

## 2014 Public Reporting of Outcomes: Lung Cancer Screening

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Highlands Regional Medical Center (HRMC) is a not-for-profit community medical center committed to its charitable mission of serving individuals regardless of their ability to pay. HRMC, in partnership with its medical staff, employees & other community resources will develop a healthier community by providing a safe hospital environment, health education & the promotion of wellness.

HRMC is an independent organization committed to being the premier health care provider that:

1. Serves the communities of the Big Sandy Region
2. Delivers superior quality, services & access
3. Aligns with its physicians for mutual success
4. Continually improves & strives for excellence

To achieve our vision, we offer our customers a wide range of on-site services, including diagnostic & interventional radiology, laboratory, emergency, surgical, outpatient IV/Chemotherapy, cardiology, physical therapy/rehabilitation with a modern wellness center/gym & inpatient care.

The Cancer Committee at HRMC is a multifaceted group of medical professionals dedicated to improving survival & quality of life for cancer patients within the community served by the facility. This is done through accreditation from the Commission on Cancer (CoC), a consortium of professional organizations dedicated to cancer care. The Cancer Committee meets quarterly & works to ensure that the cancer patient is offered & receives quality health care & the community is offered education & opportunities to remain as healthy as possible.

### **Development of the Lung Cancer Screening Program at HRMC**

The American Joint Committee on Cancer (AJCC) defines cancer staging as the process of determining how much cancer is in the body & where it is located. It describes the severity of an individual's cancer based on the magnitude of the original (primary) tumor as well as on the extent cancer has spread in the body. Understanding the stage of the cancer helps doctors to develop a prognosis & design a treatment plan for individual patients. The stages are categorized from stage 0 (least severe/progressed) through stage IV (most severe/progressed). It is important to know that the earlier a cancer is diagnosed, the better the prognosis & survival rate.

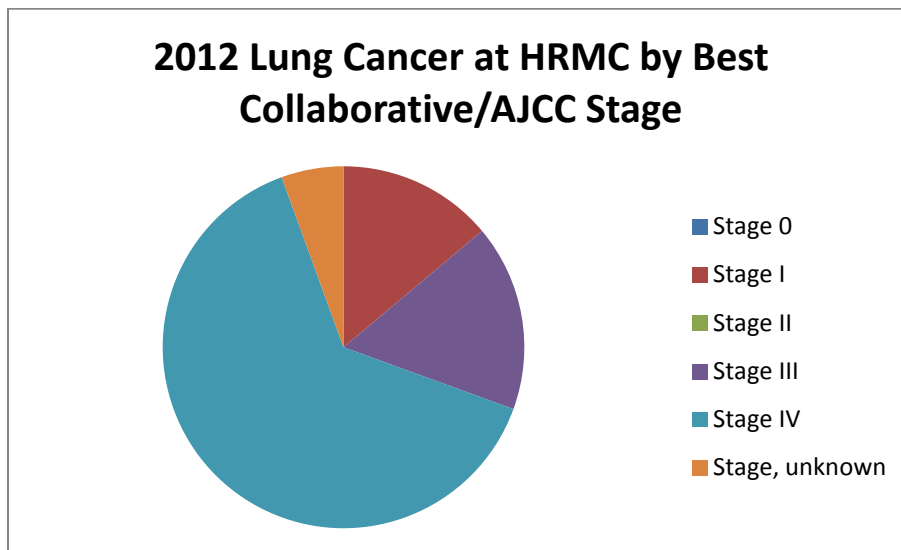
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In 2012, 156 people were diagnosed with cancer at HRMC. Lung cancer was the most frequently diagnosed cancer accounting for 36 of those diagnosed.

<b>2012 Top Five Cancer Sites at HRMC</b>	
<b>Site</b>	<b>Total Diagnosed</b>
Trachea/Bronchus/Lung	36
Breast, female & male	24
Colon/Rectum	21
Prostate	16
Bladder	6
<b>Total</b>	<b>103</b>

It was further noted that of those diagnosed with lung cancer, 63.8% was diagnosed in stage IV & 16.6% in stage III. Total accounting for just over 80% of all lung cancers diagnosed at HRMC had already progressed to the late stages.



The high rate of late stage diagnosis was determined to be attributed to a lack of community education &/or the availability of the need for early screenings.

