

Life-saving potential: lung health awareness and screening

Prioritizing lung health and screening are the best ways we can reduce the burdens of lung cancer for those at high risk.

Let's take it on together, today.



Should your patient get a lung screening?

With new screening guidelines, more patients meet the criteria. See who fits the profile.



81% increase¹

in patients eligible for lung cancer screening under expanded guidelines



50-80 years old²

expanded age range (previously 55-80 years old)



20 pack-year smoking history²

down from previous 30 pack-year smoking history

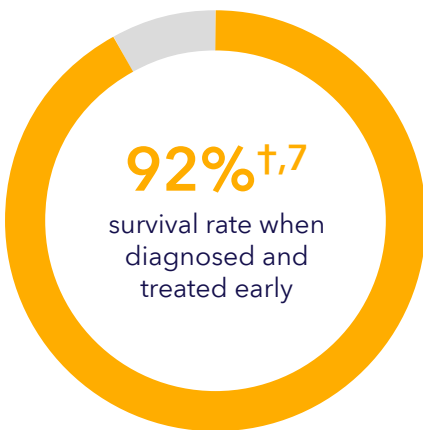
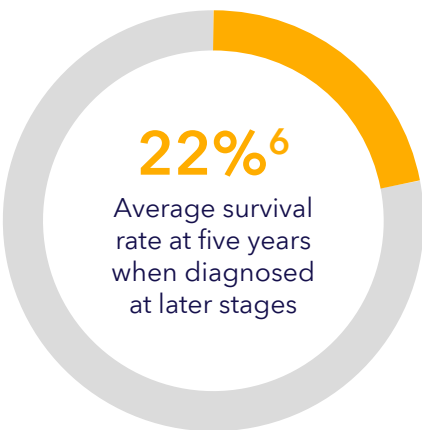
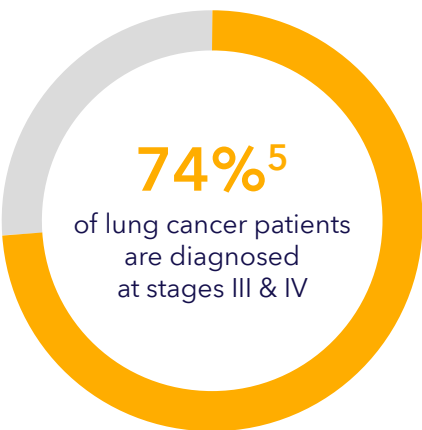


Last 15 years²

Cigarette use within that time period

What your patients need to know

Share the facts with your patients, and motivate them to get screened early and regularly. Screening with LDCT extends a patient's life expectancy compared to no screening and assists in diagnosing lung cancer at earlier stages.^{3,4}



†Based on 10-year survival after diagnosis and resection within one month.

Lung health program support

Lung cancer is complex. We can help.

1

Detect early

Identify patients eligible for lung screening and other early detection efforts.

