

## ATS issues top five 'Choosing Wisely' recommendations

29 October 2013



clinical probability and negative results of D-dimer assay; and (5) for patients at low risk of lung cancer, CT screening should not be performed.

"These recommendations reflect a consensus on the available evidence, not only on medical necessity but on patient safety and quality of life as well as economic considerations," task force cochair, Renda Wiener, M.D., M.P.H., said in a statement.

**More information:** More Information

(HealthDay)—The top five pulmonology-related issues that physicians and patients should question have been released by the American College of Chest Physicians and American Thoracic Society (ATS) as part of the *Choosing Wisely* campaign.

Members of the American College of Chest Physicians and the ATS considered 30 items and debated the impact of each with respect to evidence, prevalence, cost, relevance, and innovation. After narrowing the list to 10 items, they scored each, and created a final list of the top five recommendations.

The top five recommendations are: (1) avoiding computed tomography (CT) surveillance for evaluation of indeterminate pulmonary nodules at a greater frequency or longer duration than recommended by guidelines; (2) for patients with pulmonary hypertension resulting from left heart disease or hypoxemic lung diseases, pharmacologic treatment with advanced vasoactive agents should not be offered routinely; (3) prescriptions should not be renewed for patients recently discharged on supplemental home oxygen following hospitalization for acute illness, without assessing the patient for ongoing hypoxemia; (4) CT angiography should not be performed for possible pulmonary embolism in patients with low

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