

Health

“My horizons have widened now that I don’t have to worry about migraines.”

Judi Malcom

knows how to handle her headaches now, with help from Baylor Scott & White Health
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THE TRUTH HEALS

Why you shouldn’t lie to your doctor PAGE 8



Shedding Light on Skin Cancer Myths

Skin cancer is the most common cancer in the U.S., with more than 5 million cases diagnosed each year. Yet we're surrounded by misinformation about it. When you know the facts, you can protect yourself.

Myth: Tanning beds are safe.

Fact: You should never use tanning beds. They emit high levels of UVA, which is a type of ultraviolet light that causes skin cancer and premature aging.

Myth: Skin cancers are easily curable.

Fact: Basal cell and squamous cell carcinomas are the most common types of skin cancer, and if they're discovered early, they're easily treated. Melanoma is the least common type but the most deadly. If melanoma is identified early, it's most treatable; if it's found late, there is a higher chance that it has spread to another site in the body, and survival rates are lower.

Myth: You need some sun exposure to get enough vitamin D.

Fact: Your body converts sunlight to vitamin D, which helps keep your bones strong—but you can get plenty of vitamin D from a healthy diet, and if you need more, you can take supplements.

SEE A SKIN CARE EXPERT CLOSE TO HOME

The Skin Cancer Center at Baylor Scott & White – Irving offers treatment for advanced skin cancer. To make an appointment with a skin cancer specialist on the medical staff, visit BSWHealth.com/Irving or call **1.800.4BAYLOR**.

BACKSEAT BUDDY:

Helping Parents Avoid a Dangerous Mistake

An unusually busy morning or an unexpected distraction can lead to tragedy: a child left inside a hot car, where temperatures can be life-threatening within minutes. To help new parents remember to check for their child every time they leave the car, Baylor Scott & White Medical Center – Irving offers the Backseat Buddy™.



Parents clip the buddy—a small stuffed bear—to their car keys anytime they drive someplace with their child. After they park, they remove the child from the car seat and clip the bear to the infant carrier or leave the bear in the car seat. Once they return to the car and secure the child in the car seat, they clip the bear to their keychain again. Whenever the bear is on the keychain, it serves as a reminder that the child is in the car.

MORE

Lifesaving Advice

For more details about the Backseat Buddy™ program and other car safety tips, visit BSWHealth.com/BackseatBuddy today.

Baylor Scott & White Medical Center – Irving, 1901 N. MacArthur Blvd., Irving, TX 75061 • 972.579.8100; Baylor Health Center at Irving-Coppell, 400 W. Interstate 635 at MacArthur Blvd., Irving, TX 75063 • 972.785.5500; President: Cindy Schamp; West Region Director of Marketing: Ashleigh Killian; Manager of Marketing/PR: Leanne Pettit; Physician Liaison: Laura Dillion; Community Outreach Manager: Rachel Nobles; Main Switchboard: 972.579.8100; Patient Information: 972.579.4358; Physician Referral: 1.800.4BAYLOR (1.800.422.9567); Irving Cancer Center: 972.579.4300; Irving Women's Pavilion of Health: 972.579.8240; Irving Imaging Centers (Mammography): 2001 N. MacArthur Blvd., Suite 250 • 972.254.1616; 440 W. Interstate Hwy. 635, Suite 120A • 972.785.5650; 2740 N. State Hwy. 360, Suite 200 • 972.579.4480; 24-Hour Emergency Department: 972.579.8110; Human Resources Job Line: 972.579.8750.

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Immunotherapy: A New Weapon in the War on Cancer

In the past decade, some of the most remarkable advances in cancer treatment have been in immunotherapy. This relatively new approach harnesses the power of the body's own immune system to help it fight disease.

Immunotherapy works by boosting the immune system or enhancing immune response to help the body recognize and destroy cancer cells more effectively.

Among its benefits, immunotherapy:

- ▶ Is effective on some cancers that do not respond well to radiation or chemotherapy
- ▶ May be less toxic and cause fewer side effects than other treatments
- ▶ Provides a new option for people who have exhausted other methods

Immunotherapy is being used to treat a variety of cancers, and with dozens more treatments being explored, immunotherapy could revolutionize the way we treat cancer in the near future.



EXPERTS ON YOUR SIDE

To learn more about advanced cancer care at Baylor Scott & White, including research and clinical trials, visit BSWHealth.com/Cancer today.

