

Patient Name

Lung Cancer Screening Shared Decision Making Checklist (SDM Billing Code G0296)

DO	B Date	
]]]]	Eligibility: □ 55-80 years old (Medicare/Medicare Managed Care patients age 78-80 are eligible as self-pay) □ Greater or equal to 30 pack-years of smoking • (Pack-years = number of packs per day x number of years smoked □ Active smoker OR □ Quit within the last 15 years (# of years quit) □ Asymptomatic (To qualify, patient can NOT exhibit ANY of these signs/symptoms) • Fever, chest pain, a new or changing cough, new shortness of breath, coughing up blood, unexplained weight loss	.)
,	 Benefits: Earlier detection of cancer (1 in 320 lives saved) Higher success of treatment Better survival rates (20% reduction in mortality) 	
,	 Risks/Harms of LDCT Screening: Radiation exposure: LDCT uses a small amount of radiation (1.5 mSv compared to 7 mSv for a Chest CT). False positives: May find something in the lung that could be cancer but in fact is not. Additional follow-up tests or procedures: Could include a Chest CT, biopsy, PET/CT or other tests recommended as needed. False negatives: It is possible there is a medical condition, including lung cancer that is not found during the exam. Co-morbidities: Impact on ability to have treatment. 	
,	 Importance of smoking cessation / smoking abstinence education The most beneficial tool in reducing lung cancer is to stop smoking. If patient is a former smoker, smoking abstinence education is required by CMS at the Shared Decision Making discussion in order to be covered as a preventative screen. Salem Health provides classes and support at the Community Health Education Center. Please call the CHEC for information (503)814-2432. 	
	 Annual screenings If no abnormalities are found, screening is continued until the patient's age or years of smoking cessation make them ineligible. (See eligibility guidelines above). 	