confidence: 0.671388142416667

00:25:12.620 --> 00:25:14.900 It's very cellular on psychology

NOTE Confidence: 0.671388142416667

 $00:25:14.900 \longrightarrow 00:25:17.180$ because it's a hyperplastic process.

NOTE Confidence: 0.671388142416667

 $00{:}25{:}17.180 \dashrightarrow 00{:}25{:}19.724$ I hate to add the word cellular before

NOTE Confidence: 0.671388142416667

 $00:25:19.724 \longrightarrow 00:25:21.820$ adenomatoid nodule because it's meaningless.

NOTE Confidence: 0.671388142416667

 $00:25:21.820 \longrightarrow 00:25:23.218$ They're all cellular.

NOTE Confidence: 0.671388142416667

 $00:25:23.218 \longrightarrow 00:25:24.616$ Sometimes they are.

NOTE Confidence: 0.671388142416667

 $00:25:24.620 \longrightarrow 00:25:25.763$ They are macro.

NOTE Confidence: 0.671388142416667

 $00{:}25{:}25.763 \dashrightarrow 00{:}25{:}27.287$ Follicles are gigantic follicles,

NOTE Confidence: 0.671388142416667

 $00:25:27.290 \longrightarrow 00:25:30.030$ and when you repeatedly.

NOTE Confidence: 0.671388142416667

 $00:25:30.030 \longrightarrow 00:25:31.490$ Puncture them with an FNA,

NOTE Confidence: 0.671388142416667

 $00:25:31.490 \longrightarrow 00:25:33.478$ you will disrupt the wall and they

NOTE Confidence: 0.671388142416667

 $00:25:33.478 \longrightarrow 00:25:35.535$ will become flat monolayers but with

NOTE Confidence: 0.671388142416667

 $00:25:35.535 \longrightarrow 00:25:37.450$ abundant colloid in the background.

 $00:25:37.450 \longrightarrow 00:25:40.665$ So reassuring finding if you

NOTE Confidence: 0.671388142416667

 $00:25:40.665 \longrightarrow 00:25:42.594$ see abundant colloid.

NOTE Confidence: 0.671388142416667

00:25:42.600 --> 00:25:44.442 The other thing which you would

NOTE Confidence: 0.671388142416667

 $00:25:44.442 \longrightarrow 00:25:46.081$ sometimes see would be over

NOTE Confidence: 0.671388142416667

 $00:25:46.081 \longrightarrow 00:25:47.841$ abundance of colloid and again

NOTE Confidence: 0.671388142416667

00:25:47.841 --> 00:25:49.249 your radiologist will help

NOTE Confidence: 0.836979929714286

 $00:25:49.312 \longrightarrow 00:25:52.487$ you. For example in this case it's a

NOTE Confidence: 0.836979929714286

 $00{:}25{:}52.487 \dashrightarrow 00{:}25{:}54.655$ multi septated nodule looks anechoic

NOTE Confidence: 0.836979929714286

 $00:25:54.655 \longrightarrow 00:25:57.852$ but it has these four side of an

NOTE Confidence: 0.836979929714286

 $00:25:57.852 \longrightarrow 00:25:59.792$ artifact called Comet Tail artifact.

NOTE Confidence: 0.836979929714286

00:25:59.800 --> 00:26:02.775 They have small tails and this typically

NOTE Confidence: 0.836979929714286

 $00:26:02.775 \longrightarrow 00:26:05.500$ happens when the ultrasound waves hit

NOTE Confidence: 0.836979929714286

 $00{:}26{:}05.500 \dashrightarrow 00{:}26{:}08.236$ a protein rich fluid like colloid.

NOTE Confidence: 0.836979929714286

 $00:26:08.240 \longrightarrow 00:26:10.116$ It creates this artifact

NOTE Confidence: 0.836979929714286

00:26:10.116 --> 00:26:12.930 reassuring finding and if you see.

00:26:12.930 --> 00:26:16.430 Even a lot of cells, such as in this case,

NOTE Confidence: 0.836979929714286

 $00{:}26{:}16.430 \dashrightarrow 00{:}26{:}18.134$ you know that you are dealing

NOTE Confidence: 0.836979929714286

 $00:26:18.134 \longrightarrow 00:26:19.270$ with a benign diagnosis.

NOTE Confidence: 0.836979929714286

00:26:19.270 --> 00:26:20.830 So it's an easy diagnosis,

NOTE Confidence: 0.836979929714286

 $00:26:20.830 \longrightarrow 00:26:22.306$ very specific diagnosis.

NOTE Confidence: 0.836979929714286

00:26:22.306 --> 00:26:25.750 Very few cases will have malignant tumor,

NOTE Confidence: 0.836979929714286

 $00:26:25.750 \longrightarrow 00:26:27.302$ but there are issues.

NOTE Confidence: 0.836979929714286

 $00:26:27.302 \longrightarrow 00:26:30.212$ We all know if overabundance of composites

NOTE Confidence: 0.836979929714286

 $00:26:30.212 \longrightarrow 00:26:33.740$ can lead to an oncocytic neoplasm diagnosis.

NOTE Confidence: 0.836979929714286

 $00:26:33.740 \longrightarrow 00:26:35.560$ If your tip of the needle hits

NOTE Confidence: 0.836979929714286

 $00{:}26{:}35.560 \dashrightarrow 00{:}26{:}37.610$ an area with all micro follicles,

NOTE Confidence: 0.836979929714286

 $00:26:37.610 \longrightarrow 00:26:40.320$ you can over diagnose it

NOTE Confidence: 0.836979929714286

 $00:26:40.320 \longrightarrow 00:26:41.946$ as follicular neoplasm.

NOTE Confidence: 0.836979929714286

00:26:41.950 --> 00:26:43.462 Sometime with cystic component

NOTE Confidence: 0.836979929714286

00:26:43.462 --> 00:26:45.730 you can have cyst lining cells

NOTE Confidence: 0.836979929714286

 $00:26:45.797 \longrightarrow 00:26:47.409$ that look fairly atypical.

00:26:47.410 --> 00:26:48.445 Occasionally with cytoplasmic

NOTE Confidence: 0.836979929714286

 $00{:}26{:}48.445 \dashrightarrow 00{:}26{:}50.860$ tales I I shared this case with

NOTE Confidence: 0.836979929714286

 $00:26:50.926 \longrightarrow 00:26:52.398$ the resident this morning.

NOTE Confidence: 0.836979929714286

 $00:26:52.400 \longrightarrow 00:26:53.822$ This famous metaplasia,

NOTE Confidence: 0.836979929714286

00:26:53.822 --> 00:26:55.718 you can get intranuclear

NOTE Confidence: 0.836979929714286

00:26:55.718 --> 00:26:58.229 inclusions and of course capillary

NOTE Confidence: 0.836979929714286

00:26:58.229 --> 00:27:00.774 architecture can confuse you with

NOTE Confidence: 0.836979929714286

 $00{:}27{:}00.774 \dashrightarrow 00{:}27{:}03.100$ the appellate higher carcinoma.

NOTE Confidence: 0.836979929714286

 $00:27:03.100 \longrightarrow 00:27:05.214$ So this is my favorite slide to

NOTE Confidence: 0.836979929714286

 $00:27:05.214 \longrightarrow 00:27:07.544$ show and remind people that the most

NOTE Confidence: 0.836979929714286

 $00:27:07.544 \longrightarrow 00:27:09.584$ common cause of a false positive

NOTE Confidence: 0.836979929714286

00:27:09.654 --> 00:27:11.964 diagnosis in thyroid cytology is

NOTE Confidence: 0.836979929714286

 $00{:}27{:}11.964 \dashrightarrow 00{:}27{:}13.812$ Hashimoto thyroiditis over diagnosed

NOTE Confidence: 0.836979929714286

 $00:27:13.812 \longrightarrow 00:27:16.072$ as suspicious for papillary papillary.

NOTE Confidence: 0.836979929714286

 $00:27:16.072 \longrightarrow 00:27:18.312$ So if you're not careful,

 $00:27:18.320 \longrightarrow 00:27:20.357$ you can have a bad diagnosis as

NOTE Confidence: 0.836979929714286

 $00{:}27{:}20.357 \dashrightarrow 00{:}27{:}22.603$ far as long as you remember that

NOTE Confidence: 0.836979929714286

 $00:27:22.603 \longrightarrow 00:27:25.053$ you have to be very careful with

NOTE Confidence: 0.836979929714286

 $00:27:25.053 \longrightarrow 00:27:27.198$ Hashimoto again imaging can help.

NOTE Confidence: 0.836979929714286

00:27:27.200 --> 00:27:29.960 It's a bilateral symmetrical process,

NOTE Confidence: 0.836979929714286

 $00:27:29.960 \longrightarrow 00:27:31.268$ it's a lobulated.

NOTE Confidence: 0.760655175923077

 $00:27:33.330 \longrightarrow 00:27:36.417$ Lobulation that you will see on imaging

NOTE Confidence: 0.760655175923077

 $00:27:36.417 \longrightarrow 00:27:38.729$ micro mobilizations because of these Gray,

NOTE Confidence: 0.760655175923077

 $00:27:38.730 \longrightarrow 00:27:40.820$ white lymphoid nodules and very

NOTE Confidence: 0.760655175923077

 $00:27:40.820 \longrightarrow 00:27:43.303$ often the estimate would be widely

NOTE Confidence: 0.760655175923077

 $00{:}27{:}43.303 \dashrightarrow 00{:}27{:}45.855$ dilated as you can see here and in

NOTE Confidence: 0.760655175923077

 $00:27:45.855 \longrightarrow 00:27:48.229$ the initial phases of Hashimoto.

NOTE Confidence: 0.760655175923077

 $00:27:48.230 \longrightarrow 00:27:49.658$ If you do color Doppler it's

NOTE Confidence: 0.760655175923077

 $00:27:49.658 \longrightarrow 00:27:51.292$ very vast or it's late stages

NOTE Confidence: 0.760655175923077

 $00:27:51.292 \longrightarrow 00:27:52.847$ that you lose the vascularity.

NOTE Confidence: 0.760655175923077

 $00{:}27{:}52.850 \dashrightarrow 00{:}27{:}54.590$ Sometime adding up these features

 $00:27:54.590 \longrightarrow 00:27:56.909$ even before you get DF and A

NOTE Confidence: 0.760655175923077

 $00:27:56.909 \longrightarrow 00:27:58.694$ will will give you a good idea

NOTE Confidence: 0.760655175923077

 $00:27:58.694 \longrightarrow 00:28:00.916$ that is going to be a lymphocytic

NOTE Confidence: 0.760655175923077

00:28:00.916 --> 00:28:03.189 thyroiditis and if you are lucky you.

NOTE Confidence: 0.760655175923077

00:28:03.189 --> 00:28:04.854 We get this beautiful biphasic

NOTE Confidence: 0.760655175923077

 $00:28:04.854 \longrightarrow 00:28:06.575$ admixture of hurthle cells

NOTE Confidence: 0.760655175923077

00:28:06.575 --> 00:28:08.060 and polymorphous lymphocytes,

NOTE Confidence: 0.760655175923077

 $00{:}28{:}08.060 \dashrightarrow 00{:}28{:}10.740$ which may appear singly or in the form

NOTE Confidence: 0.760655175923077

 $00{:}28{:}10.740 \dashrightarrow 00{:}28{:}13.530$ of this lymphohistiocytic aggregate,

NOTE Confidence: 0.760655175923077

 $00:28:13.530 \longrightarrow 00:28:15.870$ as I'm showing you here.

NOTE Confidence: 0.760655175923077

00:28:15.870 --> 00:28:17.875 Problems usually arise when you

NOTE Confidence: 0.760655175923077

00:28:17.875 --> 00:28:19.880 have reactive changes in the

NOTE Confidence: 0.760655175923077

 $00{:}28{:}19.950 \dashrightarrow 00{:}28{:}22.090$ nuclei of the metaplastic cells.

NOTE Confidence: 0.760655175923077

 $00{:}28{:}22.090 \dashrightarrow 00{:}28{:}24.772$ So for example here the background

NOTE Confidence: 0.760655175923077

 $00:28:24.772 \longrightarrow 00:28:25.666$ is lymphocytic.

 $00:28:25.670 \longrightarrow 00:28:27.745$ These cells have markedly enlarged

NOTE Confidence: 0.760655175923077

 $00{:}28{:}27.745 \dashrightarrow 00{:}28{:}30.320$ nuclei which are over in shape.

NOTE Confidence: 0.760655175923077

 $00:28:30.320 \longrightarrow 00:28:32.024$ Look at this case.

NOTE Confidence: 0.760655175923077

00:28:32.024 --> 00:28:34.154 All nuclei with beautiful grooves,

NOTE Confidence: 0.760655175923077

 $00:28:34.160 \longrightarrow 00:28:35.650$ intranuclear inclusions,

NOTE Confidence: 0.760655175923077

00:28:35.650 --> 00:28:39.375 fine powdery chromatin Oval nuclei,

NOTE Confidence: 0.760655175923077

00:28:39.380 --> 00:28:40.715 beautiful intranuclear inclusions.

NOTE Confidence: 0.760655175923077

 $00:28:40.715 \longrightarrow 00:28:44.094$ So it's very hard to suppress the

NOTE Confidence: 0.760655175923077

 $00{:}28{:}44.094 \dashrightarrow 00{:}28{:}46.698$ temptation not to call these three

NOTE Confidence: 0.760655175923077

00:28:46.698 --> 00:28:49.680 scenarios or cases as suspicious of PTC.

NOTE Confidence: 0.760655175923077

 $00:28:49.680 \longrightarrow 00:28:53.054$ PTC for all three cases on resection

NOTE Confidence: 0.760655175923077

 $00:28:53.054 \longrightarrow 00:28:55.440$ was simply Hashimoto Paraditas.

NOTE Confidence: 0.760655175923077

 $00:28:55.440 \longrightarrow 00:28:57.368$ So what I'm trying to tell you is

NOTE Confidence: 0.760655175923077

 $00{:}28{:}57.368 \dashrightarrow 00{:}28{:}59.142$ that have a very high threshold

NOTE Confidence: 0.760655175923077

 $00:28:59.142 \longrightarrow 00:29:00.374$ for committing to PTC.

NOTE Confidence: 0.760655175923077

 $00:29:00.380 \longrightarrow 00:29:02.660$ There's a special BDC diagnosis when

00:29:02.660 --> 00:29:05.027 you have previous history of Hashimoto

NOTE Confidence: 0.760655175923077

 $00{:}29{:}05.027 \dashrightarrow 00{:}29{:}07.750$ or use seem concurrent changes of Hashimoto,

NOTE Confidence: 0.760655175923077

 $00:29:07.750 \longrightarrow 00:29:09.676$ even with the knowledge that patients

NOTE Confidence: 0.760655175923077

00:29:09.676 --> 00:29:11.378 who have long standing Hashimoto

NOTE Confidence: 0.760655175923077

 $00:29:11.378 \longrightarrow 00:29:13.173$ have a much higher incidence

NOTE Confidence: 0.760655175923077

 $00:29:13.173 \longrightarrow 00:29:14.609$ of typhoid higher carcinoma.

NOTE Confidence: 0.760655175923077

00:29:14.610 --> 00:29:16.155 Just tell yourself that you're

NOTE Confidence: 0.760655175923077

00:29:16.155 --> 00:29:18.710 not going to call it PTC unless

NOTE Confidence: 0.760655175923077

 $00{:}29{:}18.710 \dashrightarrow 00{:}29{:}20.129$ you're absolutely convinced,

NOTE Confidence: 0.760655175923077

00:29:20.130 --> 00:29:22.490 so I'm not stopping you from doing that.

NOTE Confidence: 0.760655175923077 00:29:22.490 --> 00:29:23.615 In my case, NOTE Confidence: 0.760655175923077

00:29:23.615 --> 00:29:25.865 when I see such focal changes,

NOTE Confidence: 0.760655175923077

 $00:29:25.870 \longrightarrow 00:29:29.470$ I call it a US nuclear tipi in a

NOTE Confidence: 0.760655175923077

00:29:29.470 --> 00:29:30.610 background of Hashimoto.

NOTE Confidence: 0.760655175923077

00:29:30.610 --> 00:29:33.960 Or I go up to suspicious for PTC if several

 $00:29:34.048 \longrightarrow 00:29:36.860$ slides show internuclear inclusions.

NOTE Confidence: 0.760655175923077

 $00{:}29{:}36.860 \dashrightarrow 00{:}29{:}39.887$ But if I have edge to edge carcinoma,

NOTE Confidence: 0.760655175923077

00:29:39.887 --> 00:29:42.666 those are the cases where I feel

NOTE Confidence: 0.760655175923077

 $00:29:42.666 \longrightarrow 00:29:45.301$ comfortable calling TTC rising in the

NOTE Confidence: 0.760655175923077

 $00:29:45.301 \longrightarrow 00:29:47.069$ background of Hashimoto's thyroiditis.

NOTE Confidence: 0.760655175923077

 $00:29:47.070 \longrightarrow 00:29:49.566$ So you all know AUS has a lot

NOTE Confidence: 0.760655175923077

 $00:29:49.566 \longrightarrow 00:29:50.890$ of subjectivity involved.

NOTE Confidence: 0.760655175923077

 $00:29:50.890 \longrightarrow 00:29:53.466$ There are many phases of this diagnosis.

NOTE Confidence: 0.760655175923077

 $00:29:53.470 \longrightarrow 00:29:55.444$ So these are the cases which are

NOTE Confidence: 0.760655175923077

 $00:29:55.444 \longrightarrow 00:29:57.227$ typically have very subtle focal atypia

NOTE Confidence: 0.760655175923077

 $00:29:57.227 \longrightarrow 00:29:59.278$ that you don't want to call benign

NOTE Confidence: 0.760655175923077

 $00:29:59.334 \longrightarrow 00:30:01.175$ and lose the patient to follow up.

