

Supplementary Table. Questions answered by the investigators for each nodule

1. Is the presented lesion a nodule? (Regardless of your choice here, please proceed with the evaluation.)
<input type="radio"/> Yes, it is
<input type="radio"/> No, it is not a nodule and I would not describe it as a nodule in my everyday practice
2. Comet-tail artifact
<input type="radio"/> Present
<input type="radio"/> Absent
<input type="radio"/> Uncertain
3. Figures in the back wall of cystic areas caused by posterior acoustic enhancement
<input type="radio"/> Present
<input type="radio"/> Absent
<input type="radio"/> Uncertain
4. Punctate echogenic foci (question based on ACR TI-RADS)
<input type="radio"/> Present
<input type="radio"/> Absent
<input type="radio"/> Uncertain but probably present
<input type="radio"/> Uncertain but probably absent
5. Unequivocal microcalcifications
<input type="radio"/> Present
<input type="radio"/> Absent
6. Hyperechogenic spots of uncertain origin
<input type="radio"/> Present
<input type="radio"/> Absent
7. Coarse calcification(s)
<input type="radio"/> Present
<input type="radio"/> Absent
<input type="radio"/> Uncertain
8. Central intranodular coarse calcification
<input type="radio"/> Present
<input type="radio"/> Absent
<input type="radio"/> Uncertain
9. Isolated macrocalcification occupying an entirely calcified nodule
<input type="radio"/> Present
<input type="radio"/> Absent
<input type="radio"/> Uncertain
10. Peripheral (rim) calcification(s)
<input type="radio"/> Present and disrupted with small extrusive soft tissue component
<input type="radio"/> Present and disrupted without small extrusive soft tissue component
<input type="radio"/> Present and not disrupted
<input type="radio"/> Absent
<input type="radio"/> Uncertain
11. Composition of the nodule
<input type="radio"/> Pure cyst
<input type="radio"/> Cystic or almost completely cystic
<input type="radio"/> Spongiform

<input type="radio"/> Mixed cystic and solid
<input type="radio"/> Solid or almost completely solid
<input type="radio"/> Cannot be determined because of calcification(s)
12. Is the nodule partially cystic?
<input type="radio"/> No
<input type="radio"/> Yes, and the solid part is eccentric
<input type="radio"/> Yes, and the solid part is not eccentric
13. Echogenicity
<input type="radio"/> Hyperechoic or isoechoic 7
<input type="radio"/> Mildly to moderately hypoechoic2
<input type="radio"/> Very hypoechoic2
<input type="radio"/> Anechoic2
<input type="radio"/> Cannot be determined1
14. Nodule margin
<input type="radio"/> Smooth
<input type="radio"/> Ill-defined
<input type="radio"/> Lobulated or irregular
<input type="radio"/> Cannot be determined
15. Extrathyroidal extension
<input type="radio"/> Present
<input type="radio"/> Absent
16. Based merely on nodule ultrasound characteristics, would you recommend aspiration cytology?
<input type="radio"/> Yes
<input type="radio"/> No
17. Considering both the nodule characteristics and the provided (often limited) patient data, would you recommend aspiration cytology?
<input type="radio"/> Yes
<input type="radio"/> No