Low Dose CT Lung Screening Order Requisition

Having discussed with my patient, I request that my asymptomatic (no signs or symptoms of lung cancer) patient, __________________________, DOB, _____________, be scheduled for a Low Dose CT Lung Screening Scan at Summit Health.

(MEDICARE: 55 to 77 years old, current smoker or quit within 15 years, has smoked at least 1 pack of cigarettes daily for 30+ years, and (*requires a one-time shared decision making visit with ordering provider*)

Date of Shared Decision Making (SDM) counseling visit to discuss lung screening (if applicable):_________

Printed Name/Title of personnel conducting SDM counseling office visit: ________________________________

(For NON-MEDICARE patients: 55 to 80 years old, current smoker or quit within 15 years, has smoked at least 1 pack of cigarettes daily for 30+ years---NO SHARED DECISION MAKING VISIT REQUIRED)

Patient’s age: __________

Pack Year History: ___________ PPD X _________Years.

Current Smoker?  ☐ Yes  ☐ No

If No, how many years ago did patient quit? _____________

Referring Physician:

Print Name: ___________________________________

Signature: ___________________________________

NPI: _________________________________________

Date: ______________ Contact #: _______________

Diagnosis Code:  Z87.891 -Personal history of nicotine dependence

                  F17.210 -Nicotine dependence, Unspecified, With cigarettes

*Include G0296 for Medicare patient’s having the one time shared medical decision counseling visit.

Other: ______________________________

Comments: __________________________________________________________

_____________________________________________________________________

*For Medicare patients, the initial LDCT lung cancer screening service to be ordered, a lung cancer screening counseling and shared decision meeting must occur and be documented in the patient’s chart. Subsequent screening can be ordered during an appropriate physician visit.

For questions regarding the Low Dose Lung CT program, please contact Leslie Clever, RN, Lung Navigator at 217-6001 or email at lclever@summithealth.org
Provider Information:
LDCT Lung Screening examinations can be made by calling Central Scheduling at 717-267-6116

For Medicare patients, a lung cancer screening counseling and shared decision making visit includes the following elements (and is appropriately documented in the beneficiary’s medical records), and must be furnished by a physician or qualified non-physician practitioner:

- Determination of beneficiary eligibility including age, absence of signs or symptoms of lung disease, a specific calculation of cigarette smoking pack-years; and if a former smoker, the number of years since quitting;
- Shared decision making, including the use of one or more decision aids, to include benefits, harms, follow-up diagnostic testing, over-diagnosis, false positive rate, and total radiation exposure;
- Counseling on the importance of adherence to annual LDCT lung cancer screening, impact of comorbidities and ability or willingness to undergo diagnosis and treatment;
- Counseling on the importance of maintaining cigarette smoking abstinence if former smoker, or smoking cessation if current smoker and, if appropriate, offering additional Medicare-covered tobacco cessation counseling services; and
- If appropriate, the furnishings of a written order for lung cancer screening with LDCT. Written orders for both initial and subsequent LDCT lung cancer screenings must contain the following information, which must also be documented in the beneficiaries' medical records:
  - Beneficiary date of birth,
  - Actual pack-year smoking history (number);
  - Current smoking status, and for former smokers, the number of years since quitting smoking;
  - Statement that the beneficiary is asymptomatic; and
  - NPI of the ordering practitioner.

Low Dose CT (LDCT Lung Cancer Screening Benefits)

1. LDCT scans of the chest produce images of sufficient image quality to detect many lung diseases and abnormalities using up to 90 percent less ionizing radiation than a conventional chest CT scan.
2. No radiation remains in a patient’s body after a CT examination.
3. X-rays used in LDCT of the chest scans have no immediate side effects.
4. CT scans are able to detect even very small nodules in the lung. LDCT of the chest is especially effective for diagnosing lung cancer at its earliest, most treatable stage.
5. Lung cancer found by screening with LDCT is often at an earlier stage of disease.
6. Lung cancer screening with LDCT has been proven to reduce the number of deaths from lung cancer in patients at high risk.
7. CT is fast, which is important for patients who have trouble holding their breath.
8. CT scanning is painless and noninvasive.
9. When cancer is found with screening, patients can more often undergo minimally invasive surgery and have less lung tissue removed.

Risks

- False positive results occur when a test appears to be abnormal but no lung cancer is found. Abnormal findings may require additional testing to determine whether or not cancer is present. These tests, such as additional CT exams or more invasive tests in which a piece of lung tissue is removed (called a biopsy), have risks and may cause a patient anxiety.
- Test results that appear to be normal even when lung cancer is present are called false-negative test result may delay seeking medical care.
- Not all of the cancers detected by LDCT will be found in the early stage of the disease. Screening that detects lung cancer may not improve your health or help you live longer if the disease has already spread beyond the lungs to other places in the body.
- LDCT lung screening and all other screening exams can lead to the detection and treatment of cancer which may never have harmed you. This can result in unnecessary treatment, complications, and cost.
- There is a theoretical small risk of cancer from exposure to low dose radiation.