NOTE Confidence: 0.760655175923077

 $00:30:01.180 \longrightarrow 00:30:02.200$ On the other hand,

NOTE Confidence: 0.760655175923077

 $00:30:02.200 \longrightarrow 00:30:04.733$ you don't want to go all the way to

NOTE Confidence: 0.760655175923077

 $00:30:04.733 \longrightarrow 00:30:06.617$ Flagler Neoplasma SFM and have the

NOTE Confidence: 0.760655175923077

 $00:30:06.617 \longrightarrow 00:30:09.187$ patient undergo polypectomy or thyroidectomy.

 $00:30:09.190 \longrightarrow 00:30:11.506$ So you use the term AUS.

NOTE Confidence: 0.760655175923077

 $00:30:11.510 \longrightarrow 00:30:13.379$ And now this is the major change

NOTE Confidence: 0.760655175923077

 $00:30:13.379 \longrightarrow 00:30:15.312$ that you will see now are based

NOTE Confidence: 0.760655175923077

 $00:30:15.312 \longrightarrow 00:30:16.914$ on our own study at Hopkins.

NOTE Confidence: 0.760655175923077

 $00:30:16.920 \longrightarrow 00:30:18.756$ We showed that there are two

NOTE Confidence: 0.760655175923077

00:30:18.756 --> 00:30:19.980 distinct groups of AUS.

NOTE Confidence: 0.760655175923077

 $00:30:19.980 \longrightarrow 00:30:22.584$ The one which are based on nuclear

NOTE Confidence: 0.760655175923077

 $00:30:22.584 \dashrightarrow 00:30:26.290$ tipiya has an ROM of 48% in our study,

NOTE Confidence: 0.760655175923077

 $00:30:26.290 \longrightarrow 00:30:29.440$ 23% of all other subtypes of AUS.

NOTE Confidence: 0.760655175923077

 $00:30:29.440 \longrightarrow 00:30:32.079$ And now we have support of several

NOTE Confidence: 0.760655175923077

 $00:30:32.079 \longrightarrow 00:30:34.038$ molecular studies which have clearly

NOTE Confidence: 0.760655175923077

 $00:30:34.038 \longrightarrow 00:30:36.677$ shown that the high risk group have

NOTE Confidence: 0.760655175923077

 $00{:}30{:}36.677 \dashrightarrow 00{:}30{:}38.870$ mutations more specific like B RAF

NOTE Confidence: 0.760655175923077

00:30:38.870 --> 00:30:41.150 V600E and the other group which we call

NOTE Confidence: 0.8110541875

 $00:30:41.221 \longrightarrow 00:30:42.299$ micro follicular.

 $00:30:42.300 \longrightarrow 00:30:45.078$ Or miscellaneous have the low risk

NOTE Confidence: 0.8110541875

 $00{:}30{:}45.078 \dashrightarrow 00{:}30{:}48.482$ mutations such as KSP 10 taxi PPR

NOTE Confidence: 0.8110541875

 $00:30:48.482 \longrightarrow 00:30:51.410$ gamma pointing more towards nifty or

NOTE Confidence: 0.8110541875

 $00:30:51.410 \longrightarrow 00:30:53.970$ flocculant neoplasm type diagnosis.

NOTE Confidence: 0.8110541875

 $00:30:53.970 \longrightarrow 00:30:57.365$ So that prompted us to have in

NOTE Confidence: 0.8110541875

 $00:30:57.370 \longrightarrow 00:31:00.090$ 2023 editions simply two AUS,

NOTE Confidence: 0.8110541875

 $00:31:00.090 \longrightarrow 00:31:02.659$ AUS nuclear this is the highest and

NOTE Confidence: 0.8110541875

 $00:31:02.659 \longrightarrow 00:31:04.989$ AUS other which is the low risk.

NOTE Confidence: 0.8110541875

 $00:31:04.990 \longrightarrow 00:31:06.934$ If you want you can certainly

NOTE Confidence: 0.8110541875

00:31:06.934 --> 00:31:08.672 put a descriptor after your

NOTE Confidence: 0.8110541875

 $00:31:08.672 \longrightarrow 00:31:10.168$ diagnosis based on micro,

NOTE Confidence: 0.8110541875

 $00:31:10.170 \longrightarrow 00:31:13.176$ follicular or plasmacytoid cells or cyst.

NOTE Confidence: 0.8110541875

00:31:13.180 --> 00:31:16.042 Lining cells, but the top line would be AUS,

NOTE Confidence: 0.8110541875

 $00:31:16.050 \longrightarrow 00:31:17.451$ nuclear or AUS.

NOTE Confidence: 0.8110541875

00:31:17.451 --> 00:31:20.253 All other benchmark is the same

NOTE Confidence: 0.8110541875

 $00:31:20.253 \longrightarrow 00:31:23.164$ and not more than 10% of your

 $00{:}31{:}23.164 \dashrightarrow 00{:}31{:}25.546$ cases should be called the US.

NOTE Confidence: 0.8110541875

 $00:31:25.550 \longrightarrow 00:31:27.138$ If it's significantly higher,

NOTE Confidence: 0.8110541875

 $00:31:27.138 \longrightarrow 00:31:29.520$ you have to bring it down.

NOTE Confidence: 0.8110541875

00:31:29.520 --> 00:31:30.242 Polyclar neoplasm,

NOTE Confidence: 0.8110541875

 $00:31:30.242 \longrightarrow 00:31:31.686$ again imaging may help.

NOTE Confidence: 0.8110541875

 $00:31:31.690 \longrightarrow 00:31:33.400$ They typically oven in shape.

NOTE Confidence: 0.8110541875

 $00:31:33.400 \longrightarrow 00:31:35.264$ They could be ISO,

NOTE Confidence: 0.8110541875

 $00{:}31{:}35.264 \dashrightarrow 00{:}31{:}37.594$ equate or high bit hypoechoic.

NOTE Confidence: 0.8110541875

 $00{:}31{:}37.600 \dashrightarrow 00{:}31{:}39.528$ They're very vascular when

NOTE Confidence: 0.8110541875

 $00:31:39.528 \longrightarrow 00:31:41.456$ you initially read them,

NOTE Confidence: 0.8110541875

 $00:31:41.460 \longrightarrow 00:31:42.891$ typically very irregular

NOTE Confidence: 0.8110541875

00:31:42.891 --> 00:31:44.799 vascularity in the middle.

NOTE Confidence: 0.8110541875

 $00:31:44.800 \longrightarrow 00:31:46.172$ This is a case which turned

NOTE Confidence: 0.8110541875

00:31:46.172 --> 00:31:47.720 out to be Flagler Red Norma.

NOTE Confidence: 0.8110541875

 $00:31:47.720 \longrightarrow 00:31:49.708$ You can actually see the needle track

 $00:31:49.708 \longrightarrow 00:31:51.138$ and hemorrhage caused by the FNA.

NOTE Confidence: 0.8110541875

 $00:31:51.140 \longrightarrow 00:31:53.352$ This turned out to be a minimally

NOTE Confidence: 0.8110541875

 $00:31:53.352 \longrightarrow 00:31:54.300$ invasive follicular carcinoma.

NOTE Confidence: 0.8110541875

 $00:31:54.300 \longrightarrow 00:31:55.785$ You can see the disruption

NOTE Confidence: 0.8110541875

 $00:31:55.785 \longrightarrow 00:31:56.973$ of the capsule here,

NOTE Confidence: 0.8110541875

 $00:31:56.980 \longrightarrow 00:31:59.668$ but these features cannot be seen.

NOTE Confidence: 0.8110541875

00:31:59.670 --> 00:32:01.582 Accurately on imaging and

NOTE Confidence: 0.8110541875

 $00:32:01.582 \longrightarrow 00:32:03.972$ certainly cannot be seen on

NOTE Confidence: 0.8110541875

 $00{:}32{:}03.972 \dashrightarrow 00{:}32{:}05.800$ psychology and even in Histology.

NOTE Confidence: 0.8110541875

 $00:32:05.800 \longrightarrow 00:32:08.145$ You really have to look hard for

NOTE Confidence: 0.8110541875

 $00{:}32{:}08.145 \dashrightarrow 00{:}32{:}10.554$ this penetration of the capsule with

NOTE Confidence: 0.8110541875

 $00:32:10.554 \longrightarrow 00:32:13.053$ mushrooming of the tumor into the

NOTE Confidence: 0.8110541875

 $00{:}32{:}13.053 \dashrightarrow 00{:}32{:}14.761$ lymphovascular spaces before you

NOTE Confidence: 0.8110541875

00:32:14.761 --> 00:32:17.348 will commit to the diagnosis flula

NOTE Confidence: 0.8110541875

00:32:17.348 --> 00:32:20.036 carcinoma and hence we simply call

NOTE Confidence: 0.8110541875

 $00{:}32{:}20.036 \dashrightarrow 00{:}32{:}22.030$ them cellular neoplasm and then

 $00:32:22.030 \longrightarrow 00:32:24.310$ they do a diagnostic lobectomy.

NOTE Confidence: 0.8110541875

 $00:32:24.310 \longrightarrow 00:32:26.080$ These days molecular tests are done

NOTE Confidence: 0.8110541875

 $00:32:26.080 \longrightarrow 00:32:28.843$ 1st and if they are negative within 96%.

NOTE Confidence: 0.8110541875

00:32:28.843 --> 00:32:30.082 Very predictive value.

NOTE Confidence: 0.8110541875

 $00{:}32{:}30.082 \dashrightarrow 00{:}32{:}32.560$ You avoid the need to do

NOTE Confidence: 0.8110541875

 $00:32:32.649 \longrightarrow 00:32:34.479$ a diagnostic lobectomy.

NOTE Confidence: 0.8110541875

00:32:34.480 --> 00:32:37.156 A very important thing happened in

NOTE Confidence: 0.8110541875

00:32:37.156 --> 00:32:40.188 2017 edition which will remain in 2023,

NOTE Confidence: 0.8110541875

 $00:32:40.188 \longrightarrow 00:32:43.464$ which is how to diagnose or screen

NOTE Confidence: 0.8110541875

 $00:32:43.464 \dashrightarrow 00:32:46.360$ for nift P and the answer is simple.

NOTE Confidence: 0.8110541875

 $00:32:46.360 \longrightarrow 00:32:49.216$ The cases where you see mild nuclear

NOTE Confidence: 0.8110541875

 $00{:}32{:}49.216 \dashrightarrow 00{:}32{:}51.755$ changes with the philar based

NOTE Confidence: 0.8110541875

 $00:32:51.755 \longrightarrow 00:32:54.835$ architecture call them follicular neoplasm.

NOTE Confidence: 0.8110541875

 $00:32:54.840 \longrightarrow 00:32:57.018$ In 2010 we recommended those cases

NOTE Confidence: 0.8110541875

00:32:57.018 --> 00:32:59.887 should be bumped up to to suspicious of.

00:32:59.890 --> 00:33:00.914 Primary carcinoma,

NOTE Confidence: 0.8110541875

 $00:33:00.914 \longrightarrow 00:33:04.302$ but in 2017 and in 2023 Bethesda

NOTE Confidence: 0.8110541875

 $00:33:04.302 \longrightarrow 00:33:06.357$ we allow minor nuclear changes

NOTE Confidence: 0.8110541875

 $00:33:06.357 \longrightarrow 00:33:08.500$ to be present in follicular

NOTE Confidence: 0.8110541875

 $00:33:08.500 \longrightarrow 00:33:11.008$ neoplasm because we want to put

NOTE Confidence: 0.8110541875

00:33:11.008 --> 00:33:13.938 all potential cases of nift P in

NOTE Confidence: 0.8110541875

 $00:33:13.938 \longrightarrow 00:33:15.150$ follicular neoplasm categories

NOTE Confidence: 0.8110541875

 $00:33:15.150 \longrightarrow 00:33:17.072$ so they get the right treatment

NOTE Confidence: 0.8110541875

 $00:33:17.072 \longrightarrow 00:33:18.740$ which is lobectomy for next week.

NOTE Confidence: 0.8110541875

 $00:33:18.740 \longrightarrow 00:33:20.360$ So it's very important to realize.

NOTE Confidence: 0.8110541875

 $00:33:20.360 \longrightarrow 00:33:23.952$ So if I would see a curricular pattern

NOTE Confidence: 0.8110541875

 $00:33:23.952 \longrightarrow 00:33:26.782$ lesion with rare intranuclear inclusions

NOTE Confidence: 0.8110541875

00:33:26.782 --> 00:33:29.898 or groups or some over nuclei.

NOTE Confidence: 0.8110541875

00:33:29.900 --> 00:33:32.108 I would call it follicular neoplasm,

NOTE Confidence: 0.8110541875

 $00:33:32.110 \longrightarrow 00:33:33.585$ even knowing that potentially this

NOTE Confidence: 0.8110541875

 $00:33:33.585 \longrightarrow 00:33:35.589$ case will turn out to be nifty.

 $00:33:35.590 \longrightarrow 00:33:37.306$ But I'll write a simple note.

NOTE Confidence: 0.8110541875

 $00{:}33{:}37.310 \dashrightarrow 00{:}33{:}39.340$ Differential diagnosis includes an FPN

NOTE Confidence: 0.8110541875

 $00:33:39.340 \longrightarrow 00:33:41.990$ collision that happy surgeons are happy for.

NOTE Confidence: 0.8110541875

 $00:33:41.990 \longrightarrow 00:33:45.596$ Lobectomy will only show a nifty.

NOTE Confidence: 0.8110541875

 $00:33:45.600 \longrightarrow 00:33:47.656$ So that's the psychology

NOTE Confidence: 0.8110541875

 $00:33:47.656 \longrightarrow 00:33:49.198$ of cellular neoplasm.

NOTE Confidence: 0.8110541875

 $00:33:49.200 \longrightarrow 00:33:51.342$ Again the criteria remains the same

NOTE Confidence: 0.8110541875

00:33:51.342 --> 00:33:53.752 that it should show a predominantly

NOTE Confidence: 0.8110541875

 $00:33:53.752 \longrightarrow 00:33:55.572$ micro floccular architecture as

NOTE Confidence: 0.8110541875

00:33:55.572 --> 00:33:58.480 shown here that more than 50% of

NOTE Confidence: 0.8110541875

 $00:33:58.480 \longrightarrow 00:34:01.871$ the cells will be in the form of

NOTE Confidence: 0.8110541875

 $00{:}34{:}01.871 \dashrightarrow 00{:}34{:}04.528$ these very uniform equal size micro

NOTE Confidence: 0.8110541875

 $00{:}34{:}04.528 \dashrightarrow 00{:}34{:}07.300$ follicles with 15 or fewer nuclei in

NOTE Confidence: 0.808348917666667

 $00{:}34{:}07.381 \dashrightarrow 00{:}34{:}10.549$ the form of a complete circle or near

NOTE Confidence: 0.808348917666667

 $00:34:10.549 \longrightarrow 00:34:13.529$ complete circle with no hole oil in the

 $00:34:13.529 \longrightarrow 00:34:16.230$ middle of the follicles they can have.

NOTE Confidence: 0.808348917666667

 $00{:}34{:}16.230 \dashrightarrow 00{:}34{:}17.950$ Get your bachelor architecture.

NOTE Confidence: 0.808348917666667

 $00:34:17.950 \longrightarrow 00:34:19.972$ But whatever the case can colloid

NOTE Confidence: 0.808348917666667

 $00:34:19.972 \longrightarrow 00:34:22.316$ more than 50% of popular component

NOTE Confidence: 0.808348917666667

 $00:34:22.316 \longrightarrow 00:34:24.084$ in micro follicular architecture.

NOTE Confidence: 0.808348917666667

00:34:24.090 --> 00:34:27.150 You will call it follicular neoplasm.

NOTE Confidence: 0.808348917666667

00:34:27.150 --> 00:34:28.870 Some change changes happen

NOTE Confidence: 0.808348917666667

 $00{:}34{:}28.870 \dashrightarrow 00{:}34{:}30.590$ with Hercule cell neoplasm.

NOTE Confidence: 0.808348917666667

 $00:34:30.590 \longrightarrow 00:34:32.990$ Again, this is a diagnosis that

NOTE Confidence: 0.808348917666667

 $00:34:32.990 \longrightarrow 00:34:35.876$ you will base on near exclusive

NOTE Confidence: 0.808348917666667

 $00{:}34{:}35.876 \dashrightarrow 00{:}34{:}38.268$ population of further cells.

NOTE Confidence: 0.808348917666667

00:34:38.270 --> 00:34:40.643 I know in Histology it could be 70%

NOTE Confidence: 0.808348917666667

 $00:34:40.643 \longrightarrow 00:34:42.808$ or whatever percentage cut off.

NOTE Confidence: 0.808348917666667

 $00:34:42.810 \longrightarrow 00:34:43.854$ People would decide,

NOTE Confidence: 0.808348917666667

 $00:34:43.854 \longrightarrow 00:34:46.290$ but it's inside a path we like

NOTE Confidence: 0.808348917666667

 $00:34:46.367 \longrightarrow 00:34:48.704$ to see near 100% of the cells

 $00:34:48.704 \longrightarrow 00:34:50.684$ as appearing as ankle slides.

NOTE Confidence: 0.808348917666667

 $00:34:50.690 \longrightarrow 00:34:52.280$ The other change which happened

NOTE Confidence: 0.808348917666667

 $00:34:52.280 \longrightarrow 00:34:54.434$ with this category is that as you

NOTE Confidence: 0.808348917666667

 $00:34:54.434 \longrightarrow 00:34:55.946$ know WHO junk the term hurthle

NOTE Confidence: 0.808348917666667

 $00:34:55.946 \longrightarrow 00:34:57.498$ cell and everyone is happy.

