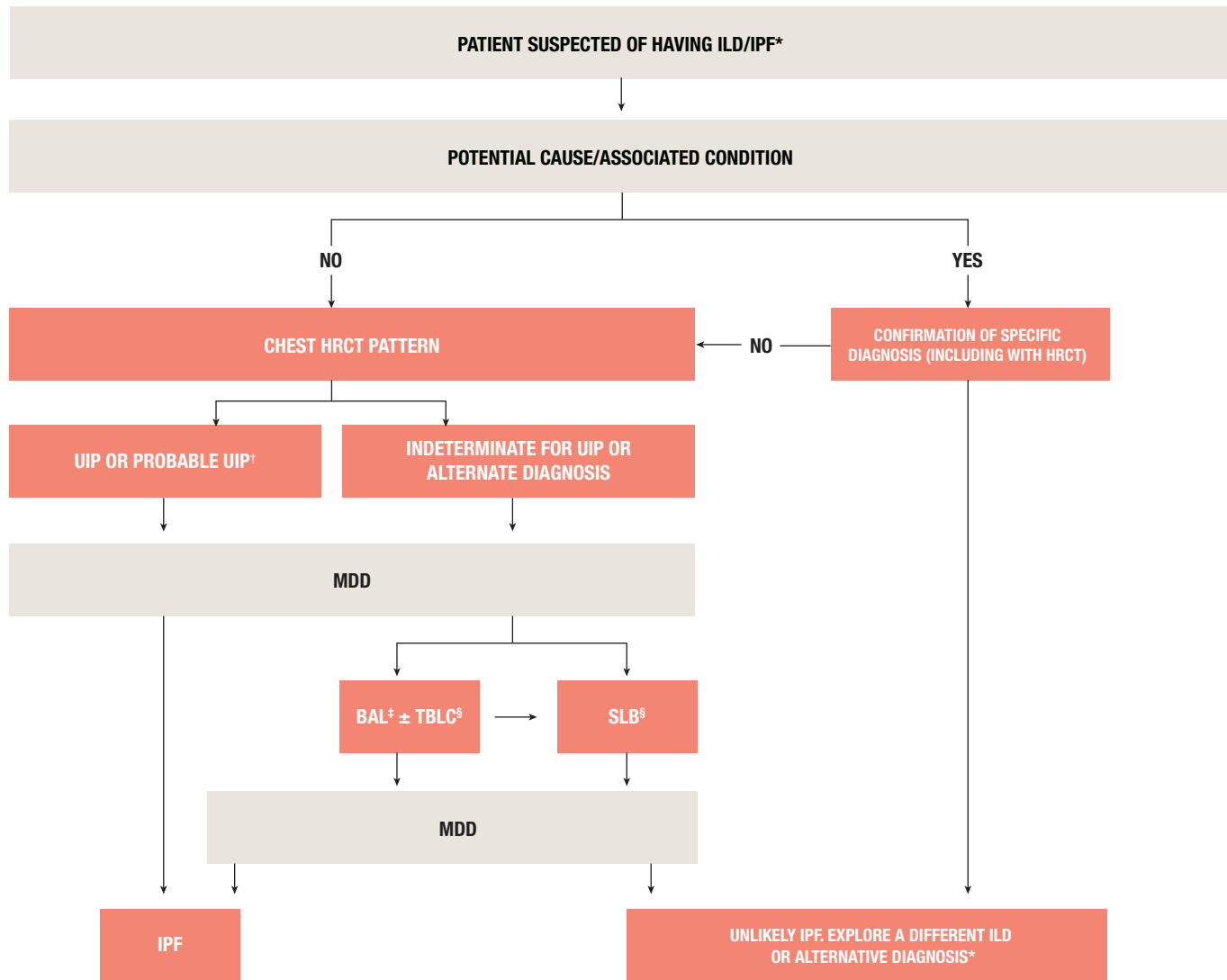


TIMELY AND ACCURATE DIAGNOSING OF ILD/IPF* INVOLVES A MULTIDISCIPLINARY APPROACH INCLUDING CLINICAL, RADIOLOGIC, AND PATHOLOGIC REVIEWS



BAL, bronchoalveolar lavage; HRCT, high-resolution computed tomography; ILD, interstitial lung disease; IPF, idiopathic pulmonary fibrosis.

*Adapted from ATS guidelines; please refer to latest reference.

†Patients with a radiologic pattern of probable usual interstitial pneumonia (UIP) can receive a diagnosis of IPF after multidisciplinary discussion (MDD) without confirmation by lung biopsy in the appropriate clinical setting (eg, 60 yr old, male, smoker). BAL may be appropriate in some patients with a probable UIP pattern.

‡BAL may be performed before MDD in some patients evaluated in experienced centers.

§Transbronchial lung cryobiopsy (TBLC) may be preferred to surgical lung biopsy (SLB) in centers with appropriate expertise and/or in some patient populations, adapted from ATS guidelines. A subsequent SLB may be justified in some patients with nondiagnostic findings on TBLC.