

LUNG SCREENING PROGRAM REPORT

(Public Reporting of Outcomes – CoC* Standard 1.12)

(Screening Program – CoC Standard 4.2) *American College of Surgeons Commission on Cancer

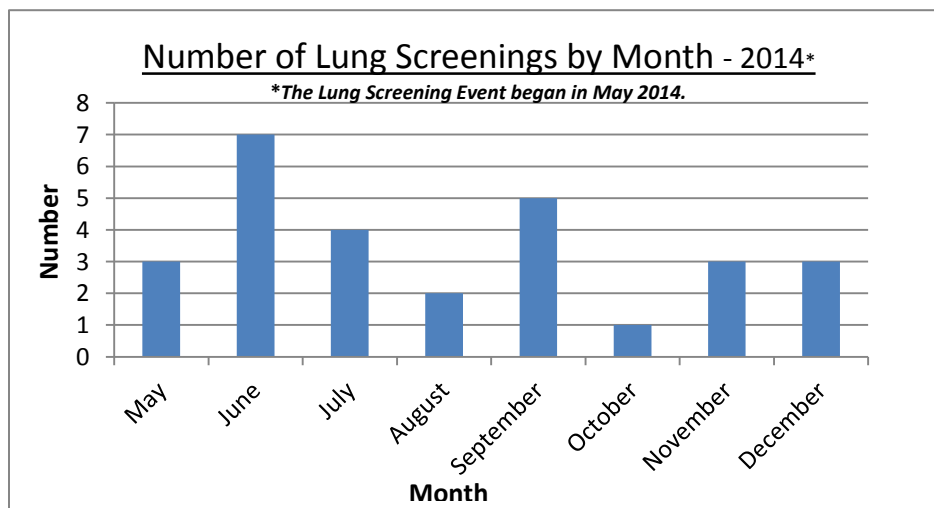
The St. John's Riverside Hospital (SJRH) Lung Screening Program event was offered in the community of Southwest Yonkers for early cancer detection using CT Scanning. This low-dose scanning technique allows radiologists to detect tumors and nodules (masses less than 3mm) that chest x-ray machines are unable to detect. Early screenings of your lungs increase the chances of early lung cancer detection allowing for more successful treatments. According to the Centers for Disease Control and Prevention, over 160,000 people die each year from lung cancer.¹ Lung cancer accounts for about 27% of all cancers deaths and is by far the leading cause of death among both men and women. Each year, more people die of lung cancer than of colon, breast, and prostate cancer combined (NCCN). To learn more about our Lung Screening, call the Central Scheduling Department at (914) 964-4329.

Lung Screening at SJRH

The SJRH lung screening is open to eligible individuals who are considering preventative measures of health. The American Lung Association recommends a low-dose CT screening for individuals who meet a specific set of criteria involving patients who are heavy smokers currently or formerly.² We follow the National Comprehensive Cancer Network (NCCN)'s definition of individuals who are high-risk for lung cancer: Patients who are over 50 years of age and have a 20 year history of smoking with at least one additional risk factor. These factors include, but are not limited to, exposure to second hand smoke, previous history of cancer (of any form), family history of cancer, personal history of chronic lung disease, or occupational exposure to carcinogens such as asbestos.

Lung Screening Program Event (May – December 2014):

- ❖ 28 patients have participated in the Lung Screening event.
- ❖ 50% of patients were male and 50% of patients were female.
- ❖ Average age of individuals participating was 62 years.



¹ 2014 lung cancer statistics from the Centers for Disease Control <http://www.cdc.gov/>.

