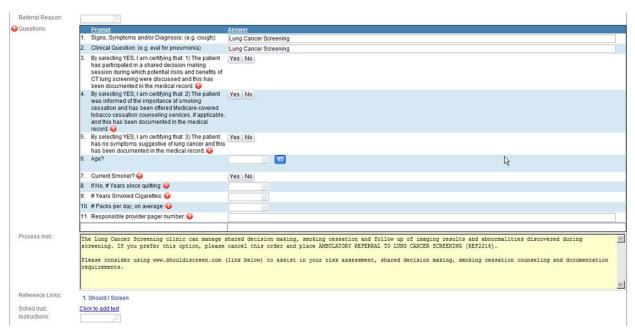


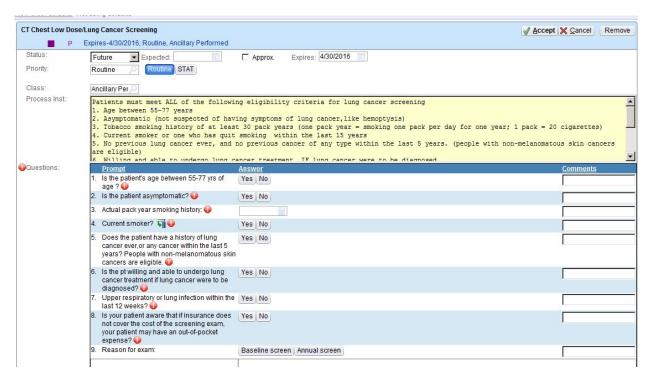
CT Lung Screening Order Form

	Patient Name: DOB:/Patient phone # :		
	Packs/day (20 cigarettes/pack): x Years smoked: = Pack years*:		
	Currently smoking? Y N If not currently smoking, how many years since stopped	?	
CT LUNG SCREENING EXAM (Please select one) INITIAL LUNG SCREENING EXAM SUBSEQUENT EXAM AUTHORIZATION* # *Please authorize for ONE of the following codes: 60297 CT LOW DOSE LUNG SCREENING OR 71250 CT THORAX WITHOUT CONTRAST			
Comments:			
The patient must meet ALL of the it love grownests or eligibility into the IT Lung S reening program.			
	The patient has participated in a shared decision making session during which potential risks and benefits of CT lung screening were discussed, was informed of the importance of adherence to annual screening, impact of comorbidities, and ability/willingness to undergo diagnosis and treatment should the patient is diagnosed with lung cancer, and 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 between the ages of 55-77 years		
	Has at least a 30+ pack year smoking history		
	 Is currently smoking or quit within the last 15 years. THE PATIENT IS ASYMPTOMATIC OF LUNG CANCER. LATTEST THE PATIENT DOES NOT HAVE AND IS NOT BY 	FING TREATER FOR ANY	
	THE PATIENT IS ASYMPTOMATIC OF LUNG CANCER. <u>I ATTEST THE PATIENT DOES NOT HAVE AND IS NOT B</u> OF THE FOLLOWING:	ING TREATED FOR ANY	
	Significant chest pain		
	Unintended weight loss		
	HemoptysisActive pneumonia		
Ord	rdering Provider Signature:Date:	/	
By signing this order, YOU ARE ATTESTING THAT THE PATIENT MEETS ALL OF THE ABOVE REQUIRED ELEMENTS,			
A SHARED DECISION MAKING VISIT HAS OCCURRED, AND REQUIRED ELEMENTS ARE DOCUMENTED IN			
THE	HE OFFICE NOTES		
Ord	rdering Provider (print name):Phone:		
ORDERING PROVIDER NPI** # Fax:			
**Provider NPI number required.			