NOTE Confidence: 0.808348917666667

 $00:34:57.500 \longrightarrow 00:34:59.428$ That they're simply call

NOTE Confidence: 0.808348917666667

 $00:34:59.428 \longrightarrow 00:35:00.874$ on cosmetic neoplasm.

NOTE Confidence: 0.808348917666667

00:35:00.880 --> 00:35:02.960 So using Bethesda system,

NOTE Confidence: 0.808348917666667

00:35:02.960 --> 00:35:04.000 perspectively speaking,

NOTE Confidence: 0.808348917666667

 $00:35:04.000 \longrightarrow 00:35:06.215$ you will simply call them

NOTE Confidence: 0.808348917666667

 $00:35:06.215 \longrightarrow 00:35:07.544$ oncocytic follicular neoplasm.

NOTE Confidence: 0.808348917666667

 $00:35:07.550 \dashrightarrow 00:35:10.160$ A very simple diagnosis are very

NOTE Confidence: 0.808348917666667

 $00{:}35{:}10.160 \dashrightarrow 00{:}35{:}12.475$ commonly asked question is how

NOTE Confidence: 0.808348917666667

 $00{:}35{:}12.475 \dashrightarrow 00{:}35{:}14.876$ to differentiate hurt a oncocytic

NOTE Confidence: 0.808348917666667

 $00:35:14.876 \longrightarrow 00:35:17.708$ hyperplasia as part of a hyperplastic

 $00:35:17.708 \longrightarrow 00:35:20.660$ nodule from a true oncocytic neoplasm.

NOTE Confidence: 0.808348917666667

 $00{:}35{:}20.660 {\:\dashrightarrow\:} 00{:}35{:}22.280$ 2 features that I pay.

NOTE Confidence: 0.808348917666667

 $00:35:22.280 \longrightarrow 00:35:25.208$ Due importance would be the proliferation

NOTE Confidence: 0.808348917666667

 $00:35:25.208 \longrightarrow 00:35:27.620$ of capillaries as shown here.

NOTE Confidence: 0.808348917666667

 $00:35:27.620 \longrightarrow 00:35:28.972$ And frequent bind nucleation.

NOTE Confidence: 0.808348917666667

 $00:35:28.972 \longrightarrow 00:35:31.480$ If every other cell has two nuclei,

NOTE Confidence: 0.808348917666667

 $00:35:31.480 \longrightarrow 00:35:34.320$ especially with the nucleolar prominence,

NOTE Confidence: 0.808348917666667

00:35:34.320 --> 00:35:37.758 I would be very comfortable calling

NOTE Confidence: 0.808348917666667

 $00{:}35{:}37.758 \dashrightarrow 00{:}35{:}40.050$ it oncocytic follicular neoplasm.

NOTE Confidence: 0.808348917666667

00:35:40.050 --> 00:35:41.780 A major differential diagnosis

NOTE Confidence: 0.808348917666667

 $00:35:41.780 \longrightarrow 00:35:44.360$ of a floccular neoplasm.

NOTE Confidence: 0.808348917666667

 $00:35:44.360 \longrightarrow 00:35:47.918$ Is with a parathyroid lesion typically

NOTE Confidence: 0.808348917666667

00:35:47.918 --> 00:35:50.999 a parathyroid Noma rule of thumb,

NOTE Confidence: 0.808348917666667

00:35:50.999 --> 00:35:53.597 which I usually teach my fellows,

NOTE Confidence: 0.808348917666667

 $00:35:53.600 \longrightarrow 00:35:55.364$ is that if you're going after

NOTE Confidence: 0.808348917666667

 $00{:}35{:}55.364 \dashrightarrow 00{:}35{:}57.791$ a hard F and a nodule and you

 $00:35:57.791 \longrightarrow 00:35:59.980$ have zero call or no call roid,

NOTE Confidence: 0.808348917666667

00:35:59.980 --> 00:36:01.591 think parathyroid medullary

NOTE Confidence: 0.808348917666667

 $00:36:01.591 \longrightarrow 00:36:04.276$ and metastasis in that order.

NOTE Confidence: 0.808348917666667

00:36:04.280 --> 00:36:06.148 And certainly intra parathyroids

NOTE Confidence: 0.808348917666667

 $00:36:06.148 \longrightarrow 00:36:08.016$ could be intra thyroidal.

NOTE Confidence: 0.808348917666667

 $00:36:08.020 \longrightarrow 00:36:09.790$ Even the best radiologists cannot

NOTE Confidence: 0.808348917666667

 $00:36:09.790 \longrightarrow 00:36:12.211$ distinguish them and we will come to

NOTE Confidence: 0.808348917666667

 $00:36:12.211 \longrightarrow 00:36:14.255$ your attention as as a thyroid nodule.

NOTE Confidence: 0.808348917666667

 $00{:}36{:}14.260 \dashrightarrow 00{:}36{:}15.976$ So they are very cellular because

NOTE Confidence: 0.808348917666667

 $00{:}36{:}15.976 \dashrightarrow 00{:}36{:}17.530$ they are stronger poor tumors.

NOTE Confidence: 0.808348917666667

00:36:17.530 --> 00:36:19.987 They have a diffuse population of cells,

NOTE Confidence: 0.808348917666667

 $00:36:19.990 \longrightarrow 00:36:22.306$ some of which may form follicles,

NOTE Confidence: 0.808348917666667

 $00{:}36{:}22.310 \dashrightarrow 00{:}36{:}24.420$ but large population of naked

NOTE Confidence: 0.808348917666667

00:36:24.420 --> 00:36:26.530 nuclei because when you smear

NOTE Confidence: 0.808348917666667

 $00:36:26.605 \longrightarrow 00:36:28.610$ them you lose the cytoplasm.

 $00:36:28.610 \longrightarrow 00:36:31.424$ Very vascular as you can see here.

NOTE Confidence: 0.808348917666667

 $00:36:31.430 \longrightarrow 00:36:33.454$ So at Hopkins what we do is that

NOTE Confidence: 0.808348917666667

 $00:36:33.454 \longrightarrow 00:36:35.503$ we keep this small bullet tubes

NOTE Confidence: 0.808348917666667

 $00:36:35.503 \longrightarrow 00:36:37.711$ plastic tube prefilled with one CC

NOTE Confidence: 0.808348917666667

 $00:36:37.774 \longrightarrow 00:36:39.712$ of Hanks balanced salt solution on

NOTE Confidence: 0.808348917666667

00:36:39.712 --> 00:36:42.231 the FSA card and whenever we suspect

NOTE Confidence: 0.808348917666667

 $00:36:42.231 \longrightarrow 00:36:44.266$ something could be a parathyroid.

NOTE Confidence: 0.808348917666667

 $00{:}36{:}44.270 \dashrightarrow 00{:}36{:}46.688$ That's the radiologists do one extra

NOTE Confidence: 0.808348917666667

 $00:36:46.688 \longrightarrow 00:36:48.925$ dedicated task and then we rinse

NOTE Confidence: 0.808348917666667

 $00:36:48.925 \longrightarrow 00:36:51.125$ that pass in this one CC of hand

NOTE Confidence: 0.808348917666667

00:36:51.201 --> 00:36:53.230 down substitutions, Andrew Chemistry.

NOTE Confidence: 0.808348917666667

 $00:36:53.230 \longrightarrow 00:36:55.855$ And next day when the PTH level

NOTE Confidence: 0.808348917666667

 $00:36:55.855 \longrightarrow 00:36:58.685$ comes back higher than the patient

NOTE Confidence: 0.808348917666667

00:36:58.685 --> 00:37:00.593 peripheral blood that's highly

NOTE Confidence: 0.808348917666667

 $00:37:00.593 \longrightarrow 00:37:02.779$ protective of a parathyroid lesion.

NOTE Confidence: 0.808348917666667

 $00:37:02.780 \longrightarrow 00:37:04.640$ I use the term parathyroid lesion.

 $00:37:04.640 \longrightarrow 00:37:07.208$ I don't call it parathyroid neoplasm

NOTE Confidence: 0.808348917666667

00:37:07.208 --> 00:37:09.545 because you could certainly have

NOTE Confidence: 0.808348917666667

 $00:37:09.545 \longrightarrow 00:37:11.611$ isolated hyperplasia recently or you

NOTE Confidence: 0.808348917666667

00:37:11.611 --> 00:37:14.769 can make a cell block and do for example.

NOTE Confidence: 0.808348917666667

00:37:14.770 --> 00:37:15.590 PTH immunostaining,

NOTE Confidence: 0.808348917666667

00:37:15.590 --> 00:37:18.870 these eight people love to do GATA 3,

NOTE Confidence: 0.808348917666667

 $00:37:18.870 \longrightarrow 00:37:20.430$ which is an excellent marker

NOTE Confidence: 0.808348917666667

 $00:37:20.430 \dashrightarrow 00:37:21.990$ because it's saying the nucleus.

NOTE Confidence: 0.808348917666667

 $00{:}37{:}21.990 \dashrightarrow 00{:}37{:}23.565$ So even if you don't have much

NOTE Confidence: 0.808348917666667

00:37:23.565 --> 00:37:25.050 cytoplasm in a limited sample,

NOTE Confidence: 0.808348917666667

00:37:25.050 --> 00:37:27.426 you can still get nuclear staining.

NOTE Confidence: 0.904999179166667

 $00:37:27.430 \dashrightarrow 00:37:30.286$ So one thing I wanted to tell you

NOTE Confidence: 0.904999179166667

 $00{:}37{:}30.286 \dashrightarrow 00{:}37{:}32.866$ all is that recently people have

NOTE Confidence: 0.904999179166667

 $00:37:32.866 \longrightarrow 00:37:34.406$ started to ask this question.

NOTE Confidence: 0.904999179166667

00:37:34.410 --> 00:37:36.645 Well, you're calling it parathyroid

00:37:36.645 --> 00:37:39.689 lesion patient also has a neck node.

NOTE Confidence: 0.904999179166667

 $00{:}37{:}39.690 \dashrightarrow 00{:}37{:}41.688$ Could this be a parathyroid carcinoma

NOTE Confidence: 0.904999179166667

 $00:37:41.688 \longrightarrow 00:37:44.489$ or is it a parathyroid adenoma?

NOTE Confidence: 0.904999179166667

 $00:37:44.490 \longrightarrow 00:37:46.522$ Unfortunately we have this

NOTE Confidence: 0.904999179166667

00:37:46.522 --> 00:37:48.046 excellent immunostain now,

NOTE Confidence: 0.904999179166667

 $00:37:48.050 \longrightarrow 00:37:50.888$ a pair of fibrominn which is

NOTE Confidence: 0.904999179166667

 $00:37:50.890 \longrightarrow 00:37:54.676$ extracted from a tumor suppressor gene

NOTE Confidence: 0.904999179166667

00:37:54.676 --> 00:37:57.850 hyperparathyroidism 2 HPT two which?

NOTE Confidence: 0.904999179166667

 $00:37:57.850 \longrightarrow 00:38:00.490$ Which is lost in parathyroid carcinomas.

NOTE Confidence: 0.904999179166667

 $00:38:00.490 \longrightarrow 00:38:03.742$ And look at the impressive profile

NOTE Confidence: 0.904999179166667

 $00:38:03.742 \longrightarrow 00:38:07.030$ for 96% sensitivity and 99%

NOTE Confidence: 0.904999179166667

 $00:38:07.030 \longrightarrow 00:38:09.770$ specificity for parathyroid carcinoma.

NOTE Confidence: 0.904999179166667

 $00:38:09.770 \longrightarrow 00:38:12.670$ So this is a neck node that was sent to me.

NOTE Confidence: 0.904999179166667

 $00:38:12.670 \longrightarrow 00:38:14.364$ There's a smear and the cell block.

NOTE Confidence: 0.904999179166667

 $00:38:14.370 \longrightarrow 00:38:16.484$ So we knew right away it was

NOTE Confidence: 0.904999179166667

 $00:38:16.490 \longrightarrow 00:38:17.567$ a parathyroid tissue.

 $00:38:17.567 \longrightarrow 00:38:19.721$ Patient also had a thyroid nodule

NOTE Confidence: 0.904999179166667

 $00:38:19.721 \longrightarrow 00:38:21.900$ and you were asked the question

NOTE Confidence: 0.904999179166667

 $00{:}38{:}21.900 \dashrightarrow 00{:}38{:}23.660$ is it a metastatic parathyroid

NOTE Confidence: 0.904999179166667

 $00:38:23.730 \longrightarrow 00:38:25.190$ carcinoma to a net node.

NOTE Confidence: 0.904999179166667

 $00:38:25.190 \longrightarrow 00:38:27.950$ So we did a part of Fibrominn as you can see.

NOTE Confidence: 0.904999179166667

00:38:27.950 --> 00:38:29.546 Beautifully, strongly positive.

NOTE Confidence: 0.904999179166667

 $00:38:29.546 \longrightarrow 00:38:32.206$ So we excluded carcinoma based

NOTE Confidence: 0.904999179166667

00:38:32.206 --> 00:38:35.180 on this very impressive profile.

NOTE Confidence: 0.904999179166667

 $00{:}38{:}35.180 \dashrightarrow 00{:}38{:}36.818$ They went after the thyroid nodule.

NOTE Confidence: 0.904999179166667

 $00:38:36.820 \longrightarrow 00:38:40.397$ It was simply a benign hyperplastic nodule.

NOTE Confidence: 0.904999179166667

 $00:38:40.400 \longrightarrow 00:38:41.948$ So this is a very important

NOTE Confidence: 0.904999179166667

 $00:38:41.948 \longrightarrow 00:38:42.980$ part of my presentation.

NOTE Confidence: 0.904999179166667

 $00{:}38{:}42.980 \dashrightarrow 00{:}38{:}44.552$ The so-called indeterminate thyroid

NOTE Confidence: 0.904999179166667

00:38:44.552 --> 00:38:47.451 nodules as you know is a very

NOTE Confidence: 0.904999179166667

 $00:38:47.451 \longrightarrow 00:38:49.339$ frustrating diagnosis for pathologists

 $00:38:49.339 \longrightarrow 00:38:51.699$ and also for the clinicians.

NOTE Confidence: 0.904999179166667

00:38:51.700 --> 00:38:55.046 15 to 30% of them are indeterminate.

NOTE Confidence: 0.904999179166667

 $00:38:55.050 \longrightarrow 00:38:57.110$ Majority unfortunately are still resected

NOTE Confidence: 0.904999179166667

 $00:38:57.110 \longrightarrow 00:39:00.050$ and majority do turn out to be benign.

NOTE Confidence: 0.904999179166667

 $00:39:00.050 \longrightarrow 00:39:02.540$ So it's an unnecessary procedure.

NOTE Confidence: 0.904999179166667

 $00:39:02.540 \longrightarrow 00:39:05.312$ AUS and political and neoplasm are

NOTE Confidence: 0.904999179166667

 $00:39:05.312 \longrightarrow 00:39:08.320$ typically taken as as a categories

NOTE Confidence: 0.904999179166667

 $00:39:08.320 \longrightarrow 00:39:10.480$ within the indeterminate diagnosis.

NOTE Confidence: 0.904999179166667

 $00:39:10.480 \longrightarrow 00:39:12.489$ I love to show this slide because

NOTE Confidence: 0.904999179166667

 $00:39:12.489 \longrightarrow 00:39:14.720$ now there are molecular tests which

NOTE Confidence: 0.904999179166667

00:39:14.720 --> 00:39:16.890 people are a fraid will replace

NOTE Confidence: 0.904999179166667

00:39:16.890 --> 00:39:18.620 cytopathologist or thyroid FN's.

NOTE Confidence: 0.904999179166667

 $00:39:18.620 \longrightarrow 00:39:21.896$ Just like HPV stole a lot of GYN pathology.

NOTE Confidence: 0.904999179166667

 $00:39:21.900 \longrightarrow 00:39:24.284$ So I often show this slide that you

NOTE Confidence: 0.904999179166667

00:39:24.284 --> 00:39:26.785 will not get to this stage that you

NOTE Confidence: 0.904999179166667

00:39:26.785 --> 00:39:29.344 will find work for food because you

00:39:29.344 --> 00:39:31.876 will always have your thyroid cytology.

NOTE Confidence: 0.904999179166667

 $00:39:31.880 \longrightarrow 00:39:33.872$ These tests are expensive so they

NOTE Confidence: 0.904999179166667

 $00:39:33.872 \longrightarrow 00:39:36.340$ will not be offered to every patient.

NOTE Confidence: 0.904999179166667

00:39:36.340 --> 00:39:38.620 With a thyroid nodule you will

NOTE Confidence: 0.904999179166667

 $00:39:38.620 \longrightarrow 00:39:40.580$ still do your critical role.

NOTE Confidence: 0.904999179166667

 $00:39:40.580 \longrightarrow 00:39:41.770$ You will do the FDA,

NOTE Confidence: 0.904999179166667

 $00:39:41.770 \longrightarrow 00:39:44.605$ read the FN as in determine it and then

NOTE Confidence: 0.904999179166667

 $00:39:44.605 \dashrightarrow 00:39:47.487$ the patient will get a molecular test.

