



GE HealthCare

Reliability, productivity and image quality:

The role of Versana Premier in otolaryngology

Author: Jagdish K. Dhingra MBBS, ECNU, FRCS

Clinical case of Hashimoto thyroiditis

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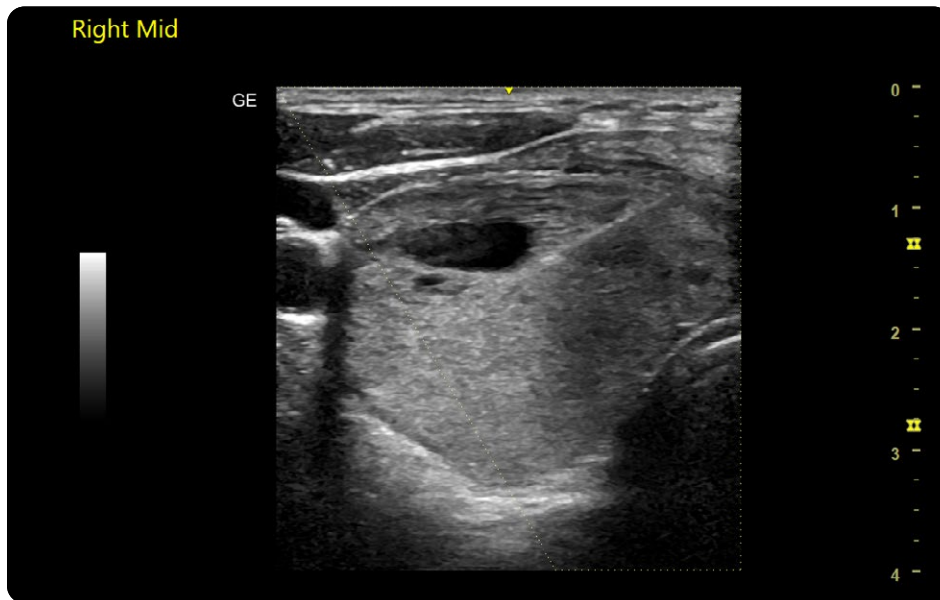
The following case was obtained by
Dr. Dhingra using a Versana Premier.™

Dr. Dhingra is a paid consultant for GE HealthCare and was compensated for participation in this case study. The statements by Dr. Dhingra described here are based on his own opinions and on results that were achieved in his unique setting. Since there is no "typical" hospital and many variables exist, i.e. hospital size, case mix, etc., there can be no guarantee that other customers will achieve the same results.



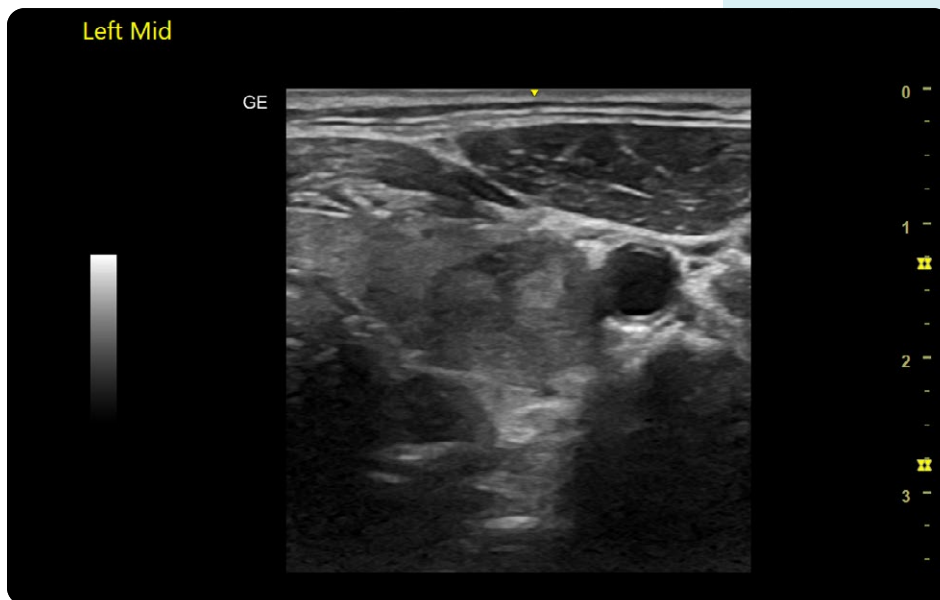
A case of Hashimoto thyroiditis

Clinical presentation



- 50-year-old female with history of hypothyroidism
- Longstanding history of thyroid nodules
- Ultrasound shows a right-sided, solid, isoechoic mass that is wider than tall with small areas of colloid nodules
- Left thyroid lobe revealed pseudonodules suggestive of Hashimoto thyroiditis. The diagnosis was confirmed on laboratory testing with elevated TPO antibodies

Key findings



Utilized feature: Ultrasound-guided fine needle aspiration was performed using Versana Premier Needle Guide Feature

Cytology results: Benign. Bethesda 2 with inflammatory cells in the background consistent with Hashimoto thyroiditis.

Key takeaway: Hashimoto thyroiditis is the most common autoimmune thyroid disorder. The immune system wrongly identifies thyroid cells as foreign and subsequently mounts an inflammatory response against them.

Diagnosis: Hashimoto thyroiditis

Conclusion

Ultrasound is an inexpensive, low-risk, and effective tool for evaluating thyroid and parotid lesions. Its accessibility and accuracy in predicting the nature of lesions compares favorably to that of more expensive and invasive cross-sectional imaging. Fine needle biopsies can be performed at the same visit, thus expediting care. These images taken on a Versana Premier suggest that ultrasound imaging in clinical settings can often be confidently used as an initial, and perhaps sole, imaging modality for thyroid and parotid masses.



Dr. Jagdish K Dhingra is an Otolaryngologist in Massachusetts with over 20 years of experience in the practice of otolaryngology head and neck surgery.

Dr. Dhingra did his initial training in India and the UK before moving to the US, where he did his residency training at Tufts Medical Center in Boston, Massachusetts before joining ENT specialists, Inc. in 2002.

For the last 10 years, he has focused his practice on diseases of the thyroid and parathyroid glands and has performed over 4,000 office-based ultrasound-guided thyroid procedures. He regularly teaches at courses sponsored by the American Head and Neck Society and American Academy of Otolaryngology – Head and Neck Surgery. He is also an associate professor at Tufts University School of Medicine.

Since 2005, Dr Dhingra has led 15 surgical missions to Rwanda, Africa and performed over 300 surgeries on patients with large goiters.

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