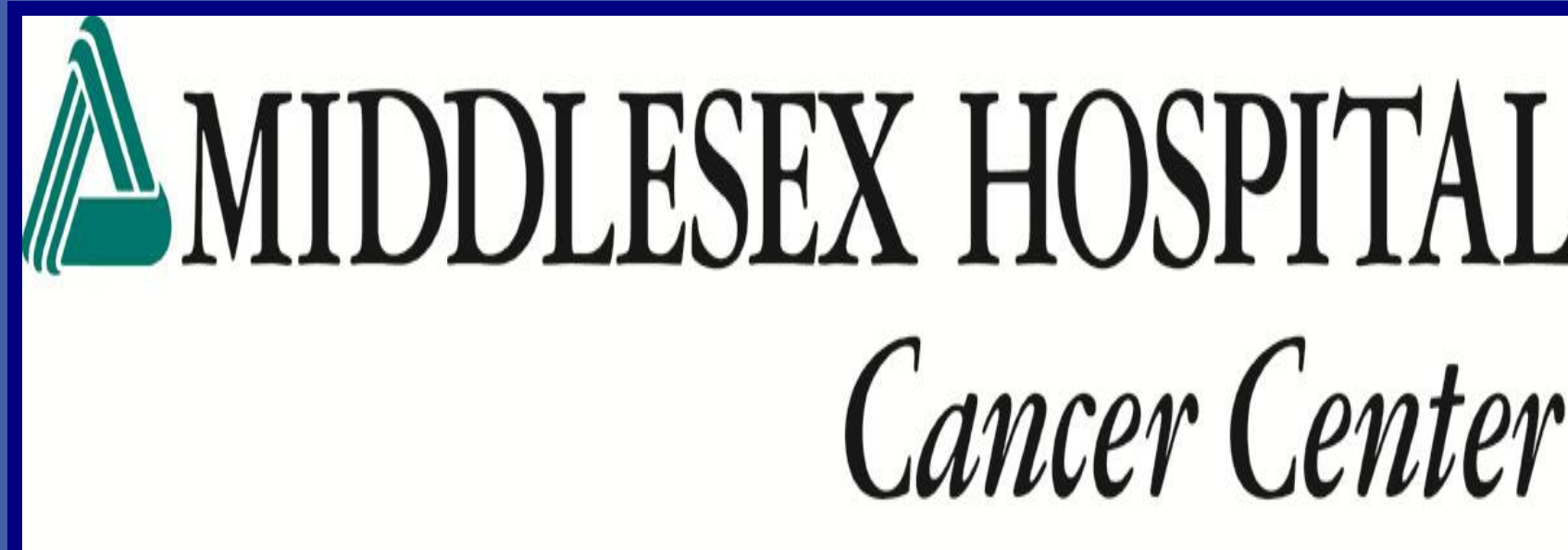


# The Role of the Nurse Navigator in Lung Nodule Follow-Up

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## Objective

To ensure appropriate follow up for the multiple incidental pulmonary nodules found on imaging studies.