Sample LCSC Order Form



Sample order LCS order form addressing CMS requirements and ACR registry data elements courtesy of Cherie Erkmen, MD, Eileen O'Malley, Leslie Boff, Frank Erdlen Temple University Health Systems)



© 2015 Epic Systems Corporation. Used with permission

CT LUNG CANCER SCREENING SHARED DECISION MAKING VISIT REQUIREMENTS

<Facility> offers a CT Lung Cancer Screening program. Eligibility into the program requires each patient to meet criteria as per the Medicare National Coverage Determination (NCD) for CT Lung Cancer Screening regardless of insurance coverage type, or lack of insurance.

The Centers for Medicare and Medicaid Services (CMS) has determined that the evidence is sufficient to add a lung cancer screening counseling and shared decision making visit, and for appropriate beneficiaries, annual screening for lung cancer with low dose computed tomography (LDCT), as an additional preventative service benefit under the Medicare program. To begin this process, a determination of eligibility must be demonstrated. This requires an initial face to face visit between the prospective CT Lung Screening patient and the primary care provider where specific information is acquired relating to the current and past cigarette use, the benefits and harms of CT Lung Screening, and counseling of tobacco cessation. This is termed a shared decision making visit. Information gathered and documented in the office visit notes (medical record) will determine patient eligibility into the CT Lung screening program.

There is good news! The provider may bill for this CT Lung Cancer Screening shared decision making visit given a new screening code, G0296, defined as a Counseling visit to discuss need for lung cancer screening (LDCT) using low dose CT scanning (the service is for eligibility determination and shared decision making).

REQUIRED ELEMENTS OF THE SHARED DECISION MAKING VISIT THAT MUST BE DOCUMENTED:

- ✓ Patient must be between the age of 55-77
- ✓ Asymptomatic; No signs or symptoms of lung cancer
- ✓ Tobacco smoking status*; current smoker or former smoker.
 - If current smoker, patient must have tobacco smoking history of at least 30-pack years.
 - Patient specific smoking pack-years must be documented in the medical record. (One pack year=smoking one pack per day for one year. 1 pack=20 cigarettes)
 - If former smoker, number of years since guit smoking
 - ♣ CT Lung screening is only applicable to patients who smoke cigarettes.
- ✓ Use of one or more decision aids, to include benefits and harms of screening, follow up diagnostic testing, over diagnosis, false positive rate, and total radiation exposure.
- ✓ Counseling on the importance of adherence to annual lung cancer LDCT 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 the importance of smoking cessation if current smoker and, if appropriate, furnishing of information about tobacco cessation interventions, and,
- ✓ If appropriate, the furnishing of a written order for lung cancer screening with LDCT. The written order is required to contain specific criteria.

For more information please use the following links:

https://www.cms.gov/medicare-coverage-database/details/nca-decision-memo.aspx?NCAId=274

 $\frac{\text{http://www.acr.org/}^{\text{http://www.acr.org/}^{\text{media/ACR/Documents/PDF/QualitySafety/Resources/Lung%20Imaging%20Resources/Example%20of%2}{\text{Oshared%20decision%20making.pdf}}$

