

## PRIMARY CARE REFERENCE GUIDE

# Conversations on Early Detection Lung Cancer Screening Eligibility

This guide supports primary care providers in initiating lung cancer screening conversations and supporting patients through screening, results, and next steps for early treatment.

### Key Communication Strategies

- ▶ Use the **Choice - Options - Decision Talk** framework to guide effective shared decision making
- ▶ **Acknowledge and reassure** to build trust and partnership
- ▶ **Leave the door open** to encourage reflection and make space to revisit
- ▶ **Integrate risk reduction by providing clear actions**, like smoking cessation
- ▶ **Support informed decisions with resources** by referring to provincial lung cancer screening websites, educational materials, and smoking cessation programs



### What is shared decision making?

Shared decision making (SDM) is a collaborative process that balances the evidence-based benefits and risks of screening with the patient's values, preferences, and health priorities — ensuring an informed, individualized decision.

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# Support for Eligible Patients

## Choice

- Invite participation
- Establish partnership
- Empower the patient

## Options

- Screening explanation
- Present benefits and risks, provide transparent and balanced information
- Explore values and preferences
- Align decision with personal goals

## Decision

- Support and respect decision
- Reinforce follow-up
- Finalize plan

## Conversation Aids

### Choice: *Starting the conversation*

- “I’d like to talk with you about lung cancer screening. Before we begin, could you tell me what you already know or have heard about lung screening?”
- “There are specific criteria, such as age and smoking history, that determine eligibility. Based on these criteria, you may be eligible for lung cancer screening.”
- “Determining screening eligibility is a 2 step process. The first step happens here, where we calculate your eligibility through the risk calculator. The next step is a referral to the Lung Cancer Screening Program where they will conduct a more detailed risk assessment to determine your risk level.”
- “You have a choice about whether to be screened. My role is to explain what screening is and what it offers, so we can decide together what feels right for you. Would you like to hear more?”

### Options: *Providing balanced information*

- “Screening consists of a low-dose CT scan. It’s a quick, non-invasive test that looks for small spots in the lungs. Like with any test, there are risks and benefits.”
- “Benefits include finding lung cancer early when it’s treatable, reducing the number of people who die from lung cancer.”
- “Risks include finding spots that turn out not to be cancer (false positives) leading to more tests and potential worry, exposure to small amounts of radiation, and finding very slow-growing cancers that might never have caused problems.”

### Decision: *Support and next steps*

- “Some people want to do anything that might catch cancer early, even if it means more follow-up testing, while others prefer to avoid the worry or risks of false alarms. What matters most to you?”
- “Screening can help find cancer early, but protecting your lung health is still the best way to lower your risk. You can protect lung health by quitting smoking (if you smoke), avoiding second hand smoke, staying active, and seeking medical care for symptoms such as persistent cough, coughing up blood or rust coloured sputum, or shortness of breath.”
- “How important is it to you to maintain lung health? I can provide you with resources on maintaining lung health and reducing risk factors if this is something you want to work on.”

# Ineligible Patients

## Choice

- Invite participation
- Establish partnership
- Empower the patient

## Options

- Screening and eligibility explanation
- Present benefits and risks, provide transparent and balanced information
- Encourage future reassessment. Eligibility is influenced by various factors
- Inform of other prevention strategies

## Decision

- Support and address concerns
- Reinforce follow-up
- Finalize plan

## Conversation Aids

### Choice: *Starting the conversation*

- “I’d like to talk with you about lung cancer screening. Before we begin, could you tell me what you already know or have heard about lung screening?”
- “There are specific criteria, such as age and smoking history, that determine who is eligible. Would you like to hear more?”

### Options: *Providing balanced information*

- “Screening consists of a low-dose CT scan. It’s a quick, non-invasive test that looks for small spots in the lungs. Like with any test, there are risks and benefits.”
- “Benefits of screening include finding lung cancer early when it’s treatable, reducing the number of people who die from lung cancer.”
- “Risks of screening include finding spots that turn out not to be cancer (false positives) leading to more tests and potential worry, exposure to small amounts of radiation, or finding very slow-growing cancers that might never have caused problems.”
- “Based on your age and smoking history, you do not currently meet the criteria for lung cancer screening.”
- “This doesn’t mean you are risk-free, but at this time, the evidence shows the potential benefits of screening do not outweigh the potential risks for people in your situation.”

### Decision: *Support and next steps*

- “It’s important to understand that eligibility changes with age and with other factors, such as resuming smoking, COPD diagnosis, or a new case of lung cancer among a family member. Therefore, we will continue to monitor your health and reassess your eligibility at each visit.”
- “Even if screening isn’t recommended right now, there are other ways to protect your lung health, like quitting smoking if you smoke, avoiding secondhand smoke, staying active, and seeking medical care for symptoms like persistent cough, coughing up blood or rust-coloured sputum, or shortness of breath.”
- “How important is it to you to maintain lung health? I can provide you with resources on maintaining lung health and reducing risk factors if this is something you want to work on.”

## References

- Brenner, A. T., Malo, T. L., Margolis, M., Elston Lafata, J., James, S., Vu, M. B., & Reuland, D. S. (2018). Evaluating Shared Decision Making for Lung Cancer Screening. *JAMA Internal Medicine*, 178(10), 1311. <https://doi.org/10.1001/jamainternmed.2018.3054>
- Carter-Bawa, L., Lafata, J. E., Slaven, J. E., Monahan, P. O., Vielma, A. G., Wernli, K. J., Brandzel, S., Gao, H., & Rawl, S. M. (2025). Navigating shared decision-making in lung cancer screening: Insights into barriers, training, and referral propensity among clinicians. *Patient Education and Counseling*, 140, 109303. <https://doi.org/10.1016/j.pec.2025.109303>
- Dobler, C. C., Midthun, D. E., & Montori, V. M. (2017). Quality of Shared Decision Making in Lung Cancer Screening: The Right Process, With the Right Partners, at the Right Time and Place. *Mayo Clinic Proceedings*, 92(11), 1612–1616. <https://doi.org/10.1016/j.mayocp.2017.08.010>
- Fukunaga, M. I., Halligan, K., Kodela, J., Toomey, S., Furtado, V. F., Luckmann, R., Han, P. K. J., Mazor, K. M., & Singh, S. (2020). Tools to Promote Shared Decision-Making in Lung Cancer Screening Using Low-Dose CT Scanning. *Chest*, 158(6), 2646–2657. <https://doi.org/10.1016/j.chest.2020.05.610>
- Landsteiner, A., Zerzan, N., Ullman, K., Anthony, M., Claussen, A., Bayer, R., Do, T., Gustavson, A., Melzer, A., & Wilt, T. (2024). *Shared Decision-Making for Lung Cancer Screening: A Systematic Review*. Department of Veterans Affairs (US). <http://www.ncbi.nlm.nih.gov/books/NBK616279/>
- Lowenstein, L. M., Deyter, G. M. R., Nishi, S., Wang, T., & Volk, R. J. (2018). Shared decision-making conversations and smoking cessation interventions: Critical components of low-dose CT lung cancer screening programs. *Translational Lung Cancer Research*, 7(3), 254–271. <https://doi.org/10.21037/tlcr.2018.05.10>
- Volk, R. J., & Stacey, D. (2022). Ensuring High-Quality Shared Decision-making for Lung Cancer Screening. *JAMA Oncology*, 8(11), 1561. <https://doi.org/10.1001/jamaoncol.2022.3766>