## Materials and Methods

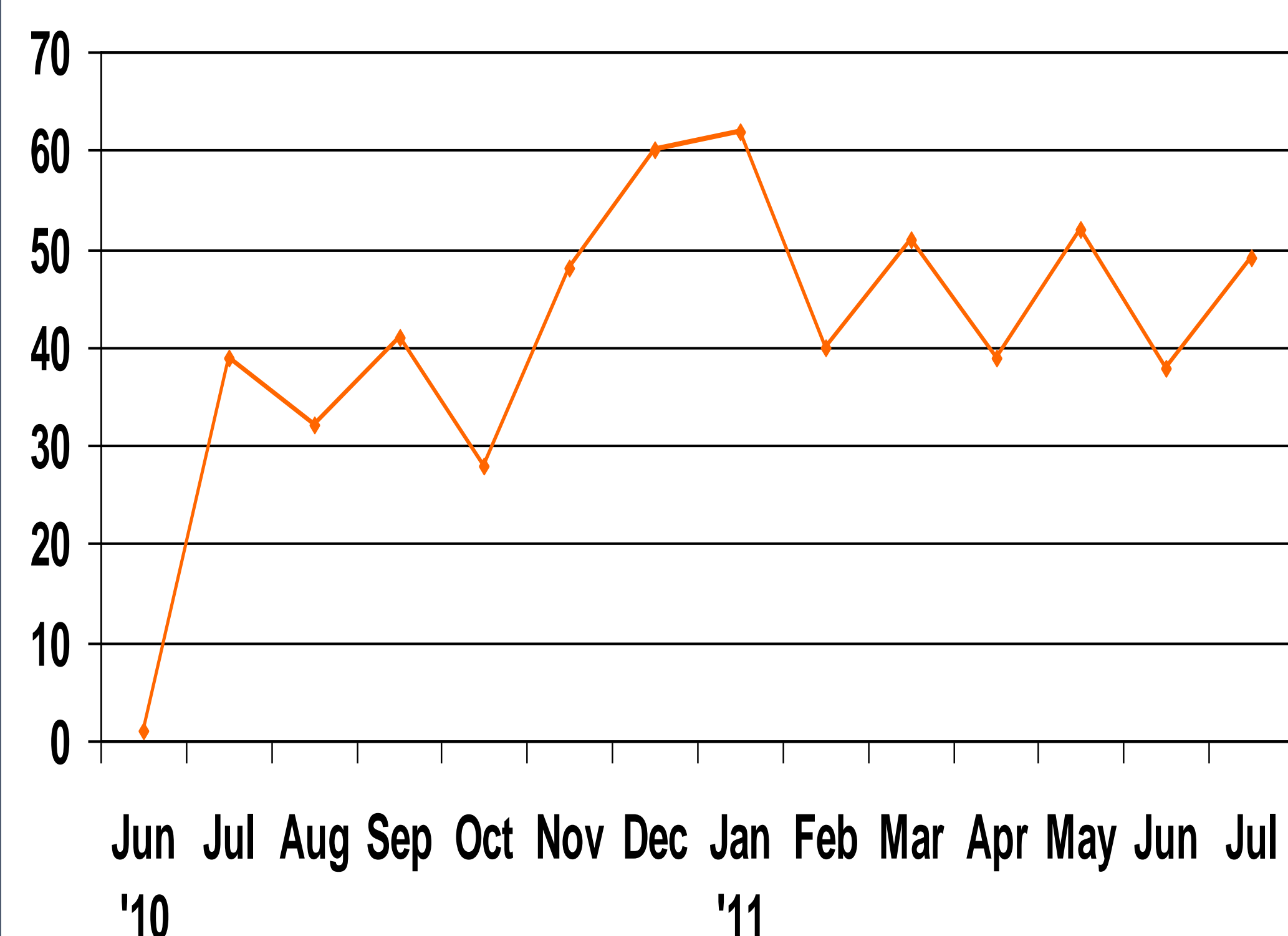
A lung nurse navigator program was established at Middlesex Hospital in 2005. Part of the navigator role was to implement surveillance on lung nodules found on CT scan. The radiologists were concerned that not all abnormal findings they reported were getting the recommended follow up. The nurse navigator and a radiologist met in June of 2010, to plan a system whereby all abnormal findings were tracked and followed up on. We achieved this by developing a database accessible to both the radiologist and the nurse navigator which ensures appropriate follow up in collaboration with the primary care physician. The Fleischner's Society Guidelines are implemented by our institution, for all lung nodules found, and pulmonary consults are offered as appropriate. The Fleischner's Society guidelines were established to provide recommendations for follow up and management of nodules smaller than 8mm, detected incidentally at nonscreening CT scan.

## Results

The collaboration of the lung nurse navigator, radiology physicians, pulmonologists, and the emergency department physicians, has increased the number of patients referred to the lung surveillance program at our institution by 75% overall. The quality assurance program was started in June of 2010, and over 500 patients have been screened through the program. If further surveillance is warranted, patients are placed on the surveillance portion of the lung program.

In January of 2010, before the initiation of the quality assurance program, the number of patients on the surveillance portion of the lung program was seven. This number increased to 37 patients in January of 2011, an increase of 82%. This quality assurance program has been utilized by 100% of the radiologists. The program has not only increased the number of referrals to the lung program, both for surveillance and for the lung cancer portion of the program, but has created an increased collaboration between the nurse navigator, and the physicians in the community, as evidenced by the increase in the number of calls from primary care physicians to the lung nurse navigator.

