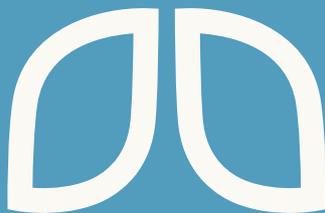


**NATIONAL FRAMEWORK FOR EXCELLENCE IN
LUNG CANCER SCREENING AND CONTINUUM OF CARE**



LUNG CANCER ALLIANCE

DECLARATION OF PURPOSE

Lung cancer kills more Americans than the next four leading cancers combined, including breast and prostate cancers. However, now there is scientific validation that screening those at high risk with low-dose CT scans can save tens of thousands of lives a year and at lower cost for each life saved than other cancer screening methods if it is carried

out safely, efficiently and equitably. Achieving this goal will require a well-informed public, the support of medical professionals, researchers and industry, and their commitment to continuously refine best practices in screening and the continuum of care as advances in imaging, risk assessment, biomarker testing and treatment are validated.

RIGHTS AND EXPECTATIONS

THE RIGHTS OF THE PEOPLE

- You have the right to know if you are at risk for lung cancer.
- You have the right to know that well-organized low-dose CT screening has been shown to significantly reduce the possibility of dying from lung cancer.
- You have the right to clear and unbiased information on the risks and benefits of CT screening.
- You have the right to fair and equitable access to medically appropriate CT screening.
- You have the right to timely and compassionate care if you are diagnosed with lung cancer.
- You have the right to donate your scans and biological specimens to lung cancer research to help find additional life-saving cures.
- You have the right to ask screening sites if they follow the Guiding Principles for Lung Cancer Screening Excellence and provide care in a multi-disciplinary continuum.

GUIDING PRINCIPLES FOR LUNG CANCER SCREENING EXCELLENCE

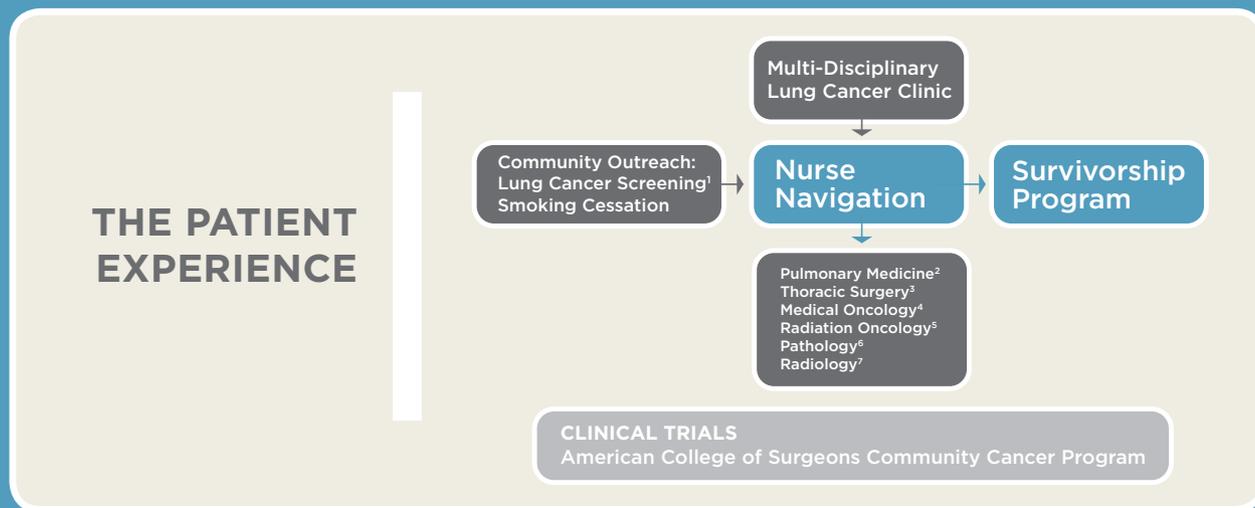
A CENTER OF SCREENING EXCELLENCE

- Will provide clear information, based on current evidence, on who is a candidate for lung cancer screening and the risks and benefits of the screening process in language appropriate to the candidate.
- Must comply with comprehensive standards based on best practices for controlling screening quality, radiation dose and diagnostic procedures such as those developed by the National Comprehensive Cancer Network (<http://www.nccn.org>) and the International Early Lung Cancer Action Program (<http://www.ielcap.org>).
- Works with a multi-disciplinary clinical team to carry out a coordinated continuum of care for screening, diagnosis and disease management based on best practices which include:
 - Experienced radiologists, pathologists and pulmonologists to evaluate the images and specimens obtained in screening and treatment work-ups;
 - Trained thoracic surgeons with experience in minimally invasive techniques who are committed to annual reporting on surgical outcomes;
 - Oncologists and radiation oncologists experienced in the care of patients with lung cancer;
 - Nurses and support staff who will assist patients with coordination of their care within the continuum.
- Will include a comprehensive smoking cessation program in its screening and continuum of care program based on best practices evidence.
- Will report results expeditiously to those screened and the referring physician, and will transmit copies of all reports and scans in a timely manner if requested for a second opinion or transfer of care.
- Will provide those screened with information on how they can donate images and biospecimens to advance research in the prevention, diagnosis and treatment of all types of lung cancer.
- Will participate in outcome data collection in order to further refine risk evaluation, screening and diagnostic protocols.

