



MONTCLAIR RADIOLOGY

Serving the Community for Over 75 Years



550 SUMMIT AVE, JERSEY CITY

116 PARK ST, MONTCLAIR

20 HIGH ST, NUTLEY

271 GROVE ST, VERONA

1140 BLOOMFIELD AVE, WEST CALDWELL

TEL: 973-661-4674

ULTRA LOSE DOSE CT LUNG CANCER SCREENING

Patient: _____ Acct #: _____
Age: _____ Date of Birth: _____ Gender: _____ Ht: _____ Wt: _____
Ordering Physician: _____ NPI: _____
Facility: _____ Accession #: _____

Lung Cancer Screening Criteria

Medicare and most private healthcare plans cover LDCT lung screening costs if you can answer "yes" to **all** of the next 3 questions and provide an estimate of pack-year smoking history

ALL PATIENTS

- YES NO Current smoker or former tobacco smoker
- YES NO Age 55-75 years
- YES NO Asymptomatic (no current signs or symptoms of lung cancer)

CURRENT AND FORMER SMOKERS

Number of years you smoked. Number of packs per day.

CURRENT SMOKING STATUS

- YES NO **Current smoker**
- YES NO Has your physician provided smoking cessation guidance?
If no, Montclair Radiology can provide guidance

--OR--

- YES NO **Former smoker** Years since quitting

Please sign below to verify that all information entered is correct.

Patient Signature: _____ Date: _____

Authorization

Patients meeting all eligibility criteria for an initial or annual LDCT screening are typically covered under preventative care coverage.

- Medicare
- Commercial Insurance
Authorization required for
CPT Code S8032 or G0297

Auth# _____

Frequency

- This is my first LDCT lung screening.
- This is **not** my first LDCT lung screening.

Date of my last LDCT lung screening: _____

11 full months must have passed since your last screening.

TECHNOLOGIST ATTESTATION

Technologist must review and complete all fields on this form.

- YES NO The patient has met the 30 pack-years requirement.
Patient smoked 1 pack/day for 30 years or PT smoked 2 packs/day for 15 years or PT smoke 1 ½ packs/day for 20 years.
- YES NO Smoking cessation guidance has been given to the patient.

Technologist: _____ Initials: _____

Referring physicians can bill Medicare for a consultation before ordering a CT Lung Screening using the code below:
G0296 – Counseling visit to discuss need for lung cancer screening (LDCT) using low-dose CT scan (service is for eligibility determination and shared decision making)