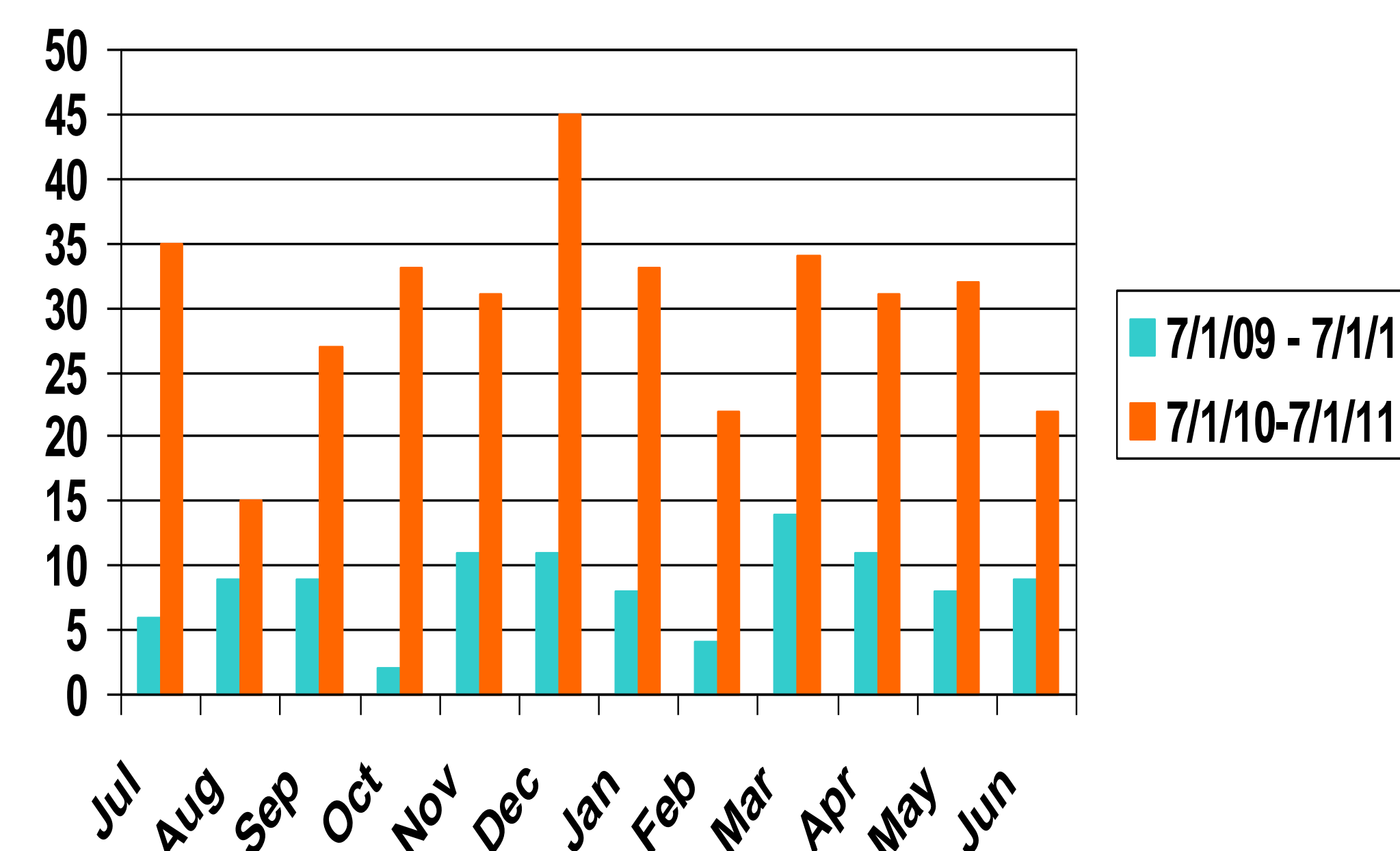
Lung QA Program Accruals



The QA program has increased the number of patients on the Lung Surveillance portion of the program on average by 75% since July 2010.

The Lung Quality Assurance (QA) program was started in June of 2010, and over 500 patients have been screened through the program.

Lung Surveillance Accruals



## Conclusions

Nurse navigators can play an important role in lung nodule surveillance, which benefits the patients, as well as the physicians. The recommendation for follow up of pulmonary nodules has been set by the American College of Chest Physicians; but uniform follow up is not always the case. Primary care physicians look for guidance from radiologists as to the recommended follow up of abnormalities. Likewise, emergency department physicians, upon finding incidental nodules, are looking for a system in which follow up is ensured. The quality assurance program at the Middlesex Hospital Cancer Center, led by the lung nurse navigator, provides this vital service.

## References

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