Figure 2. Suggested Approach to the Diagnosis of ILD.

Abbreviations: BAL=bronchoalveolar lavage fluid; HRCT-high-resolution computed tomography; ILD=interstitial lung disease; VATS=video-assisted thorascopic surgery

Specimen analysis
- BAL fluid
  - Visual inspection of retrieved fluid
  - Cell count & differential
  - Microbiologic testing as indicated
  - Special stains and cell marker testing if considered useful
  - Malignant cell cytology
- Endoscopic lung biopsy
  - Histopathology
  - Special stains, immunochemistry

Bronchoscopy
- Bronchoalveolar lavage
  - Appropriate target area
  - Wedge position
  - Adequate instilled/retrieved volume of BAL fluid
- ±Endoscopic lung biopsy

Is bronchoscopy likely to aid diagnosis?
Yes
- Review clinical data & HRCT pattern
- Review specimen analysis results
- Multidisciplinary interactions (clinicians, radiologists, pathologists)

No
- Surgical lung biopsy (e.g. VATS) if no excessive risk identified

“Putting it all together”
- Review clinical data & HRCT pattern
- Review specimen analysis results
- Multidisciplinary interactions (clinicians, radiologists, pathologists)

Indeterminate Diagnosis

Possible/Suspected ILD

Comprehensive history, physical examination, appropriate lab testing, thoracic imaging

Confident Specific Diagnosis

Non-diagnostic

Consider Surgical Lung Biopsy