LCSR Data Elements from Ordering Physician Records

Shared decision making visit and Order form

Data Element	Data Element Description	Shared Decision Making Visit	Written Order
Patient's date of birth		Х	х
Smoking status	1 Current smoker An adult who has smoked 100 cigarettes in his or her lifetime and who currently smokes cigarettes. Includes daily smokers and non-daily smokers (also known as occasional smokers). 2 Former smoker A person who was not smoking at the time of the interview but has smoked at least 100 cigarettes in their life. 3 Never smoker A person who was not smoking at the time of the interview and has smoked less than 100 cigarettes in their life. 4 Smoker, Current Status Unknown Indicates a person who is known to have smoked but whose current smoking status is unknown. 9 Unknown If Ever Smoked Indicates that a person's smoking status is unknown.	X	x
Number of packs-year of smoking	Pack-years as reported by the ordering practitioner on the order form Pack-years defined as number of packs per day x total years smoked.	х	х
Number of years since quit		х	х
Is there documentation of shared decision making?		х	x - not required on NCD but recommended by ACR
Other comorbidities listed on patient record that limit life expectancy		Part of shared decision making and monitored by ordering physician. Not required on order but radiology group may be able to capture from EHTR if ordering physician documented there.	
Other comorbidities, other specify		Х	
Ordering practitioner NPI			Х
Signs or symptoms of lung cancer		Х	Х

Sample order form with LCSR elements highlighted (Special thanks to Dr. McKee from the Lahey Clinic for sharing)

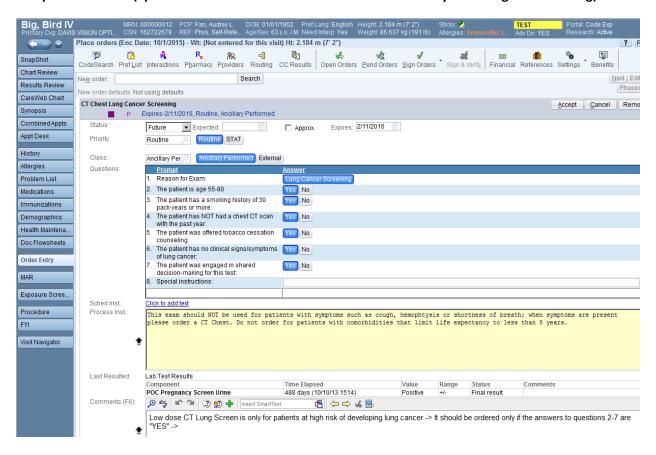


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CT Lung Screening Order Form

Patient Name:	_MRN:	DOB://		
Packs/day (20 cigarettes/pack): x	Years smoked:	= Pack years*:		
Currently smoking? Y N If not smoking, how many years quit?				
Ordering MD (print name):		Phone:		
National Provider Identifier (NPI):		Fax:		
CT Lung Screening Exam (initial, repeat or follow-up) Other Please instruct patient to call 1-855-CT-CHEST to confirm eligibility when ordering the initial CT Lung Screening exam. Comments:				
By signing this order, you are certifying that:				
 The patient has participated in a shared decision making session during which potential risks and benefits of CT lung screening were discussed. 				
 The patient was informed of the importance of adherence to annual screening, impact of comorbidities, and ability/willingness to undergo diagnosis and treatment 				
 The patient was informed of the importance of smoking cessation and/or maintaining smoking abstinence, including the offer of Medicare-covered tobacco cessation counseling services, if applicable. 				
 The patient is asymptomatic (no symptoms such as fever, chest pain, new shortness of breath, new or changing cough, coughing up blood, or unexplained significant weight loss). 				
Ordering MD Signature:		Date: / /		

Sample EMR order (Special thanks to Dr. Kazerooni from the University of Michigan for sharing)



Sample EMR order (Special thanks to Dr. Sachs from the University of Colorado for sharing)

