

Screening Guidelines: Lung Cancer

Executive Summary

The Ascension Oncology Service Line Council recommends current or former smokers who meet criteria and are aged **55 to 80** should be screened with annual low-dose CT scans of the chest.

For current and former smokers who meet criteria aged **50 to 55**, screening is recommended, with consideration given to individual patient risk and insurance coverage.

Additional risk factors such as family history of lung cancer, race, sex, and personal history of cancer should be considered when counseling about screening.

Solid and part-solid nodules 5 mm and smaller do not need immediate diagnostic follow up and can be imaged again in one year.

Ascension Lung Cancer Detailed Screening Guidelines

- For asymptomatic smokers and former smokers aged 50 to 80 who have smoked 20 pack-years or more and either continue to smoke or have quit within the past 15 years, annual screening with low-dose CT should be offered.
- For asymptomatic smokers and former smokers who do not meet the smoking and age criteria but are deemed to be at high risk of having/developing lung cancer based on clinical risk prediction calculators, low-dose CT screening should be routinely discussed using shared decision-making tools.
- For individuals who have accumulated fewer than 20 pack-years of smoking or are younger than
 age 50 or older than age 79, or have quit smoking more than 15 years ago, and do not have a high
 risk of having/developing lung cancer based on clinical risk prediction calculators, low-dose CT
 screening should not be performed.
- For individuals with comorbidities that adversely influence their ability to tolerate the evaluation of screen-detected findings or tolerate treatment of an early stage screen-detected lung cancer, or that substantially limit their life expectancy, low-dose CT screening <u>should not</u> be performed.

Clinicians are encouraged to incorporate individual patient values and insurance coverage considerations in shared decision making regarding screening.

Source and background information is available from your Ministry Market Oncology service line leader. <u>Disease Site Guideline National Lead</u>: John Howington, MD, Ascension St. Thomas **March 2021**