Decentralized Lung PCP identifies screening **Cancer Screening** eligible individual, conducts SDM, and orders LDCT scan **FOR LUNG Program** CANCER PCP provides or refers for comprehenisve smoking cessation and follow-up services LDCT screening ordered by PCP and obtained @ accredited imaging center Lung-RADS LDCT scan results sent to **Lung-RADS Category 3 & 4** Category 1, 2, and (concerning) results. ± 3 results letter and managed by LCSP sent to patient and PCP by LCSP LCSP reviews results with MDT or N/TB. **PCP** manages (Patient and PCP notified of clinical plan) Luna-RADS "S" findings PCP or LCSP manage 3-6 month interval diagnostic work-up and/ follow-up LDCT or referral to specialist as scheduled/ deemed necessary performed (PCP notified of outcome) if necessary LCSP reports (PCP notified of data to LCSR results) and conducts LCSP recalls patient for quality audits repeat annual LDCT screening or interval follow-up LDCT or Resume annual screening LDCT or interval follow-up and/or treatment as recommended. other diagnostic study

LUNG CANCER SCREENING WORK FLOW LEGEND LCS eligibility determination and referral
Shared decision making.

Shared decision making

Smoking cessation services

Annual LDCT screening or interval follow-up chest imaging

Results review and action

Action for Lung-RADS "S" findings

Multidisciplinary or lung nodule/tumor board results review

Reporting to lung cancer registry and quality audit

Diagnostic work-up/referral to specialist

The decentralized lung cancer screening program (LCSP) model positions the primary care provider (PCP) at the helm of the patient's journey through the screening process; however, the LCSP is a collaborative partner to both PCP and patient throughout, to ensure a high quality screening experience. The PCP's responsibility includes identifying screening eligible individuals, performing shared decision making (SDM), providing or referring to comprehensive smoking cessation services for patients who are smoking, documenting these procedures, and ordering the low dose CT (LDCT) scan.

Once the LDCT has been performed, the lung cancer screening (LCS) results and management recommendations will be reviewed by the PCP and the LCSP. The results of negative or low-suspicion LDCT findings based on the Lung-RADS category system are sent to the patient and the PCP with

repeat annual screening or interval follow-up imaging recommendations. The LCSP reviews the results of concerning LDCT findings with a multidisciplinary team (MDT) or nodule/tumor board (N/TB). These results and clinical recommendations are discussed with the patient and communicated to the PCP. The LCSP and PCP will determine who (LCSP or PCP) will manage the diagnostic workup or referral to a specialist, and who has responsibility for results management of this workup. The LCSP navigator and/or coordinator are integral partners in this workflow and the LCS process. They may perform any or all of the following duties: scheduling, results management, communicating with all involved (patient, PCP, multidisciplinary team, specialist) providing patient education, ensuring a timely continuum of care and essential clinical follow-up is performed, and reporting to the LCS Registry. The PCP manages all "S" findings. The PCP provides or refers for comprehensive smoking cessation follow-up.



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