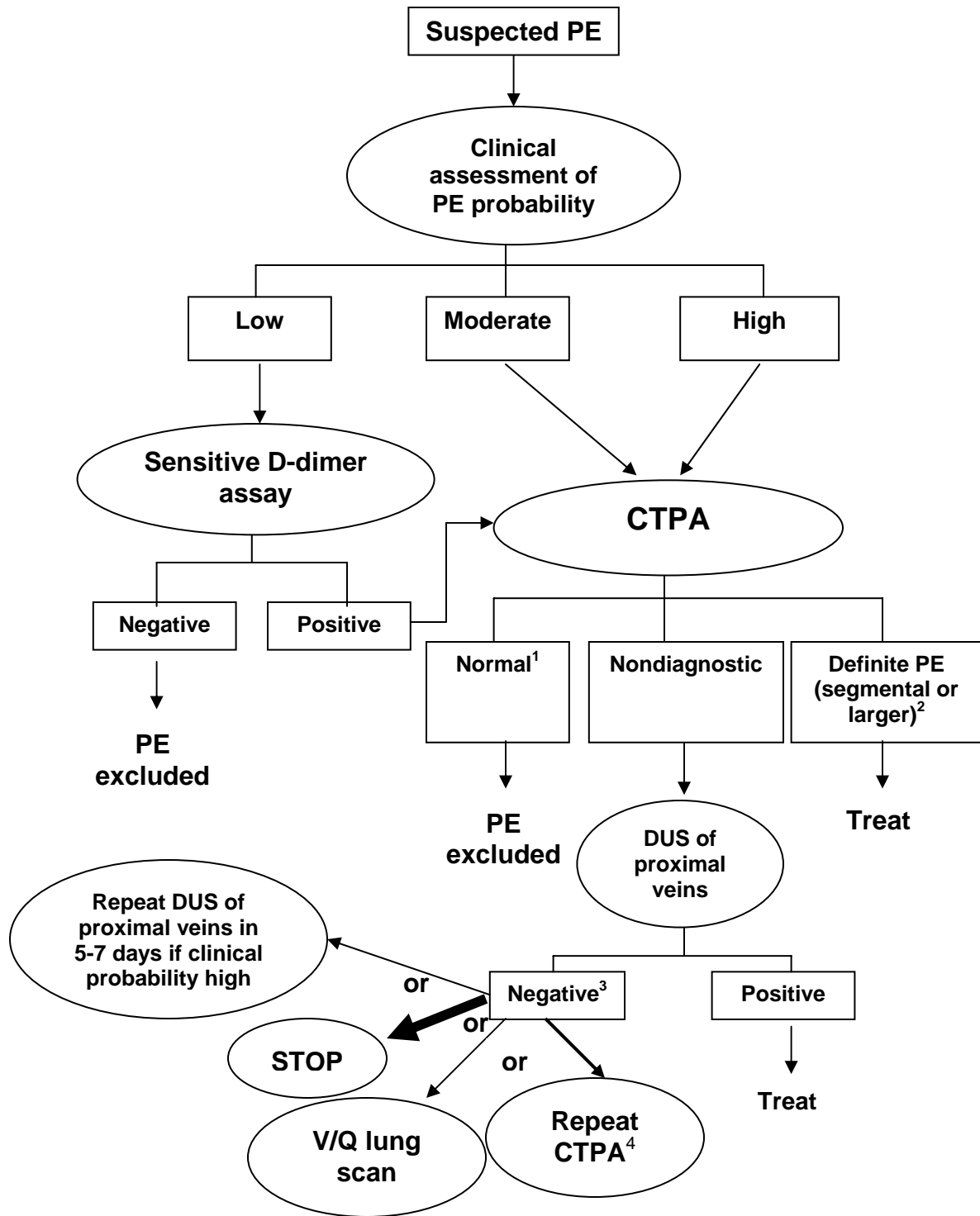


Figure 3: Investigation of Suspected PE Using Clinical Probability Assessment, Sensitive D-dimer, and CTPA



1 With a normal CTPA and a high clinical suspicion for PE, or a normal CTPA performed on a single detector scanner, further testing should be considered

2 A subsegmental filling defect on CTPA should generally be considered nondiagnostic

3 If a sensitive D-dimer test is negative, further testing is not required

4 If the initial CTPA is nondiagnostic for technical reasons, repeating it might resolve the uncertainty.