NOTE Confidence: 0.904999179166667

 $00:39:47.490 \longrightarrow 00:39:51.130$ But we all agree that they do

NOTE Confidence: 0.904999179166667

 $00:39:51.130 \longrightarrow 00:39:52.690$ increase significantly preoperative

NOTE Confidence: 0.904999179166667

00:39:52.770 --> 00:39:55.490 diagnostic accuracy and FN sample,

NOTE Confidence: 0.904999179166667

 $00:39:55.490 \dashrightarrow 00:39:57.681$ the liquid sample is a great sample

NOTE Confidence: 0.904999179166667

 $00{:}39{:}57.681 \dashrightarrow 00{:}39{:}59.890$ to do these molecular testing.

NOTE Confidence: 0.904999179166667

 $00{:}39{:}59.890 \dashrightarrow 00{:}40{:}01.666$ So equation will always flow this

NOTE Confidence: 0.904999179166667

 $00:40:01.666 \longrightarrow 00:40:03.998$ way that we will have an affinity

 $00:40:03.998 \longrightarrow 00:40:06.170$ diagnosis leading to a molecular test.

NOTE Confidence: 0.904999179166667

 $00:40:06.170 \longrightarrow 00:40:08.618$ And again these molecular tests as

NOTE Confidence: 0.904999179166667

00:40:08.618 --> 00:40:10.590 I mentioned before reduced the.

NOTE Confidence: 0.904999179166667

 $00:40:10.590 \longrightarrow 00:40:12.130$ Number of so-called diagnostic

NOTE Confidence: 0.904999179166667

 $00:40:12.130 \longrightarrow 00:40:14.440$ lobectomies which we used to do,

NOTE Confidence: 0.904999179166667

00:40:14.440 --> 00:40:16.148 again not enough time to go into

NOTE Confidence: 0.904999179166667

 $00:40:16.148 \longrightarrow 00:40:17.230$ details of these tests.

NOTE Confidence: 0.904999179166667

00:40:17.230 --> 00:40:19.262 We all know that there are three major

NOTE Confidence: 0.904999179166667

 $00{:}40{:}19.262 \dashrightarrow 00{:}40{:}21.714$ tests that are often used in pharma, tyroc,

NOTE Confidence: 0.904999179166667

 $00:40:21.714 \longrightarrow 00:40:25.278$ Dynex, all three are very comfortable.

NOTE Confidence: 0.904999179166667

 $00:40:25.280 \longrightarrow 00:40:28.376$ At Hopkins, we use a pharma.

NOTE Confidence: 0.904999179166667

00:40:28.380 --> 00:40:31.494 Title seek and Thai jennex provide

NOTE Confidence: 0.904999179166667

00:40:31.494 --> 00:40:33.164 an additional advantage that you

NOTE Confidence: 0.904999179166667

 $00:40:33.164 \longrightarrow 00:40:35.598$ can do on paraffin block or you can

NOTE Confidence: 0.904999179166667

 $00:40:35.598 \longrightarrow 00:40:37.560$ escape the cells off or glass slide.

NOTE Confidence: 0.904999179166667

 $00{:}40{:}37.560 \dashrightarrow 00{:}40{:}40.808$ But keep in mind they do offer a

 $00{:}40{:}40.808 \dashrightarrow 00{:}40{:}43.700$ much lower success rate when you

NOTE Confidence: 0.904999179166667

 $00{:}40{:}43.700 \dashrightarrow 00{:}40{:}46.780$ don't do it on on a liquid sample.

NOTE Confidence: 0.868188861764706

00:40:46.780 --> 00:40:50.497 So whichever test you do they all give you

NOTE Confidence: 0.868188861764706

 $00:40:50.497 \longrightarrow 00:40:54.259$ good results and this is a very important.

NOTE Confidence: 0.868188861764706

 $00:40:54.260 \longrightarrow 00:40:57.360$ Editorial which was written by.

NOTE Confidence: 0.868188861764706

 $00:40:57.360 \longrightarrow 00:41:00.251$ The well known endocrinologist who had helped

NOTE Confidence: 0.868188861764706

 $00:41:00.251 \longrightarrow 00:41:02.809$ us tremendously with the Testa book also.

NOTE Confidence: 0.868188861764706

 $00{:}41{:}02.810 \dashrightarrow 00{:}41{:}06.050$ And as you can see here that he's clearly

NOTE Confidence: 0.868188861764706

 $00:41:06.050 \longrightarrow 00:41:08.821$ telling the readers that these tests will

NOTE Confidence: 0.868188861764706

00:41:08.821 --> 00:41:12.149 not replace what we do the imaging and FNA,

NOTE Confidence: 0.868188861764706

00:41:12.150 --> 00:41:16.534 it would simply support the FN a

NOTE Confidence: 0.868188861764706

 $00:41:16.534 \longrightarrow 00:41:18.914$ diagnosis or a clinical diagnosis

NOTE Confidence: 0.868188861764706

 $00{:}41{:}18.914 \dashrightarrow 00{:}41{:}21.910$ or higher diagnostic accuracy.

NOTE Confidence: 0.868188861764706

 $00:41:21.910 \longrightarrow 00:41:24.535$ So we are looking for a synergistic

NOTE Confidence: 0.868188861764706

 $00:41:24.535 \longrightarrow 00:41:26.769$ partnership with these molecular tests.

 $00:41:26.770 \longrightarrow 00:41:28.282$ They're not here.

NOTE Confidence: 0.868188861764706

 $00{:}41{:}28.282 \dashrightarrow 00{:}41{:}31.810$ To replace us or replace the radiologist.

NOTE Confidence: 0.868188861764706

00:41:31.810 --> 00:41:33.310 So suspicious malignancy,

NOTE Confidence: 0.868188861764706

 $00:41:33.310 \longrightarrow 00:41:34.810$ no major change.

NOTE Confidence: 0.868188861764706

 $00:41:34.810 \longrightarrow 00:41:37.752$ But just to remind you that the cases

NOTE Confidence: 0.868188861764706

 $00:41:37.752 \longrightarrow 00:41:40.308$ previously what we used to call

NOTE Confidence: 0.868188861764706

00:41:40.308 --> 00:41:43.153 suspicious for PTC based on focal

NOTE Confidence: 0.868188861764706

00:41:43.153 --> 00:41:45.548 nuclear features with fine powdery

NOTE Confidence: 0.868188861764706

 $00{:}41{:}45.548 \dashrightarrow 00{:}41{:}48.502$ chromatin or grooves or rare intranuclear

NOTE Confidence: 0.868188861764706

00:41:48.502 --> 00:41:51.660 inclusions now should be called AU for,

NOTE Confidence: 0.868188861764706

00:41:51.660 --> 00:41:53.560 should be called follicular neoplasm

NOTE Confidence: 0.868188861764706

 $00:41:53.560 \longrightarrow 00:41:55.382$ because these are potential cases

NOTE Confidence: 0.868188861764706

00:41:55.382 --> 00:41:57.838 that will turn out to be nifty and

NOTE Confidence: 0.868188861764706

00:41:57.900 --> 00:42:00.049 you want these patients to get a

NOTE Confidence: 0.868188861764706

00:42:00.049 --> 00:42:01.966 lobectomy and not a total thyroidectomy.

NOTE Confidence: 0.868188861764706

 $00{:}42{:}01.966 \dashrightarrow 00{:}42{:}04.705$ So that's the only message I have for

00:42:04.705 --> 00:42:06.835 you when you entertain that diagnosis,

NOTE Confidence: 0.868188861764706

00:42:06.840 --> 00:42:08.295 suspicious for malignancy,

NOTE Confidence: 0.868188861764706

 $00:42:08.295 \longrightarrow 00:42:10.720$ that be conservative for lesions

NOTE Confidence: 0.868188861764706

 $00:42:10.720 \longrightarrow 00:42:13.432$ which have a follicular pattern and

NOTE Confidence: 0.868188861764706

 $00:42:13.432 \longrightarrow 00:42:15.512$ all these showing focal features

NOTE Confidence: 0.868188861764706

 $00:42:15.512 \longrightarrow 00:42:17.390$ of papillary carcinoma.

NOTE Confidence: 0.868188861764706

 $00:42:17.390 \longrightarrow 00:42:21.152$ So malignant remains a very accurate

NOTE Confidence: 0.868188861764706

00:42:21.152 --> 00:42:24.078 diagnosis in Afghani psychology,

NOTE Confidence: 0.868188861764706

 $00:42:24.078 \longrightarrow 00:42:27.908$ no significant change from 2017.

NOTE Confidence: 0.868188861764706

 $00:42:27.910 \longrightarrow 00:42:30.360$ If you are not seeing the major

NOTE Confidence: 0.868188861764706

00:42:30.360 --> 00:42:31.928 diagnostic features of papillary

NOTE Confidence: 0.868188861764706

 $00{:}42{:}31.928 \rightarrow 00{:}42{:}33.740$ fibroelastoma course small bodies

NOTE Confidence: 0.868188861764706

 $00{:}42{:}33.740 \dashrightarrow 00{:}42{:}36.659$ which are seen in minority of cases,

NOTE Confidence: 0.868188861764706

 $00:42:36.660 \longrightarrow 00:42:39.999$ in my experience not more than 1520% of PTC.

NOTE Confidence: 0.868188861764706

 $00:42:39.999 \longrightarrow 00:42:41.568$ So those features,

 $00:42:41.570 \longrightarrow 00:42:44.258$ ask yourself question should I be calling

NOTE Confidence: 0.868188861764706

00:42:44.258 --> 00:42:47.599 it PTC or should I be happier calling?

NOTE Confidence: 0.868188861764706

 $00:42:47.600 \longrightarrow 00:42:52.200$ Suspicious of PDC if it has a follicular

NOTE Confidence: 0.868188861764706

00:42:52.200 --> 00:42:57.730 pattern architecture if you are calling it.

NOTE Confidence: 0.868188861764706

 $00:42:57.730 \longrightarrow 00:43:01.058$ PTC and it has a follicular pattern or

NOTE Confidence: 0.868188861764706

 $00:43:01.060 \longrightarrow 00:43:03.180$ as a matter of fact in all PTC cases.

NOTE Confidence: 0.868188861764706

 $00:43:03.180 \longrightarrow 00:43:06.026$ Make it a habit to add this optional

NOTE Confidence: 0.868188861764706

 $00:43:06.026 \longrightarrow 00:43:09.576$ note at three to 4% of the cases which

NOTE Confidence: 0.868188861764706

00:43:09.576 --> 00:43:12.060 are called PTC on affinity psychology.

NOTE Confidence: 0.868188861764706

00:43:12.060 --> 00:43:13.985 Turn out to be nifty or follow

NOTE Confidence: 0.868188861764706

 $00:43:13.985 \longrightarrow 00:43:15.440$ up to protect yourself,

NOTE Confidence: 0.868188861764706

 $00{:}43{:}15.440 \dashrightarrow 00{:}43{:}17.708$ protect declination and so that you

NOTE Confidence: 0.868188861764706

 $00:43:17.708 \longrightarrow 00:43:20.627$ will still have a good confidence from

NOTE Confidence: 0.868188861764706

00:43:20.627 --> 00:43:23.285 your clinical colleagues in case it

NOTE Confidence: 0.868188861764706

00:43:23.285 --> 00:43:25.797 turns out to be nifty and patient,

NOTE Confidence: 0.868188861764706

 $00:43:25.800 \longrightarrow 00:43:28.070$ get overtreated.

00:43:28.070 --> 00:43:29.642 We all know how papillary carcinoma

NOTE Confidence: 0.868188861764706 00:43:29.642 --> 00:43:30.166 looks like. NOTE Confidence: 0.868188861764706

 $00:43:30.170 \longrightarrow 00:43:33.590$ The workout starts with imaging isoechoic,

NOTE Confidence: 0.868188861764706

00:43:33.590 --> 00:43:35.098 beautiful punctate,

NOTE Confidence: 0.868188861764706

00:43:35.098 --> 00:43:36.606 echogenic foci,

NOTE Confidence: 0.868188861764706

00:43:36.606 --> 00:43:38.868 cluster of microcalcifications,

NOTE Confidence: 0.868188861764706

 $00:43:38.870 \longrightarrow 00:43:39.902$ similar bodies,

NOTE Confidence: 0.868188861764706

 $00:43:39.902 \longrightarrow 00:43:41.450$ beautiful papillary architecture,

NOTE Confidence: 0.868188861764706

 $00:43:41.450 \longrightarrow 00:43:42.060$ fibrovascular course.

NOTE Confidence: 0.868188861764706

00:43:42.060 --> 00:43:44.977 And now I can see that I did not

NOTE Confidence: 0.868188861764706

00:43:44.977 --> 00:43:47.431 see show the fellows the classical

NOTE Confidence: 0.868188861764706

 $00:43:47.431 \longrightarrow 00:43:49.519$ fibrovascular scores earlier this morning.

NOTE Confidence: 0.868188861764706

 $00{:}43{:}49.520 \dashrightarrow 00{:}43{:}52.504$ But here you go. This is picture perfect.

NOTE Confidence: 0.868188861764706

00:43:52.510 --> 00:43:54.322 All nuclei with longitudinally

NOTE Confidence: 0.868188861764706

 $00:43:54.322 \longrightarrow 00:43:55.228$ running groups,

00:43:55.230 --> 00:43:57.474 tiny marginal nucleoli sitting

NOTE Confidence: 0.868188861764706

 $00{:}43{:}57.474 \dashrightarrow 00{:}43{:}59.718$ under neath the nuclear membrane.

NOTE Confidence: 0.868188861764706

00:43:59.720 --> 00:44:02.055 And of course sharply punched

NOTE Confidence: 0.868188861764706

 $00:44:02.055 \longrightarrow 00:44:03.456$ out intranuclear inclusions,

NOTE Confidence: 0.868188861764706

 $00:44:03.460 \longrightarrow 00:44:04.872$ classic features of papillary.

NOTE Confidence: 0.868188861764706

 $00:44:04.872 \longrightarrow 00:44:06.637$ So if you see this,

NOTE Confidence: 0.868188861764706

 $00:44:06.640 \longrightarrow 00:44:09.595$ it's simply a papillary thyroid

NOTE Confidence: 0.868188861764706

 $00:44:09.595 \longrightarrow 00:44:11.210$ carcinoma diagnosis question.

NOTE Confidence: 0.868188861764706

00:44:11.210 --> 00:44:14.220 Often asked is should we be diagnosing

NOTE Confidence: 0.868188861764706

00:44:14.220 --> 00:44:17.240 variants of subtype and the answer is no,

NOTE Confidence: 0.868188861764706

 $00{:}44{:}17.240 \longrightarrow 00{:}44{:}19.249$ because sometimes even if you have these

NOTE Confidence: 0.868188861764706

00:44:19.249 --> 00:44:21.428 tall cell variants which you are seeing here,

NOTE Confidence: 0.868188861764706

 $00:44:21.430 \longrightarrow 00:44:22.672$ the tallest cells,

NOTE Confidence: 0.868188861764706

 $00:44:22.672 \longrightarrow 00:44:24.742$ the oncocytic look so bubble

NOTE Confidence: 0.868188861764706

 $00:44:24.742 \longrightarrow 00:44:25.570$ internuclear inclusions

NOTE Confidence: 0.7029006704

00:44:25.637 --> 00:44:27.477 or you're seeing these gland

 $00:44:27.477 \longrightarrow 00:44:28.949$ like formations reminding you

NOTE Confidence: 0.7029006704

 $00:44:28.949 \longrightarrow 00:44:30.777$ that this could be a colonic.

NOTE Confidence: 0.7029006704

00:44:30.780 --> 00:44:33.680 No carcinoma. These are columnar

NOTE Confidence: 0.7029006704

00:44:33.680 --> 00:44:35.420 salvadorians or capillary.

NOTE Confidence: 0.7029006704

 $00:44:35.420 \longrightarrow 00:44:37.394$ I think these changes are very

NOTE Confidence: 0.7029006704

 $00:44:37.394 \longrightarrow 00:44:39.524$ focal and you may be inaccurate

NOTE Confidence: 0.7029006704

 $00:44:39.524 \longrightarrow 00:44:41.738$ when there is action is done.

NOTE Confidence: 0.7029006704

00:44:41.740 --> 00:44:42.991 So parathyroid carcinoma

NOTE Confidence: 0.7029006704

 $00:44:42.991 \longrightarrow 00:44:44.659$ is a great diagnosis.

NOTE Confidence: 0.7029006704

00:44:44.660 --> 00:44:47.460 I only mention it in a note

NOTE Confidence: 0.7029006704

 $00{:}44{:}47.460 \dashrightarrow 00{:}44{:}49.683$ that's focal features suggest that

NOTE Confidence: 0.7029006704

00:44:49.683 --> 00:44:52.479 all sylvarant or the very rare

NOTE Confidence: 0.7029006704

 $00:44:52.479 \longrightarrow 00:44:55.254$ columnar cell variants if I see

NOTE Confidence: 0.7029006704

 $00:44:55.254 \longrightarrow 00:44:56.726$ those features because sometimes

NOTE Confidence: 0.7029006704

 $00:44:56.726 \longrightarrow 00:44:59.445$ it will help the surgeon do the

00:44:59.445 --> 00:45:01.375 central level 6 of paratracheal.

NOTE Confidence: 0.7029006704

 $00:45:01.380 \longrightarrow 00:45:03.012$ And for the section,

NOTE Confidence: 0.7029006704

 $00:45:03.012 \longrightarrow 00:45:05.052$ because that nodal dissection is

NOTE Confidence: 0.7029006704

 $00:45:05.052 \longrightarrow 00:45:07.130$ associated with the two serious

NOTE Confidence: 0.7029006704

 $00:45:07.130 \longrightarrow 00:45:09.135$ potential complications I have surgery

NOTE Confidence: 0.7029006704

 $00:45:09.135 \longrightarrow 00:45:11.809$ the permanent larvngeal nerve damage

NOTE Confidence: 0.7029006704

 $00:45:11.809 \longrightarrow 00:45:14.009$ and or permanent hypoparathyroidism.

