



Lung Nodules – The New Fleischner Society Guidelines

- Dr. Parang Sanghavi

Lung Nodules – The New Fleischner Society Guidelines

Lung nodule(s) are frequently incidentally encountered in a CT chest scan and the management is often a clinical dilemma. While it is important not to dismiss significant nodule(s), it is also important not to unnecessarily investigate and/ or treat clinically insignificant nodule(s). “Fleischner Society 2017” guidelines for management of such incidental nodule(s) is currently the standard practice(1).

This guidelines applies to all the incidental nodules, except in the following situations:

- 1) Patients younger than 35 years
- 2) Immunocompromised patients
- 3) Patients with cancer

Steps for Fleischner Society 2017 guideline:

- 1) Solid or subsolid (ground glass or part solid) nodule
- 2) Single or multiple nodule(s)
- 3) Size of the nodule (<6, 6-8, >8 mm) – average of long and short axes, rounded to the nearest mm
- 4) Low risk or high risk (Risk factors – Size, Morphology, Location, Multiplicity, Growth rate, Emphysema and Fibrosis, Age, Sex Race and Family history, Tobacco and other inhaled carcinogens)

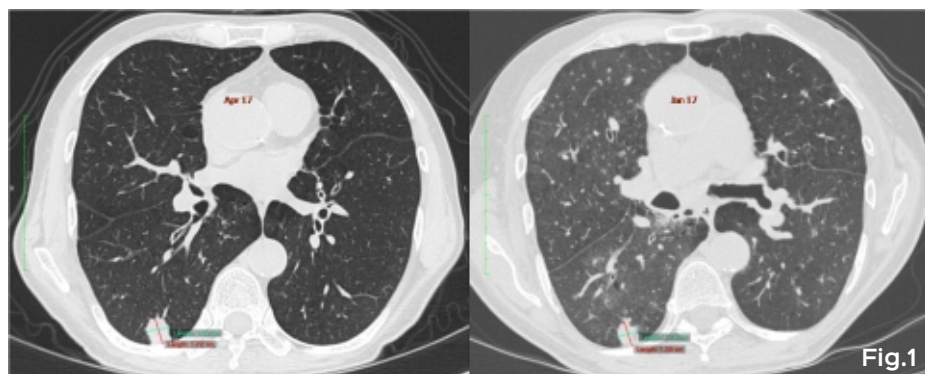


Fig 1: A single 14 mm sized nodule is seen in the superior segment of the right lower lobe. As per the guidelines, either a biopsy work-up or PET/CT or a follow up scan after 3 months would be appropriate. It was decided to follow-up the patient. The repeat study showed increase in the size of the nodule to 16 mm. A CT guided core biopsy was performed which showed adenocarcinoma.

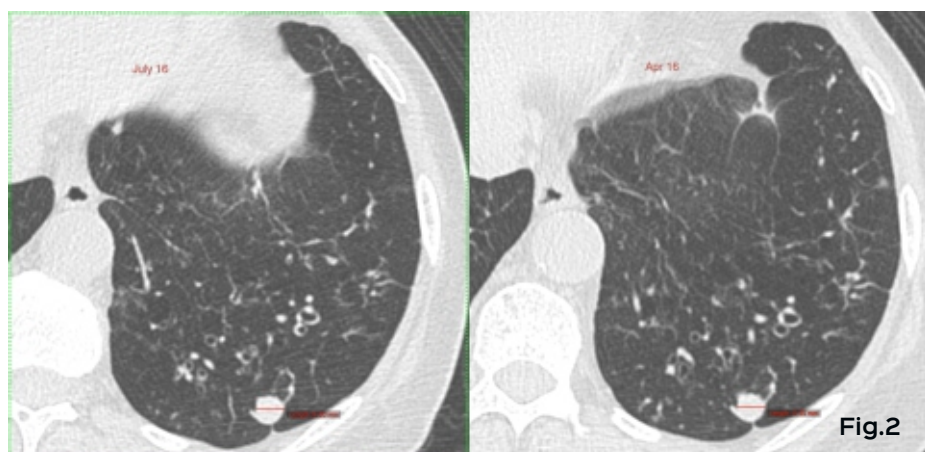


Fig 2: A single 9 mm sized nodule is seen in the left lower lobe. As per the guidelines, a follow up scan after 3 months was performed, which showed a stable nodule with no change in size, suggestive of a benign nodule. No further steps are necessary if the patient is low risk. In a high-risk patient, another follow-up study at 9-12 months is also appropriate.



At a glance:

•Incidental lung nodules are commonly encountered in CT scans and their management can be a clinical dilemma.

•The new 2017 Fleischner Society guidelines serve as a guide to managing these

•Based on the size and other characteristics, there are specific recommendations for management.