0.4 mSv The amount of radiation (in millisieverts) that a woman receives during a typical mammogram. For perspective, you get about this much exposure every two months just from your natural surroundings. **A mammogram's benefits of identifying breast cancer early far outweigh the slight risk of cancer from radiation.** If you're concerned, consult your doctor.



Thinking About Organ Donation? Start Here

If you're considering becoming a living organ donor, Baylor Scott & White Health can support you on your journey. Here is a list of resources to help you learn more about:

Qualifying for donation.

Finding out whether you can be a living donor is easier than you think. Visit LivingDonorDallas.org, LivingDonorFortWorth.org or LivingDonorTemple.org to complete a brief health history survey for the location nearest you.

Kidney donation.

Go to BSWHealth.com/LivingDonorFAQ to find answers to commonly asked questions.

Liver donation.

Check out BSWHealth.com/LivingDonorLiver to learn more, including who can donate and what to expect.

Transplantation services. Visit BSWHealth.com/Transplant to learn about Baylor Scott & White's multispecialty transplantation centers in North and Central Texas.

Organ donation in general. Go to BSWHealth.com/LivingDonor for details about living organ donation, including requirements, costs and benefits.



MORE

Talk to Someone About Being a Donor

To speak to a living donor coordinator, call one of Baylor Scott & White Health's transplant locations:

- ▶ Baylor University Medical Center at Dallas: **214.820.4438**
- ▶ Baylor Scott & White All Saints Medical Center – Fort Worth: **817.922.2990**
- ▶ Scott & White Medical Center – Temple: **254.724.8912**

Do You Have Hepatitis C?

Before you say no, read this

➔ YOU'VE BEEN around long enough to know the drill. As far as your health is concerned, you're pretty good about keeping up with annual checkups, screenings and immunizations.

But ... have you been tested for hepatitis C?

Hepatitis C is a contagious, blood-borne virus that attacks the liver. It affects up to 3.9 million Americans, and 3 in 4 of them are born between 1945 and 1965. Why these baby boomers specifically?

"Most of the people who have hepatitis C contracted it sometime in the '70s or '80s prior to screenings for viruses in blood products that were given in transfusions," says Terilyn R. Scott-Winful, MD, a gastroenterologist on the medical staff at Baylor Scott & White Medical Center – Carrollton and Baylor Scott & White Medical Center – Plano. "People who have a history of injected drug use—no matter how remote it was—also are at risk."

UNDERCOVER VIRUS

You might be thinking that if you contracted hepatitis C that long ago, you would know by now. Not necessarily. Although some cases of hepatitis C clear on their own, the majority of them stay in the body for life. Most of the time, there are no initial indicators that a person has the virus.

"Hepatitis C can go undetected for years and years," Dr. Scott-Winful says. "Most people who have it don't know they're infected until they start developing complications."

Problems include cirrhosis (damage) of the liver and liver cancer. Hepatitis C, ultimately,

is the No. 1 reason for liver transplants today. With diligence, though, things don't have to progress to that point. A simple screening can detect the infection well before serious issues arise.

"Baby boomers need only be screened once using a very simple blood test," Dr. Scott-Winful says.

FAVORABLE TREATMENT

If the test reveals that you have hepatitis C, treatment can be administered to clear the infection. Options, fortunately, have come a long way.

"As recently as about six years ago, the treatment for hepatitis C consisted of daily injections that were fairly effective but came with undesirable side effects—flulike symptoms, headache, depression," Dr. Scott-Winful says. "It's much easier to treat now. Today, people can take a pill once or twice a day, with minimal side effects. And the cure rates are 95 to 99 percent."

Dr. Scott-Winful encourages everyone born between 1945 and 1965 to talk to a primary care provider about getting screened for hepatitis C.

GET HELP MANAGING LIVER DISEASE

Baylor Scott & White has hepatologists on the medical staff trained to work with people who have hepatitis C and other liver conditions.

Visit BSWHealth.com/LiverDisease for details.



Feet in Focus

Learn to recognize—and address—these common conditions

→ WE RELY ON OUR FEET to take us everywhere. Yet aside from the occasional pedicure, you might say we take them for granted. And it shows.

Three-quarters of Americans experience foot problems at some point in their lives, the American Podiatric Medical Association says.