² Recommendations from The American Lung Association <http://www.lung.org/>

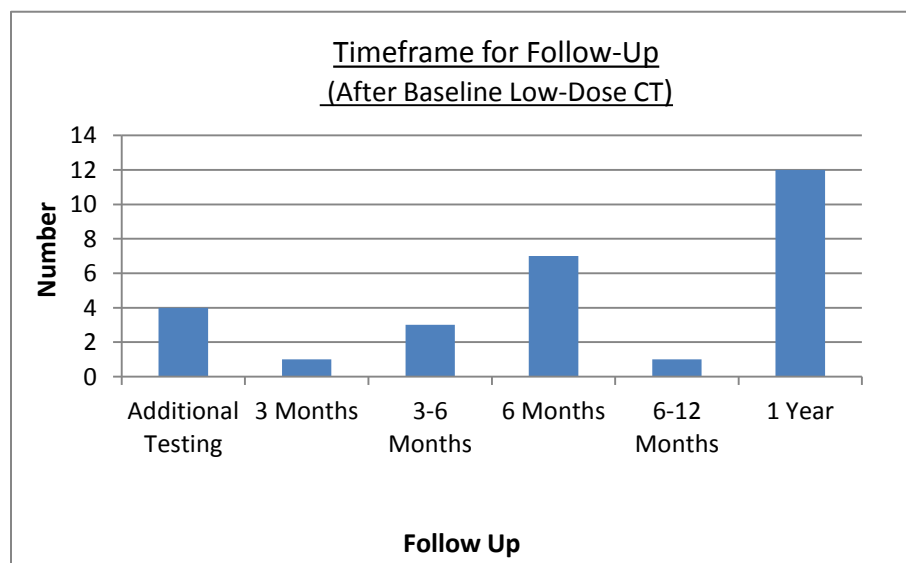
Follow-Up

CT scans show images of our patients' lungs which may show abnormal zones or nodules. Current or former smokers with any irregularities often require follow up. The NCCN has Lung Cancer Screening Guidelines that provide guidance on screenings and recommendations for follow-up.³ Follow up recommendations range from having immediate follow up including additional testing or procedures, such as a PET/CT scan, biopsy, surgical excision, echo testing, thyroid ultrasound; to having another low-dose CT scan in 3 months, 6 months, or 1 year. (The SJRH Cancer Program follows these guidelines; however, the follow-up of screening findings may be altered based on individual circumstances and physician discretion).

❖ Follow-up after CT scan:

- Fourteen (14%) percent of patients required immediate follow-up with additional testing after their initial CT scan. 4% of patients required a follow up in 3 months. 11% of patients required a follow up between 3 and 6 months. 25% of patients required a follow up in 6 months. 4% of patients required a follow up between 6 and 12 months. 43% of patients required a follow up in 1 year.

Follow-up Requirement	Number of Patients	Percentage
Immediate Follow-up with Additional Testing	4	14%
3 Months	1	4%
3-6 Months	3	11%
6 Months	7	25%
6-12 Months	1	4%
1 Year	12	43%



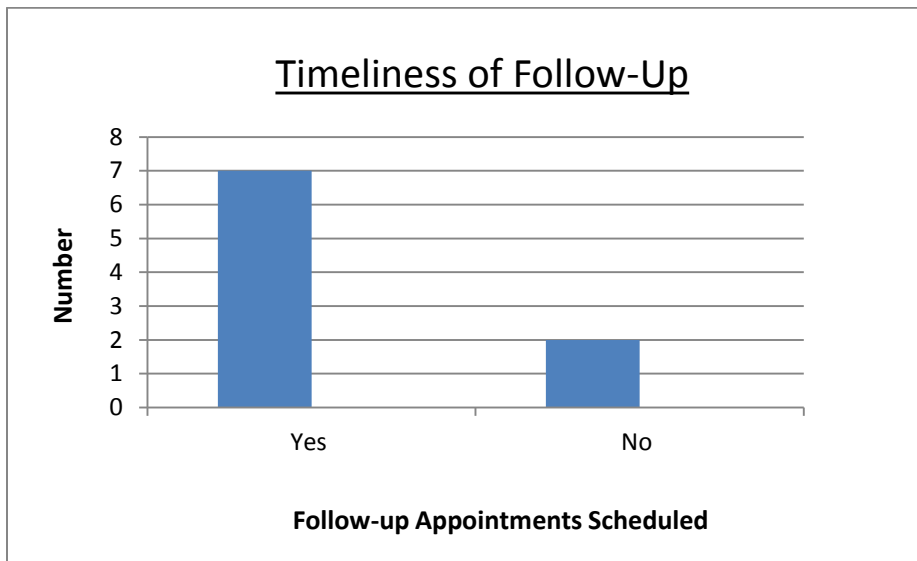
³ NCCN Guidelines Version 1.2014 for Lung Cancer Screening.

During the reporting period (May-December 2014), a total of **9 out of 28 patients were required to schedule follow-up appointments by December 31, 2014.** (Note: Only these patients are included in our 2014 outcomes data and the remaining follow-up appointments will be tracked through 2015).

❖ Patient follow-up outcomes for 2014:*

- 33% of patients (3 out of 9) returned to our facility within the timeframe for their follow-up appointment.
- 44% of these patients (4 out of 9) scheduled their follow-up appointments within the timeframe at other facilities.
- 22% of patients (2 out of 9) did not schedule their appointments within the recommended timeframe.

*Attempts were made to contact all patients to schedule follow-up appointments.



Lung Cancer Diagnoses Outcomes

Identifying cancer at an early stage is important, as patients with early stage lung cancer may be eligible for treatment that is not appropriate for patients with advanced stage lung cancer. Treatment varies between early and advanced stage lung cancer making additional follow up a main priority.

- Lung cancer diagnoses for patients who received screening and returned to our facility for their follow up in 2014:
 - Of the 3 patients who received screening and returned to our facility for their 2014 follow up appointments, 0% of these patients were diagnosed with lung cancer.