NOTE Confidence: 0.7029006704

 $00:45:14.010 \longrightarrow 00:45:15.510$ Most surgeons will take those

NOTE Confidence: 0.7029006704

00:45:15.510 --> 00:45:17.010 node out nodes out anyway,

NOTE Confidence: 0.7029006704

00:45:17.010 --> 00:45:19.030 but good surgeons palpate them.

NOTE Confidence: 0.7029006704

 $00:45:19.030 \longrightarrow 00:45:20.858$ If it's negative image

NOTE Confidence: 0.7029006704

00:45:20.858 --> 00:45:22.686 them imaging is negative,

NOTE Confidence: 0.7029006704

00:45:22.690 --> 00:45:24.562 then they may depend on molecular

NOTE Confidence: 0.7029006704

 $00{:}45{:}24.562 \dashrightarrow 00{:}45{:}26.866$ testing or your call of tall cell

NOTE Confidence: 0.7029006704

 $00:45:26.866 \longrightarrow 00:45:28.526$ variant or an aggressive variant.

NOTE Confidence: 0.7029006704

 $00:45:28.530 \longrightarrow 00:45:30.396$ But even with that I strongly

 $00:45:30.396 \longrightarrow 00:45:31.640$ recommend that don't suck.

NOTE Confidence: 0.7029006704

 $00{:}45{:}31.640 \dashrightarrow 00{:}45{:}34.510$ Like that with her carcinoma.

NOTE Confidence: 0.7029006704

00:45:34.510 --> 00:45:36.350 Medullary is an easy diagnosis,

NOTE Confidence: 0.7029006704

 $00:45:36.350 \longrightarrow 00:45:38.735$ but also keep in mind it has the widest

NOTE Confidence: 0.7029006704

 $00:45:38.735 \longrightarrow 00:45:40.609$ spectrum of cyto morphologic changes.

NOTE Confidence: 0.7029006704

 $00:45:40.610 \longrightarrow 00:45:43.781$ Very often it will be the so-called

NOTE Confidence: 0.7029006704

00:45:43.781 --> 00:45:45.845 epithelioid type with plasmacytoid

NOTE Confidence: 0.7029006704

 $00:45:45.845 \longrightarrow 00:45:48.960$ features could be focally spindly.

NOTE Confidence: 0.7029006704

 $00:45:48.960 \longrightarrow 00:45:51.546$ The presence of amyloid greatly helps,

NOTE Confidence: 0.7029006704

 $00:45:51.550 \longrightarrow 00:45:54.054$ but you have to learn how to recognize

NOTE Confidence: 0.7029006704

 $00:45:54.054 \longrightarrow 00:45:56.028$ amyloid as opposed to Polaroid.

NOTE Confidence: 0.7029006704

00:45:56.030 --> 00:45:58.150 It's more glassy appearing,

NOTE Confidence: 0.7029006704

 $00{:}45{:}58.150 \dashrightarrow 00{:}46{:}00.920$ more amorphous, more sharply defined,

NOTE Confidence: 0.7029006704

 $00:46:00.920 \longrightarrow 00:46:04.450$ cut out fragments, and if you recognize it.

NOTE Confidence: 0.7029006704

 $00:46:04.450 \longrightarrow 00:46:05.764$ Which is present.

 $00:46:05.764 \longrightarrow 00:46:08.808$ I think in 6570% of the cases

NOTE Confidence: 0.7029006704

 $00{:}46{:}08.808 \dashrightarrow 00{:}46{:}10.968$ it becomes an easy diagnosis.

NOTE Confidence: 0.7029006704

 $00:46:10.970 \longrightarrow 00:46:14.298$ But issues happen when you have a very

NOTE Confidence: 0.7029006704

00:46:14.298 --> 00:46:16.830 uncommon pure spindle cell morphology

NOTE Confidence: 0.7029006704

 $00:46:16.830 \longrightarrow 00:46:20.589$ and you cannot exclude spindle cell lesion.

NOTE Confidence: 0.7029006704

00:46:20.590 --> 00:46:22.420 Or someone asked me this morning

NOTE Confidence: 0.7029006704

 $00:46:22.420 \longrightarrow 00:46:24.170$ at the 8:00 o'clock lecture,

NOTE Confidence: 0.7029006704

 $00:46:24.170 \longrightarrow 00:46:26.978$ how about the giant cell variant

NOTE Confidence: 0.7029006704

 $00{:}46{:}26.978 \to 00{:}46{:}28.382$ of megalithic carcinoma.

NOTE Confidence: 0.7029006704

00:46:28.390 --> 00:46:30.742 Very polymorphic cells still

NOTE Confidence: 0.7029006704

 $00:46:30.742 \longrightarrow 00:46:32.506$ retaining a dark,

NOTE Confidence: 0.7029006704

00:46:32.510 --> 00:46:32.906 hyperchromatic,

NOTE Confidence: 0.7029006704

00:46:32.906 --> 00:46:34.094 evenly dispersed chromatin.

NOTE Confidence: 0.7029006704

 $00:46:34.094 \longrightarrow 00:46:37.428$ So if you are on site for efna in

NOTE Confidence: 0.7029006704

 $00{:}46{:}37.428 \dashrightarrow 00{:}46{:}39.216$ these cases now we recommend that

NOTE Confidence: 0.7029006704

 $00{:}46{:}39.216 \dashrightarrow 00{:}46{:}41.347$ you can actually send the needle.

 $00:46:41.350 \longrightarrow 00:46:43.810$ Watch out for calcitonin levels.

NOTE Confidence: 0.7029006704

 $00:46:43.810 \longrightarrow 00:46:46.078$ You don't even have to wait for a cell

NOTE Confidence: 0.7029006704

 $00:46:46.078 \longrightarrow 00:46:48.175$ block and if the calcitonin comes

NOTE Confidence: 0.7029006704

00:46:48.175 --> 00:46:50.300 back significantly higher than you know,

NOTE Confidence: 0.7029006704

 $00:46:50.300 \longrightarrow 00:46:52.718$ you have a measure tire carcinoma.

NOTE Confidence: 0.7029006704

 $00{:}46{:}52.720 \dashrightarrow 00{:}46{:}55.175$ Previously we recommended it on

NOTE Confidence: 0.7029006704

00:46:55.175 --> 00:46:57.630 potential metastasis to the lymph

NOTE Confidence: 0.7029006704

00:46:57.709 --> 00:47:00.194 nodes of a majorly carcinoma Ki 67

NOTE Confidence: 0.7029006704

 $00:47:00.194 \longrightarrow 00:47:02.562$ with now WHO recommends be done

NOTE Confidence: 0.7029006704

 $00{:}47{:}02.562 \dashrightarrow 00{:}47{:}05.418$ for to classify low and high grade.

NOTE Confidence: 0.7029006704

 $00:47:05.420 \longrightarrow 00:47:07.996$ But it's a histologic thing and I strongly,

NOTE Confidence: 0.7029006704

 $00:47:08.000 \longrightarrow 00:47:10.105$ strongly recommend do not attempt

NOTE Confidence: 0.7029006704

00:47:10.105 --> 00:47:11.368 it on psychology.

NOTE Confidence: 0.7029006704

 $00:47:11.370 \longrightarrow 00:47:13.896$ Just the simple diagnosis of measuring

NOTE Confidence: 0.7029006704

 $00:47:13.896 \longrightarrow 00:47:16.450$ high carcinoma should be good enough.

 $00:47:16.450 \longrightarrow 00:47:19.282$ And a plastic is a fairly easy diagnosis

NOTE Confidence: 0.7029006704

 $00:47:19.282 \longrightarrow 00:47:21.590$ when you see it in psychology.

NOTE Confidence: 0.7029006704

 $00:47:21.590 \longrightarrow 00:47:23.534$ As the name suggests,

NOTE Confidence: 0.7029006704

 $00:47:23.534 \longrightarrow 00:47:25.964$ extreme pleomorphism or an aplasia.

NOTE Confidence: 0.7029006704

 $00:47:25.970 \longrightarrow 00:47:27.990$ You can imagine that disparity

NOTE Confidence: 0.7029006704

 $00:47:27.990 \longrightarrow 00:47:30.010$ in cell size and shape.

NOTE Confidence: 0.7029006704

 $00:47:30.010 \longrightarrow 00:47:31.980$ So a very easy diagnosis.

NOTE Confidence: 0.7029006704

00:47:31.980 --> 00:47:34.460 And we all know it's a rapidly enlarging

NOTE Confidence: 0.7029006704

 $00{:}47{:}34.460 \to 00{:}47{:}36.668$ mass often cause airway compression.

NOTE Confidence: 0.7029006704

 $00:47:36.670 \longrightarrow 00:47:39.058$ This patient died inhaling

NOTE Confidence: 0.7029006704

 $00:47:39.058 \longrightarrow 00:47:40.849$ the necrotic tumor.

NOTE Confidence: 0.7029006704

 $00:47:40.850 \longrightarrow 00:47:43.940$ Imaging is a very aggressive looking

NOTE Confidence: 0.7029006704

 $00:47:43.940 \longrightarrow 00:47:46.920$ tumor with necrosis extra thyroidal.

NOTE Confidence: 0.7029006704

 $00:47:46.920 \longrightarrow 00:47:50.372$ Sanction a significantly enlarged

NOTE Confidence: 0.7029006704

 $00:47:50.372 \longrightarrow 00:47:53.428$ and juxtapose cervical nodes.

NOTE Confidence: 0.7029006704

 $00:47:53.428 \longrightarrow 00:47:55.420$ But on psychology,

 $00:47:55.420 \longrightarrow 00:47:57.184$ sometimes it's very difficult

NOTE Confidence: 0.859913824285714

 $00:47:57.184 \longrightarrow 00:47:58.507$ to exclude metastasis.

NOTE Confidence: 0.859913824285714

00:47:58.510 --> 00:48:01.014 I often tell people when you have a

NOTE Confidence: 0.859913824285714

00:48:01.014 --> 00:48:03.145 pleomorphic tumor and you are trying to

NOTE Confidence: 0.859913824285714

00:48:03.145 --> 00:48:05.479 jump quickly to a diagnosis of anaplastic,

NOTE Confidence: 0.859913824285714

 $00:48:05.480 \longrightarrow 00:48:07.322$ always exclude metastasis

NOTE Confidence: 0.859913824285714

 $00:48:07.322 \longrightarrow 00:48:09.778$ and some oncologic centers.

NOTE Confidence: 0.859913824285714

 $00{:}48{:}09.780 \dashrightarrow 00{:}48{:}12.180$ Metastatic carcinomas are cancers are

NOTE Confidence: 0.859913824285714

00:48:12.180 --> 00:48:14.580 more common than primary anaplastic,

NOTE Confidence: 0.859913824285714

 $00:48:14.580 \longrightarrow 00:48:15.196$ for example.

NOTE Confidence: 0.859913824285714

 $00:48:15.196 \longrightarrow 00:48:17.044$ This case looks very similar to

NOTE Confidence: 0.859913824285714

00:48:17.044 --> 00:48:19.320 the one which I'm showing you here,

NOTE Confidence: 0.859913824285714

 $00{:}48{:}19.320 \dashrightarrow 00{:}48{:}21.696$ except this is a metastatic Melanoma in a

NOTE Confidence: 0.859913824285714

 $00:48:21.696 \longrightarrow 00:48:24.135$ patient who had a known history of Melanoma.

NOTE Confidence: 0.859913824285714

 $00:48:24.140 \longrightarrow 00:48:25.949$ So if you don't get the history or you

00:48:25.949 --> 00:48:27.846 don't pay particular attention to history,

NOTE Confidence: 0.859913824285714

 $00:48:27.850 \longrightarrow 00:48:31.348$ you can very easily misdiagnosed metastasis.

NOTE Confidence: 0.859913824285714

 $00:48:31.350 \longrightarrow 00:48:34.854$ So history is important and certainly keep in

NOTE Confidence: 0.859913824285714

 $00:48:34.854 \longrightarrow 00:48:38.447$ mind that renal cell metastasis lung adeno,

NOTE Confidence: 0.859913824285714

 $00:48:38.450 \longrightarrow 00:48:39.990$ breast add no Melanoma,

NOTE Confidence: 0.859913824285714

 $00:48:39.990 \longrightarrow 00:48:41.915$ these are metastasis to thyroid

NOTE Confidence: 0.859913824285714

 $00:48:41.915 \longrightarrow 00:48:43.787$ traders are very vascular organs

NOTE Confidence: 0.859913824285714

00:48:43.787 --> 00:48:45.917 and it knows very effectively how

NOTE Confidence: 0.859913824285714

 $00:48:45.979 \longrightarrow 00:48:48.059$ to filter circulating tumor cells.

NOTE Confidence: 0.859913824285714

00:48:48.060 --> 00:48:50.382 So it's not uncommon to find

NOTE Confidence: 0.859913824285714

 $00{:}48{:}50.382 \dashrightarrow 00{:}48{:}51.930$ metastasis in the thyroid.

NOTE Confidence: 0.859913824285714

 $00:48:51.930 \longrightarrow 00:48:53.530$ We all know when you've

NOTE Confidence: 0.859913824285714

 $00:48:53.530 \longrightarrow 00:48:54.490$ an aplastic thyroid carcinoma.

NOTE Confidence: 0.859913824285714

00:48:54.490 --> 00:48:56.258 You will lose sight of carrot in staining.

NOTE Confidence: 0.859913824285714

00:48:56.260 --> 00:48:58.510 Often you will lose sight

NOTE Confidence: 0.859913824285714

00:48:58.510 --> 00:49:00.632 of globulin and TF11 stain,

 $00:49:00.632 \longrightarrow 00:49:03.334$ which is often retained at least focally.

NOTE Confidence: 0.859913824285714

 $00:49:03.340 \longrightarrow 00:49:06.160$ Is this beautiful pack stain immunostaining?

NOTE Confidence: 0.859913824285714

 $00:49:06.160 \longrightarrow 00:49:09.406$ So still it remains the most

NOTE Confidence: 0.859913824285714

 $00:49:09.406 \longrightarrow 00:49:11.029$ important immunostains to

NOTE Confidence: 0.859913824285714

 $00:49:11.029 \longrightarrow 00:49:13.470$ diagnose anaplastic carcinoma.

NOTE Confidence: 0.859913824285714

00:49:13.470 --> 00:49:16.390 Also to remind you that the new WHO

NOTE Confidence: 0.859913824285714

00:49:16.390 --> 00:49:18.007 classification took out squamous

NOTE Confidence: 0.859913824285714

 $00{:}49{:}18.007 \dashrightarrow 00{:}49{:}20.449$ cell carcinoma as a separate entity.

NOTE Confidence: 0.859913824285714

 $00:49:20.450 \longrightarrow 00:49:22.178$ Now if you see squamous cell

NOTE Confidence: 0.859913824285714

 $00:49:22.178 \longrightarrow 00:49:23.330$ carcinoma in a thyroid,

NOTE Confidence: 0.859913824285714

 $00:49:23.330 \longrightarrow 00:49:25.598$ either it would be a locally

NOTE Confidence: 0.859913824285714

 $00{:}49{:}25.598 \operatorname{\dashrightarrow} > 00{:}49{:}27.862$ invasive or a macs famous cell or

NOTE Confidence: 0.859913824285714

 $00:49:27.862 \longrightarrow 00:49:30.242$ it will be a subtype of anaplastic.

NOTE Confidence: 0.859913824285714

 $00:49:30.250 \longrightarrow 00:49:32.074$ So if I see this prospectively

NOTE Confidence: 0.859913824285714

 $00:49:32.074 \longrightarrow 00:49:33.630$ in in a thyroid FNA,

 $00:49:33.630 \longrightarrow 00:49:36.186$ I would call it anaplastic undifferentiated

NOTE Confidence: 0.859913824285714

 $00{:}49{:}36.186 \to 00{:}49{:}38.250$ paracast Noma squamous cell type.

NOTE Confidence: 0.859913824285714

 $00:49:38.250 \longrightarrow 00:49:41.110$ That's how we will report it.

NOTE Confidence: 0.859913824285714

00:49:41.110 --> 00:49:44.927 I'm not going to mention too much about nift.

NOTE Confidence: 0.859913824285714

00:49:44.930 --> 00:49:48.514 Pi will simply answer 2 questions for you.

NOTE Confidence: 0.859913824285714

 $00:49:48.520 \longrightarrow 00:49:50.168$ Is there a cytopathologic

NOTE Confidence: 0.859913824285714

00:49:50.168 --> 00:49:51.816 diagnostic criteria for Nipp?

NOTE Confidence: 0.859913824285714

 $00:49:51.820 \longrightarrow 00:49:54.180$ And answer is simple none.

NOTE Confidence: 0.859913824285714

 $00:49:54.180 \longrightarrow 00:49:56.100$ Should we be diagnosing if PN,

NOTE Confidence: 0.859913824285714

00:49:56.100 --> 00:49:56.760 FN,

NOTE Confidence: 0.859913824285714

 $00{:}49{:}56.760 \dashrightarrow 00{:}50{:}00.060$ cytology and answers absolutely no?

NOTE Confidence: 0.859913824285714

 $00:50:00.060 \longrightarrow 00:50:03.508$ It's just that we seen for nifty and

NOTE Confidence: 0.859913824285714

 $00:50:03.508 \longrightarrow 00:50:06.766$ in cases that we think are potentially

NOTE Confidence: 0.859913824285714

 $00:50:06.766 \longrightarrow 00:50:09.904$ nifty based on focal papillary features

NOTE Confidence: 0.859913824285714

 $00:50:09.904 \longrightarrow 00:50:12.600$ and follicular pattern architecture,

NOTE Confidence: 0.859913824285714

 $00:50:12.600 \longrightarrow 00:50:15.197$ we will put them in follicular neoplasm.

