Thyroglobulin measurements should be done 2-12 weeks post-surgery to detect residual disease and then every 6-12 months to detect recurrent disease. Such testing is most sensitive when thyroxine suppression therapy is stopped or when recombinant human TSH is used to stimulate thyroglobulin release.\(^3\) Calcitonin and CEA should be measured before surgery to establish a baseline and then 2-3 months after surgery to detect residual disease. Monitoring should continue every 6-12 months thereafter to detect recurrent disease. Test codes are shown in brackets. PTC indicates papillary thyroid carcinoma; FTC, follicular thyroid carcinoma; MTC, medullary thyroid carcinoma; Tg, thyroglobulin; and CEA, carcinoembryonic antigen.

This figure was developed by Quest Diagnostics based on references 2, 3, and 5. It is provided for informational purposes only and is not intended as medical advice. A physician’s test selection and interpretation, diagnosis, and patient management decisions should be based on his/her education, clinical expertise, and assessment of the patient.