



LUNG CANCER SCREENING DECISION TOOL

BOOKLET



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Australian Government

NATIONAL
LUNG CANCER
SCREENING
PROGRAM



What is the aim of this tool?

This tool can help you decide whether you want to start screening for lung cancer. Many people see the benefits and think screening for cancer is a good thing. There are ways that screening can help you, and there are also things you should know before you make a decision to undergo screening.

This booklet is designed to give you information to help you make an informed choice about whether you would prefer to have screening or not. This is your choice – there is no right or wrong answer about whether to have screening.

What is lung cancer?

Lung cancer is a cancer that starts in the lungs. A group of cells that are not normal and grow out of control and can also spread to other parts of the body.

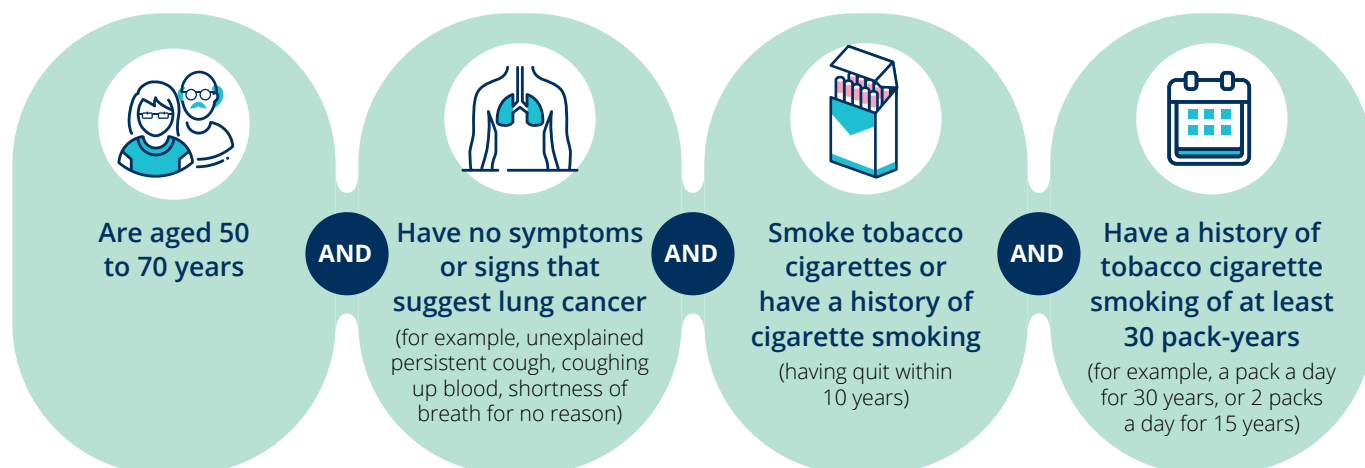
What is lung cancer screening?

Lung cancer screening involves a low-dose computed tomography (low-dose CT) scan for people without symptoms (e.g. you do not have an unexplained persistent cough or are not coughing up blood) to look for early signs of cancer. Early detection of lung cancer increases the options for treatment and gives you a better chance of a cure.

Low-dose CT scans for lung cancer screening are free for those with Medicare.

Am I eligible?

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



Talk to your healthcare provider to see if you are eligible.



How could lung cancer screening help me?

Benefits of lung cancer screening include:

Find lung cancer early

There are more treatment options and a better chance of a cure when cancers are found early.

Peace of mind

Screening can rule out lung cancer but also other lung diseases. A low-dose CT scan can reassure you of your lung health.

Gives you an opportunity to discuss smoking history and get support if you choose to quit

You do not need to quit smoking to have screening, but quitting can help prevent lung cancer and other lung diseases, leading to a longer and healthier life.

What else should I know about lung cancer screening?

It is normal to feel worried when participating in lung cancer screening. Around 22-51% of the people who screen will have nodules on their first scan. Over 95% of these nodules will not be lung cancer. Still, it can be stressful getting the scan, waiting for results or doing further scans or tests. Talk to your healthcare provider to learn about support that is available.

