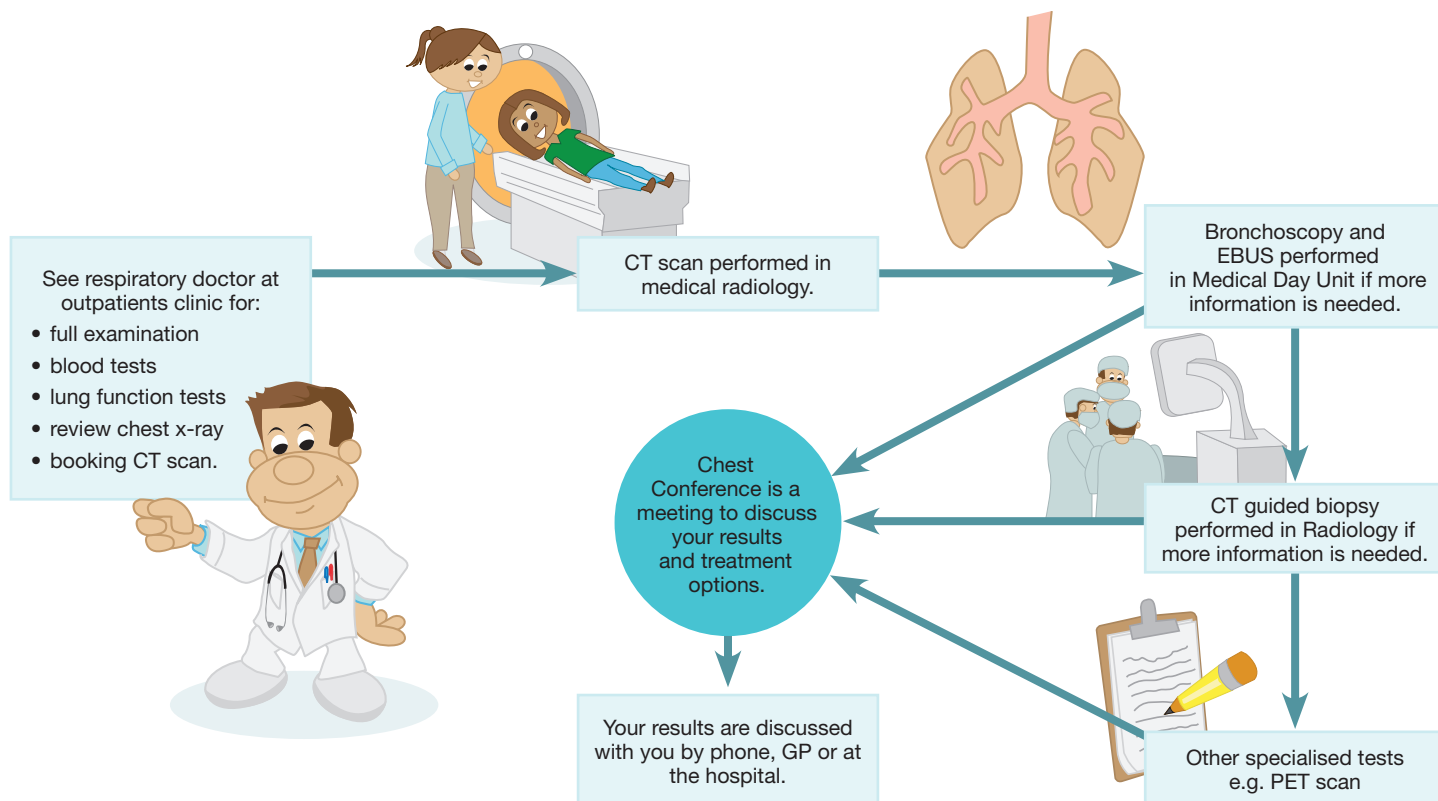


Diagnosing your lung disease

(including lung cancer)

Finding out what is happening in your lungs can be a time of great anxiety for you and your family. A 'lesion' or 'shadow' in your lung may show on your chest x-ray. A number of tests will need to be done as getting a diagnosis is complicated. The specialists treating lung disease want an accurate diagnosis so that they know they are offering the right treatment for you. Below is a pathway of tests you may require to help your specialist make an accurate diagnosis. You may not need to have all of these tests.



• Computer Tomography (CT) scan - Chest

This scan gives a three dimensional view of your chest. It shows exactly where the lesion is in relation to other important organs, such as the heart, blood vessels and ribs, and what size it is. This is called 'staging' and is important to make the right treatment choices. The CT scan also sees if there are other lesions elsewhere in the body. This investigation usually takes less than an hour to do.

• Bronchoscopy and Endobronchial Ultrasound (EBUS)

This is a procedure where the specialist is able to see your breathing tubes, inside your lungs. This is done using a small (5mm) flexible telescope, and allows the doctor to take some samples to send to the laboratory. These samples are called 'brushings' 'washings' and 'biopsies'.

If you have enlarged lymph glands around the breathing tube, the specialist may perform an EBUS on the same day as the bronchoscopy. EBUS is similar to bronchoscopy but it has a special ultrasound guided probe at the tip of the flexible telescope to locate and take samples of the lymph glands.

These are very safe and quick tests and are usually performed while you are an outpatient. You will be given sedation and local anaesthetic, you can generally go home the same day.

• CT Guided Chest Biopsy

This is a test where local anaesthetic numbs the chest wall and a special needle is inserted directly into the lung lesion, between the ribs. This test is always performed by an experienced specialist, and uses the CT machine. This is performed as a day procedure and you will go home after a few hours. We have a separate pamphlet giving more detail on CT guided chest biopsy.

• Positron Emission Tomography (PET) scan

A PET scan is an imaging procedure showing the chemical function of an organ or tissue, rather than its structure, as in a CT scan. PET is an extremely sensitive way to detect the early stages of diseases such as cancers. Small amounts of tumour may be found which are not detectable by other imaging procedures. A PET scan helps doctors choose the best treatment for you - surgery, radiation treatment or chemotherapy. A PET scan can also help to monitor the effectiveness of therapy. Combining a PET scan with a CT scan further improves information. From a PET-CT scan the doctor can see that cancer is present and identify its exact site or location.

• Chest Conference

When the respiratory doctors have enough information on your diagnosis, your case will be discussed at this meeting held every week at Waikato Hospital.

Present at this meeting are a number of specialists from different departments, a radiologist who looks at your CT scan, respiratory consultants, cardiothoracic surgeons, the pathologist, and oncologists. All the relevant information is discussed, and an agreed treatment plan is made that will be specific for you and your circumstances. You are not required to attend this meeting, as a number of other patients and confidential information are also discussed. A report on this meeting is sent to your GP the next morning and the outcome will be discussed with you and your family within two days of the meeting, including details of the proposed treatment plan. No action will be taken without your agreement and full understanding at each step of the way.

If you have any questions you can contact the clinical nurse specialist who is involved in your care:

Name: _____

Contact: _____