

Author's footnote: Since this review was accepted for publication, Musset and colleagues¹ have published a study evaluating helical CT, ultrasonography of the proximal veins, and clinical assessment of PE probability for the management of 1041 patients with suspected PE. Important findings of the study by Musset and colleagues, generally consistent with this review, include: 1) a normal helical CT and normal ultrasonography excludes PE in patients with a low or moderate clinical probability of PE; 2) helical CT is not sensitive enough to exclude PE on its own (16% of PE were diagnosed by an abnormal ultrasound with a normal helical CT); 3) isolated subsegmental filling defects are non-diagnostic for PE; and 4) 8% of helical CT examinations were non-diagnostic. The study provides and validates a helical CT-based algorithm for the diagnosis of PE.

1. Musset D, Parent F, Meyer G, Maitre S, Girard P, Leroyer C et al. Diagnostic strategy for patients with suspected pulmonary embolism: a prospective multicentre outcome study. *Lancet*. 2002;360:1914-20.