Exploring Barriers to and Best Practices in Implementing a Lung Cancer Screening Program at LVHN

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**BACKGROUND / INTRODUCTION**

- Lung cancer is the leading cause of cancer-related deaths, it is expected to be responsible for over 154,000 deaths in the United States in 2018 (1).
- Lung cancer screening rates are significantly sub-optimal with few of the eligible patients being screened.
- Diagnosing lung cancer by screening when patients are asymptomatic is the best way to increase rates of survival, decreasing cases of mortality (2).
- The purpose of the study was to explore best practices in identification of patients eligible for lung cancer screening, identify patient-reported, provider-reported and systematic barriers to screening and provide recommendations for the implementation of a lung cancer screening program at Lehigh Valley Health Network.

**METHODS**

- 256 Lehigh Valley Physician Group Family Medicine and Internal Medicine Department clinicians were sent an email requesting their feedback on a 5-minute anonymous survey. 66 clinicians completed the survey. The anonymous clinician survey was designed to elicit current behavior and identify areas of improvement for lung cancer screening.
- Telephone interviews were conducted with 10 patients meeting the following criteria:
  - Screened for lung cancer between January 1, 2018 and March 31, 2018
  - Referred for screening by a family medicine or internal medicine clinician
  - Scans had no abnormal findings
  - No documentation of a condition that would preclude them from being an interview candidate

**RESULTS**

Clinician and Patient surveys were analyzed separately, the themes aligned to create a unified understanding of experiences with lung cancer screening among each side of the healthcare system within Lehigh Valley Health Network.

**RECOMMENDATIONS**

- Grand Rounds, Departmental Meetings, online reference and pocket guides to increase guideline adherence
- Shared-decision tool and patient education materials created with patient and clinician engagement.
- EPIC upgrades to allow for the automatic identification of eligible lung cancer screening patients.