

3.05 A Dedicated Solitary Pulmonary Nodule Service Reduces Inappropriate Surveillance CT

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Our Lady of Lourdes Hospital has a dedicated solitary pulmonary nodule service since 2020 that includes a multidisciplinary (MDT) meeting with the radiology and respiratory team. We review the activities of this service and compared the number of surveillance CT performed before the service was established. A retrospective study comparing incidental CT reports of solitary nodules in 2018 versus 2021 was performed. Eighty-nine percent (n=113) of nodules reported in 2021 were discussed at the MDT meeting with 28 percent (n=32) discharged at first review based on the BTS 2015 guidelines. Seventy-one patients (88%) were followed up to completion for surveillance CT with 9 patients referred to the Rapid Access Clinic. Meanwhile, 106 solitary nodules were reported in 2018. Ninety-one (86%) of patients received surveillance CT although 16 cases did not require surveillance as per BTS guidelines. 42 (46%) surveillance CTs were performed outside the BTS guidelines including 6 weeks and 6 months' timeframe. Nineteen (20%) cases completed surveillance beyond the recommended time which led to an excess of 1.7 CTs for 2018 versus 2021.

Here we report that a dedicated solitary pulmonary nodule service reduces inappropriate surveillance CT which may overall reduce health cost as well as patient's anxiety.

References

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Conflict of Interest: None to declare