

When you have your referral for a low-dose CT scan, you will need to:

- Check with your doctor where lung cancer screening is offered in your area.
- Book in for your scan at a local radiology clinic or mobile screening truck location (in some rural and remote areas). Your scan will be covered by Medicare.
- Have your free low-dose CT scan.

Following your low-dose CT scan, you will need to:

- Check that your contact details are up to date in the NCSR.
- Look out for your results. The NCSR will let you know what to do next. This may be a reminder (by text message or letter) to screen in two years (if you are found to be at very low risk) or return to see your doctor for your results.
- Visit your doctor for a new CT referral to screen again after you get a reminder from the NCSR.

If you are eligible, you should be screened every two years until the age of 70. Having regular screening every two years is the best way to find lung cancer early, when it’s easier to treat.

It is important that you have lung cancer screening even if you feel well.

The program targets those at the highest risk of lung cancer, but if you’re not eligible now you may still be at risk.

If you are not eligible for the program now because of your age or smoking history, you could become eligible in the future. Check regularly with your doctor to see if you are eligible for lung cancer screening under the program.

It is important to see your doctor if you have any new signs or symptoms of lung cancer, such as coughing up blood or shortness of breath for no reason, even if your last lung cancer screening result was very low risk.

Does it work?

Research on lung cancer screening from the United States and Europe has shown that up to 70% of lung cancers are found at early stages, when they are easier to treat or cure.^{2,3}

1. Medical Services Advisory Committee. 1699 – National Lung Cancer Screening Program Public Summary Document [Internet]. Canberra, Australia: Australian Government Department of Health; 2022 Jul [cited 2024 Mar 28]. Report No.:1699. <http://www.msac.gov.au/internet/ msac/publishing.nsf/ Content/1699-public>.

2. Aberle, D. et al. National Lung Screening Trial Research Team. Reduced lung cancer mortality with low-dose computed tomographic screening. *New England Journal of Medicine* 365, 395–409 (2011).

3. De Koning, H. J. et al. Reduced lung-cancer mortality with volume CT screening in a randomized trial. *New England Journal of Medicine* 382, 503–513 (2020).



Australian Government

NATIONAL LUNG CANCER SCREENING PROGRAM



For more information about the National Lung Cancer Screening Program: www.health.gov.au/nlcsp



For help to quit smoking: www.quit.org.au

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NATIONAL LUNG CANCER SCREENING PROGRAM



WHAT IS THE NATIONAL LUNG CANCER SCREENING PROGRAM?



From July 2025, eligible people in Australia will be able to participate in screening for lung cancer through the National Lung Cancer Screening Program.¹ Low-dose computed tomography (CT) scans in the program are covered by Medicare.

Screening is a way of finding signs of cancer in people who do not have any symptoms. The goal is to find cancer early, when it is easier to treat.

Lung cancer screening uses a low-dose CT scan to look for any small lumps, called nodules.

Lung cancer screening can find 70% of lung cancer at its early stages, before there are any symptoms and when treatment is most effective.^{2,3}

Eligibility

You are eligible for the program if you meet all of the below criteria:



To see if you are eligible to take part in the program, your doctor will ask you to discuss your tobacco cigarette smoking history to find out your 'pack-years'. 'Pack-years' is a way of working out the number of cigarettes a person has smoked over time.

30 pack-years is the same as smoking a pack of 20 cigarettes each day for 30 years. You might not be able to remember exactly, so your doctor can help you work out your pack-years based on an estimate of how many cigarettes you smoked and for

how many years. It is important to share this with your doctor to help find out if you are eligible for screening. Calculating pack-years is an 'imperfect science' and healthcare providers should use clinical judgement and best estimates to calculate smoking pack-years when determining program eligibility.

Once an individual is participating in the program, their smoking history eligibility criteria does not need to be re-assessed.

What do I need to do?

- 1 If you think you might be eligible, speak with a doctor who will assess your eligibility. You will need a referral for the scan. Consultation fees may apply if your doctor does not bulk bill. The scan is free, covered by Medicare.
- 2 If you think someone you know might be eligible, encourage them to speak to their doctor. This could be a friend, parent, grandparent or other family member. They may need some extra support to speak to their doctor.
- 3 Ask your doctor about the benefits and potential harms of lung cancer screening. Talk about your preferences to decide and discuss if lung cancer screening is right for you.
- 4 Your doctor will check if you are suitable to have a low-dose CT scan. If you have had a recent health issue, a scan might not be right for you at this time. For example, if you have had a CT scan in the last 12 months for other health issues or if you have had the COVID-19 infection in the last 12 weeks.
- 5 If you are eligible and suitable for screening, and consent to take part in lung cancer screening, your doctor will refer you for a free low-dose CT scan covered by Medicare.
- 6 With your consent, your doctor will enrol you in the National Cancer Screening Register (NCSR). This will support your lung cancer screening by sending you reminders and your results to your doctor. You are still able to take part in lung cancer screening if you do not want to be signed up in the NCSR. But you will not receive reminders or any communication from the NCSR if you opt out.