 $00:50:15.200 \longrightarrow 00:50:18.512$ If we like we can add a node

NOTE Confidence: 0.859913824285714

 $00:50:18.512 \longrightarrow 00:50:20.480$ differential diagnosis including FP.

NOTE Confidence: 0.859913824285714

 $00:50:20.480 \longrightarrow 00:50:21.380$ Most importantly,

NOTE Confidence: 0.859913824285714

 $00:50:21.380 \longrightarrow 00:50:24.080$ the understanding is that it leads

NOTE Confidence: 0.859913824285714

 $00:50:24.080 \longrightarrow 00:50:26.928$ to de escalation of treatment,

NOTE Confidence: 0.859913824285714

 $00:50:26.930 \longrightarrow 00:50:30.146$ reduces the number of diagnostic lupa.

NOTE Confidence: 0.859913824285714

00:50:30.150 --> 00:50:32.514 Surgeries, especially total thyroidectomy.

NOTE Confidence: 0.859913824285714

 $00:50:32.514 \longrightarrow 00:50:35.216$ So these patients prospectively when

NOTE Confidence: 0.859913824285714

00:50:35.216 --> 00:50:38.457 you call them should only undergo a

NOTE Confidence: 0.859913824285714

 $00:50:38.457 \longrightarrow 00:50:41.545$ lebec me and not a total sorry text me.

NOTE Confidence: 0.859913824285714

 $00:50:41.550 \longrightarrow 00:50:44.862$ So we all know the critical role of

NOTE Confidence: 0.859913824285714

00:50:44.862 --> 00:50:47.029 molecular testing and diagnostics,

NOTE Confidence: 0.859913824285714

 $00{:}50{:}47.030 \dashrightarrow 00{:}50{:}50.948$ but now it has expanded into.

NOTE Confidence: 0.859913824285714

 $00:50:50.950 \longrightarrow 00:50:53.115$ Agnostics and precision or targeted

NOTE Confidence: 0.859913824285714

 $00:50:53.115 \longrightarrow 00:50:54.414$ medicine as well.

 $00:50:54.420 \longrightarrow 00:50:57.642$ So not only emerging but established

NOTE Confidence: 0.859913824285714

 $00{:}50{:}57.642 \dashrightarrow 00{:}50{:}59.790$ evidence between genomic variants

NOTE Confidence: 0.859913824285714

 $00:50:59.874 \longrightarrow 00:51:02.640$ and tumor Histology how they behave,

NOTE Confidence: 0.859913824285714

 $00:51:02.640 \longrightarrow 00:51:05.463$ what would be the therapeutic clinical

NOTE Confidence: 0.859913824285714

 $00:51:05.463 \longrightarrow 00:51:07.878$ course and the rapeutic options available.

NOTE Confidence: 0.859913824285714

00:51:07.880 --> 00:51:12.080 So really A3 prong role for molecular tests.

NOTE Confidence: 0.859913824285714

 $00:51:12.080 \longrightarrow 00:51:12.780$ For example,

NOTE Confidence: 0.859913824285714

 $00:51:12.780 \longrightarrow 00:51:14.530$ most of the commercially available

NOTE Confidence: 0.859913824285714

 $00:51:14.530 \longrightarrow 00:51:16.059$ molecular tests now do dirt,

NOTE Confidence: 0.859913824285714

00:51:16.060 --> 00:51:18.970 ALK and entrec analysis and all

NOTE Confidence: 0.859913824285714

 $00{:}51{:}18.970 \dashrightarrow 00{:}51{:}21.380$ these mutations are associated with.

NOTE Confidence: 0.859913824285714

 $00:51:21.380 \longrightarrow 00:51:23.981$ All the bad things you can see in a

NOTE Confidence: 0.859913824285714

00:51:23.981 --> 00:51:25.940 thyroid cancer, higher mortality,

NOTE Confidence: 0.859913824285714

00:51:25.940 --> 00:51:28.200 clinical stage treatment failure,

NOTE Confidence: 0.873782801666667

 $00:51:28.200 \longrightarrow 00:51:30.480$ metastasis so on and so forth.

NOTE Confidence: 0.873782801666667

 $00:51:30.480 \longrightarrow 00:51:33.296$ So it does give our clinicians very useful

 $00:51:33.296 \longrightarrow 00:51:36.425$ piece of information for example entrec

NOTE Confidence: 0.873782801666667

 $00:51:36.425 \longrightarrow 00:51:38.773$ mutated rearranged reputar carcinoma.

NOTE Confidence: 0.873782801666667

 $00:51:38.780 \longrightarrow 00:51:41.432$ We all know these patients present

NOTE Confidence: 0.873782801666667

00:51:41.432 --> 00:51:44.932 with the with multi focal disease,

NOTE Confidence: 0.873782801666667

 $00:51:44.932 \longrightarrow 00:51:46.238$ aggressive disease,

NOTE Confidence: 0.873782801666667

 $00:51:46.240 \longrightarrow 00:51:48.810$ advanced clinical stage and unfortunately

NOTE Confidence: 0.873782801666667

00:51:48.810 --> 00:51:51.775 on FN sometimes you don't see.

NOTE Confidence: 0.873782801666667

00:51:51.775 --> 00:51:54.376 Very well developed features of papillary

NOTE Confidence: 0.873782801666667

 $00{:}51{:}54.376 \dashrightarrow 00{:}51{:}57.028$ carcinoma and has molecular tests are

NOTE Confidence: 0.873782801666667

 $00{:}51{:}57.028 \dashrightarrow 00{:}51{:}59.921$ very important that if they demonstrate

NOTE Confidence: 0.873782801666667

 $00:51:59.921 \longrightarrow 00:52:01.745$ and track rearranged carcinoma.

NOTE Confidence: 0.873782801666667

 $00:52:01.745 \dashrightarrow 00:52:04.905$ So this is what has happened that FDA

NOTE Confidence: 0.873782801666667

 $00{:}52{:}04.905 \dashrightarrow 00{:}52{:}08.018$ has approved a number of agents for

NOTE Confidence: 0.873782801666667

 $00:52:08.018 \longrightarrow 00:52:10.470$ treatment of these mutated cancers.

NOTE Confidence: 0.873782801666667 00:52:10.470 --> 00:52:12.016 For example,

 $00:52:12.016 \longrightarrow 00:52:14.866$ the debriefing with the additional

NOTE Confidence: 0.873782801666667

00:52:14.866 --> 00:52:18.658 traumatic for B RAF mutated and apothecary

NOTE Confidence: 0.873782801666667

 $00:52:18.658 \longrightarrow 00:52:21.628$ carcinoma larotrectinib is now very

NOTE Confidence: 0.873782801666667

 $00:52:21.628 \longrightarrow 00:52:25.040$ commonly used for Amtrak fused tumors

NOTE Confidence: 0.873782801666667

 $00:52:25.040 \longrightarrow 00:52:27.690$ regardless of the tumor Histology.

NOTE Confidence: 0.873782801666667

 $00:52:27.690 \longrightarrow 00:52:29.718$ And the the most recent 1,

NOTE Confidence: 0.873782801666667

 $00:52:29.720 \longrightarrow 00:52:33.216$ the pulsating herb is used for red mutated.

NOTE Confidence: 0.873782801666667

00:52:33.220 --> 00:52:35.170 Measure with high carcinoma so the

NOTE Confidence: 0.873782801666667

 $00{:}52{:}35.170 \dashrightarrow 00{:}52{:}37.152$ molecular tests play a pivotal role

NOTE Confidence: 0.873782801666667

 $00:52:37.152 \longrightarrow 00:52:39.308$ and and if you don't have these

NOTE Confidence: 0.873782801666667

 $00{:}52{:}39.308 \dashrightarrow 00{:}52{:}41.109$ molecular tests at the institution,

NOTE Confidence: 0.873782801666667

 $00{:}52{:}41.110 \dashrightarrow 00{:}52{:}43.410$ you're actually denying the patient

NOTE Confidence: 0.873782801666667

 $00:52:43.410 \longrightarrow 00:52:46.739$ a chance for a disease free survival

NOTE Confidence: 0.873782801666667

 $00{:}52{:}46.739 \dashrightarrow 00{:}52{:}49.603$ based on these very specific targeted

NOTE Confidence: 0.873782801666667

00:52:49.603 --> 00:52:52.018 therapies which are now commonly

NOTE Confidence: 0.873782801666667

 $00:52:52.018 \longrightarrow 00:52:55.220$ available in many major medical centers.

00:52:55.220 --> 00:52:56.174 So very briefly,

NOTE Confidence: 0.873782801666667

 $00:52:56.174 \longrightarrow 00:52:59.162$ since people do ask me the role of AI

NOTE Confidence: 0.873782801666667

 $00{:}52{:}59.162 \longrightarrow 00{:}53{:}01.232$ or deep learning or computer aided

NOTE Confidence: 0.873782801666667

00:53:01.232 --> 00:53:03.338 learning in psychology, I often.

NOTE Confidence: 0.873782801666667 00:53:03.338 --> 00:53:03.956 Tell them. NOTE Confidence: 0.873782801666667

 $00:53:03.956 \longrightarrow 00:53:06.814$ So far it has not worked because it's

NOTE Confidence: 0.873782801666667

00:53:06.814 --> 00:53:09.604 very challenging to apply to psychology.

NOTE Confidence: 0.873782801666667

 $00:53:09.610 \longrightarrow 00:53:12.179$ Psychology has color as opposed to imaging,

NOTE Confidence: 0.873782801666667

00:53:12.180 --> 00:53:14.917 which is black and white or Gray.

NOTE Confidence: 0.873782801666667

 $00{:}53{:}14.920 \dashrightarrow 00{:}53{:}17.600$ And not only color, it has many stains.

NOTE Confidence: 0.873782801666667

 $00{:}53{:}17.600 \dashrightarrow 00{:}53{:}19.616$ Even the same stain diff quick use

NOTE Confidence: 0.873782801666667

 $00{:}53{:}19.616 \dashrightarrow 00{:}53{:}21.634$ at Yale will look different from

NOTE Confidence: 0.873782801666667

 $00{:}53{:}21.634 \dashrightarrow 00{:}53{:}23.439$ the TIF quake user options.

NOTE Confidence: 0.873782801666667

 $00:53:23.440 \longrightarrow 00:53:26.308$ The nuclei will I would different

NOTE Confidence: 0.873782801666667

 $00:53:26.308 \longrightarrow 00:53:28.770$ intensity of nuclear staining and

 $00:53:28.770 \longrightarrow 00:53:31.590$ computer cannot be taught that those

NOTE Confidence: 0.873782801666667

 $00{:}53{:}31.590 \dashrightarrow 00{:}53{:}34.599$ variations because it would look for the

NOTE Confidence: 0.873782801666667

 $00:53:34.599 \longrightarrow 00:53:37.770$ intensity of gradient of the of the staining.

NOTE Confidence: 0.873782801666667

 $00:53:37.770 \longrightarrow 00:53:39.995$ Cytology has too many smears.

NOTE Confidence: 0.873782801666667

00:53:40.000 --> 00:53:42.989 I mean you can imagine a conventionally

NOTE Confidence: 0.873782801666667

 $00:53:42.989 \longrightarrow 00:53:44.657$ prepared thyroid ethnic and

NOTE Confidence: 0.873782801666667

 $00:53:44.657 \longrightarrow 00:53:46.517$ have anywhere from 10 to 20.

NOTE Confidence: 0.87378280166666700:53:46.520 --> 00:53:47.416 Plus smears.

NOTE Confidence: 0.873782801666667

00:53:47.416 --> 00:53:48.312 Scanning them,

NOTE Confidence: 0.873782801666667

00:53:48.312 --> 00:53:50.104 especially if they're three-dimensional,

NOTE Confidence: 0.873782801666667

00:53:50.110 --> 00:53:51.274 adding Z, stacking,

NOTE Confidence: 0.873782801666667

 $00:53:51.274 \longrightarrow 00:53:53.602$ cutting them in a thin slices,

NOTE Confidence: 0.873782801666667

00:53:53.610 --> 00:53:56.270 using the whole slide scanner,

NOTE Confidence: 0.873782801666667

00:53:56.270 --> 00:53:59.806 too much data for the computer to analyze,

NOTE Confidence: 0.873782801666667

 $00:53:59.810 \longrightarrow 00:54:01.184$ and most importantly,

NOTE Confidence: 0.873782801666667

 $00:54:01.184 \longrightarrow 00:54:03.932$ I pose these questions to people

 $00:54:03.932 \longrightarrow 00:54:05.540$ who are doing AI.

NOTE Confidence: 0.873782801666667

 $00:54:05.540 \longrightarrow 00:54:07.290$ I'm not saying anything terribly

NOTE Confidence: 0.873782801666667

 $00:54:07.290 \longrightarrow 00:54:09.627$ bad about a all I'm saying is

NOTE Confidence: 0.873782801666667

 $00:54:09.627 \longrightarrow 00:54:12.155$ that it will take time for AI to

NOTE Confidence: 0.873782801666667

 $00:54:12.155 \longrightarrow 00:54:13.879$ be applicable to diagnostics.

NOTE Confidence: 0.873782801666667

 $00:54:13.880 \longrightarrow 00:54:15.889$ So the questions I often ask is,

NOTE Confidence: 0.873782801666667

 $00:54:15.890 \longrightarrow 00:54:17.160$ are you trying to replace?

NOTE Confidence: 0.873782801666667

 $00:54:17.160 \longrightarrow 00:54:19.588$ Colleges or societal technologists

NOTE Confidence: 0.873782801666667

 $00:54:19.588 \longrightarrow 00:54:22.623$ for onsite evaluation of articles.

NOTE Confidence: 0.873782801666667

 $00:54:22.630 \longrightarrow 00:54:24.650$ Time consuming process and

NOTE Confidence: 0.873782801666667

 $00{:}54{:}24.650 {\: -->\:} 00{:}54{:}26.670$ most people say no.

NOTE Confidence: 0.873782801666667

00:54:26.670 --> 00:54:28.355 Are you trying to achieve

NOTE Confidence: 0.873782801666667

 $00{:}54{:}28.355 \dashrightarrow 00{:}54{:}29.366$ higher diagnostic accuracy?

NOTE Confidence: 0.873782801666667

 $00{:}54{:}29.370 \dashrightarrow 00{:}54{:}33.185$ I already presented such good risk of

NOTE Confidence: 0.873782801666667

 $00:54:33.185 \longrightarrow 00:54:35.690$ malignancies and accurate accuracy,

00:54:35.690 --> 00:54:37.610 high accuracy of thyroid athanas.

NOTE Confidence: 0.873782801666667

 $00:54:37.610 \longrightarrow 00:54:39.370$ So the answer is no.

NOTE Confidence: 0.873782801666667

 $00:54:39.370 \longrightarrow 00:54:41.120$ So are we trying to decrease the

NOTE Confidence: 0.873782801666667

 $00:54:41.120 \longrightarrow 00:54:43.027$ turnaround time and again the answer is no.

NOTE Confidence: 0.873782801666667

00:54:43.030 --> 00:54:45.151 Actually we will add on turn around

NOTE Confidence: 0.873782801666667

00:54:45.151 --> 00:54:47.733 time and we trying to save valuable

NOTE Confidence: 0.873782801666667

 $00:54:47.733 \longrightarrow 00:54:50.400$ healthcare dollars and answer is again no.

NOTE Confidence: 0.873782801666667

 $00:54:50.400 \longrightarrow 00:54:52.770$ If the companies make AI programs,

NOTE Confidence: 0.873782801666667

 $00{:}54{:}52.770 \dashrightarrow 00{:}54{:}54.720$ they will want their money back

NOTE Confidence: 0.873782801666667

 $00:54:54.720 \longrightarrow 00:54:56.929$ and it will add to the cost.

NOTE Confidence: 0.638569063333333

 $00{:}54{:}56.930 \dashrightarrow 00{:}55{:}00.106$ Of doing an FDA. So with that I

NOTE Confidence: 0.638569063333333

 $00:55:00.106 \longrightarrow 00:55:02.522$ and my presentation I would be very

NOTE Confidence: 0.638569063333333

 $00:55:02.522 \longrightarrow 00:55:04.822$ happy to answer any question about

NOTE Confidence: 0.638569063333333

00:55:04.822 --> 00:55:07.032 Tyler Cytopathology in general or

NOTE Confidence: 0.638569063333333

 $00:55:07.032 \longrightarrow 00:55:09.160$ Bethesda system in particular.

NOTE Confidence: 0.638569063333333

 $00:55:09.160 \longrightarrow 00:55:11.640$ So again thank you Angelique for hosting me.

 $00:55:11.640 \longrightarrow 00:55:13.887$ Thank you all for being wonderful audience.

NOTE Confidence: 0.82481728

00:55:20.710 --> 00:55:28.030 Yes, please. Problem. Quite often.

NOTE Confidence: 0.82481728

 $00:55:28.030 \longrightarrow 00:55:29.450$ Technically adequate.

NOTE Confidence: 0.82481728

 $00:55:29.450 \longrightarrow 00:55:31.750$ But they don't have enough colloid.

NOTE Confidence: 0.37832573

00:55:34.140 --> 00:55:38.738 Line. Question. But so you're

NOTE Confidence: 0.37832573

 $00:55:38.738 \longrightarrow 00:55:40.530$ struggling, you don't have microphone.

NOTE Confidence: 0.126658054

00:55:44.000 --> 00:55:45.130 Stop drinking.