“Foot and ankle problems are common,” says Justin Kane, MD, an orthopedic surgeon on the medical staff at Baylor Scott & White Medical Center – McKinney. “They account for about 1 in 10 emergency department visits.”

Here are four foot ailments that may have you out of step.

1 BUNIONS

These painful bumps at the base joint of the big toe are caused by wearing shoes with narrow toe boxes, heredity and certain inflammatory conditions, such as rheumatoid arthritis. “Bunions do not need to be treated solely for appearance’s sake,” Dr. Kane says. “If a bunion is painful, switch to flats and wedges over high-heeled shoes, and shoes with wider toe boxes.” In severe cases, bunions can be treated with surgery.

2 HALLUX RIGIDUS

The most common arthritic condition of the foot, hallux rigidus affects women more than men and is typically diagnosed when there is pain, stiffness and swelling in the big toe, particularly during physical activity. Over-the-counter pain relievers and anti-inflammatory medications are the first line of defense, along



with choosing footwear with ample cushioning, rocker bottoms and inserts that limit motion in the big toe joint. Surgical options are available if conservative treatments fail.

3 FLATFEET

Just as it sounds, this condition occurs when the entire bottom of the foot touches the ground instead of having an arch. Some people are born with flatfeet, but others can develop them over time. Flatfeet typically don't pose problems, but if they cause foot pain, your doctor might recommend arch supports, stretching or physical therapy.

4 PLANTAR FASCIITIS

This overuse injury is characterized by pain in the heel after getting out of bed in the morning or sitting for long

periods. “It will feel like you're stepping on a pebble or stone,” Dr. Kane says. Plantar fasciitis is more likely in women, people who stand on hard surfaces for work, runners and those with tight calf muscles. Treatment includes rest, stretching, footwear modification, anti-inflammatories, injections and, in rare cases, surgery.

MORE

Strong Support

When you have a problem with your feet or ankles, orthopedic surgeons on the medical staff at Baylor Scott & White – Irving can help you stay strong. For a referral, visit [BSWHealth.com/irving](https://www.bswhealth.com/irving) or call **1.800.4BAYLOR**.

Judi Malcom and her husband, Mark, share a love of motorcycles.



Heading Toward Relief

With the right medical approach, Judi Malcom's doctors stopped a vicious cycle of migraines

➔ PEOPLE WHO EXPERIENCE migraine headaches know they can be intensely painful. They just don't know when the next one will strike. This unpredictability was especially challenging for Judi Malcom. She and her husband, Mark, tend to dogs, cats and miniature horses on their 6-acre property in Ennis. She also rides a motorcycle for fun—not exactly an ideal situation for a migraine.

“Just the possibility of getting a migraine curtails your activities,” she says.

Malcom had migraines for more than 15 years and accepted them as a fact of life. “I thought I was coping well enough on my own, because the headaches didn't keep me from going to work,” she says. “But I was taking over-the-counter migraine medicine constantly.”



“The Headache Center taught me to manage my migraines the right way. I feel I’ve got my life back.” —Judi Malcom

In recent years, the headaches worsened, requiring visits to the doctor for pain injections and trips to the emergency department. Over nine months last year, they became unbearable. After one of her worst headaches sent her to the emergency department again, Malcom went to the Headache Center at Baylor University Medical Center at Dallas.

DOING SOMETHING ABOUT IT

Malcom’s story isn’t unusual, says George Nissan, DO, an internal medicine physician on the medical staff at the Headache Center.

“Some folks can tolerate a lot of pain before they seek help,” he says. “But they may be doing themselves a disservice. There is a lot we can do to prevent migraines and a number of non-narcotic ways to treat the pain when it happens.”

Migraines are just one type of headache that can affect quality of life. Other forms include cluster headaches and simple chronic daily headaches. Finding the right treatment can be as much art as science, because it can be difficult to identify the cause.

The Headache Center takes a multidisciplinary approach. In addition to conventional drug

therapies for prevention and symptom management, physicians on the medical staff can use a full range of alternative therapies, including biofeedback, Botox injections, meditation and group therapy. As part of the Baylor Neuroscience Center, the Headache Center is fully equipped to diagnose more serious underlying conditions, of which headaches themselves might be a symptom.

