

**Goiter, Thyroid Nodule/Cyst**

Dear referring Practitioner,

- Please print and complete this page then fax back with the completed referral.
- Please review the following checklist to ensure that all information is available for more efficient triaging and shorter wait times for your patient.
- Please send this completed application only once results for all required investigations are available. Referrals with pending results will not be triaged until all results are available.

**Consult endocrinology when (please check box(es) that applies to your patient):**

Palpable nodules, thyroid asymmetry, or thyroid nodule on ultrasound

**AND any one of the following:**

- Abnormal thyroid functions tests
- Lymphadenopathy
- Increasing in size
- Causing discomfort, dyspnea, dysphagia, or dysphonia

*Note: no need to refer for goiter and normal TSH and Free T4*

**Information/Investigations Required:**

- Thyroid ultrasound (only if definite palpable nodule) – please send ultrasound report and images on a CD with the patient
- TSH
- Free T4
- Anti-thyroid peroxidase antibody (TPO Ab)

**Triaging Urgency for Goiter, Thyroid Nodule/Cyst Appointments:**

**Non-urgent** –goiter: and abnormal TSH and/or Free T4:

**Semi-urgent**—nodule >1cm or any suspicious features (calcifications, increased vascularity, irregular margins)

We strive to meet the triaging times (below), but please note that times may vary in particular for non-urgent or elective referrals.

**Categories for Urgency:**

**Emergent-** *contact staff endocrinologist on call (905) 521-5030*

**Urgent** – within 7 days – *contact staff endocrinologist on call before sending referral (905) 521-5030*

**Semi-urgent**– 1 to 4 weeks

**Non-urgent** – 4-16weeks

**Elective** – Next available