



Providers case study

Georgia Cancer Center: Optellum's Lung Cancer Prediction (LCP) AI® funnels the right patients to the right procedures

Learn how Optellum's AI-enabled solution has improved Georgia Cancer Center's management of incidental lung nodules

Case study highlights

↑ 33%

increase in number of procedures

14 days

shortened time to diagnosis from 42 days

\$500-\$600

average facility reimbursement

Customer



Provider type

Academic Medical Center

Location

Augusta, Georgia, US



The LCP risk of malignancy score moves the right patients forward to robotic bronchoscopy or surgical biopsy. While accelerated early diagnosis and treatment for high-scoring and malignant nodules is key, use of the AI software has also helped to ensure we are not doing unnecessary biopsies or procedures.

Dr. Daniel Miller, Director of Thoracic Surgery at Georgia Cancer Center

Problem

Bridging rural and urban care at the Georgia Cancer Center

The Georgia Cancer Center plays a vital role in serving patients from rural areas within a 75- to 100-mile radius of the facility. Situated in Augusta, the state's second- largest city, along the banks of the Savannah River, this geographic region frequently sees patients presenting with various lung conditions, including granulomatous lung disease, pulmonary sarcoidosis, and post-COVID lung scarring. Determining the cause of incidentally found lung disease and nodules is crucial for managing the care of these patients.

Solution

Improving incidental nodule management with Optellum's AI solutions

Implementing Optellum's Virtual Nodule Clinic (VNC) has significantly improved Georgia Cancer Center's ability to address diverse health challenges and ensure patients receive timely, comprehensive care. Accurate identification and characterization of incidentally detected lung nodules are essential for early-stage lung cancer diagnosis. Optellum Lung Cancer Prediction (LCP)® score plays a crucial role in clinical decision-making, given its strong ability to predict malignancy, unlike nodule size alone. LCP scores of 8 or higher are especially predictive, guiding decisions on whether to pursue biopsy, surgery, or robotic bronchoscopy. While nodule characteristics may not always resonate with patients, the LCP Score and malignancy likelihood histogram are impactful during consultations.

Results

Expedited care, increased volumes, and ROI with added reimbursement

Previously, the team at Georgia Cancer Center may have had a patient with a 7 mm nodule where the decision would be to follow a watch-and-wait approach. However, with the Optellum LCP score some of those same nodules may score an 8 or 9. Therefore, instead of waiting 3 months for new imaging, the patient's care team move the patient forward, eliminating any delay. In aggregate, this has resulted in a 33% increase in procedures, a 67% reduction in time to diagnosis (from 42 days to under 14 days), and positive ROI, supplemented by a \$500-\$600 average reimbursement per LCP use.

Conclusion

With Optellum's AI-driven insights, the center now accurately identifies high-risk nodules, facilitating timely treatment such as robotic bronchoscopy or surgical biopsy. The integration of LCP scores allows Dr. Miller and his team to focus on targeted, effective patient care, reducing unnecessary procedures and improving diagnostic efficiency.