2

Biopsy, when indicated

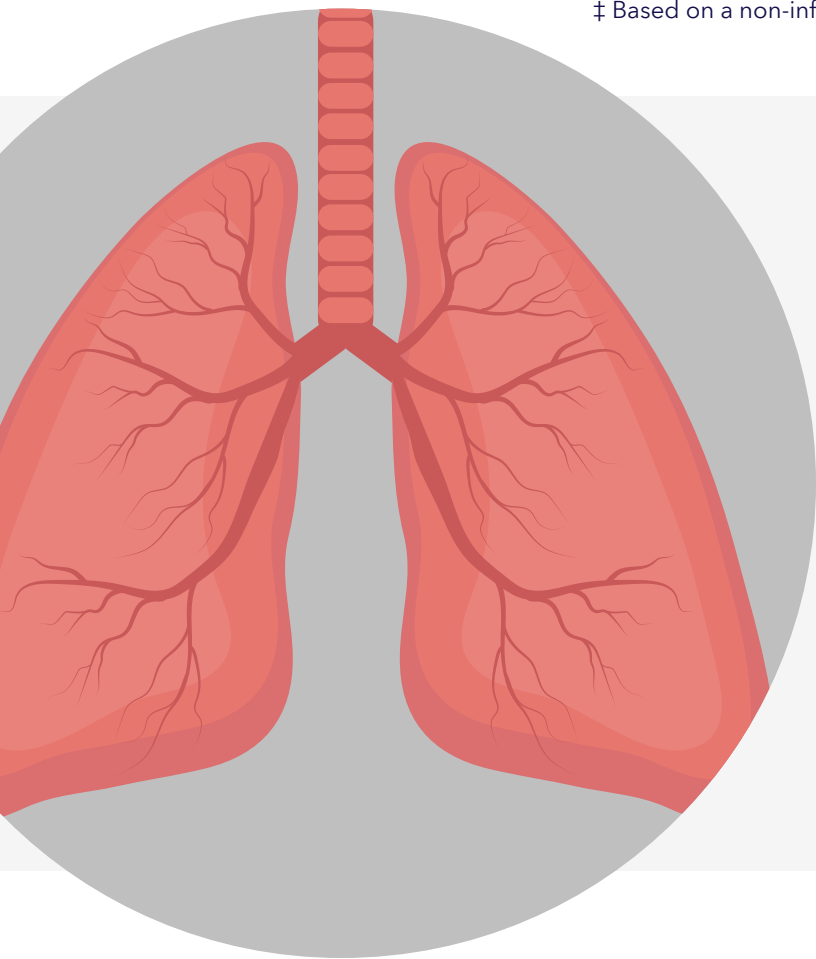
ILLUMISITE™ fluoroscopic navigation platform is the first and only solution that is clinically proven to offer a safer biopsy experience and the same diagnostic yield of CT-guided biopsy. ‡⁸

3

Provide treatment options

Foster multidisciplinary approach and treatment pathways for patients.

‡ Based on a non-inferiority RCT; safer biopsy based on complication rate.



QR CODE

Start their screening

Share our QR code with patients who meet the criteria for lung screening to schedule their low-dose CT scan.

Your institution's logo here



If you have questions about lung cancer screening, diagnosis, or support, contact us for more information.

Not for use in pediatric patients or those with unstable hemodynamic status. Specific risks include but not limited to: bleeding, pneumothorax, and respiratory failure. Please refer to IFU for complete contraindication and risk information.

1. Henderson LM, Rivera MP, Basch E. Broadened Eligibility for Lung Cancer Screening: Challenges and Uncertainty for Implementation and Equity. *JAMA*. 2021;325(10):939-941. doi:10.1001/jama.2020.26422. 2. U.S. Preventative Service Task Force. Final Recommendation Statement. Lung Cancer: Screening. Updated March 9, 2021. Accessed February 4, 2021. <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/lung-cancer-screening>. 3. de Koning HJ, van der Aalst CM, de Jong PA, et al. Reduced Lung-Cancer Mortality with Volume CT Screening in a Randomized Trial. *N Engl J Med*. 2020;382(6):503-513. 4. Aberle DR, Adams AM, Berg CD, et al. Reduced lung-cancer mortality with low-dose computed tomographic screening. *N Engl J Med*. 2011;365(5):395-409. 5. Gildea TR, DaCosta Byfield S, Hogarth DK, Wilson DS, Quinn CC. A retrospective analysis of delays in the diagnosis of lung cancer and associated costs. *Clinicoecon Outcomes Res*. 2017;9:261-269. 6. Siegel RL, Miller KD, Fuchs HE, Jemal A. Cancer Statistics, 2021. *CA Cancer J Clin*. 2021;71(1):7-33. 7. Henschke CI, Yankelevitz DF, Libby DM, Pasmantier MW, Smith JP, Miettinen OS. Survival of patients with stage I lung cancer detected on CT screening. *N Engl J Med*. 2006;355(17):1763-1771. 8. Lentz R. Navigational Bronchoscopy versus Computed Tomography-guided Transthoracic Needle Biopsy for the Diagnosis of Indeterminate Lung Nodules: initial results from the VERITAS multicenter randomized trial. *AJRCCM*. Published online May 1, 2024. https://www.atsjournals.org/doi/abs/10.1164/ajrccm-conference.2024.209.1_MeetingAbstracts.A6665