PINPOINTING THE PROBLEM

The biggest factors in migraines are heredity, lifestyle and hormones, Dr. Nissan says. That’s why the first order of business for new patients is to explore their medical and health histories, lifestyles and experiences with headaches. MRIs, bloodwork and, rarely, lumbar punctures also may be part of the diagnostic process.

At the Headache Center, Malcom learned that she had been experiencing a common side effect of prolonged self-treatment of migraines: rebound headaches from over-the-counter medicine.

On her doctor’s advice, she stopped taking her pain medication and underwent a weeklong regimen of infusion therapy to break the cycle. She admits it was tough at first, but it worked. Now she takes preventive medication, and the migraines are few and far between. When the headaches do develop, she says, her rescue medication knocks them out.

As she describes the relief she felt on the fourth day of therapy, when the migraine finally broke, her voice is tinged with emotion. “It was like somebody turned the lights on for me,” she says. “I didn’t realize how much peripheral vision I’d lost. The world became much bigger again, in more ways than one.”

EPILEPSY EXPLAINED

Seizures occur when a person’s brain cells called neurons fire excessively, causing involuntary shaking. These episodes can last from seconds to minutes.

Epilepsy is diagnosed when a person has two seizures at least 24 hours apart or has one seizure and is likely to have another because of factors such as stroke, infection, injury or epilepsy syndrome.

Descriptions of the seizure symptoms as well as tests such as electroencephalograms and MRIs of the brain can confirm the diagnosis, explains Novreen Shahdad, MD, a neurologist on the medical staff at Baylor Scott & White Medical Center – Irving.

Many people with epilepsy find control with one or more anti-seizure medications. In severe cases, where medications don’t stop the seizures, a doctor might recommend evaluation for epilepsy brain surgery, vagus nerve stimulation or a ketogenic diet. Keeping a log of seizures to identify possible triggers and then avoiding those triggers can help as well.

MORE

Find Dr. Right®

If you or a loved one needs help controlling epilepsy, doctors on the medical staff at Baylor Scott & White – Irving can help. Call **1.800.4BAYLOR** or visit **[BSWHealth.com/irving](https://www.bswhealth.com/irving)** for a physician referral.



7 Lies Never to Tell Your Doctor

A primary care physician explains why honesty is the best policy



THE TRUTH IS, BEHIND THE CLOSED DOORS OF EXAM ROOMS, LOTS OF GOOD PEOPLE MISLEAD THEIR PHYSICIANS. WHY?

“One of the major reasons patients lie is out of embarrassment or fear of talking about certain issues,” says Cristiana Angelelli, MD, a primary care physician at Scott & White Clinic – Pflugerville. One study found that about a quarter of Americans have been untruthful with a doctor or omitted details about their health during an exam.

Being open and honest with your provider is good for your relationship with him or her—and, ultimately, that's good for your health. Here are seven lies you shouldn't tell your doctor.

1 "I quit smoking."

Smoking is the No. 1 risk factor for heart disease, stroke, cancer and other ailments, so if you're lighting up, your doctor needs to know.

"A significant amount of people lie about smoking, because they don't want to be reprimanded or they're afraid we'll tell their insurance companies, which isn't the case," Dr. Angelelli says. "It's important to tell us if you smoke, because we can recommend strategies for quitting. We'll also recommend certain screenings at specific ages. Plus, chances are we already know."

2 "I only drink occasionally."

As with smoking, you'll want to be honest with your doctor about your alcohol consumption, particularly if you have more than one drink per day as a woman or two drinks per day as a man.

"Most patients downplay how much they drink," Dr. Angelelli says. "But it's important to know, so we can offer counseling and order the right labs to check liver function."

3 "I eat healthfully and exercise regularly."

This one isn't so much a lie as a misunderstanding, Dr. Angelelli says. "Most patients say they try to eat healthy and exercise," she says. When she digs deeper, however, she discovers that the foods people think are healthy actually aren't, their portions are too big or they're giving themselves more credit than they should for calories burned through exercise.

If your doctor is concerned about your weight, he or she probably will ask you to describe what you eat in a typical day and how you exercise. Don't leave out the handfuls of candy you munch on at work or the midnight snacks. And be real about how often you are active. Your provider can make recommendations or refer you to a nutritionist or a trainer for help with important lifestyle changes.

4 "Everything's fine."

No one likes to admit they're having problems in the bedroom or they're feeling worthless, but if there's something on your mind, mention it. Your doctor can ease your concerns by letting you know when there's really nothing to worry about, or recommend appropriate treatment when something should be looked into.