False positives

Lung cancer screening can result in a false-positive result (i.e. the scan result suggests you may have lung cancer, but follow-up investigations say you don't). False positives can happen with any screening or medical test.

Overdiagnosis

Some cancers are very slow growing and may not cause problems during your lifetime. This is called "overdiagnosis" and happens for around 1 in 30 cancers found during lung cancer screening. Overdiagnosis can happen with any screening or medical test.

Exposure to radiation

A low-dose CT scan uses the smallest amount of radiation possible while still getting a high-quality image. This is lower than one year exposure to natural radiation in regular life. If you have a nodule, you may need more scans to see whether it is cancer. This is a low level of radiation that is safe and can improve early diagnosis.

Additional findings not related to lung cancer

Sometimes lung cancer screening will pick up other concerns that can be addressed by your healthcare provider. The scan may show things either in the lungs (other than cancer, such as emphysema), or outside of the lungs (such as heart disease). Finding these can allow for life-saving treatment but may also need more testing and may cause you to worry.

Key questions	Screening	No screening
What are the chances of finding lung cancer at an early stage?	70 out of 100 lung cancers will be found at an early stage ¹ .	7 out of 100 lung cancers will be found at an early stage ¹ .
What are the chances of the scan result being suggestive of lung cancer but follow-up investigations saying that you don't have lung cancer?	Of all people screened, around 3 in 100 will have a high or very high-risk nodule found ¹ . To see if a high or very high-risk nodule is cancer, your healthcare provider might suggest further investigation. Fewer than half of those with a high or very high-risk nodule will turn out to have lung cancer.	People who do not have screening will avoid the possibility of unnecessary medical tests but will also not have the chance to find early lung cancers that have no symptoms.
What are the chances of finding something other than lung cancer on the scan?	Sometimes the scan will find things which require further tests, and other times the scan will find other serious illnesses that require treatment. These treatments could save your life.	People who do not have screening avoid having extra medical tests, but will also not have the chance to find other treatable health conditions early.

1. Based on best estimates from randomised controlled trials.

What does lung cancer screening involve?



How often?

- Every two years if results are normal (very low risk) with no significant findings.
 - More often if something is found on the scan.
-



How do I prepare?

- Get a low-dose CT scan referral form from your healthcare provider (doctor or nurse practitioner).
 - Book your scan online, by telephone or in person. Let them know you are taking part in the National Lung Cancer Screening Program.
 - Make sure to take your scan referral form and Medicare card.
 - Wear comfortable clothing. You may need to change into a gown for the scan.
 - Let the clinic know in advance if you need help getting changed into a gown or onto the table for a scan.
 - There is no need to fast.
-



What happens on the day?

- You may be asked to complete a health check and measure your height and weight. You will be asked if you can lift your arms above your head for 5-10 minutes.
 - You will lie flat on your back on a table with your arms above your head. You will need to hold your breath for a few seconds and stay still. The radiographer will take images of your chest. You will not need to have any needles for the scan.
 - The scan itself will take **about 10 seconds**, and **you should not feel any pain**.
 - Your appointment will take between 10 and 15 minutes.
-



How do I get there?

- Ask your healthcare provider where lung cancer screening is offered in your area. This includes a Heart of Australia mobile screening truck for some rural and remote areas.
-



Can family members, friends, or carers be there?

- Plan to take a friend or family member with you if you would like to do so.
-



What is the cost of the low-dose CT scan?

- The low-dose CT scan is free under Medicare.
-

What happens after my scan?

Your healthcare provider will receive the results of your scan and will contact you if they need to discuss the findings.

You will receive a notification (text message or letter) from the National Cancer Screening Register (NCSR) that lets you know what to do next. This may be to have a low-dose CT scan again in two years, or to discuss your results with your healthcare provider.

What does my result mean and what happens next?

