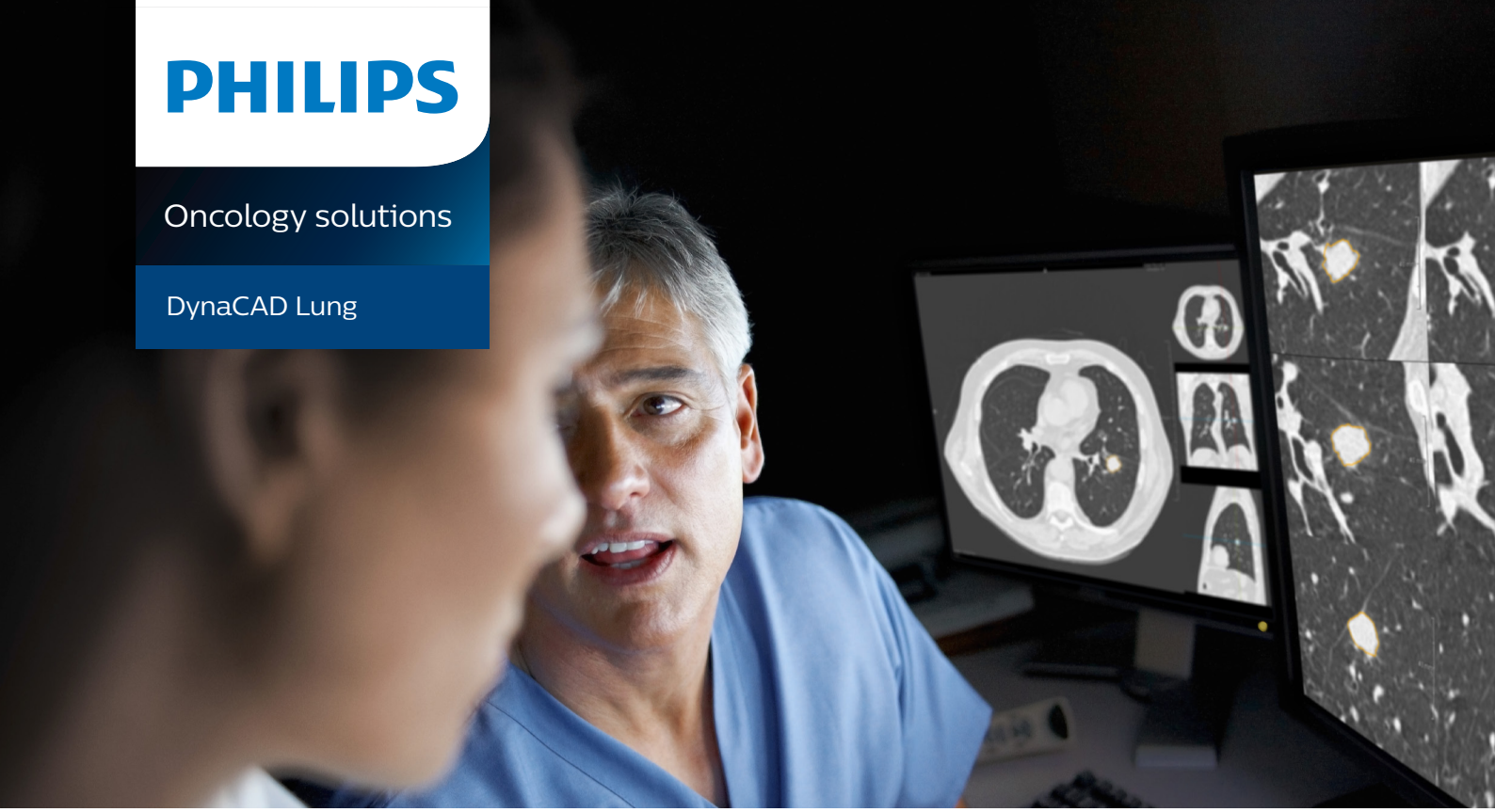
PHILIPS

Oncology solutions

DynaCAD Lung



Elevate confidence and productivity with advanced visualization

At Philips, we understand the need for simplified, automated tools to help streamline workflows. DynaCAD Lung from Philips is a vendor-neutral, medical imaging software system that provides fast, efficient viewing as well as quantification, manipulation, communication and reporting of multi-slice CT exams of the chest.

With flexible report templates and automated image registration, DynaCAD Lung helps facilitate synchronous display and navigation of multiple patient exams for initial review and easy follow-up comparison of current and prior study findings – **helping to reduce manual tasks so you can make the best use of your time.**

Multi-slice CT (MSCT) is a useful tool in finding suspicious lesions earlier, but as the number of images per study continue to increase, the diligence required in finding small lung nodules among hundreds of CT image slices has become a growing challenge. Oversight of actionable lung nodules on CT images is always a risk, however, new, innovative tools are available to help manage this risk and improve your overall radiology workflow efficiency.