Based on these criteria, a specific recommendation is given for each category, such as follow up interval, PET/CT or tissue sampling.

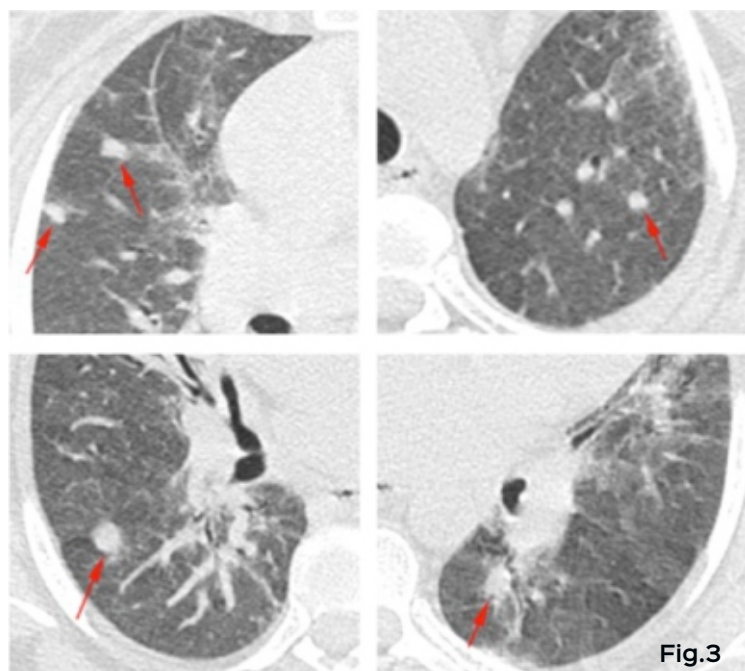


Fig 3: Multiple nodules are seen in both the lungs, ranging in size from 3 mm to 8 mm in diameter. As per the guidelines, a follow up scan after 3 to 6 months should be advised.

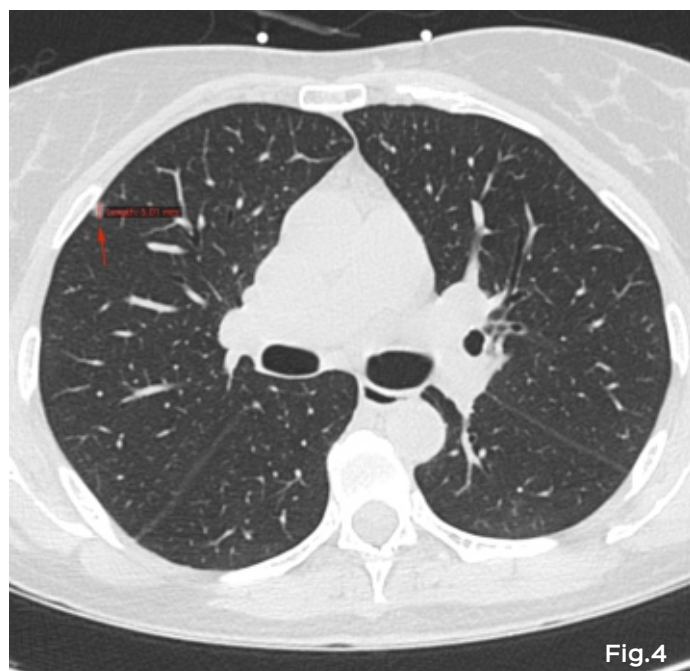


Fig 4: A single 5 mm diameter subsolid (ground glass attenuation) nodule is seen in the anterior segment of the right upper lobe. As per the guidelines, this is not significant and nothing further needs to be done.

Subscribe to INNER SPACES : info@jankharia.com

Online version : <http://picture-this.in/index.php/inner-spaces/>

Main Clinic

383 | Bhaveshwar Vihar | Sardar V. P. Road | Prarthana Samaj | Charni Road | Mumbai 400 004 | T: 022 66173333

Cardiac, Chest & Interventional Twin Beam CT

461 | Nishat Business Centre | Arya Bhavan | Sardar V. P. Road | Mumbai 400 004 | T: 022 2380 2172 | 022 2389 3551 / 2

PET / CT, Organ Optimized 3T MRI

Gr. Floor | Piramal Tower Annexe | G. K. Marg | Lower Parel | Mumbai 400 013 | T: 022 6617 4444

Owner, Printer & Publisher: Dr. Bhavin Jankharia

Published at: Dr. Jankharia's Imaging Centre

Bhaveshwar Vihar, 383, S.V.P. Road, Prarthana Samaj, Charni Road, Mumbai 400 004.