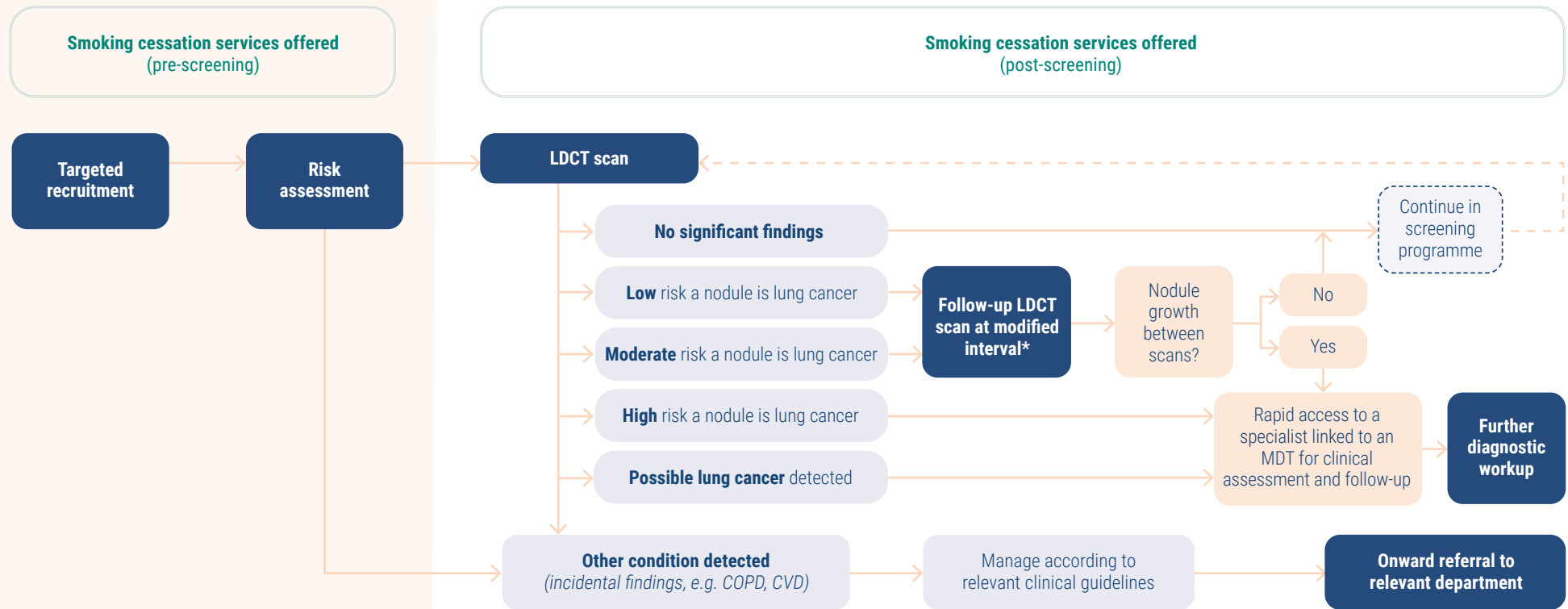


Example pathway for managing results from LDCT screening

Every step of the lung cancer care pathway should be guided by evidence-based standards and built into a common protocol to ensure consistency across participating centres. The success of screening depends on having appropriate monitoring and care escalation

processes for participants with signs of lung cancer. A pathway along which a participant in a low-dose computed tomography (LDCT) screening programme for lung cancer would travel is depicted below, drawing on examples from Australia and Canada.^{1,2}



Adapted from figures published by Cancer Australia¹ and Lam *et al.* (2021).²

* Interval between scans will depend on the screening protocol and differ by the level of risk that a nodule could be lung cancer.

COPD: chronic obstructive pulmonary disease; CVD: cardiovascular disease; LDCT: low-dose computed tomography; MDT: multidisciplinary team.

1. Cancer Australia. 2020. *Report on the lung cancer screening enquiry.*
2. Lam S, Tammemagi M. 2021. *Eur Respir Rev* 30(161): 1-17



The Lung Cancer Policy Network is a global multi-stakeholder initiative set up by the Lung Ambition Alliance. The Network is funded by AstraZeneca, Guardant Health, Johnson & Johnson, Medtronic, MSD and Siemens Healthineers. Secretariat is provided by The Health Policy Partnership, an independent health research and policy consultancy. All Network outputs are non-promotional, evidence based and shaped by the members, who provide their time for free.