Referral Algorithm: Goiter

Enlargement of thyroid (goiter) → Suspicion for thyroid mass/nodule?

YES → Check TSH, free T4 and thyroid peroxidase and thyroglobulin antibodies and order ultrasound → Abnormal ultrasound? **YES** → Refer to Otolaryngology

NO (from Suspicion) → Check TSH, free T4, thyroid peroxidase and thyroglobulin antibodies

Abnormal ultrasound? **NO** → Abnormal labs?

Abnormal labs? **NO** → Compressive symptoms? (Difficulty swallowing, shortness of breath, voice changes) **YES** → Refer to Otolaryngology

Compressive symptoms? **NO** → No referrals indicated, monitor

Abnormal labs? **YES** → Compressive symptoms? (Difficulty swallowing, shortness of breath, voice changes)

Compressive symptoms? **YES** → Refer to Otolaryngology and Endocrinology

Compressive symptoms? **NO** → Elevated TSH or low free T4? follow hypothyroidism algorithm / Normal TSH, normal free T4 and positive antibodies? Recheck TSH and free T4 in 3 months*
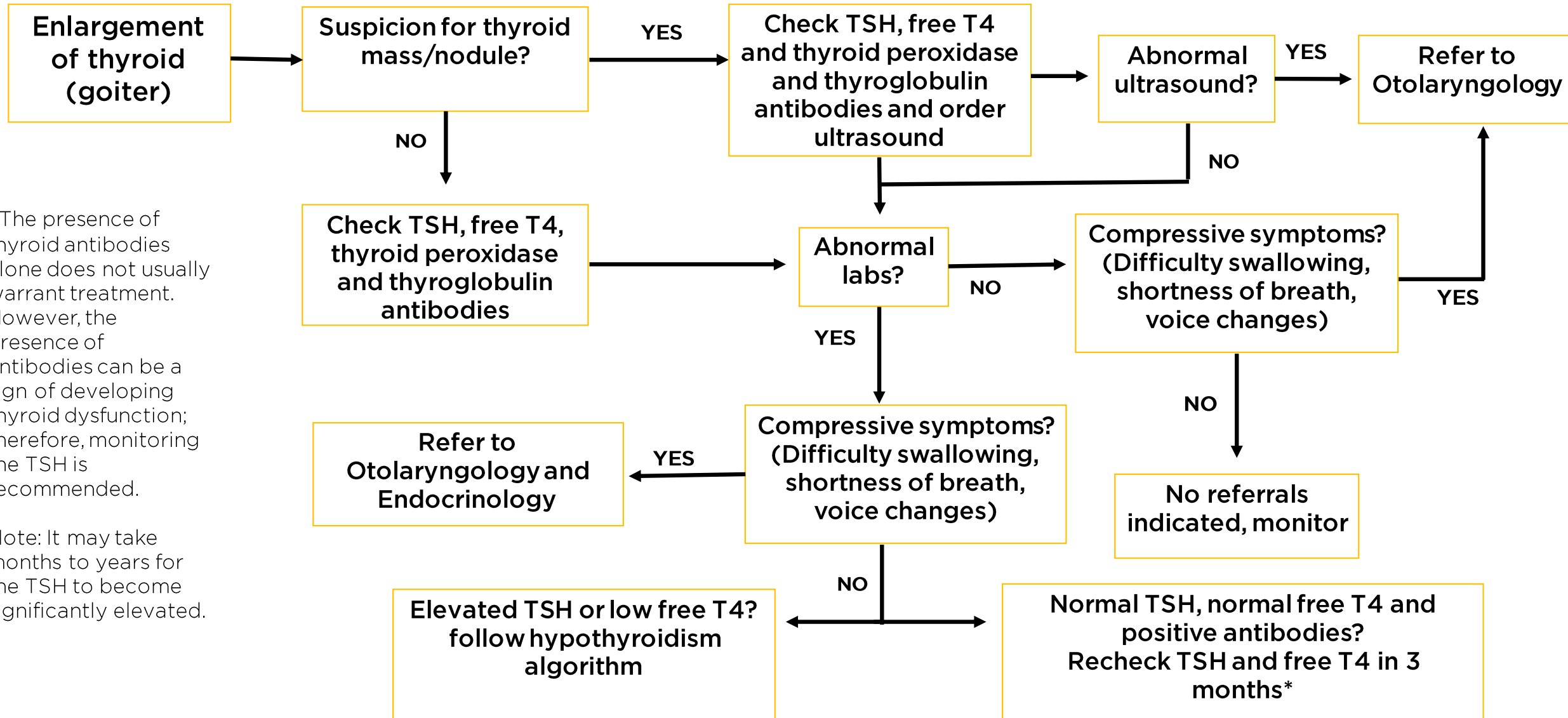
*The presence of thyroid antibodies alone does not usually warrant treatment. However, the presence of antibodies can be a sign of developing thyroid dysfunction; therefore, monitoring the TSH is recommended.

Note: It may take months to years for the TSH to become significantly elevated.