AN EXAMPLE OF

A CONTINUUM OF CARE FLOWCHART

The Continuum of Care is a roadmap to guide patients and medical professionals through the complex process of screening. This structure is based on best practices designed by William R. Mayfield M.D., Chief Surgical Officer for WellStar Health Systems, current member of The Society of Thoracic Surgeons, Board Certified in Cardiovascular and Thoracic surgery, and his associates at WellStar HealthSystem in 2011.



1. Lung cancer screening consistent with Level 1A data and NCCN and IELCAP guidelines. Access for lower socio-economic strata.

2. Pulmonary medicine with bronchoscopy, image guided biopsy (SuperD), EBUS services.

3. Thoracic surgery with expertise in VATS procedures and VATS lobectomy with complete staging through lymph adenectomy, subscribing to the STS General Thoracic Surgery Database.

4. Medical oncologic treatment consistent with NCCN guidelines and with access to clinical trials for all stages.

5. Radiation oncology with state-of-the-art technology and CyberKnife therapy.

6. Pathology with specific pulmonary expertise and access to genomic tissue profiling.

7. Diagnostic and interventional radiology have direct interface with multi-disciplinary team for nodule evaluation.

FORUM

The advent of lung cancer screening presents a unique public health opportunity to get it done right from the beginning as efficiently, equitably and cost-effectively as possible. If tissue, blood, breath and urine samples are collected during the screening process, biomedical research into all types of lung cancer, precancerous conditions and improved treatments can be accelerated and better coordinated. Accomplishing these goals requires a mechanism for the collection and analysis of data and a system for incorporating imaging and biomedical advances as they are validated. This will be the charge of the Lung Cancer Screening Excellence Forum - a dynamic body of thought leaders in all fields related to lung cancer who are committed to making this the turning point in lung cancer outcomes.

LUNG CANCER ALLIANCE COMMITS TO THE FOLLOWING: WE WILL

ESTABLISH the Lung Cancer Screening Excellence Forum, an ongoing assembly of thought leaders to develop the mechanism for data and specimen collection, and for incorporating validated imaging and biomedical advances into screening and the continuum of care.

CONTINUE to provide responsible and timely information on lung screening and research advancements to the public.

CONTINUE to inform the public of those sites committed to providing lung cancer screening within a continuum of care following best practices.

CONTINUE to work collaboratively with the medical community to provide the public and patient perspective.

CONTINUE to support research in imaging, targeted therapies and the molecular signatures of precancerous cellular environments, risk and malignancy for all types of lung cancers.

CONTINUE to work with all stakeholders to support measures to reduce tobacco exposure in our society, as well as to collaborate with partners to address issues contributing to the stigmatization of lung cancer and work to reduce disparities in the delivery of quality lung cancer screening services.

We gratefully acknowledge the leadership contributions of William R. Mayfield M.D., Chief Surgical Officer for WellStar Health Systems, current member of The Society of Thoracic Surgeons, Board Certified in Cardiovascular and Thoracic surgery, James Mulshine, M.D., Associate Provost for Research at Rush Medical University and Frederic Grannis Jr., M.D., President of City of Hope Medical Staff in the creation of this Framework.

**ABOUT
LUNG
CANCER
ALLIANCE**





LUNG CANCER ALLIANCE (LCA) is the only national non-profit organization dedicated solely to providing support and advocacy for people living with or at risk for the disease.

Our mission is ending injustice and saving lives through an alliance of advocacy, education and support.

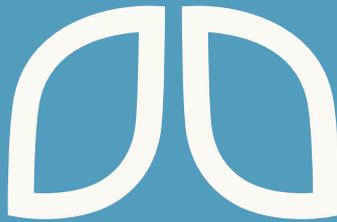
WHAT WE DO

Provide live, real time support, referral and information services for patients, their loved ones and those at risk for the disease. Conduct national awareness campaigns, such as Team Lung Love and the National Shine A Light on Lung Cancer Vigil to educate the public about the facts, dispel myths and share calls-to-action that will reduce the stigma of the disease. Advocate for multiple millions in public health dollars for lung cancer research by using targeted political strategies mobilizing a nationwide network of volunteer advocates.

HOW YOU CAN HELP

- Become a volunteer
- Participate in the National Shine A Light on Lung Cancer Vigil
- Sign up for Team Lung Love
- Contact Congress and ask for support of the Lung Cancer Mortality Reduction Act
- Donate

Join us today and help sustain the lung cancer movement. There are many ways to support our work. Contact us at 1-800-298-2436 or donate@lungcanceralliance.org.



Lung Cancer Alliance | 888 16th Street, NW | Suite 150 | Washington, D.C. 20006

lungcanceralliance.org