Mediastinal staging of non-small-cell lung cancer in patients being considered for radical treatment

Peripheral lesion without enlarged mediastinal nodes (<10 mm short axis; low probability of nodal involvement) → PET-CT

- Nodes negative → Further management
- Nodes positive → PET-CT and EBUS/EUS if no extra-thoracic disease

Mediastinal nodes 10–20 mm short axis i.e. intermediate probability of nodal involvement → PET-CT and EBUS/EUS if no extra-thoracic disease

- Positive EBUS/EUS → PET-CT
- Negative EBUS/EUS → Positive

Mediastinal nodes >20 mm short axis i.e. high probability of nodal involvement → Neck US and biopsy if neck nodes are pathological on radiological criteria on CT

- Negative → PET-CT
- Positive → Consider surgical staging if clinical suspicion is high and alters management

Treatment Decision by MDT