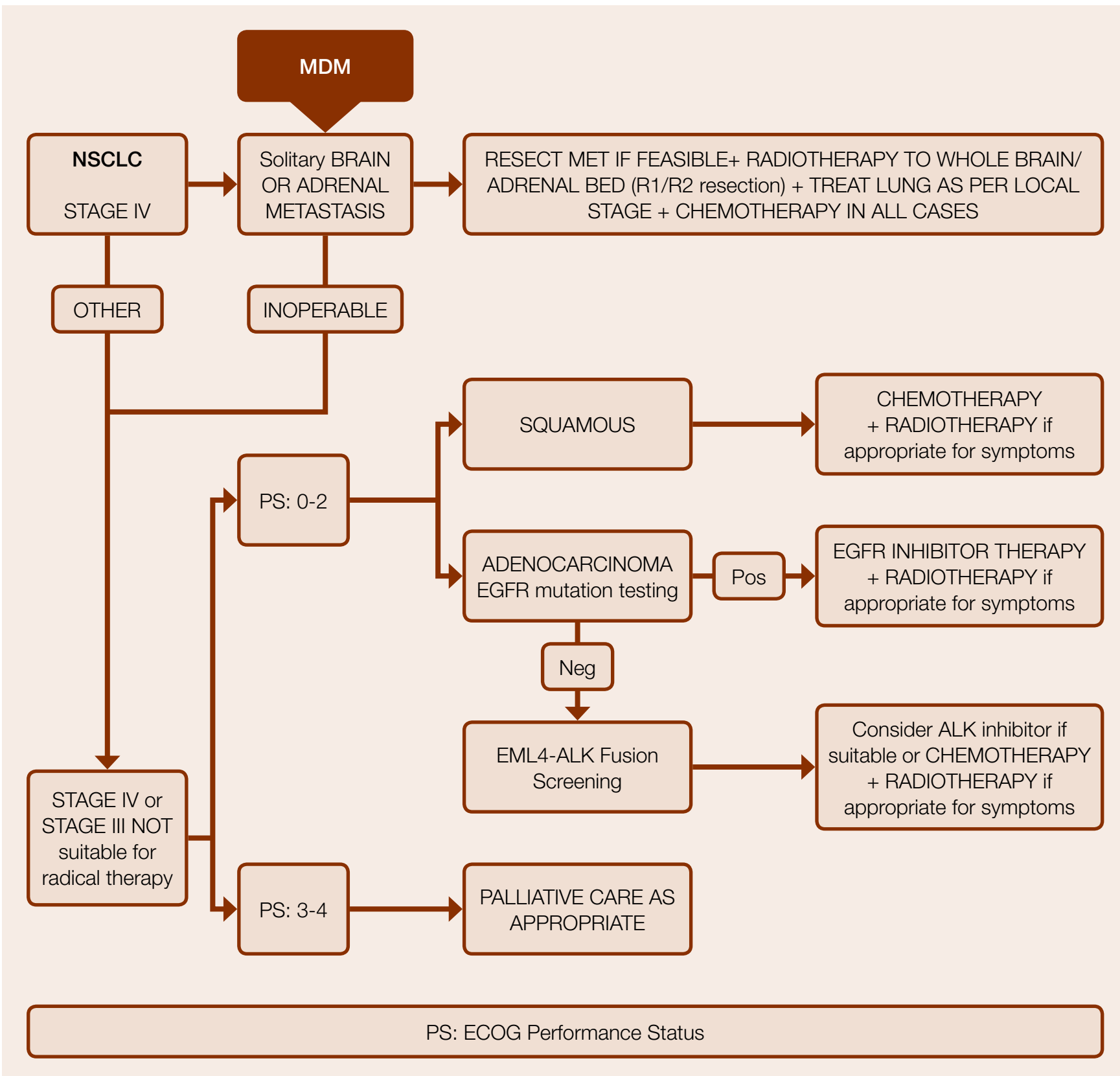
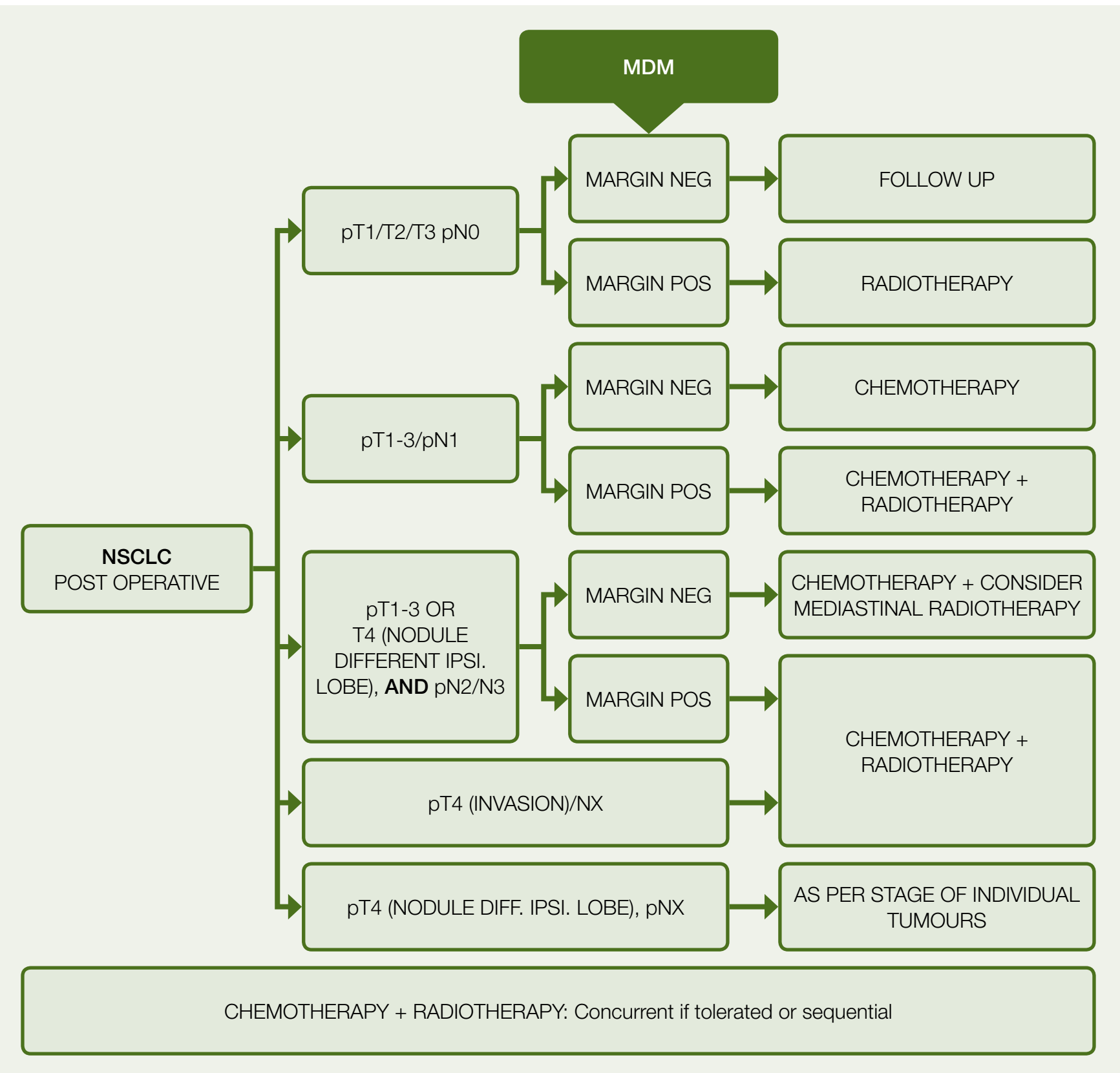
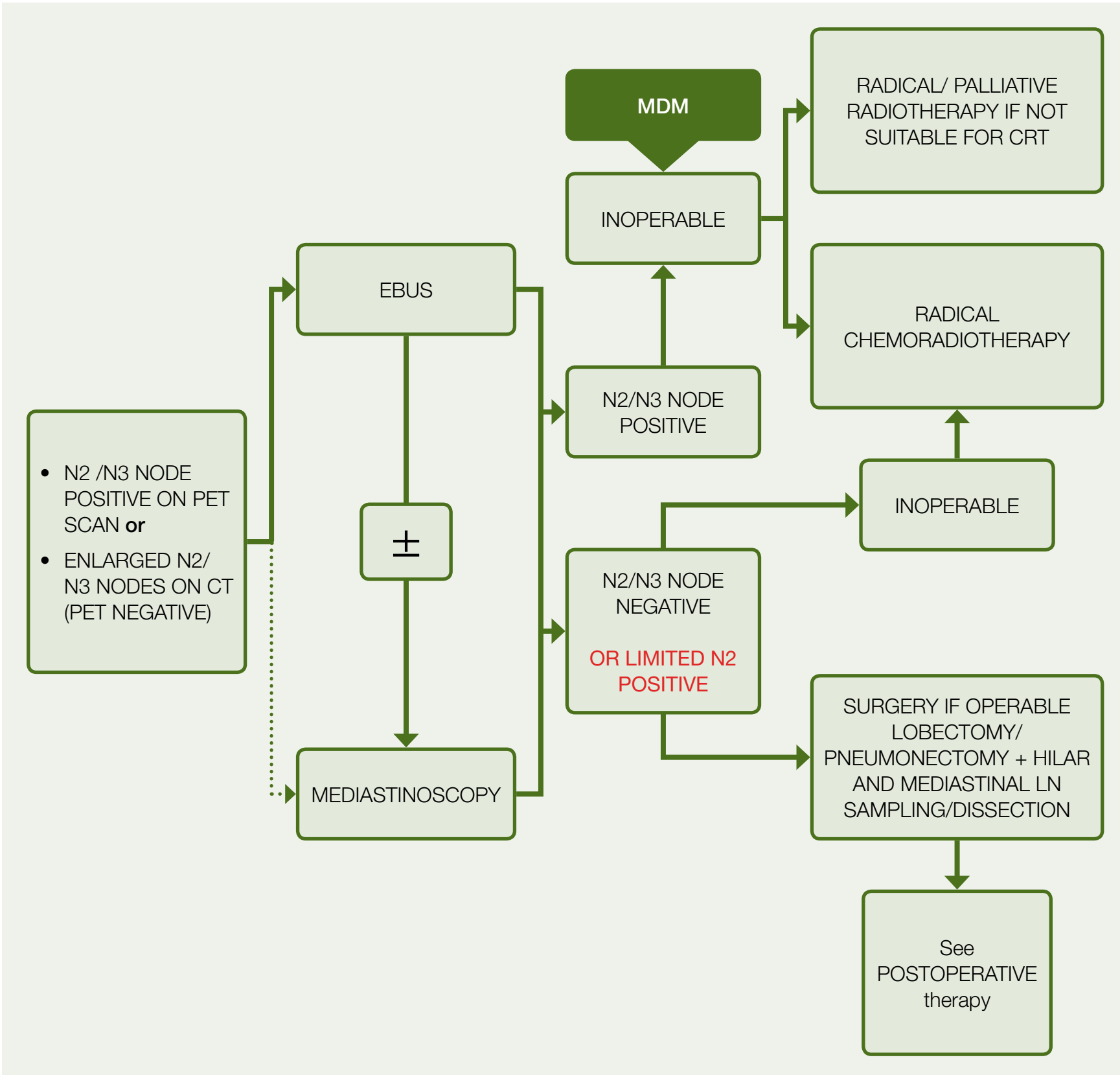
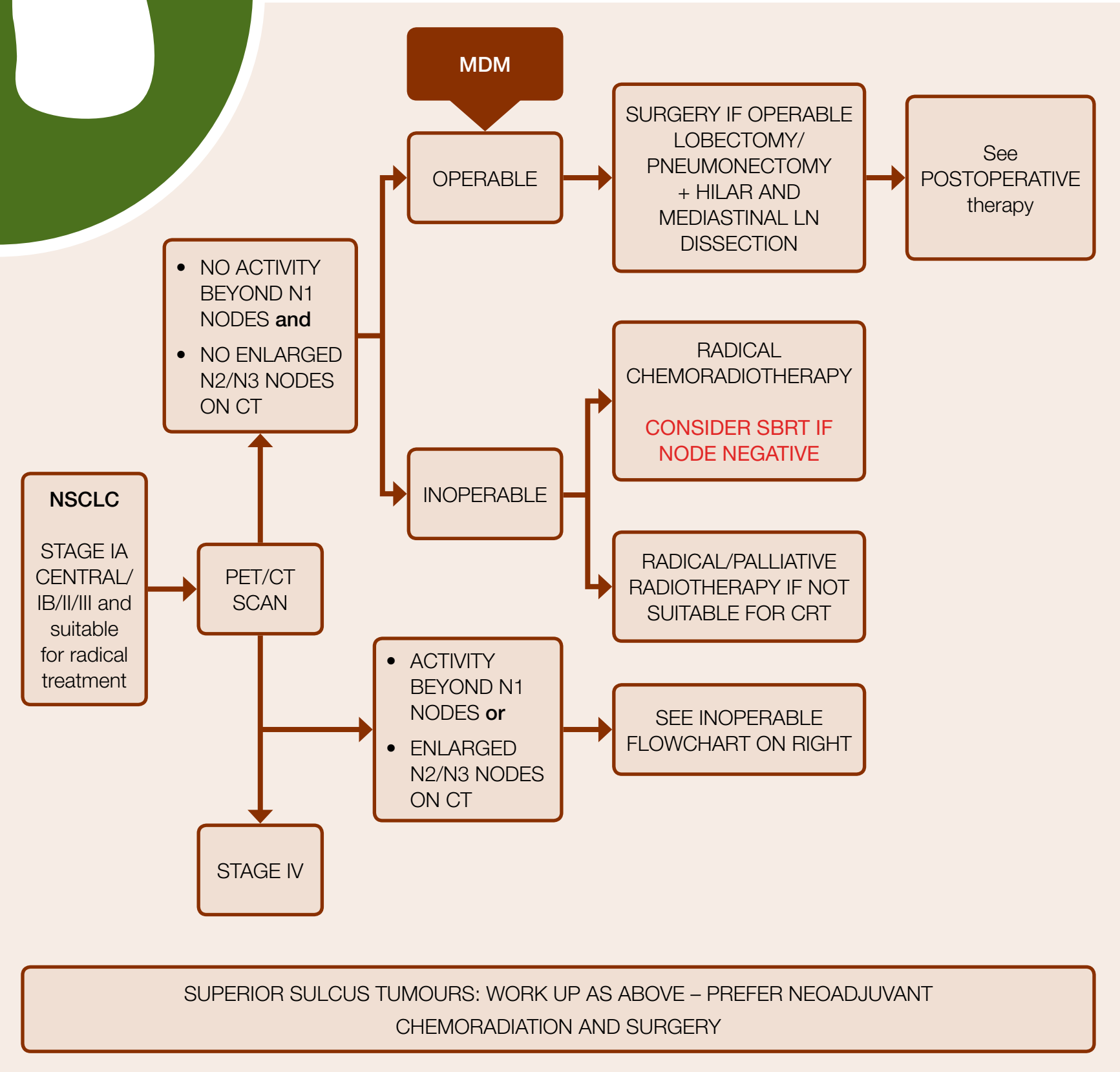
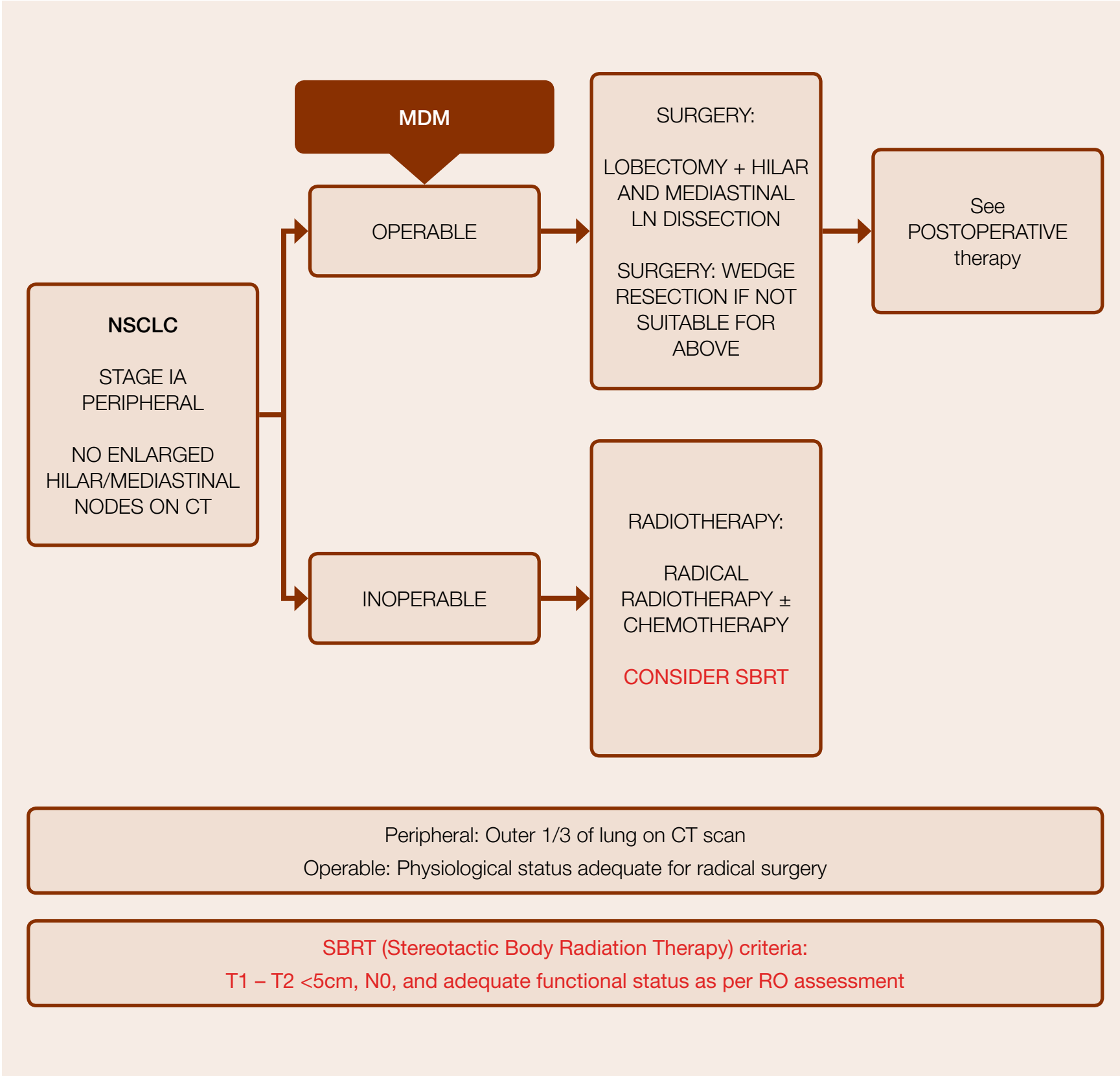
