



CT Chest, Ontario Lung Screening Program (OLSP) - Medical Directive

Medical Advisory Committee Approved: 23NOV2021

Harmonized

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Authorizing Prescriber(s)

Radiologists working at Lakeridge Health (LH) Oshawa and Bowmanville.

Authorized to Whom

The Registered Nurse (RN) working in the Ontario Lung Screening Program (OLSP) at Lakeridge Health Oshawa who have the knowledge, skill and judgement to select the CT Chest Low Dose (LD) protocol, High Risk Lung Cancer Screening (HRLCS), and Computed Tomography (CT) scans within the OLSP.

Co-Implementers: Medical Radiation Technologists (MRT) employed at Lakeridge Health who have the knowledge, skill and judgement to perform diagnostic imaging as selected by the OLSP RN.

Patient Description/Population

Any adult patient referred to the OLSP, who meets the program criteria as outlined in the OLSP Eligibility Policy and is eligible for a Low Dose CT Chest Scan.

Order and/or Procedure

CT Chest LD HRLCS (IMG201) protocol may be selected by the OLSP RN for any patient who meets the OLSP eligibility criteria.

Indications to the Implementation of the Directive

Any patient referred to the OLSP who meets eligibility criteria, and:

- Has a Tammemagi risk score of greater than or equal to 2%, as calculated by the OLSP RN, and
- Is between 55 and 74 years of age at the time of risk assessment eligibility

Contraindications to the Implementation of the Directive

The directive must not be implemented in any of the following circumstances:

- Patient does not meet the eligibility criteria for OLSP
- Authorization for eligibility is withdrawn by referring physician
- Patient or Substitute Decision Maker (SDM) withdraws from OLSP, or refuses diagnostic investigation

Document Sponsor/Owner Group: Diagnostic Imaging, Date Approved 20OCT2021

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Documentation Requirements

In addition to standard documentation practices, the RN implementing this medical directive must document the following in the electronic health record:

- The name of this medical directive
- The procedure implemented
- The name of the implementer
- The date and time (included in electronic documentation)
- Signature of implementer including credentials/electronic signature

Review/Evaluation Process

The medical directive will be reviewed every two years as directed by the Diagnostic Imaging Program

References

The College of Physicians, Delegation of Controlled Act

OLSP Policies:

- HRLCSP Risk Triage Policy
- HRLCSP LDCT Policy
- HRLCSP Screening Authorization Policy
- HRLCSP Eligibility Policy



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This table must **not** be used independently apart from the Medical Directive

Order Table Form

Order	Indication	Contraindication	Notes (Optional)
CT Chest LD HRLCS (IMG201) protocol	<ul style="list-style-type: none">• OLSP-referred patients who meet referral criteria, and• Patients with a Tammemagi risk score of greater than or equal to 2%, as calculated by the nurse navigator, and• Patients between the ages of 55 and 74 at the time of risk assessment eligibility	<ul style="list-style-type: none">• Patient does not meet the eligibility criteria for OLSP• Authorization for eligibility is withdrawn by referring physician• Patient or substitute decision maker withdraws from OLSP	