5 "Yes, I take my medication as prescribed."

Although you may have a decent track record with your medication regimen, let your provider know if you sometimes skip or forget doses—or if you don't get your prescription filled at all. Not taking medication as directed accounts for 30 to 50 percent of chronic disease treatment failures, the Centers for Disease Control and Prevention says.

"Some patients won't pick up a prescription because they can't afford it," Dr. Angelelli says. "They may be embarrassed to say that, but if they tell their doctor, he or she can look for something cheaper or help them find discounts."

6 "I will follow your instructions."

Even with doctor's orders, not everyone chooses to go for diagnostic tests, follow through with physical therapy or change eating habits. To do these things or not, it's your choice. Just be upfront with your doctor about your intentions.

"If you're not going to go through with, say, a certain test, just say so," Dr. Angelelli says. "Being honest with your doctor ensures you're both working toward the same goals for your health."

7 "I understand."

If you don't grasp what your doctor has told you during an appointment or what you need to do next, speak up.

"Instructions can be confusing, and we don't always know when patients aren't understanding," Dr. Angelelli says. "We want you to feel confident in your treatment plan, because you'll be more likely to stick with it and you'll have better results." To help with details from a visit, bring someone along to take notes, and follow up with the provider to get clarification.

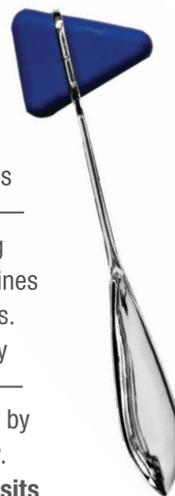
CHECKING UP ON TWO TYPES OF DOCTOR VISITS

You might think of many of your doctor appointments as checkups. But that's not how doctors view them. Mary Hernandez-Zhang, MD, an internal medicine physician on the medical staff at Baylor Scott & White Medical Center – Irving, explains that there are two types of appointments: wellness visits and problem-oriented visits.

Wellness visits focus on preventive measures—staying healthy, avoiding illnesses, updating vaccines and reviewing lab results. These visits—commonly referred to as checkups—are usually fully covered by insurance with no copay.

Problem-oriented visits cover chronic conditions, such as diabetes and high blood pressure, as well as health concerns like headaches, illnesses and infections. For these visits, you'll probably pay a copay, and your deductible will apply.

Why does the distinction matter? Most insurance companies won't allow doctors to schedule both types of visits in the same appointment. So if you're due for an annual exam and you also have a health concern, call your doctor's office to see whether you need to schedule separate appointments.



MORE

Your Partner in Wellness

If you want help managing your health conditions and maximizing your wellness, make an appointment with an internal medicine physician. To find one on the medical staff at Baylor Scott & White – Irving, visit [BSWHealth.com/irving](https://www.bswhealth.com/irving) or call 1.800.4BAYLOR.

More Than Skin Deep

Psoriasis could contribute to plaque buildup in the arteries. Educating people about the connection might help them handle heart disease

 It's called a "silent killer" for a reason. Atherosclerosis—the buildup of plaque inside the arteries—often occurs so slowly that many people are unaware they even have the condition until they experience a life-threatening heart attack or stroke.

That's why doctors often warn people who have conditions associated with atherosclerosis, such as diabetes, about the effect their condition could have on their heart. "This can help them make healthier lifestyle decisions, like eating right, exercising, taking their medications and getting screened for the presence of heart disease," explains Jeffrey M. Schussler, MD, director of the intensive care unit at Baylor Jack and Jane Hamilton Heart and Vascular Hospital.

HEART DISEASE'S NEW RISK FACTOR

In recent years, a new condition has been linked to the development of atherosclerosis: psoriasis, an autoimmune disease

characterized by raised, red, scaly and often painful patches on the skin.

"We now know that psoriasis is more than just a skin disease. It's an inflammatory disease," Dr. Schussler says. "Inflammation can cause a variety of problems in the body, including the development of plaque in the arteries."

Because this information is relatively new, there is not a lot of hard evidence linking the two conditions, Dr. Schussler says. "Currently," he says, "people who have psoriasis aren't regularly educated about or screened for heart disease."

But that could change in the near future, thanks in part to research by Baylor Scott & White Health.

