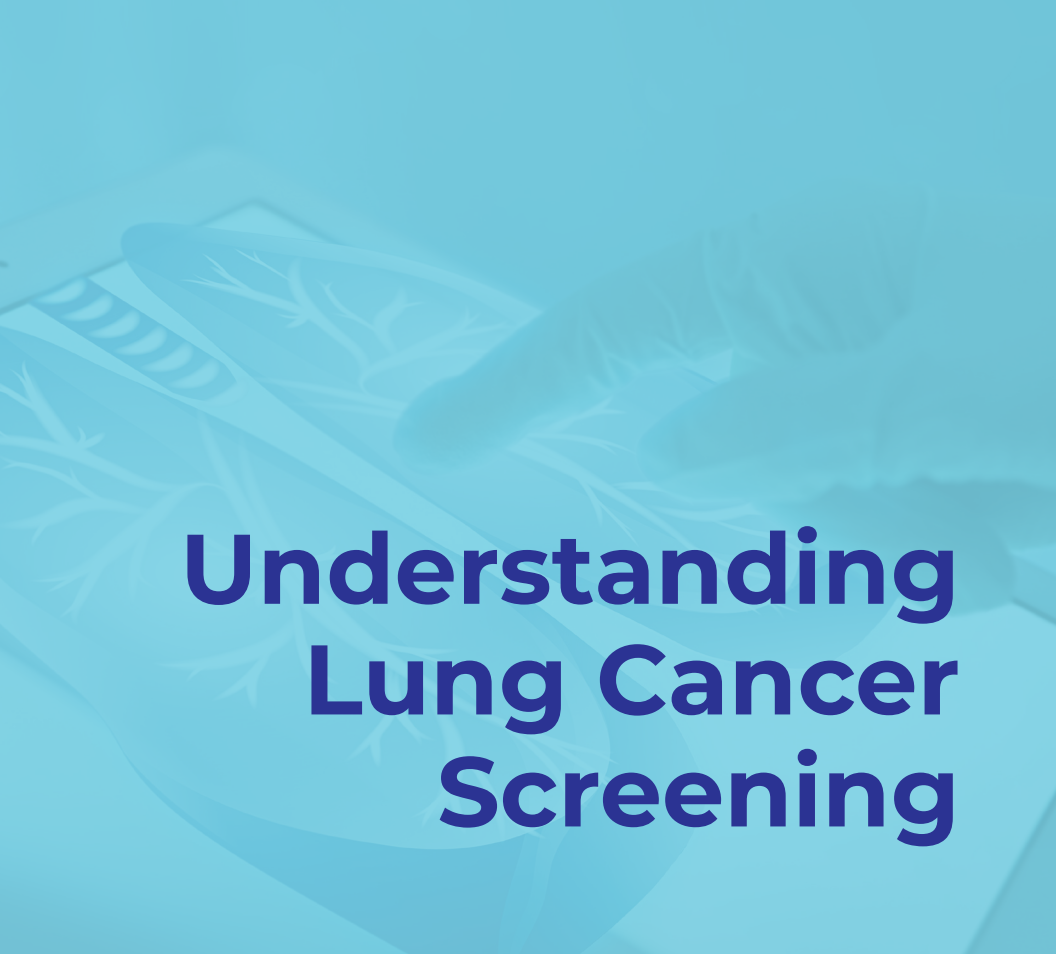




Empower Everyone.
Ignore No One.

A faint, light blue background image showing a hand holding a stethoscope, symbolizing medical care or screening.

Understanding Lung Cancer Screening

1-800-298-2436 | go2foundation.org



What is Cancer Screening?

Cancer screening is a test to check for disease in someone who does not have any symptoms. Some examples of cancer screening include mammograms for breast cancer, pap smears for cervical cancer and colonoscopies for colorectal cancer. The goal of screening is to find cancer early when it is more treatable and even curable.

For lung cancer, low dose CT (LDCT) scans are the only proven method. Chest x-rays are not recommended for screening. To learn more see the patient education video on the “about screening” pages on our website at www.go2foundation.org.

Why Should I Consider Screening?

Studies have shown that screening those at high risk with LDCT scans before symptoms are present can find lung cancer early when it is easier to treat and more likely to be cured. Lung cancer screening might also show if you have other conditions or diseases that need to be treated.

Who Should Be Screened for Lung Cancer?

Annual screening is recommended for individuals whose age and smoking history place them at higher risk for lung cancer. This means they have at least a 30 pack year* smoking history and currently smoke or quit within 15 years. Most commercial insurances cover individuals aged 55–80, while Medicare covers those aged 55–77.

There is some research to support screening people who may be younger or who have smoked less but who also have another factor that increases their risk of lung cancer, such as a diagnosis of COPD, a family history of lung cancer or job exposure to cancer-causing agents like radon and asbestos. Tell your doctor and find out if a low-dose CT scan is right for you. Note that screening for other risk factors may have a co-pay and deductible applied.

