

FLEISCHNER SOCIETY RECOMMENDATIONS FOR FOLLOW-UP OF SMALL LUNG NODULES DETECTED INCIDENTALLY ON CT (PATIENTS ≥ 35 YEARS OF AGE)

NODULE SIZE	LOW-RISK PATIENT	HIGH-RISK PATIENT
≤ 4 mm	No follow-up needed	CT at 12 months
		• If stable, no further
		follow-up
>4 2 6 mm	CT at 12 months	• Initial CT at 6-12 months
	 If stable, no further 	• If stable, repeat CT at
	follow-up	18-24 months
>6 2 8 mm	• Initial CT at 6-12 months	• Initial CT at 3-6 months
	• If stable, repeat CT at	• If stable, repeat CT at 9-
	18-24 months	12 months and 24 months
> 8 mm	• CT at 3, 9, and 24	• CT at 3, 9, and 24
	months	months
	 Consider PET or biopsy 	• Consider PET or biopsy

LOW RISK = minimal or absent history of smoking or other known risk factors.

HIGH RISK = history of smoking or other known risk factors.

KNOWN RISK FACTORS: history of lung cancer in first-degree relative; exposure to asbestos, radon, or uranium.

- NOTE: nonsolid, partially solid, or ground-glass nodules may require longer follow-up to exclude indolent adenocarcinoma
- NOTE: guidelines do NOT apply to the following groups:
 - known or suspected cancer outside of the lungs
 - patients younger than 35 years of age
 - patients with unexplained fever

SOURCE: MacMahon H, Austin JHM, Gamsu G, et al. Guidelines for management of small pulmonary nodules detected on CT scans: a statement from the Fleischner Society. *Radiology* 2005; 237: 395-400.