NOTE Confidence: 0.6713428

00:55:48.080 --> 00:55:49.510 Or you. NOTE Confidence: 0.834512135555556

 $00:55:50.860 \longrightarrow 00:55:52.290$ It's a good question and

NOTE Confidence: 0.83451213555556

 $00:55:52.290 \longrightarrow 00:55:53.434$ answer is very simple.

NOTE Confidence: 0.83451213555556

00:55:53.440 --> 00:55:54.760 If you have enough cells,

NOTE Confidence: 0.83451213555556

00:55:54.760 --> 00:55:57.100 that sample is not non diagnostic,

NOTE Confidence: 0.83451213555556

 $00{:}55{:}57.100 \dashrightarrow 00{:}55{:}59.740$ it's diagnostics and it becomes

NOTE Confidence: 0.83451213555556

 $00:55:59.740 \longrightarrow 00:56:01.852$ an issue of interpretation.

NOTE Confidence: 0.83451213555556

 $00:56:01.860 \longrightarrow 00:56:04.282$ I sign out thyroid nodules benign all

 $00:56:04.282 \longrightarrow 00:56:07.220$ the time even without seeing any colloid.

NOTE Confidence: 0.83451213555556

 $00:56:07.220 \longrightarrow 00:56:08.075$ If the cellularity,

NOTE Confidence: 0.83451213555556

 $00:56:08.075 \longrightarrow 00:56:09.500$ even with the high cellularity,

NOTE Confidence: 0.83451213555556

 $00:56:09.500 \longrightarrow 00:56:10.500$ if the cells look benign,

NOTE Confidence: 0.83451213555556

 $00:56:10.500 \longrightarrow 00:56:12.936$ it's a benign diagnosis if there

NOTE Confidence: 0.83451213555556

 $00:56:12.936 \longrightarrow 00:56:14.560$ is lymphoid proliferation in

NOTE Confidence: 0.83451213555556

 $00:56:14.628 \longrightarrow 00:56:16.228$ the background even without.

NOTE Confidence: 0.83451213555556

 $00.56:16.228 \longrightarrow 00:56:18.566$ And if little cells I call it

NOTE Confidence: 0.834512135555556

00:56:18.566 --> 00:56:20.744 benign for hachimura you don't have

NOTE Confidence: 0.83451213555556

 $00:56:20.744 \longrightarrow 00:56:22.990$ to have sex with flicker cells,

NOTE Confidence: 0.83451213555556

 $00:56:22.990 \longrightarrow 00:56:24.817$ one or two groups or even without

NOTE Confidence: 0.83451213555556

 $00:56:24.817 \longrightarrow 00:56:26.878$ it seeing any flicker cell as long

NOTE Confidence: 0.83451213555556

 $00:56:26.878 \longrightarrow 00:56:28.708$ as this logical evidence or you're

NOTE Confidence: 0.834512135555556

 $00{:}56{:}28.771 \dashrightarrow 00{:}56{:}30.547$ seeing good lymphoid population.

NOTE Confidence: 0.83451213555556

 $00:56:30.550 \longrightarrow 00:56:33.301$ So again answer is simple that if

NOTE Confidence: 0.83451213555556

 $00:56:33.301 \longrightarrow 00:56:35.391$ you have follicular cells present

00:56:35.391 --> 00:56:38.296 in a sample it's not non diagnostic

NOTE Confidence: 0.83451213555556

 $00:56:38.296 \longrightarrow 00:56:40.574$ unless there is a compromising

NOTE Confidence: 0.83451213555556

00:56:40.574 --> 00:56:43.244 factors such as air drying artifact,

NOTE Confidence: 0.83451213555556

00:56:43.250 --> 00:56:44.474 excessively obscuring blood,

NOTE Confidence: 0.83451213555556

 $00:56:44.474 \longrightarrow 00:56:46.370$ so on and so forth.

NOTE Confidence: 0.892398928

 $00:56:49.670 \longrightarrow 00:56:50.650$ Yeah. Thank you for that.

NOTE Confidence: 0.892398928

 $00.56:50.650 \longrightarrow 00:56:54.290$ Excellent. One area that.

NOTE Confidence: 0.70404685

 $00:56:57.310 \longrightarrow 00:57:00.800$ I think. It's when.

NOTE Confidence: 0.8301585

 $00:57:04.260 \longrightarrow 00:57:04.450$ Yeah.

NOTE Confidence: 0.619424

 $00:57:09.010 \longrightarrow 00:57:15.670$ Maybe the song? Michael Pages for people.

NOTE Confidence: 0.619424

00:57:15.670 --> 00:57:16.486 You know, but then you know,

NOTE Confidence: 0.619424

 $00:57:16.490 \longrightarrow 00:57:19.558$ sometimes you just have exclusively

NOTE Confidence: 0.619424

 $00{:}57{:}19.560 \dashrightarrow 00{:}57{:}22.900$ about yourselves and you can see.

NOTE Confidence: 0.619424

 $00:57:22.900 \longrightarrow 00:57:25.918$ Especially appropriate for that particular.

NOTE Confidence: 0.819346005

 $00:57:26.590 \longrightarrow 00:57:27.655$ So good question.

 $00:57:27.655 \longrightarrow 00:57:29.430$ Thank you for asking that.

NOTE Confidence: 0.819346005

00:57:29.430 --> 00:57:32.570 It always remains.

NOTE Confidence: 0.819346005

00:57:32.570 --> 00:57:35.986 An issue where to draw the line between

NOTE Confidence: 0.819346005

 $00:57:35.990 \longrightarrow 00:57:39.620$ oncocytic hyperplasia a US oncocytic

NOTE Confidence: 0.819346005

00:57:39.620 --> 00:57:43.720 type or oncocytic neoplasm and so,

NOTE Confidence: 0.819346005

 $00:57:43.720 \longrightarrow 00:57:46.200$ so answer would be that if

NOTE Confidence: 0.819346005

 $00:57:46.200 \longrightarrow 00:57:48.210$ you have adequate number of.

NOTE Confidence: 0.819346005

00:57:48.210 --> 00:57:50.988 Are on cassettes.

NOTE Confidence: 0.819346005

 $00:57:50.990 \longrightarrow 00:57:54.226$ It is not a US unless there

NOTE Confidence: 0.819346005

 $00{:}57{:}54.226 \dashrightarrow 00{:}57{:}55.570$ are other factors involved.

NOTE Confidence: 0.819346005

00:57:55.570 --> 00:57:57.684 So if you have oncocytic only with

NOTE Confidence: 0.819346005

 $00:57:57.684 \longrightarrow 00:57:59.715$ lot of color in the background

NOTE Confidence: 0.819346005

 $00:57:59.715 \longrightarrow 00:58:01.480$ even without seeing any usual

NOTE Confidence: 0.819346005

 $00.58:01.480 \longrightarrow 00.58:03.349$ type of follicular cells,

NOTE Confidence: 0.819346005

 $00:58:03.350 \longrightarrow 00:58:06.024$ I will lean heavily towards a benign

NOTE Confidence: 0.819346005

 $00:58:06.024 \dashrightarrow 00:58:08.102$ diagnosis because I would know

 $00{:}58{:}08.102 \dashrightarrow 00{:}58{:}10.247$ that Oncocyte don't make colored,

NOTE Confidence: 0.819346005

 $00:58:10.250 \longrightarrow 00:58:11.537$ they're defective metaplastic

NOTE Confidence: 0.819346005

00:58:11.537 --> 00:58:13.682 forms of particular cells of

NOTE Confidence: 0.819346005

00:58:13.682 --> 00:58:15.521 cellular colloid is coming from

NOTE Confidence: 0.819346005

 $00:58:15.521 \longrightarrow 00:58:17.369$ somewhere where we don't not seeing

NOTE Confidence: 0.819346005

 $00:58:17.369 \longrightarrow 00:58:19.228$ the usual form of liquor self.

NOTE Confidence: 0.819346005

 $00:58:19.230 \longrightarrow 00:58:21.770$ So colloid and Oncocyte is.

NOTE Confidence: 0.819346005

 $00{:}58{:}21.770 \dashrightarrow 00{:}58{:}24.344$ Is a very reassuring mixture and

NOTE Confidence: 0.819346005

 $00:58:24.344 \longrightarrow 00:58:27.472$ I would go behind the the cases

NOTE Confidence: 0.819346005

 $00{:}58{:}27.472 \dashrightarrow 00{:}58{:}30.524$ where I call something a US based

NOTE Confidence: 0.819346005

 $00{:}58{:}30.524 \dashrightarrow 00{:}58{:}32.664$ on cocytic subtype is all Oncocyte

NOTE Confidence: 0.819346005

 $00:58:32.664 \longrightarrow 00:58:36.229$ in a very sparsely cellular sample.

NOTE Confidence: 0.819346005

 $00{:}58{:}36.230 \dashrightarrow 00{:}58{:}41.405$ Or if I see a lot of wrong quest sites.

NOTE Confidence: 0.819346005

00:58:41.410 --> 00:58:42.318 But the,

NOTE Confidence: 0.81934600500:58:42.318 --> 00:58:42.772 the,

 $00:58:42.772 \longrightarrow 00:58:45.042$ the clinical impression is Hashimoto

NOTE Confidence: 0.819346005

 $00{:}58{:}45.042 \dashrightarrow 00{:}58{:}47.507$ thy roiditis and I don't want to go

NOTE Confidence: 0.819346005

00:58:47.507 --> 00:58:49.680 all the way to oncocytic neoplasm,

NOTE Confidence: 0.819346005

 $00:58:49.680 \longrightarrow 00:58:53.145$ then I would go AUS on cosec.

NOTE Confidence: 0.88500132

00:58:55.620 --> 00:58:57.811 But again, it's it's a little bit

NOTE Confidence: 0.88500132

00:58:57.811 --> 00:58:59.660 of subjectivity is involved here,

NOTE Confidence: 0.88500132

 $00:58:59.660 \longrightarrow 00:59:01.660$ and the one advice I could give you

NOTE Confidence: 0.88500132

 $00:59:01.660 \longrightarrow 00:59:04.112$ is to do molecular testing with the

NOTE Confidence: 0.88500132

 $00{:}59{:}04.112 \dashrightarrow 00{:}59{:}06.002$ understanding that it comes back

NOTE Confidence: 0.88500132

 $00{:}59{:}06.066 \dashrightarrow 00{:}59{:}08.136$ with a higher percentage of cases,

NOTE Confidence: 0.88500132

 $00:59:08.140 \longrightarrow 00:59:09.013$ suspicious or positive.

NOTE Confidence: 0.88500132

 $00:59:09.013 \longrightarrow 00:59:10.468$ So you have to be

NOTE Confidence: 0.9836472

 $00:59:10.480 \longrightarrow 00:59:13.430$ careful with that. So.

NOTE Confidence: 0.54975593

00:59:16.170 --> 00:59:16.510 Off.

NOTE Confidence: 0.2801788

00:59:26.640 --> 00:59:27.130 Select.

NOTE Confidence: 0.594842652857143

 $00:59:33.680 \longrightarrow 00:59:37.866$ For the management based on the subject.

 $00:59:37.870 \longrightarrow 00:59:41.149$ Because sometimes those.

NOTE Confidence: 0.594842652857143

 $00:59:41.150 \longrightarrow 00:59:43.120$ Very in the nose part.

NOTE Confidence: 0.66312395

00:59:47.690 --> 00:59:48.380 We know. NOTE Confidence: 0.740087842727273

00:59:56.090 --> 00:59:57.490 So grouping, excellent question.

NOTE Confidence: 0.740087842727273

 $00:59:57.490 \longrightarrow 01:00:00.190$ So that's why we wanted to simplify.

NOTE Confidence: 0.740087842727273

 $01:00:00.190 \longrightarrow 01:00:03.361$ So we don't recommend to the clinicians

NOTE Confidence: 0.740087842727273

01:00:03.361 --> 01:00:06.946 how to manage the US it's their choice.

NOTE Confidence: 0.740087842727273

 $01:00:06.950 \longrightarrow 01:00:09.710$ They know more about clinical history,

NOTE Confidence: 0.740087842727273

01:00:09.710 --> 01:00:11.198 clinical palpation findings

NOTE Confidence: 0.740087842727273

 $01:00:11.198 \longrightarrow 01:00:12.686$ or imaging findings.

NOTE Confidence: 0.740087842727273

 $01:00:12.690 \longrightarrow 01:00:15.804$ All we do is we report what we see.

NOTE Confidence: 0.740087842727273

 $01:00:15.810 \longrightarrow 01:00:17.844$ So previously they used to get

NOTE Confidence: 0.740087842727273

 $01:00:17.844 \dashrightarrow 01:00:19.875$ very confused where we would say

NOTE Confidence: 0.740087842727273

01:00:19.875 --> 01:00:21.982 AUS where some of our bodies AUS

NOTE Confidence: 0.740087842727273

 $01:00:21.982 \longrightarrow 01:00:23.889$ rare internuclear inclusions.

 $01:00:23.890 \longrightarrow 01:00:25.234$ And by the way,

NOTE Confidence: 0.740087842727273

 $01{:}00{:}25.234 \dashrightarrow 01{:}00{:}27.250$ the worst diagnosis you can give

NOTE Confidence: 0.740087842727273

 $01:00:27.329 \longrightarrow 01:00:30.472$ to a clinician is AUS with rare

NOTE Confidence: 0.740087842727273

 $01:00:30.472 \longrightarrow 01:00:31.819$ internuclear inclusions because.

NOTE Confidence: 0.740087842727273

 $01:00:31.820 \longrightarrow 01:00:33.985$ They are taught internuclear inclusion

NOTE Confidence: 0.740087842727273

 $01{:}00{:}33.985 \to 01{:}00{:}35.717$ equals papillary thyroid carcinoma.

NOTE Confidence: 0.740087842727273

 $01:00:35.720 \longrightarrow 01:00:37.616$ So we should never do that.

NOTE Confidence: 0.740087842727273

 $01:00:37.620 \longrightarrow 01:00:40.105$ And these were the reasons that we

NOTE Confidence: 0.740087842727273

 $01:00:40.105 \longrightarrow 01:00:42.446$ wanted to tell our clinical colleagues

NOTE Confidence: 0.740087842727273

01:00:42.446 --> 01:00:45.239 that AUS is not a very complex,

NOTE Confidence: 0.740087842727273

01:00:45.240 --> 01:00:47.920 subjectively interpreted diagnostic category,

NOTE Confidence: 0.740087842727273

 $01:00:47.920 \longrightarrow 01:00:52.780$ that it could be very well defined.

NOTE Confidence: 0.740087842727273

 $01:00:52.780 \longrightarrow 01:00:56.330$ So nuclear is when you see nuclear, Ethiopia.

NOTE Confidence: 0.740087842727273

01:00:56.330 --> 01:00:58.880 Features of papillary but very

NOTE Confidence: 0.740087842727273

01:00:58.880 --> 01:01:01.370 folky present and everything else,

NOTE Confidence: 0.740087842727273

01:01:01.370 --> 01:01:03.245 including on Pacific suspending everything

01:01:03.245 --> 01:01:05.700 you will call other if you like.

NOTE Confidence: 0.740087842727273

 $01{:}01{:}05.700 \dashrightarrow 01{:}01{:}08.556$ You can still put a descriptive

NOTE Confidence: 0.740087842727273

 $01:01:08.560 \longrightarrow 01:01:11.896$ diagnosis as a second line note.

NOTE Confidence: 0.740087842727273

01:01:11.900 --> 01:01:15.868 So your other question that you have was.

NOTE Confidence: 0.740087842727273

 $01:01:15.870 \longrightarrow 01:01:19.368$ How to manage more conservatively or

NOTE Confidence: 0.740087842727273

 $01:01:19.368 \longrightarrow 01:01:22.792$ lobectomy or otherwise it's a decision

NOTE Confidence: 0.740087842727273

 $01:01:22.792 \longrightarrow 01:01:25.768$ which is based on their discussion

NOTE Confidence: 0.740087842727273

 $01{:}01{:}25.768 \dashrightarrow 01{:}01{:}28.590$ and but the reason I showed that

NOTE Confidence: 0.740087842727273

 $01:01:28.590 \longrightarrow 01:01:30.779$ slide where I wrote that now sometimes

NOTE Confidence: 0.740087842727273

01:01:30.779 --> 01:01:32.963 it simply follow up and they don't

NOTE Confidence: 0.740087842727273

 $01:01:32.963 \longrightarrow 01:01:35.250$ do anything that we have seen that

NOTE Confidence: 0.740087842727273

 $01:01:35.250 \longrightarrow 01:01:38.026$ they have started to realize that.

NOTE Confidence: 0.740087842727273

01:01:38.026 --> 01:01:42.996 If there's an AUS based on other

NOTE Confidence: 0.740087842727273

01:01:42.996 --> 01:01:44.900 reasons than nuclear tipiya,

NOTE Confidence: 0.740087842727273

01:01:44.900 --> 01:01:47.910 these patients will have a very low

 $01:01:47.910 \longrightarrow 01:01:50.640$ probability of having a malignant tumor.

NOTE Confidence: 0.740087842727273

 $01:01:50.640 \longrightarrow 01:01:54.504$ Has also shown by pharma testing that

NOTE Confidence: 0.740087842727273

 $01:01:54.504 \longrightarrow 01:01:57.708$ almost 80% of them turn out to be behind.

NOTE Confidence: 0.845681898

 $01:01:59.880 \longrightarrow 01:02:01.700$ Does that answer your question? Yeah, yeah.

NOTE Confidence: 0.473067496666667

 $01:02:05.300 \longrightarrow 01:02:07.160$ You have dialysis.

