



Lung Cancer Screening

Several expert groups, including the United States Preventive Services Task Force, have published new guidelines recommending that physicians discuss lung cancer screening with patients who meet certain criteria. Screening CT scans for lung cancer are currently covered by Medicare for this “high risk” population: ages 55-77 (private insurers cover ages 55-80), AND current smokers or former smokers who have quit within the last 15 years, AND a 30 pack-year history of smoking (one pack a day for the past 30 years, or two packs a day for the past 15 years), AND no symptoms of lung cancer (weight loss, coughing up blood, etc.).

Discussing Risks and Benefits

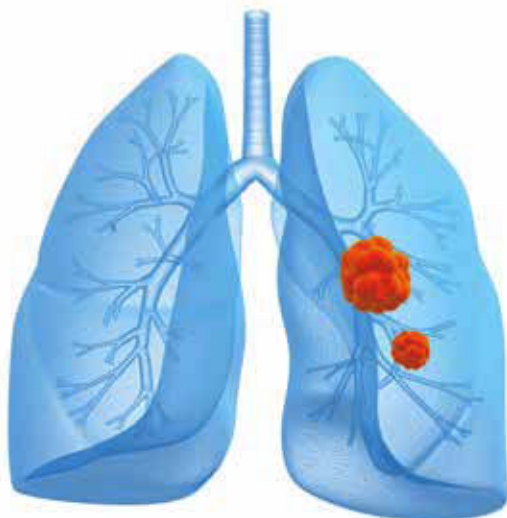
Prior to CT screening, the patient must be informed of the potential risks, benefits, and limitations of screening. If you would prefer, our physicians at the BMC Lung Nodule Clinic are happy to have a discussion with your patient that addresses:

Potential Benefits

- Lower mortality: Through early-stage detection in asymptomatic patients, low-dose CT (LDCT) screening reduces the risk of dying from lung cancer by 20%. About 320 people must go through screening to prevent 1 death from lung cancer.
- Peace of mind for patients if the LDCT scan comes back normal.
- Adoption of healthy lifestyle choices: Delivering the results of LDCT may be an opportunity to encourage smoking cessation.

Potential Harms

- “False positive” results: About 1 in 4 screening LDCT scans find abnormalities that turn out not to be cancer, but that still need to be assessed through additional scans or more invasive tests.
- Overdiagnosis: Screening CTs can find indolent tumors that would not have otherwise come to clinical attention.
- Radiation risk: Any radiation exposure carries risk, including screening CT scans. However, the exposure from a screening LDCT scan is comparable to that received during a routine mammogram.
- Anxiety: A cancer screening can be a stressful event, and an abnormal lung cancer screening test can also cause anxiety.
- False reassurance: A negative (normal) screening CT does not mean that a patient will not develop lung cancer in the future. The most important thing anyone can do to reduce their risk is to not smoke or use any form of tobacco.



About the Lung Nodule Clinic

BMC's Lung Nodule Clinic is dedicated to treating patients with pulmonary nodules that are discovered incidentally, or as a result of a screening CT scan for lung cancer. Patients who are deemed "high-risk" have the opportunity to meet with thoracic surgeons on the same day.

The Lung Nodule Clinic takes a multi-disciplinary approach to patient care with collaboration between radiologists, thoracic surgeons, and pulmonologists, as well as support from a patient navigator.

The Lung Nodule Clinic also serves as a referral source for a shared decision making visit prior to lung cancer screening. Our clinicians can communicate the results of a LDCT screening directly to your patient. Expert follow-up care is provided by one of our licensed pulmonologists.



New patient appointments are available within 3–4 weeks, and sooner for patients with larger or high-risk pulmonary nodules.

**To refer a patient
please call 617.638.7480**