Screening results	Next steps
Incomplete The scan could not be reported for technical reasons and needs to be repeated.	<ul style="list-style-type: none"> You will need to re-screen when you get a reminder from the NCSR or your healthcare provider.
Very low risk There were no findings of concern from your scan. Regular screening every two years is important to check for changes as you age.	<ul style="list-style-type: none"> The NCSR will inform you there are no significant findings and that you should re-screen in 2 years. You will get a reminder from the NCSR and/or your healthcare provider when it is time to screen again in 2 years. You will need to go back to your healthcare provider in 2 years for your suitability check and get a request (referral) for a low-dose CT scan. Smoking history will not need to be re-assessed.
Low risk A nodule has been found on your scan but you are considered to have a low chance of lung cancer. You will need to have another scan in 12 months time.	<ul style="list-style-type: none"> The NCSR will not provide you with your results, but will encourage you to speak with your healthcare provider about your results. The NCSR will remind you when it is time to screen again in 12 months. When you get your reminder, you will need to go back to your healthcare provider for your suitability check and get a request (referral) for a low-dose CT scan.
Low to moderate risk or moderate risk A nodule or nodules have been found on your scan that needs to be monitored more frequently. Depending on your findings you will need to have another scan in 3 or 6 months time.	<ul style="list-style-type: none"> The NCSR will not provide you with your results, but will encourage you to speak with your healthcare provider about your results. The NCSR will remind you when it is time to screen again in 3 or 6 months. You will need to go back to your healthcare provider for your suitability check and get a suitability check and a referral for a low-dose CT scan
High risk or very high risk One or more nodules have been found that need further investigation. This does not mean that you have cancer. There is a higher risk of lung cancer, so it is important that you attend all follow-ups.	<ul style="list-style-type: none"> The NCSR will encourage you to speak with your healthcare provider about your results. The healthcare provider will review the radiology report and refer you to a specialist for further investigation.
Actionable additional findings unrelated to lung cancer The lungs, including the neck, chest and upper abdomen. Sometimes this can show findings either in the lungs (something other than cancer, such as emphysema), or outside of the lungs (something like heart disease).	<ul style="list-style-type: none"> Your healthcare provider will talk to you about the need for any further tests and next steps. An additional finding does not necessarily mean you cannot continue in the lung cancer screening program.

Lung cancer treatment

If lung cancer is found, treatment can include surgery to remove part of the lung that is affected by cancer. Other potential treatments include radiation therapy and chemotherapy. You may have a mix of treatments.

Decision tool

Remember, participating in lung cancer screening is your choice. Use this tool below to help you decide what is important to you.

ASK YOURSELF: What is important to you when deciding about screening for lung cancer?

Rate each statement from 1 to 5 based on how important it is to you, where 1 means 'Not important' and 5 means 'Very important'.

No screening Screening
Not important ←→ Very important

Finding lung cancer early, before symptoms develop?

(e.g. an unexplained persistent cough or coughing up blood)

1 2 3 4 5

Finding lung cancer early when there are more treatment options?

1 2 3 4 5

Peace of mind about your lung health?

1 2 3 4 5

Having an opportunity to discuss smoking history and get support to quit?

1 2 3 4 5

ASK YOURSELF: How concerned are you about:

Rate each statement from 1 to 5 based on how important it is to you, where 1 means 'Not important' and 5 means 'Very important'.

No screening Screening
Very concerned ←→ Not concerned

Being worried about participating in lung cancer screening?

5 4 3 2 1

Being exposed to radiation?

5 4 3 2 1

Having a false positive?

(i.e. the scan result suggests you may have cancer, but follow-up investigations say you don't)

5 4 3 2 1

Other tests to investigate any findings from the low-dose CT scan?

5 4 3 2 1

Have a look at your answers above

If most of your answers are on the right, you're in favour of having screening. If most of your answers are on the left, you're in favour of not having screening.



For more information about the National Lung Cancer Screening Program:

www.health.gov.au/nlcsp

Call free Helpline Monday to Friday
8:00am – 4:30pm AEST (excluding
public holidays): 1800 654 301 (Option 2)

Quitline
13 7848

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