NOTE Confidence: 0.9088036

01:02:12.930 --> 01:02:16.858 Yeah, exactly. So ADA guidelines are

NOTE Confidence: 0.9088036

 $01:02:16.858 \longrightarrow 01:02:19.950$ actually built on the tester system

NOTE Confidence: 0.927660743333333

 $01:02:19.950 \dashrightarrow 01:02:22.248$ which is which is wonderful news.

NOTE Confidence: 0.927660743333333

 $01:02:22.250 \longrightarrow 01:02:28.118$ And even now the 2022 I have seen a

NOTE Confidence: 0.927660743333333

 $01:02:28.118 \longrightarrow 01:02:31.985$ little bit of draft form and again

NOTE Confidence: 0.927660743333333

 $01{:}02{:}31.985 \dashrightarrow 01{:}02{:}35.820$ it's based on what we are suggesting

NOTE Confidence: 0.927660743333333

 $01{:}02{:}35.820 \dashrightarrow 01{:}02{:}40.174$ in the in the forthcoming edition so.

NOTE Confidence: 0.927660743333333

 $01:02:40.180 \longrightarrow 01:02:43.008$ Which is great because we can very

NOTE Confidence: 0.927660743333333

01:02:43.008 --> 01:02:46.216 easily talk to each other using those

NOTE Confidence: 0.927660743333333

01:02:46.216 --> 01:02:49.084 potesta categories and know how the

NOTE Confidence: 0.927660743333333

 $01:02:49.171 \longrightarrow 01:02:52.135$ patient would be treated or managed.

 $01:02:52.140 \longrightarrow 01:02:56.050$ So let me just ask one more question, sure.

NOTE Confidence: 0.927660743333333

 $01:02:56.050 \longrightarrow 01:03:00.880$ Suspicious. That's great.

NOTE Confidence: 0.927660743333333

 $01:03:00.880 \longrightarrow 01:03:03.360$ Image means us.

NOTE Confidence: 0.618294834

01:03:06.100 --> 01:03:08.980 So they probably like Siri.

NOTE Confidence: 0.618294834

 $01:03:08.980 \longrightarrow 01:03:11.940$ And when you call those suspicious

NOTE Confidence: 0.618294834

 $01:03:11.940 \longrightarrow 01:03:13.515$ people, at the end of the day,

NOTE Confidence: 0.618294834

01:03:13.520 --> 01:03:16.586 you know the risk of malignancy

NOTE Confidence: 0.618294834

 $01:03:16.586 \longrightarrow 01:03:18.300$ suspicious actually approaches 100%.

NOTE Confidence: 0.618294834

 $01:03:18.300 \longrightarrow 01:03:19.767$ So at the end of the day for when?

NOTE Confidence: 0.79562023

01:03:25.630 --> 01:03:26.290 So that's NOTE Confidence: 0.656567586666667

 $01:03:27.620 \longrightarrow 01:03:30.866$ so 75% and Hopkins is 80%.

NOTE Confidence: 0.656567586666667

 $01:03:30.870 \longrightarrow 01:03:33.558$ Now I think in the new edition,

NOTE Confidence: 0.656567586666667

 $01:03:33.560 \longrightarrow 01:03:35.244$ a lot of people.

NOTE Confidence: 0.656567586666667

01:03:35.244 --> 01:03:37.349 We'll do the total thyroidectomy,

NOTE Confidence: 0.656567586666667

01:03:37.350 --> 01:03:39.162 but if I would,

 $01:03:39.162 \longrightarrow 01:03:40.974$ I'm calling something suspicious

NOTE Confidence: 0.656567586666667

 $01:03:40.974 \longrightarrow 01:03:43.255$ for proprietary carcinoma and I've

NOTE Confidence: 0.656567586666667

 $01:03:43.255 \longrightarrow 01:03:45.415$ convinced myself the the features

NOTE Confidence: 0.656567586666667

 $01{:}03{:}45.415 \dashrightarrow 01{:}03{:}47.969$ are more than what I would see in

NOTE Confidence: 0.656567586666667

 $01:03:47.969 \longrightarrow 01:03:50.765$ a nifty and I don't want to call it

NOTE Confidence: 0.656567586666667

01:03:50.765 --> 01:03:53.470 flicker neoplasm only I put a statement

NOTE Confidence: 0.656567586666667

 $01:03:53.470 \longrightarrow 01:03:55.770$ recommendation for the first time.

NOTE Confidence: 0.656567586666667

 $01:03:55.770 \longrightarrow 01:03:59.250$ I tell people to put us a statement

NOTE Confidence: 0.656567586666667

01:03:59.250 --> 01:04:02.010 do lobectomy or consider lobectomy

NOTE Confidence: 0.656567586666667

 $01:04:02.010 \longrightarrow 01:04:04.098$ or whatever because although

NOTE Confidence: 0.656567586666667

 $01{:}04{:}04.098 \dashrightarrow 01{:}04{:}05.430$ the official recommendation.

NOTE Confidence: 0.656567586666667

 $01:04:05.430 \longrightarrow 01:04:07.481$ This in the back we most surgeons

NOTE Confidence: 0.656567586666667

 $01:04:07.481 \longrightarrow 01:04:09.383$ they should go back with a

NOTE Confidence: 0.656567586666667

 $01:04:09.383 \longrightarrow 01:04:11.124$ centerfire 80% risk of agency

NOTE Confidence: 0.656567586666667

01:04:11.124 --> 01:04:13.700 and do as a second procedure of

NOTE Confidence: 0.656567586666667

 $01:04:13.780 \longrightarrow 01:04:16.260$ completing the higher directly.

 $01:04:16.260 \longrightarrow 01:04:18.800$ So they will do it if it's

NOTE Confidence: 0.656567586666667

01:04:18.800 --> 01:04:20.240 not a papillary carcinoma,

NOTE Confidence: 0.656567586666667

 $01:04:20.240 \longrightarrow 01:04:23.285$ the poor patient is way over treated.

NOTE Confidence: 0.656567586666667

 $01:04:23.290 \longrightarrow 01:04:25.234$ Are also people have asked me

NOTE Confidence: 0.656567586666667

 $01:04:25.234 \longrightarrow 01:04:27.626$ this question why do we even have

NOTE Confidence: 0.656567586666667

 $01:04:27.626 \longrightarrow 01:04:28.998$ the suspicious category when

NOTE Confidence: 0.656567586666667

01:04:28.998 --> 01:04:31.328 the risk of malignancy so high?

NOTE Confidence: 0.656567586666667

 $01:04:31.330 \longrightarrow 01:04:33.020$ And answer is very simple,

NOTE Confidence: 0.656567586666667

 $01:04:33.020 \longrightarrow 01:04:36.276$ we want to give the category of malignant

NOTE Confidence: 0.656567586666667

 $01:04:36.276 \longrightarrow 01:04:40.070$ a very high specificity approaching 100%.

NOTE Confidence: 0.656567586666667

01:04:40.070 --> 01:04:42.434 That's why we have suspicious or

NOTE Confidence: 0.656567586666667

 $01:04:42.434 \longrightarrow 01:04:44.729$ popularity or suspicious category in general.

NOTE Confidence: 0.656567586666667

 $01:04:44.730 \longrightarrow 01:04:47.346$ If we take it out then the accuracy

NOTE Confidence: 0.656567586666667

 $01:04:47.346 \longrightarrow 01:04:50.170$ or risk of malignancy of flat out

NOTE Confidence: 0.656567586666667

 $01:04:50.170 \longrightarrow 01:04:52.260$ malignant will drop down into

 $01:04:52.343 \longrightarrow 01:04:54.168$ lower 90s or even lower.

NOTE Confidence: 0.76026249

 $01:05:01.630 \longrightarrow 01:05:02.698$ That they have some.

NOTE Confidence: 0.540751211428572

 $01:05:09.330 \longrightarrow 01:05:11.339$ And the appointment category all give you.

NOTE Confidence: 0.730634881222222

 $01:05:16.780 \longrightarrow 01:05:18.540$ You mean the adenomatoid

NOTE Confidence: 0.730634881222222

 $01:05:18.540 \longrightarrow 01:05:21.620$ nodule case that I showed you?

NOTE Confidence: 0.730634881222222

 $01:05:21.620 \longrightarrow 01:05:23.775$ Yeah, so those cases would

NOTE Confidence: 0.730634881222222

 $01:05:23.775 \longrightarrow 01:05:25.930$ be extremely difficult not to

NOTE Confidence: 0.730634881222222

 $01:05:26.012 \longrightarrow 01:05:28.480$ call a US suspicious of PTC.

NOTE Confidence: 0.730634881222222

 $01:05:28.480 \longrightarrow 01:05:30.874$ The case which I shared in

NOTE Confidence: 0.730634881222222

 $01:05:30.874 \longrightarrow 01:05:32.470$ the morning unfortunately was

NOTE Confidence: 0.730634881222222

 $01{:}05{:}32.547 \dashrightarrow 01{:}05{:}34.827$ called suspicious for papillary.

NOTE Confidence: 0.730634881222222

01:05:34.830 --> 01:05:35.577 Which you guys,

NOTE Confidence: 0.730634881222222

 $01:05:35.577 \longrightarrow 01:05:37.320$ a lot of you guys thought was

NOTE Confidence: 0.730634881222222

 $01{:}05{:}37.377 \dashrightarrow 01{:}05{:}40.400$ suspicious for probably perfect, yeah.

NOTE Confidence: 0.76576672

01:05:41.960 --> 01:05:44.870 It's. Right. Thank you.

NOTE Confidence: 0.393035095333333

 $01:05:47.540 \longrightarrow 01:05:49.370$ So suspicious of February.

 $01:05:55.970 \longrightarrow 01:05:56.798$ Any institution that.

NOTE Confidence: 0.6605046

 $01:06:07.370 \longrightarrow 01:06:07.620$ Any.

NOTE Confidence: 0.772163927142857

 $01:06:13.160 \longrightarrow 01:06:15.068$ So difference is situtions

NOTE Confidence: 0.772163927142857

 $01:06:15.068 \longrightarrow 01:06:16.499$ handle it differently.

NOTE Confidence: 0.772163927142857

01:06:16.500 --> 01:06:20.174 So. At our institution,

NOTE Confidence: 0.772163927142857

 $01:06:20.174 \longrightarrow 01:06:24.110$ the trend is to do a a lobectomy.

NOTE Confidence: 0.772163927142857

 $01:06:24.110 \longrightarrow 01:06:26.650$ For suspicious of proprietary carcinoma.

NOTE Confidence: 0.772163927142857

 $01:06:26.650 \longrightarrow 01:06:29.827$ And if it turns turns out to be negative,

NOTE Confidence: 0.772163927142857

01:06:29.830 --> 01:06:32.366 we don't include it as a false positive.

NOTE Confidence: 0.772163927142857

 $01:06:32.370 \longrightarrow 01:06:34.730$ False negative.

NOTE Confidence: 0.772163927142857

 $01{:}06{:}34.730 \dashrightarrow 01{:}06{:}37.028$ Or false positive, whichever way you look at.

NOTE Confidence: 0.772163927142857

 $01:06:37.030 \longrightarrow 01:06:40.005$ Because when we calculate the false positive,

NOTE Confidence: 0.772163927142857

 $01{:}06{:}40.010 \dashrightarrow 01{:}06{:}43.766$ it's only flat out positive case.

NOTE Confidence: 0.772163927142857

 $01:06:43.770 \longrightarrow 01:06:45.990$ Some studies include both suspicious

NOTE Confidence: 0.772163927142857

01:06:45.990 --> 01:06:48.210 and and malignant when they

 $01:06:48.285 \longrightarrow 01:06:52.380$ calculate the false positive rate.

NOTE Confidence: 0.772163927142857

 $01{:}06{:}52.380 \dashrightarrow 01{:}06{:}54.966$ If you like definitely each case

NOTE Confidence: 0.772163927142857

 $01:06:54.966 \longrightarrow 01:06:57.260$ of suspicious or popular you

NOTE Confidence: 0.772163927142857

 $01:06:57.260 \longrightarrow 01:06:59.200$ can recommend I'll actually.

NOTE Confidence: 0.772163927142857

 $01:06:59.200 \longrightarrow 01:07:01.030$ We sit sometime in tumor boards

NOTE Confidence: 0.772163927142857

 $01:07:01.030 \longrightarrow 01:07:03.061$ and and they don't mind if if

NOTE Confidence: 0.772163927142857

 $01:07:03.061 \longrightarrow 01:07:04.811$ if you tell them that you feel

NOTE Confidence: 0.772163927142857

01:07:04.873 --> 01:07:07.218 uncomfortable having the patient a

NOTE Confidence: 0.772163927142857

 $01:07:07.218 \longrightarrow 01:07:09.094$ total thyroidectomy because you're

NOTE Confidence: 0.772163927142857

 $01:07:09.094 \longrightarrow 01:07:11.502$ calling something suspicious papillary.

NOTE Confidence: 0.77216392714285701:07:11.502 --> 01:07:12.790 But again, NOTE Confidence: 0.772163927142857

 $01:07:12.790 \longrightarrow 01:07:14.078$ say that these days,

NOTE Confidence: 0.772163927142857

01:07:14.078 --> 01:07:16.010 with the with the NIFTY being

NOTE Confidence: 0.772163927142857

01:07:16.077 --> 01:07:17.427 such a such an issue,

NOTE Confidence: 0.772163927142857

 $01:07:17.430 \longrightarrow 01:07:20.461$ it's best that your diagnosis is suspicious

NOTE Confidence: 0.772163927142857

 $01:07:20.461 \longrightarrow 01:07:23.749$ or popular should be very carefully selected.

 $01:07:23.750 \longrightarrow 01:07:27.728$ Either it's papillary or subtle features.

NOTE Confidence: 0.772163927142857

 $01:07:27.730 \longrightarrow 01:07:28.450$ Focal features.

NOTE Confidence: 0.772163927142857

 $01:07:28.450 \longrightarrow 01:07:30.610$ Think of little and your passion.

NOTE Confidence: 0.772163927142857

 $01:07:30.610 \longrightarrow 01:07:33.010$ You can certainly write for follicular

NOTE Confidence: 0.772163927142857

 $01:07:33.010 \longrightarrow 01:07:34.210$ neoplasm differential diagnosis

NOTE Confidence: 0.772163927142857

 $01:07:34.210 \longrightarrow 01:07:36.325$ include NFP or a floccular variant

NOTE Confidence: 0.772163927142857

01:07:36.325 --> 01:07:37.649 of papillary thyroid carcinoma.

NOTE Confidence: 0.772163927142857

 $01:07:37.650 \longrightarrow 01:07:39.996$ We do it all the time.

NOTE Confidence: 0.772163927142857

 $01:07:40.000 \longrightarrow 01:07:42.214$ And molecular tests help and again

NOTE Confidence: 0.772163927142857

 $01:07:42.214 \longrightarrow 01:07:44.762$ answer to your question a lot of

NOTE Confidence: 0.772163927142857

 $01:07:44.762 \longrightarrow 01:07:46.427$ times suspicious for papillary now

NOTE Confidence: 0.772163927142857

 $01:07:46.427 \longrightarrow 01:07:48.704$ get molecular testing pharma which

NOTE Confidence: 0.772163927142857

 $01{:}07{:}48.704 \dashrightarrow 01{:}07{:}51.134$ is based on negative predictive

NOTE Confidence: 0.772163927142857

 $01{:}07{:}51.134 \dashrightarrow 01{:}07{:}54.290$ value 96% also has a second layer

NOTE Confidence: 0.772163927142857

 $01:07:54.290 \longrightarrow 01:07:56.533$ of testing called expression Atlas

 $01:07:56.533 \longrightarrow 01:07:59.581$ which is based on a 200 plus very

NOTE Confidence: 0.772163927142857

 $01:07:59.581 \longrightarrow 01:08:01.925$ specific positive mutations of thyroid

NOTE Confidence: 0.772163927142857

01:08:01.925 --> 01:08:05.151 cancers and and they can pick up.

NOTE Confidence: 0.772163927142857

 $01:08:05.151 \longrightarrow 01:08:08.028$ So if you call something as PC.

NOTE Confidence: 0.772163927142857

 $01:08:08.030 \longrightarrow 01:08:11.429$ Pharma is suspicious.

NOTE Confidence: 0.772163927142857

01:08:11.430 --> 01:08:13.110 GSC suspicion, the GC,

NOTE Confidence: 0.772163927142857

01:08:13.110 --> 01:08:14.790 Quincy classifier or pharma.

NOTE Confidence: 0.772163927142857

01:08:14.790 --> 01:08:17.016 They will add an expression Atlas

NOTE Confidence: 0.772163927142857

 $01:08:17.016 \longrightarrow 01:08:19.538$ over that and it's expression Atlas

NOTE Confidence: 0.772163927142857

 $01:08:19.538 \longrightarrow 01:08:22.412$ is negative with all the specific

NOTE Confidence: 0.772163927142857

 $01{:}08{:}22.412 \dashrightarrow 01{:}08{:}24.060$ markers negative for papillary,

NOTE Confidence: 0.772163927142857

 $01:08:24.060 \longrightarrow 01:08:26.130$ other cancers they will not develop.

NOTE Confidence: 0.83016515

 $01:08:33.080 \longrightarrow 01:08:34.438$ Well, if there are no more questions,

NOTE Confidence: 0.83016515

 $01:08:34.440 \longrightarrow 01:08:35.976$ once again thank you so much.

NOTE Confidence: 0.83016515

 $01:08:35.980 \longrightarrow 01:08:37.597$ Have a great rest of the afternoon.

NOTE Confidence: 0.83016515

01:08:37.600 --> 01:08:39.298 I know it's a working day,

 $01:08:39.300 \longrightarrow 01:08:40.808$ so everyone is busy.