CONFIRMING THE CONNECTION

To help establish psoriasis as a risk factor for atherosclerosis, Dr. Schussler and his team compared the coronary calcium scores of 387 men, all around 50 years old—one-third with psoriasis, one-third with type 2 diabetes and one-third with neither health condition.

"Coronary calcium scores help measure the amount of plaque that's formed in the arteries," Dr. Schussler explains. "As we suspected, the individuals with psoriasis had scores comparable to those with diabetes."

The researchers' findings were published in *JAMA Dermatology* in November, and Dr. Schussler says he hopes it will encourage physicians and health organizations to educate individuals with psoriasis about their increased risk of heart disease, along with ways to reduce it. "We need to educate both patients and physicians regarding the important link between these two diseases," he says. "Awareness of risk is half the battle."



ABOUT THE STUDY

Comparison of Coronary Artery Calcium Scores Between Patients with Psoriasis and Type 2 Diabetes

Researchers investigate whether the skin condition psoriasis could be linked to plaque buildup in the arteries and contribute to heart disease, similar to type 2 diabetes.

Key Contributor
Baylor Jack and Jane Hamilton Heart and Vascular Hospital

MORE

What We're Researching Now

Go to [BSWHealth.com/Research](https://www.bswhealth.com/research) to see more ways Baylor Scott & White Health's medical innovations are helping people lead healthier lives.

WHAT'S ONLINE

→ BSWHealth.com



RECIPE

CHICKEN SALAD WITH APPLE, RADISH AND CUCUMBER

Apples add crispness—not to mention dietary fiber—to this refreshing, satisfying green salad. Try it today!



→ Go to BSWHealth.com/Recipe for the ingredients and instructions.



TIPS

STAYING HEALTHY AFTER MENOPAUSE

Women experiencing menopause in their late 40s or early 50s can stay youthful and active and minimize symptoms like hot flashes, joint aches and mood swings.

→ Visit BSWHealth.com/HealthyMenopause for tips on nutrition, exercise and more.



QUIZ

CYCLING: GET IN GEAR



It's a great way to exercise—on your own or with friends and family. But how much do you really know about cycling?

→ Answer eight quick questions at BSWHealth.com/CyclingQuiz to test your knowledge.

ONLINE

Solutions for Achoo!

Allergies can trap you indoors and make you feel miserable. Fight back! A specialist can identify your triggers and manage your symptoms.

→ Visit BSWHealth.com/Allergy to find a physician on the medical staff at Baylor Scott & White - Irving.

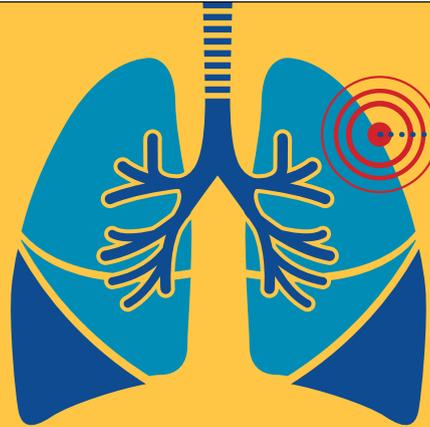


TOOL

DO YOU HAVE ACID REFLUX?

Gastroesophageal reflux disease (GERD), a chronic illness that occurs when acid backs out of the stomach, is a painful reality for 10 to 20 percent of U.S. adults. Could you be one of them?

→ Spend a minute at BSWHealth.com/GERDRisk and find out.



Lung Cancer Screening Program

People with a smoking history who are at high risk for lung cancer can be screened and diagnosed for lung cancer before symptoms develop through use of a low-dose, 5-minute computed tomography (CT) scan.

DO YOU OR A LOVED ONE MEET THESE CONDITIONS?

For Medicare to cover this screening annually, patients should:

- Be 55-77 years old
- Have a cigarette-only smoking history of 30 pack years (1.5 packs/day x 20 smoking years = 30 pack years)
- Be a current smoker or stopped smoking within the last 15 years
- Have no symptoms

COST

- The fee for a lung CT is \$250 which will be filed on the patient's insurance plan
- The fee does not include the radiologist interpretation.



Baylor Scott & White

MEDICAL CENTER

IRVING

Ask your doctor if you qualify for the lung cancer screening; a physician's order is required.

If you need a physician, call **1.800.4BAYLOR** or visit **BSWHealth.com/LungCT**.