American College of Radiology Lung Cancer Screening Registry Summary Tip Sheet

Medicare requires that information and results of screening are reported through an approved registry. Reporting of this information is required for Medicare reimbursement purposes. The only approved registry, as of April 2021, is the American College of Radiology Lung Cancer Screening Registry. The Lung Cancer Screening Registry collects data to help providers meet quality reporting requirements.

**Who does the Lung Cancer Screening Registry collect for?**

Data sent to the Lung Cancer Screening Registry is transmitted for all individuals that have had a low dose CT specifically for lung cancer screening, regardless of insurance type. Collecting data on all lung cancer screening participants allows individuals programs to request quality feedback reports and also allows a population level overview of all screening in the United States.

**Information and data collected by the Lung Cancer Screening Registry and how navigators can help:**

Data collected includes both required and optional data points, and falls into four categories:

1. Screening facility and patient information – Information about the imaging facility and general demographics and health characteristics about the patient. *This information can often be collected by the navigator.*
2. General appropriateness of screening and exam study data – Information indicating that the patient is appropriate for lung cancer screening and results of the screening exam. *Patient navigators can help collect the appropriateness of screening information.*
3. Follow-up on screening diagnostic procedures (within 1 year) and lung cancer incidence. – Information about any diagnostic procedures or lung cancer diagnoses following a screening CT. *Navigators may be able to help collect this information depending on what type of screening program that integrated with and where the patient has diagnostic procedures done.*
4. Additional lung cancer risk factors – Information on known lung cancer risk factors. *This information can often be collected by the navigator.*

See the below table for additional information on required data elements and for information on optional data variables that patient navigators can help collect for transmission to the Lung Cancer Screening Registry.

**What is the purpose of the Lung Cancer Screening Registry?**

One of the main purposes of the Lung Cancer Screening Registry is to meet screening quality standards set forth by Centers for Medicare and Medicaid put in place for reimbursement purposes. Additionally, the Lung Cancer Screening Registry provides an opportunity to collect data on all screening specific low dose CTs to ensure outcomes and potential benefits and risks are being monitored.

**What is data submitted to the Lung Cancer Screening Registry used for?**

Data submitted to the Lung Cancer Screening Registry is mostly used to monitor outcomes of lung cancer screening for CT interpretation and use of Lung-RADs. The registry also provides feedback reports for individual providers or programs and information can be requested for additional research purposes.

**How is data transmitted to the Lung Cancer Screening Registry?**

Data can be transmitted to the Lung Cancer Screening Registry by manual entry with an online form, uploaded to the registry electronically, or submitted with the help of your IT department of a certified software partner.

**Where can I find more information about the Lung Cancer Screening Registry?**

The American College of Radiology has a [website](https://www.acr.org/Practice-Management-Quality-Informatics/Registries/Lung-Cancer-Screening-Registry) specifically dedicated to the Lung Cancer Screening Registry that offers additional information on data collected, how to participate and submit data, and provides summary statistics on lung cancer screening outcomes on a state by state basis.

**Required Lung Cancer Screening Registry Data Elements**

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| **Data Type** | **Minimum Required Data Elements** | **Data Source** |
| **Required variables for Medicare reimbursement purposes** |
| Facility | Identifier | Imaging Facility |
| Radiologist (reading) | National Provider Identifier (NPI) | Imaging Facility |
| Patient | Identifier (Medicare Beneficiary Number, Name, Medical Record Number, etc.) | Ordering provider |
| Ordering Practitioner | National Provider Identifier (NPI) | Ordering provider |
| CT scanner | Manufacturer, Model | Imaging Facility |
| Indication | Lung cancer low dose CT screening - absence of signs or symptoms of lung cancer | Ordering provider |
| System | Lung nodule identification, classification and reporting system | Imaging Facility |
| Smoking history | 1) Current status (current, former, never). 2) For individuals that formerly smoke cigarettes, years since quitting. 3) Pack-years as reported by ordering practitioner. 4) For individuals that currently smoke cigarettes, smoking cessation interventions available | Ordering provider\* |
| Effective radiation Dose | CT Dose Index (CTDivol) | Imaging Facility |
| Screening | Screen date - Initial screen or subsequent (annual) screen. | Imaging Facility |
| **Additional required variables for quality improvement and monitoring benefits of lung cancer screening** |
| Patient Age  | Patient’s Date of Birth | Ordering Provider\* |
| Patient Sex | Patient’s Sex (Male, Female, Other, Unknown) | Ordering Provider\* |
| Shared Decision-Making | Documentation of shared decision-making (Yes, No, Unknown) | Ordering Provider\* |
| Patient Size | Patient height and weight | Ordering Provider\* |
| Low dose CT protocol selected | Modality (type) of chest CT | Imaging Facility |
| DLP (mGy\*cm)Radiation dose monitoring | Radiation dose index field | Imaging Facility |
| Resolution and nodule characterization | Reconstructed width of CT images | Imaging Facility |
| Follow-up exam information related to lung cancer screening | 1) Date of follow-up | Dependent on location of diagnostic follow-up |
| 2) Type of follow-up diagnostic |
| 3) Tissue diagnosis (if applicable) |
| 4) Tissue diagnosis method (if applicable) |
| 5) Location from which sample was obtained (if applicable) |
| 6) Histology (if applicable) |
| 7) Stage – Clinical or pathologic (if applicable) |
| 8) Overall stage (if applicable) |
| 9) Period of follow-up for incidence (months) |

\*Data fields that patient navigators can collect from the electronic medical record.

Required data elements that originate from the ordering provider can easily be included in the written order that is required to be sent to the imaging center for the low dose CT procedure. Examples of written orders can found on the [American College of Radiology website.](https://www.acr.org/-/media/ACR/Files/Registries/LCSR/LCSR-Data-Elements-from-Ordering-Physician-Records.pdf)
**Optional Data Elements:** The Lung Cancer Screening Registry also collects data on several items that are helpful for doctors and researchers to monitor lung cancer screening at a population level. Your organization may choose to collect these fields. Optional data elements can found in the Lung Cancer Screening Registry [Exam Form](https://nrdrsupport.acr.org/support/solutions/articles/11000041249?_ga=2.220640728.1556378352.1619463757-910404051.1599788131) and the [Data Dictionary.](https://nrdrsupport.acr.org/support/solutions/articles/11000041247?_ga=2.14456695.1556378352.1619463757-910404051.1599788131)