

Incidental Nodule Module Content

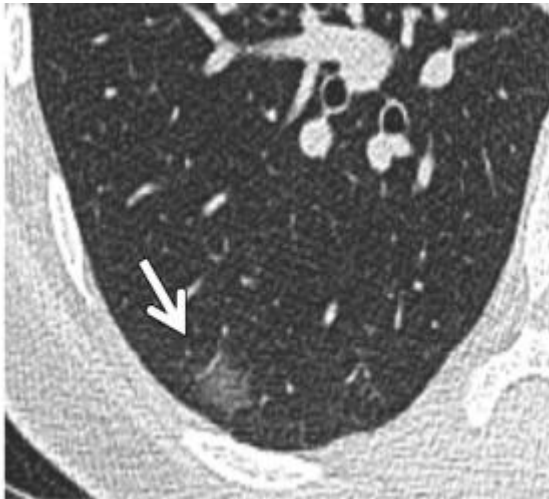
HIGHLIGHT QUESTION ANSWERS IN RED

RETURN VIA EMAIL TO AABIPforAPP@gmail.com ONCE COMPLETED BY JULY 31, 2022

Case Presentation

Mr. Smith is a 79-year-old Caucasian male with a history of COPD and 55-pack year smoking history and quit 5-years ago. He has a previous Hx of cancer. Mr. Smith presented to an emergency room with shortness of breath, productive cough and chest tightness. Cardiac work-up was negative. His O2 saturation was 84% on room air and underwent a PE protocol CT chest, which was negative for PE but revealed one “suspicious nodule” in the right upper lobe measuring 8mm. He completed treatment for an exacerbation of COPD with oral steroids, bronchodilators and antibiotics. You are consulted for recommendations regarding this nodule.

Nodule on CT:



Questions to consider:

1. How would you classify this nodule?
 - A) Single Solid
 - B) Single Sub-solid
 - C) Multiple solid
 - D) Multiple sub-solid

- 2) If you thought it was sub-solid, how would you further classify it:
- A) Ground-glass opacity
 - B) Part solid
 - C) Not applicable
- 3) What would be the next imaging follow-up recommendation based on Fleischer's recommendations?
- A) The patient does NOT need CT imaging follow-up
 - B) CT chest in 3-6 months
 - C) CT chest in 6-12 months
 - D) CT chest yearly for 5-years

Mr. Smith was lost to follow-up, but re-presented over 6-months later to his PCP for an annual exam. A CT chest was done for the nodule follow-up. The nodule is now read as "previous spiculated nodule is now larger measuring 20 x 16 mm with a 8mm solid component, as well as a new adjacent 3mm nodularity." He is referred to your clinic for evaluation and recommendations.

- 4) Now, how would you classify this nodule now?
- A) Single Solid
 - B) Single Sub-solid
 - C) Multiple solid
 - D) Multiple sub-solid
- 5) What would be the next imaging follow-up recommendation based on Fleischer's recommendations?
- A) The patient does NOT need CT imaging follow-up
 - B) CT chest in 3-6 months
 - C) CT chest in 6-12 months
 - D) CT chest yearly for 5-years
- 6) I use the Mayo Clinic calculator to stratify his risk for lung cancer. What is his probability for malignancy??

[Solitary Pulmonary Nodule \(SPN\) Malignancy Risk Score \(Mayo Clinic Model\) - MDCalc](#)

- A) 50.2%
 - B) 12%
 - C) 80.6%
 - D) 100%
- 7) Are you suspicious this is lung cancer?
- A) Yes
 - B) No

8) If you are suspicious this is lung cancer, would you biopsy the nodule?

A) Yes

B) No

C) I am not suspicious this is lung cancer

D) I would use a predictive model to assess risk for lung cancer first