1 Supplementary Table 1. Indications for fine-needle aspiration (FNA) performed in the 91 nodules measuring less than 10mm.

2

| Reason for FNA in nodule <10mm                                                                 | No. of nodules (n=91) |
|------------------------------------------------------------------------------------------------|----------------------|
| Suspicion of thyroid capsule infiltration on USS                                               | 34                   |
| FNA performed in another nodule fulfilling size criteria in contralateral thyroid lobe and done to facilitate selection of surgical approach (total vs hemi-thyroidectomy) | 21                   |
| Suspicious lymphadenopathy                                                                    | 11                   |
| Family history of thyroid carcinoma                                                            | 7                    |
| Patient preference                                                                             | 7                    |
| Suspicion of capsule infiltration and indication for FNA in nodule in contralateral lobe       | 6                    |
| Sudden appearance and growth of nodule                                                         | 2                    |
| Patient referred for parathyroidectomy and FNA of associated thyroid nodules was advised by MDT | 2                    |
| Patient was renal transplant donor and FNA of an associated thyroid nodule was advised prior to nephrectomy | 1                    |

3 USS, ultrasound scan. MDT, multidisciplinary team.