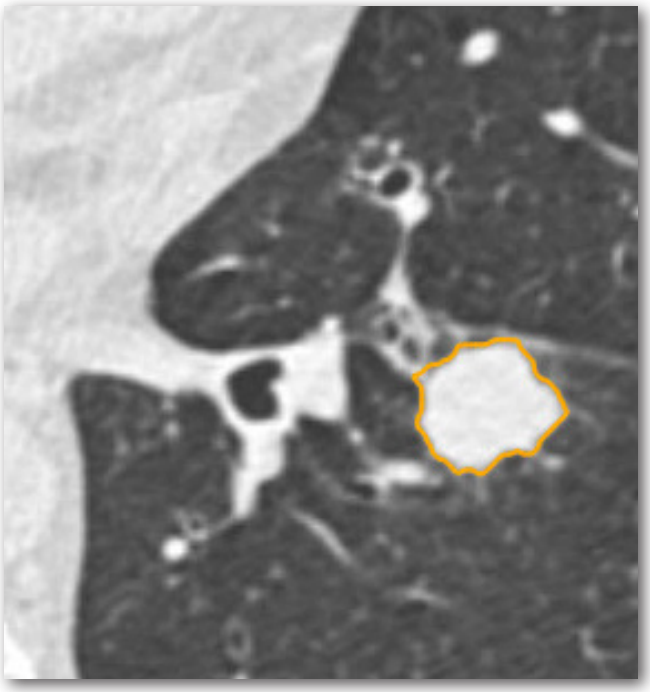
Helping to optimize workflow for fast, efficient review and reporting of CT lung exams

DynaCAD Lung offers a robust set of automated tools for retrieval and registration of prior exams along with synchronous viewing and analysis of current/prior findings. Its dual monitor display allows users to interpret and track findings in parallel with comparison views and statistics.

Its computer-aided detection (CAD) serves as a “second pair of eyes” for finding actionable lung nodules based on size, shape, density and anatomical context.

The software includes automated classifications following the American College of Radiology (ACR) Lung Imaging Data and Reporting System (Lung-RADS) and automatically integrates into the Lung Cancer Orchestrator.

Additionally, the radiologist or end user has the option to manually merge patient information with disparate MRN’s, name changes, or differing demographic data via the thin client software, simplifying current and prior comparisons and allowing users greater control over data entry.



Automated segmentation of pulmonary nodules.

Advanced lung nodule tracking for informed clinical decision making

Tracking lung nodule growth is a crucial component of providing the best clinical decision making possible. The DynaCAD Lung temporal comparison feature displays a nodule/lesion over time and in all three planes.

This automated feature, based on elastic 3D image registration, helps determine nodule status and provide a doubling time based off the change in volume or mass over time.

The system displays nodule status, type, diameter, LungRADS classification, and lobe location in an easy to review format.

PowerScribe integration[1]

Nodule information can be transmitted with Advanced Data Integration to PowerScribe by Nuance[1] to directly transmit data via merge fields. PowerScribe also supports customized reports.

Present findings with
data rich chest summary reports

DynaCAD Lung creates a Chest Summary Report complete with current and prior comparisons, volumetric data, doubling times, and LungRADS scores. The report is automatically archived on the PACS server and can be sent to the Lung Cancer Orchestrator* for continued tracking of the patient and storing of data elements. Lung Cancer Orchestrator* can then share the results with the patient and the primary care physician via system generated findings letters, while also alerting the Navigator when specific follow-ups are due.

DynaCAD Lung reports capture structural characteristics of lung nodules and Lung-RADS score and provides LungRADS-based recommended follow-up actions. Clinicians have the option to capture additional study characteristics as well.

Treating late-stage patients is three times costlier for hospitals and payers than it is for cancers caught at an earlier stage.[2] With tools that can help detect lung nodules, hospitals can help to lower these costs as well as drive additional revenue by treating cancer that may otherwise have been missed.[3]

Paving the way to a lung cancer screening program

To coordinate and manage an effective lung cancer screening program, you have to simultaneously handle a wide variety of tasks on a daily basis. Determining who is eligible, notifying and scheduling follow-ups, and reporting program status can be labor intensive – and potentially risky if details are overlooked. Manually managing these activities using several, standalone tools increases errors and makes demonstrating program quality and effectiveness a challenge.

DynaCAD Lung provides integration into the Philips Lung Cancer Orchestrator*, a proactive patient management system for lung cancer programs that monitors patients through various steps of their lung cancer screening and treatment decision journey. It uses a defined set of steps to ensure you complete proper follow-up of screening examinations and diagnostic testing on time. Then, results are communicated to the participant, their primary care physician, and can be uploaded and documented in the Electronic Medical Record (EMR).

Providing a complete solution, the system also comes equipped with the Multidisciplinary Team Orchestrator to help facilitate the clinical treatment decision process.

CT screening reduces ten year lung cancer mortality by **24% for men** and **33% for women**, compared to no screening.[4]

DynaCAD Lung is just one device from the Philips lung portfolio. Talk to us today: let's see how we can help you guide your patients along their journeys. **Visit Philips Lung Solutions on our website.**

*Lung Cancer Orchestrator is sold separately. 1. Requires version 2.5 or greater with the Advanced Data Integration feature from Nuance. PowerScribe® is a registered trademark of Nuance Communications Inc. All rights reserved. 2. Gildea TR, DaCosta Byfield S, Hogarth DK, Wilson DS, Quinn CC. A retrospective analysis of delays in the diagnosis of lung cancer and associated costs. Clinicoecon Outcomes Res. 2017;9:261-269. 3. Estimated for illustrative purposes based on various assumptions and expectations using: Advisory Board. Lung Cancer Screening Volume and Revenue Calculator. November 18, 2014. Updated April 12, 2016. Available at https://www.advisory.com/research/imaging-performance-partnership/resources/2014/lung-screening-toolkit/lung-cancer-screening-calculator. Last accessed August 3, 2020. 4. Aberle DR, Adams AM, et al. N Engl J Med. 2011;365(5):395-409.

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