

Non-Small Cell Lung Cancer Survivorship Guideline

Original Date: 9-26-18 Review Date:

MaineHealth Thoracic Oncology Work Group

<u>Stage</u>	Surveillance Plan	Role Delineation	Post Treatment Needs	<u>Behaviors</u>	<u>Treatment Summary</u>
I.	CT scan and visit every 6 months for 2 years, then every 12 months up to 5 years.	Radiation Oncology if patient received SBRT Surgical follows scans. *Follow-up by Surgeon (or pulmonologist if distance is prohibitive)	Post Radiation Post Surgical: -Respiratory/Pulmonology -Pain -Physical Disability	Smoking Cessation Nutrition Weight Management Physical Activity Annual Influenza Vaccine Pneumococcal Vaccine Avoid sun; Use	Treatment Goal: Curative/Palliative Surgery Date Surgical Procedure/Location Lymph Node Procedure Secondary Malignancy (MCCP) Recurrence date (MCCP)
II.	CT scan and H&P visit every 6 months for 3 years, then every 12 months up to 5 years.	Surgical follows scans. *Follow-up by Surgeon (or pulmonologist if distance is prohibitive) Medical Oncologist follows post-treatment effects.	Post-Chemotherapy Effects	Sunscreen Limit Alcohol Intake Stress Management	Radiation Treatment Amount/ location/ type Start/End treatment date Systemic therapy agents administered: Chemotherapy, Immunotherapy,
III.	Resected: CT scan and H&P visit every 3-6 months for 3 years. Then every 12 months up to 5 years.	therapy follow-up by	Post Radiation Post Surgical: - Respiratory/Pulmonology -Pain -Physical Disability		Endocrine therapy, other Agents Used – (Listed and # of cycles) Start/End Date Serious Toxicities During Treatment Associated Hospitalization Comments
IV.	Palliative: Individualized, patient-specific treatment.	Medical Oncologist follows post-treatment effects. Thoracic Surgeon follows up on imaging exams. Radiation Oncologist follows- up post radiation therapy.			
SBRT	Radiation Therapy Follow-up: 3 months, 6 months, then annual thereafter CT scan up to 5 years.	Radiation Oncologist			