

Ontario Lung Screening Program

This handout offers information on the Ontario Lung Screening Program (OLSP). Regular lung screening is recommended for people at high risk of lung cancer. It can find lung cancer early when treatment has a better chance of working.

You may be at high risk of lung cancer and qualify for lung screening if you:

- Are 55 to 80 years of age and,
- Regularly smoked cigarettes for many years.

A screening navigator from the OLSP asks about your smoking and health history to determine your risk score. Your risk score indicates the chance of you getting lung cancer in the next 6 years (example: if your risk score is 2, you have a 2 % chance of getting lung cancer in the next 6 years; if you risk score is 10, you have a 10% chance of getting lung cancer in the next 6 years). You are eligible to participate in the OLSP if your risk score is 2 or more.

Lung screening

If you qualify for lung screening, you will be offered a test called a “low-dose CT scan”.

During a low-dose CT scan, you lie on a table that moves into a large donut-shaped machine called a “scanner”. The scanner uses a small amount of radiation to take detailed pictures of your lungs. The test is not painful and only takes a few minutes. No medications or needles are given to you for this test.

The low-dose CT scan looks for lung nodules (spots on your lungs). The test can see the nodules but cannot tell if they are cancer. Nodules can be caused by cancer, infections, scar tissue or other health problems. Most nodules are not cancer. Lung cancer usually grows from a lung nodule. Lung nodules found during screening should be watched to see if they change or get bigger. More testing is needed to decide if a nodule is cancer.

A low-dose CT scan also takes pictures of the body parts near your lungs. This includes your heart, bones, kidneys, liver, and thyroid. These results are sent to the doctor or nurse practitioner who referred you to the OLSP. This person is responsible for ordering more tests if anything abnormal is found in other body parts.

A doctor reviews the results of your low-dose CT scan and gives them a ‘scan score’. Your scan score tells us when you should have your next low-dose CT scan or if other tests are needed. We will call you about 1 week after your low-dose CT scan with this information. The table on the next page lists the scan score and what it means. It also offers information on the recommended next steps.

Scan Score	What it means	Recommended next step
0	Your scan showed a possible infection or inflammation that needs follow up.	Your next low-dose CT scan will be in 1 to 3 months.
1	Your scan did not show any nodules that need follow-up.	Your next low-dose CT scan will be in 12 months.
2	Your scan showed 1 or more nodules with a very low chance of being or becoming cancer.	Your next low-dose CT scan will be in 12 months.
3	Your scan showed 1 or more nodules with a low chance of being or becoming cancer.	Your next low-dose CT scan will be in 6 months to see if the nodules have changed.
4A	Your scan showed 1 or more nodules that might have a chance of being or becoming cancer.	Your next low-dose CT scan will be in 3 months to see if the nodules have changed.
4B	Your scan showed 1 or more nodules that need more testing.	You will be sent for more testing.
4X	Your scan showed 1 or more nodules that need more testing.	You will be sent for more testing.

If your next step is another low-dose CT scan

The lung screening team gives you the appointment information for your next low-dose CT scan. It is important you have this low-dose CT scan. Screening works best if you are tested regularly.

If your next step is to have more testing

Someone from the Thoracic (lung) Diagnostic Assessment Program (DAP) calls you to talk about the tests you need. Having more tests does not mean you have lung cancer. If you are diagnosed with lung cancer, the Thoracic DAP team offers you information on treatment options and helps you decide what option is right for you.

Making a decision about regular lung screening

It may not be easy for you to make a decision about regular lung screening with a low-dose CT scan. To make a decision that is right for you, it helps to think about:

- The potential benefits and risks of screening, and
- Your values, beliefs, and what is most important to you.

Benefits of lung screening

Getting screened regularly with a low-dose CT scan may find lung cancer when it is smaller and easier to treat. This may mean

- Your chance of dying from lung cancer is lower.
- Fewer treatments are needed.

Risks of lung screening

Lung screening tests are not perfect. They have risks that include:

- A low-dose CT scan can show a nodule that turns out not to be cancer in a follow up test.
- You may need to have a lung biopsy (where a very small piece of the lung is removed) or surgery. The possible side effects of a lung biopsy are bleeding, infection or a collapsed lung. These side effects do not happen for many people.
- Lung cancer screening may find a slow growing cancer not harmful to your health. It can be hard to tell which cancers are more harmful.
- You are exposed to a small amount of radiation when you have a low-dose CT scan. There is a chance the extra radiation from many low-dose CT scans over time may cause cancer. The benefits of finding cancer early are greater than the risk of being exposed to radiation from a low-dose CT scan. The amount of radiation from a low-dose CT scan is:
 - More than what you are exposed to with a chest X-ray,
 - Less than what you are exposed to with a regular chest CT scan, and
 - About the same what your exposed to with 1 year of natural background radiation (radiation from the sky and the ground, and through breathing, eating and drinking).
- You can have a lung cancer not found on a low-dose CT scan. You can also have a lung cancer that may grow between your low-dose CT scans.
- Not all cancers found with a low-dose CT are caught early enough. Your cancer may already spread to other parts of the body or you may have a type of cancer not easily treated.

Questions or concerns

Talk to your doctor, nurse practitioner, or the screening navigator from the OLSP if you have questions or concerns about any information in this handout. You can call the screening navigator at 905-576-8711 extension 34449 from 8 am to 4 pm, Monday to Friday (except on holidays).

Help to quit smoking

People who stop smoking greatly reduce their risk of developing a disease such as cancer and dying early. Go to the Lung Screening Cancer page on the Central East Regional Cancer Program's website at hrlung.ca for more information. You can also ask the OLSP screening navigator for a copy of the [Getting Help to Quit Smoking](#) handout.

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