In an effort to reduce the amount of lung cancer being diagnosed in the late stages, the Cancer Committee set a goal to begin a Lung Cancer Screening program at HRMC.

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Published results from a large clinical trial showed that annual screening with chest x-ray does not reduce lung cancer mortality. Newer tests, such as low-dose spiral computed tomography (CT) scans & molecular markers in sputum, have produced promising results in detecting lung cancers at earlier, more operable stages in high-risk patients. Results from the National Lung Screen Trial, a clinical trial designed to determine the effectiveness of lung cancer screening in high-risk individuals, showed 20% fewer lung cancer deaths among current & former heavy smokers who were screened with spiral CT compared to standard chest x-ray. These results were recognized by many organizations, including the American Cancer Society (ACS) & guidelines for screening soon followed.

On July 29<sup>th</sup>, 2013, the United States Preventive Services Task Force (USPSTF) gave screening for those at high risk for lung cancer with low dose CT scans a “B” recommendation, its second highest approval rating. A high rating by USPSTF is a crucial initial step in making this screening an essential health benefit pursuant to the Affordable Care Act. It is also an important element in coverage decisions by private insurance, Medicare & Medicaid.

By following the guidelines set forth by the USPSTF, a screening tool was developed to assess & identify those individuals considered high risk for developing a lung cancer.

The guidelines include:

1. Age 55-80 years old
2. Smoking history: 30 pack year or greater
3. Smoking status: currently smoking cigarettes or quit less than 15 years
4. Health: Patient who have a known health problem that significantly limits life expectancy or the ability or willingness to have curative lung surgery should not be screened

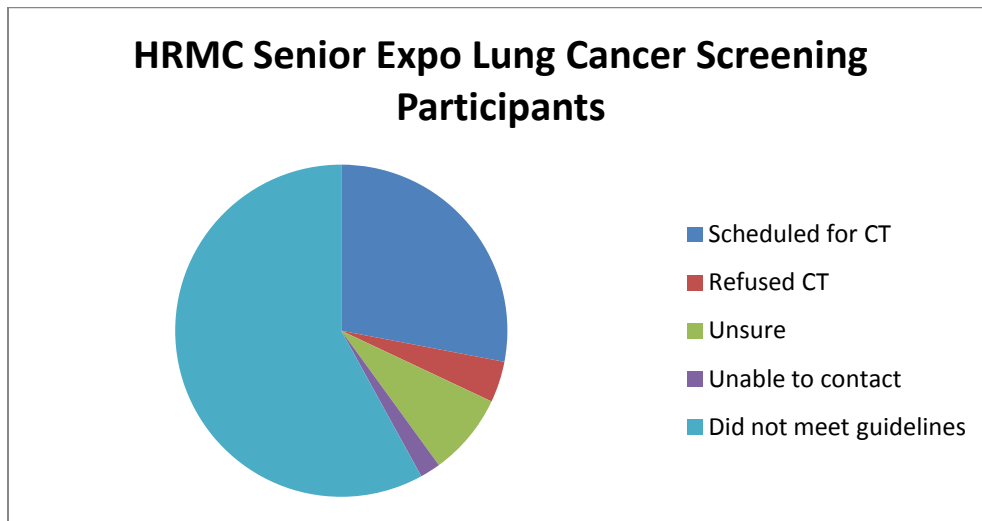
If a person is determined to be high risk, he/she is offered a low dose CT scan of their chest to screen for possible early stage lung cancers. The scans are to be performed at HRMC where the licensed radiologist reviews the scan & reports the findings. The report is also reviewed by a licensed pulmonologist. If a patient has a suspicion for lung cancer, the patient & his/her primary care physician (PCP) will be notified. Both the patient & the PCP are offered an appointment with the pulmonologist for further evaluation.

The tool was tested during the Senior Expo at HRMC on May 6<sup>th</sup>, 2014. All that attended was given a questionnaire & asked to return if they currently or have ever smoked. Forty-two questionnaires were returned. Contact by phone was attempted with one not being reached by phone. Thirteen participants (31%) were determined to be at high-risk for the development

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of lung cancer. Six people had a CT scheduled, two refused & four was unsure & stated they would call back if they wanted to be scheduled.



