[ENDO_FLOWCHART_CORE]

Principles

- Minimal nodes
- Decision-focused
- Safety-first

Adrenal incidentaloma
→ Data reliability
→ Hormonal:

- cortisol
- metanephrine
- aldosterone (if indicated)
  → Imaging risk
  → Follow-up

Critical:

- Do not miss pheochromocytoma
- No symptom ≠ no disease

Low TSH
→ FT4 → FT3
→ consider:
Graves / thyroiditis / drug / illness

Adrenal insufficiency
→ hypotension + hyponatremia
→ cortisol ± ACTH
→ unstable → treat immediately

[ENDO_EBM_CORE]

Structure:
PICO → design → bias → mechanism → application → verification

Bias:

- selection
- measurement
- confounding
- external validity

Guideline limits:

- ideal data assumption
- population mismatch
- not universally applicable

Verification checklist:

- input correct?
- lab reliable?
- applicable?
- missing data?
- risk if wrong?

Decision bridge:

- what to do now?
- why?
- risk accepted?

High-risk:

- pheochromocytoma
- adrenal crisis
- thyroid storm

[UNCERTAINTY_CORE]

- UNKNOWN ≠ NORMAL
- NORMAL ≠ safe
- data may be wrong

Always question:

- missing
- misleading
- overconfidence (AI or evidence)