***How to calculate your pack years:** Average number of packs smoked per day X number of years as a smoker = your pack years (Example 1: 1 pack a day for 30 years = 30 pack years, Example 2: 2 packs a day for 15 years = 30 pack years)

What Happens During a Low Dose CT Screening Test?

A machine called a CT scanner takes 3D x-ray pictures of your lungs using a small amount of radiation (also called a low dose CT). This level of radiation is more than a chest x-ray but is much lower than other types of CT scans.

This screening test for lung cancer is quick and painless. It requires no needles or dye. Typically, your clothing can be left in place, and there is no need to limit eating or drinking prior to the test. Lung cancer screening takes about 10 minutes, and the actual scan only takes a few seconds.

Currently, this screening test is the only one that can find lung cancer early, which allows more treatment options to save lives.

Are There Risks Involved With Screening?

As with all cancer screening tests, this test is not perfect. Some cancers may still be missed. Some scans may show spots in the lung that look suspicious but may not be cancerous. These are called false positives. Similar to moles on the skin, your lungs may have nodules or spots that are watched but are normal or non-cancerous.

When needed, your doctor may recommend additional testing to diagnose or rule out lung cancer. Usually that is another low-dose CT in a few months to see if the spots found during your screening have changed. Every low-dose CT scan—whether your screening test or a follow-up scan—involves a small amount of radiation. In some instances, your doctor may refer you for minimally invasive tissue sampling/biopsy, or possible surgery or other treatments.

How Often Should I Be Screened?

Lung cancer can be aggressive and advance quickly between stages. This is why it is important to be tested every year until you are out of the recommended age range or for as long as your doctor recommends. Regular screenings will let your doctor see if spots in your lungs are stable or whether any changes over time may be more suspicious for cancer. Screening for lung cancer before symptoms appear is important. Without it, most people do not see signs of the disease until it has spread to other areas of the body, making it harder to treat. Talk to your doctor about the results of your screening to determine what you need to do next.

Is Screening Covered by Insurance?

For individuals who meet the high-risk criteria, low dose CT screening for lung cancer is covered every year by Medicare and most private insurance plans at 100% with no out-of-pocket cost—just like mammograms and other screening tests. However, additional testing and follow-up scans between screenings may have a cost, such as a co-pay or deductible. Ask your doctor if your insurance covers the test.

Where Should I Be Screened?

You should be screened for lung cancer in an experienced center that follows approved guidelines for lung cancer screening. For example, there are GO₂ Foundation-designated Screening Centers of Excellence nationwide. To find a center near you, call our HelpLine at 1-800-298-2436 or visit our website at www.go2foundation.org.

Lung cancer screening with a low dose CT scan is recommended by leading advocacy, government and medical groups, including GO₂ Foundation for Lung Cancer, Federal Government Agencies (Centers for Medicare & Medicaid Services), the United States Preventive Services Task Force (USPSTF), the National Comprehensive Cancer Network (NCCN), American College of Radiology, and the American Cancer Society.

Choosing a Screening Program

If you do not live near a GO₂ Foundation-designated Screening Center of Excellence, here are some questions to ask your local screening center to determine if they are screening responsibly:

1. What test do you use to screen for lung cancer?

The test should be a LDCT scan, which means that the radiation amount is much lower than in a regular CT scan.

2. Who will interpret the scan?

LDCT scans can be more challenging to read than regular CT scans. It is best for a radiologist with experience reading and reporting LDCT scans of the chest to be the one to interpret your scan.

3. What guidelines will be used if something is found?

Several professional organizations have developed clinical guidelines specifically for lung cancer screening and your center should consistently follow one of them.

4. What will happen if something is found?

Your screening program should work with your primary care provider to arrange any follow-up tests or care that you need, preferably from a team of doctors who will work together to evaluate and treat you.

5. Who is eligible for screening in your program?

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There is some research to support screening people who may be younger or who have smoked less but who also have another health condition that increases their risk of lung cancer, such as a diagnosis of COPD, a family history of lung cancer or job exposure to cancer-causing agents like radon and asbestos. Tell your doctor and find out if a low-dose CT scan is right for you. Note that screening for other risk factors may have a co-pay and deductible applied.

Contact us if you have questions

1-800-298-2436 | info@go2foundation.org
go2foundation.org

WHERE CAN I GO FOR MORE INFORMATION?

For more information about lung cancer, treatments and clinical trials, to discuss support options or for referral to other resources, please contact us.

HELPLINE | 1-800-298-2436 or support@go2foundation.org

SCREENING CENTERS OF EXCELLENCE
under Risk & Early Detection at go2foundation.org

WEBSITE | go2foundation.org



Empower Everyone. Ignore No One.



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Founded by patients and survivors, GO₂ Foundation for Lung Cancer transforms survivorship as the world's leading organization dedicated to saving, extending, and improving the lives of those vulnerable, at risk, and diagnosed with lung cancer.

GO₂ Foundation works to change the reality of living with lung cancer by ending stigma, increasing public and private research funding, and ensuring access to care.

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