

# Children’s Hospital Of Wisconsin

## Co-Management Guidelines

To support collaborative care, we have developed guidelines for our community providers to utilize when referring to, and managing patients with, the pediatric specialists at Children’s Hospital of Wisconsin. These guidelines provide protocols for jointly managing patient cases between community providers and our pediatric specialists.

### MANAGEMENT OF PEDIATRIC THYROID NODULES

Workflow for patients with thyroid nodules through the CHW Interdisciplinary Thyroid Nodule Program

Diagnosis/symptom	Referring provider’s initial evaluation and management:	When to initiate referral/consider refer to Thyroid Nodule Program	What can referring provider send to Thyroid Nodule Program?	Specialist’s workup will likely include:
<p><b>Signs and symptoms</b></p> <ul style="list-style-type: none"> <li>- Palpable or incidentally identified thyroid nodule</li> </ul>	<p><b>Diagnosis and Treatment</b></p> <ul style="list-style-type: none"> <li>- Order TSH and T4 levels</li> <li>- Send to CHW radiology for ultrasound evaluation</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>- Contact Lisa Hinke RN, Pediatric Endocrinology, for referral to <b>Thyroid Nodule Group</b>/initial endocrinology visit at (414)-266-2860</li> </ul>	<ul style="list-style-type: none"> <li>- At the time thyroid nodule or diffuse abnormality of thyroid is identified</li> </ul>	<p><b>1. Using Epic</b></p> <ul style="list-style-type: none"> <li>• Please complete the external referral order</li> </ul> <p><b>In order to help triage our patients and maximize the visit, the following information would be helpful include with your referral order:</b></p> <ul style="list-style-type: none"> <li>• Urgency of the referral</li> <li>• What is the key question you would like answered?</li> </ul> <p>Note: Our office will call to schedule the appointment with the patient.</p> <p><b>2. Not using Epic external referral order:</b></p> <ul style="list-style-type: none"> <li>• In order to help triage our patients maximize the visit time, please <b>fax</b> the above information to <b>(414-607-5288)</b></li> <li>• It would also be helpful to include:           <ul style="list-style-type: none"> <li>• Chief complaint, onset, frequency</li> <li>• Recent progress notes</li> <li>• Labs and imaging results</li> <li>• Other Diagnoses</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>- Review of ultrasound/other imaging to determine need for additional imaging or biopsy</li> <li>- If nodule has suspicious ultrasonographic features, fine needle aspiration biopsy will be performed</li> </ul>

Updated by: Dr. Lauren Parsons  
 Updated on: 6/26/17



			<ul style="list-style-type: none"> <li>Office notes with medications tried/failed in the past and any lab work that may have been obtained regarding this patient's problems.</li> </ul>	
<p><b>Causes</b></p> <ul style="list-style-type: none"> <li>- Most thyroid nodules are benign (adenomas or hyperplasia)</li> <li>- Some may be cancerous: most often papillary thyroid carcinoma, less frequently follicular carcinoma or medullary carcinoma</li> </ul>				