This tool has been used at community events such as local festivals, community health fairs & HRMC events. HRMC expanded the scope of service to include self referrals by phone call to the Oncology Nurse Navigator where he/she can be quickly screened over the phone. After having success with the event screenings, the Cancer Committee decided to expand this opportunity to everyone that chooses HRMC for services. This was done by creating an alert to the Oncology Nurse Navigator if the patient reports having had a 30 pack year smoking history on admission to the Emergency Department (ER), Pre-Admissions Testing Department (PAT) &/or the nurse collecting history when admitted to HRMC. In turn, the navigator contacts the patient, educates them about the importance of early detection of lung cancer & offers the service. This was implemented on October 1<sup>st</sup>, 2014. Then at the Lung Cancer Lunch & Learn, a program directed toward healthcare professionals, the announcement was made that all physicians could use the screening tool in their offices to determine if a patient is at high-risk for lung cancer & they would be able to schedule the low dose CT themselves. This would allow for the results to go directly to the PCP after being read by the radiologist. In turn, they would be able to view the results immediately & refer &/or treat the patient as they deem necessary.

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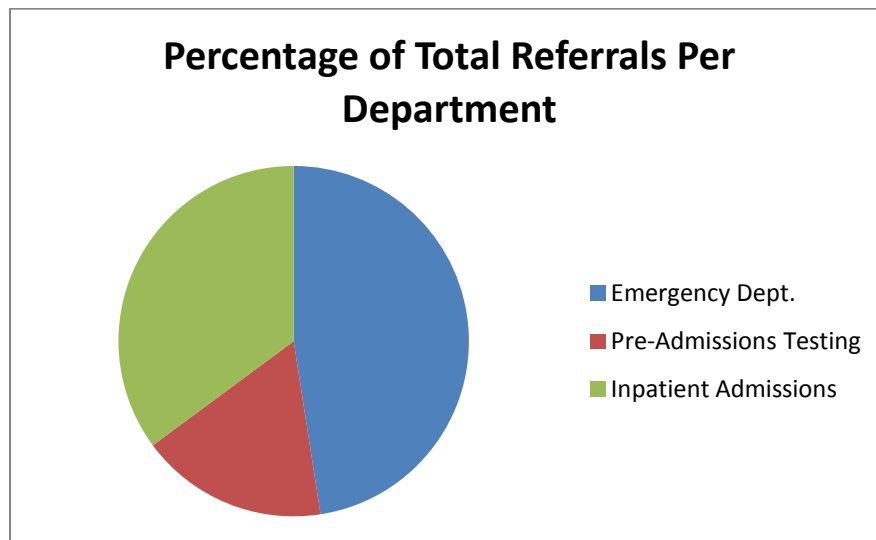
## Results of the Screening Process

Since the beginning of the Lung Cancer Screening Program, the radiology department at HRMC has performed a total of 56 Low Dose CT Lung Scans specifically for lung cancer screening. These are a direct result of the Cancer Committee's efforts in reducing the late stage lung cancer diagnosis's. These were ordered from HRMC's Navigator, Highlands Cancer Center & primary care physicians.

### ***Navigational Consults only:***

**Six months of reporting from October 1<sup>st</sup>, 2014-March 31<sup>st</sup>, 2015:**

<b>Total Consults to Navigation From Screenings in ER, PAT &amp; IP Admissions</b>	
Total Patients referred to the Oncology Nurse Navigator:	1,298
Total Duplicate Referrals (patient visited HRMC more than once):	302
Total Referrals to the Oncology Nurse Navigator:	1,600



During the same six months, a total of 267 patients were contacted via phone call. Of those, 38 (14.2%) refused to participate. Another 148 patients were screened but did not meet the criteria to be considered at high-risk by the guidelines from the USPSTF. A total of 81 patients was scheduled for a low dose CT scan of the lungs. Of the 81 scheduled, 35 kept the appointment for the lung cancer screening. Twelve of those screened had a suspicious finding & was referred for further evaluation.

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<b>Patients Contacted Via Phone Call by the Nurse Navigator</b>	
Refused to be screened	38
Screened but did not meet the criteria	148
Screened and scheduled for Low Dose CT of the Lungs	81
<b>Total</b>	<b>267</b>

