

A REMINDER FOR LDCT LUNG CANCER SCREENING PROGRAMS
TO CONTINUE SCHEDULING FOLLOW-UP EXAMS





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A December 2020 study published by the *Journal of the American College of Surgeons*, demonstrated just how important follow up is to getting patients scheduled for their regular screening exams. During the COVID-19 pandemic lung cancer screening rates dropped by almost 75% and the rate at which patients were diagnosed with lung cancer malignancies increased by 200%. This demonstrates the necessity to follow up with patients on a routine basis, remind them often of their upcoming appointments to ensure they return for annual screenings.

Busy LDCT lung cancer programs can be overwhelmed by this task. Many programs still rely on manual tracking and notification of patients and printing and mailing reminder letters. The manual nature of this process makes it a strong candidate to be put on the back burner or be forgotten all together. Even though the thrust of the aforementioned study was focused on the need to make patients feel safe during a global pandemic, the data are still applicable regardless of why patients sometimes avoid follow screening exams. Screening centers should be concerned with the need to go the extra mile to remind patients of the necessity for annual screening exams.

Forward looking centers that have embraced LDCT lung cancer screening software and advanced automation are less likely to become fatigued with day in and day out tasks such as those required of LDCT lung cancer screening programs. LDCT lung cancer screening software program manufacturers tend to focus on optimization of workflow, reporting of results and facilitation of required upload of patient data to the national ACR database, etc. to calculate a clients return on investment, but the most significant ROI lies in two other areas: identification of incidental findings and automatically providing frequent follow up reminders for patients to keep their annual scheduled appointments.

Typically patients that qualify for LDCT lung cancer screening have a higher than normal occurrence of incidental findings due to their advanced age and length of time they have been smoking cigarettes. Incidental findings lead to additional imaging exams which leads to increased revenue for the imaging center (and quite often better outcomes for the patient). Automatic, frequently reminders to patients about of the importance of returning for their annual appointment (and reminding them of when that appointment is scheduled) leads to a higher frequency of patients returning and a greater rate of disease detection at an earlier stage.

In a recent review of available software products available for LDCT lung cancer screening programs I encountered PenRad Technologies (www.penrad.com). PenRad's PenLung program claims to be fit for any sized LDCT lung cancer screening program and at first glance it automates much of the reporting and workflow challenges associated with this screening paradigm. The thing that jumped off the page for me is PenLung's ability to automatically remind patients at pre-set intervals, via email or printed letter multiple times per year, in advance of the patients scheduled appointment. This functionality alone must be a benefit to ensuring patients return for their annual exam.

What's more, PenRad's product can allow patients to complete or update a health history form from the comfort of their own home not only facilitating the check in process but also keeping the waiting rooms empty and instilling a sense of "safe". Instilling a sense of safety by keeping waiting rooms empty, especially during a pandemic as the authors indicated is a key component of making sure patients are



comfortable and more likely to return for their annual screening exam. It is clear to me the addition of automated software packages to a busy LDCT lung cancer screening program is beneficial from multiple perspectives, workflow, overall return on investment and optimization of patient care. PenLung will help in the continued fight for early detection and establishment of a beachhead against lung cancer and support early detection and better outcomes.

*About PenLung (from <u>www.penrad.com</u>)

Lung screening presents several challenges for diagnostic imaging centers offering Low Dose Computed Tomography (LDCT). Patients must be screened for eligibility requirements, and participating centers are required to upload pertinent exam information to a lung cancer screening registry to qualify for payment. PenLung offers diagnostic imaging centers a comprehensive unified lung screening and tracking software solution to manage patients participating in lung screening programs. This system also provides automated web and tablet calculators to collect smoking and environmental risk history for patient eligibility, along with the facility's LungRADS™ reporting combinations, which in turn automates the entire reporting, auditing, and lung cancer screening registry upload requirements.

About the author. Daniel D. Bickford (<u>www.linkedin.com/in/daniel-bickford</u>) is President of Pintail Strategic Consulting which has provided sales and marketing services to the diagnostic imaging industry since 2015. Daniel was co-founder of Confirma Inc., the pioneer of breast MRI CAD technology and manufacturer or of CADstream.