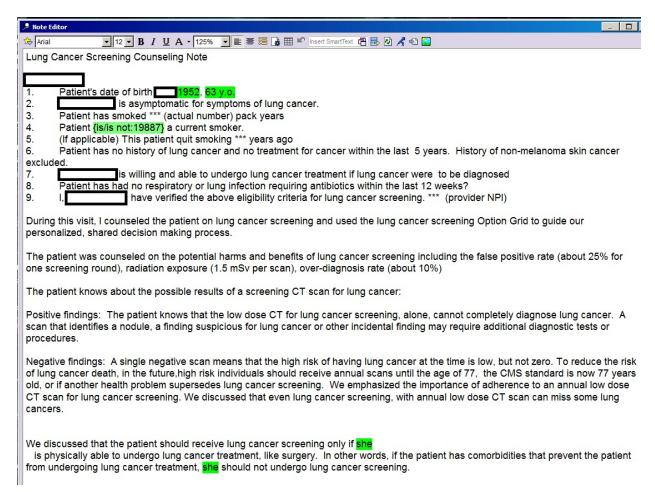
http://www.shouldiscreen.com/

http://www.radiologyinfo.org/en/info.cfm?pg=screening-lung

http://www.cancer.gov/types/lung/research/NLSTstudyGuidePatientsPhysicians.pdf

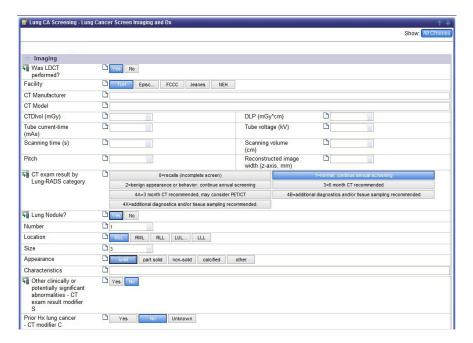
Originated: Nov 2015

Sample shared decision making note addressing CMS requirements and ACR registry data elements courtesy of (Cherie Erkmen, MD, Eileen O'Malley, Leslie Boff, Frank Erdlen from Temple University Health Systems)



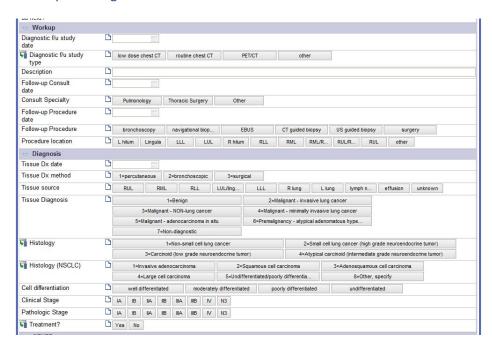
Sample screenshots of data entry system courtesy of Cherie Erkmen, MD and David Fleece, MD Temple University Health Systems

Imaging data



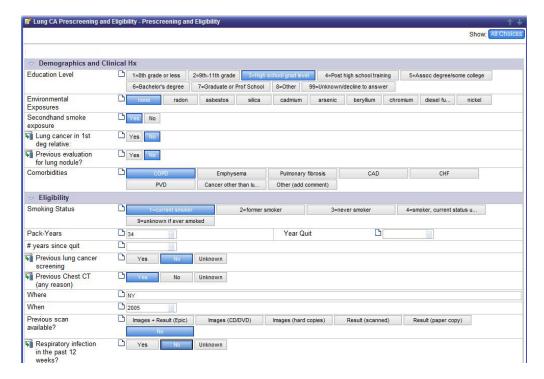
© 2015 Epic Systems Corporation. Used with permission

Workup and diagnosis



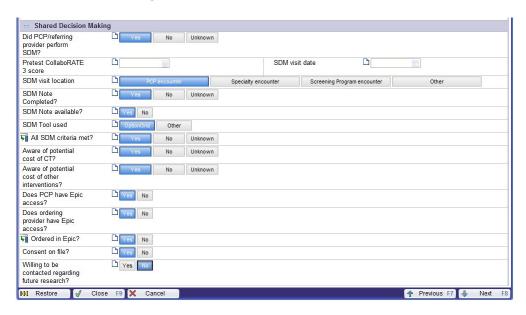
Sample data entry screenshots of data entry system courtesy of Cherie Erkmen, MD and David Fleece, MD Temple University Health Systems

Demographics and eligibility



 $\hbox{@ 2015 Epic Systems Corporation.}$ Used with permission

Shared decision making





March 14, 2016

Patient ID: Date of LDCT:

Dear:

We wish to inform you that the results of your recent Low Dose Lung Screening CT show a probably benign finding with a low likelihood of becoming a clinically active cancer. It is recommended that you undergo a follow-up Low Dose CT in 6 months to assure that the finding is stable.

A report of your results was sent to your health care provider.

Your images will become part of your medical record at my facility. They will be on file for your ongoing care. If, in the future, you change health care providers or go to a different location for a Low Dose Lung Screening CT, you should tell them where and when this CT was done.

Thank you for allowing us to help meet your health care needs.

Sincerely,

April Smith, MD Interpreting Radiologist