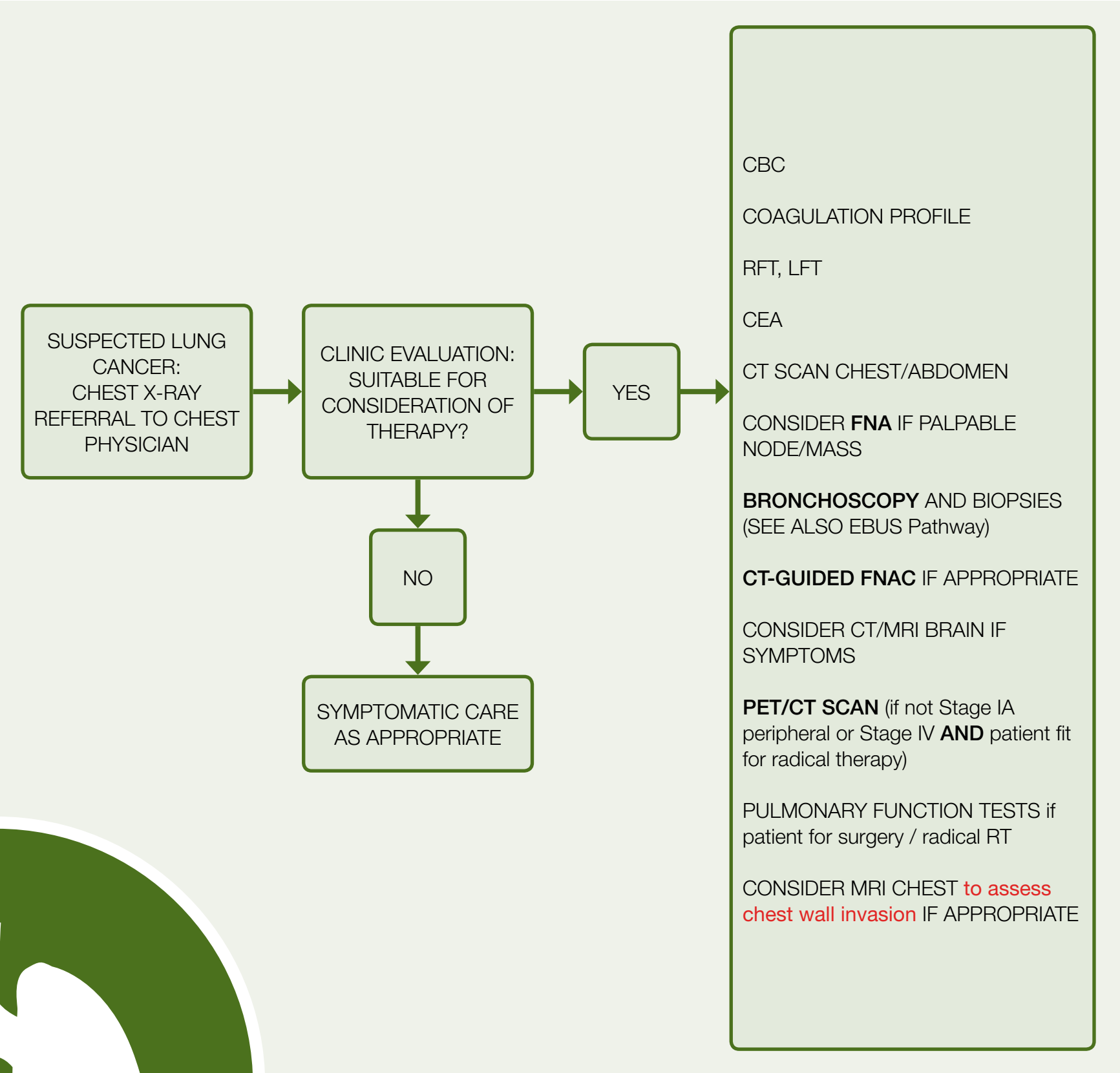


Non-small cell lung cancer treatment guideline



FOLLOW UP

- In lung cancer patients treated with curative intent, follow-up for complications related to the radical treatment should be managed by the primary specialist and should probably last 3-6 months.
- In lung cancer patients treated with curative intent, intensity of surveillance program should be decided based on the patient's ability to withstand further radical therapy. For those considered suitable for consideration of further radical therapy, a clinic review with a history, physical examination and chest-x ray, is suggested every 6 months for two years, and annually there-after until at least 5 years.
- In lung cancer patients following curative therapy, follow up with blood tests, tumour markers, PET scanning, or sputum cytology is not considered useful, unless specifically recommended by the MDM based on individual patient circumstances.
- All patients should be provided with a contact number of a Cancer Nurse Specialist, should they require advice.
- Lung cancer patients who smoke should be strongly counselled to stop smoking.