

ATA risk stratification system to estimate risk of persistent/recurrent disease

Low risk	Intermediate risk	High risk
Papillary thyroid cancer with all of the following present:	Any of the following present:	Any of the following present:
<ul style="list-style-type: none"> No local or distant metastases 	Microscopic invasion into the perithyroidal soft tissues	Macroscopic tumor invasion
<ul style="list-style-type: none"> All macroscopic tumor has been resected 	Cervical lymph node metastases or ¹³¹ I avid metastatic foci in the neck on the post-treatment scan done after thyroid remnant ablation	Incomplete tumor resection with gross residual disease
<ul style="list-style-type: none"> No invasion of locoregional tissues 	Tumor with aggressive histology or vascular invasion (aggressive histologies include tall cell, insular, columnar cell carcinoma, Hürthle cell carcinoma, follicular thyroid cancer, hobnail variant)	Distant metastases
<ul style="list-style-type: none"> Tumor does not have aggressive histology (aggressive histologies include tall cell, insular, columnar cell carcinoma, Hürthle cell carcinoma, follicular thyroid cancer, hobnail variant) 	Clinical N1 or >5 pathologic N1 with all involved lymph nodes <3 cm in largest dimension*	Postoperative serum thyroglobulin suggestive of distant metastases
<ul style="list-style-type: none"> No vascular invasion 	Multifocal papillary thyroid microcarcinoma with extrathyroidal extension and <i>BRAF</i> V600E mutated (if known)*	Pathologic N1 with any metastatic lymph node ≥3 cm in largest dimension*
<ul style="list-style-type: none"> No ¹³¹I uptake outside the thyroid bed on the post-treatment scan, if done 		Follicular thyroid cancer with extensive vascular invasion (>4 foci of vascular invasion)*
<ul style="list-style-type: none"> Clinical N0 or ≤5 pathologic N1 micrometastases (<0.2 cm in largest dimension)* 		
Intrathyroidal, encapsulated follicular variant of papillary thyroid cancer*		
Intrathyroidal, well-differentiated follicular thyroid cancer with capsular invasion and no or minimal (<4 foci) vascular invasion*		
Intrathyroidal, papillary microcarcinoma, unifocal or multifocal, including <i>BRAF</i> V600E mutated (if known)*		

ATA: American Thyroid Association; ¹³¹I: iodine-131.

* Proposed modifications, not present in the original 2009 initial risk stratification system.

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