

Lung Cancer Screening



Version 1.2016

This NCCN QUICK GUIDE™ sheet summarizes key points from the complete *NCCN Guidelines for Patients®: Lung Cancer Screening*. The complete guidelines explain which tests and treatments are recommended by experts in cancer. To view and download the guidelines, visit NCCN.org/patients or, to order printed copies, visit Amazon.com.

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Why get screened for lung cancer?



Screening can help find lung cancer early when treatment works best.

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Am I likely to get lung cancer?

Anything that increases your chances of lung cancer is called a risk factor.

Known risk factors are:

- Tobacco smoking
- Second-hand smoke
- Chronic obstructive pulmonary disease or pulmonary fibrosis
- A parent, sibling, or child with lung cancer
- Having had certain cancers
- Major contact with radon, asbestos, arsenic, beryllium, cadmium, chromium, nickel, coal smoke, soot, silica, or diesel fumes

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Should I be screened for lung cancer?

Screening is only for people who are most likely to develop lung cancer.

There are pros and cons to screening. Talk with your doctor about starting a screening program if either of these lists describe you:

- 55 years old or older,
 - Smoked at least 30 *pack years*, and
 - Quit smoking less than 15 years ago.
- or*
- 50 years old or older,
 - Smoked at least 20 *pack years*, and
 - Have one more risk factor other than second-hand smoke.

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Pack years is the number of cigarette packs smoked every day multiplied by the number of years of smoking.



What test best screens for lung cancer?

Helical low-dose computed tomography (LDCT, for short). LDCT makes pictures of the insides of your lungs. Your lungs may have small, round masses of tissue called nodules. Your doctors will look at these nodules for features that suggest there may be cancer.

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How often is screening needed?

- The number, density, and size of the nodule(s) on the first LDCT test are used to decide the timing of the second test. Doctors then look for changes across tests to decide how often screening should happen.
- If you have small or no nodules, get an LDCT test every year for at least 2 years. Medium- and large-sized nodules should be screened again sooner. If there are no changes that suggest there's cancer, follow the screening timetable for the type of nodule you have.

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What if screening suggests there's cancer?

Lung tissue will be removed from your body and tested for cancer. A biopsy removes small samples from the mass. Surgery removes the whole mass. The tissue will be looked at closely for cancer cells.

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