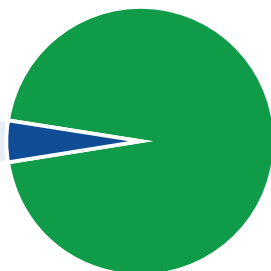


WHAT YOU SHOULD KNOW ABOUT Lung Nodules

Lung nodules can be a source of anxiety for people who discover them unintentionally; they're often found by accident on a chest X-ray or CT scan done for some other medical reason. Lung cancer is often the first concern if you just found out that you have a lung nodule; however, **95% of lung nodules are benign, meaning they are not cancerous¹.**

If you fall into the 5%, early detection by a specialist improves your treatment outcomes making your 5-year survival 10x greater².



What are next steps?

Your lung nodule should be assessed by your doctor or a specialist, such as a Pulmonologist. Certain characteristics of the lung nodule itself indicate the chances that it might be cancerous. Physicians use this information to help assess your risk, which helps to guide the next steps for managing your lung nodule.

High Risk >65%

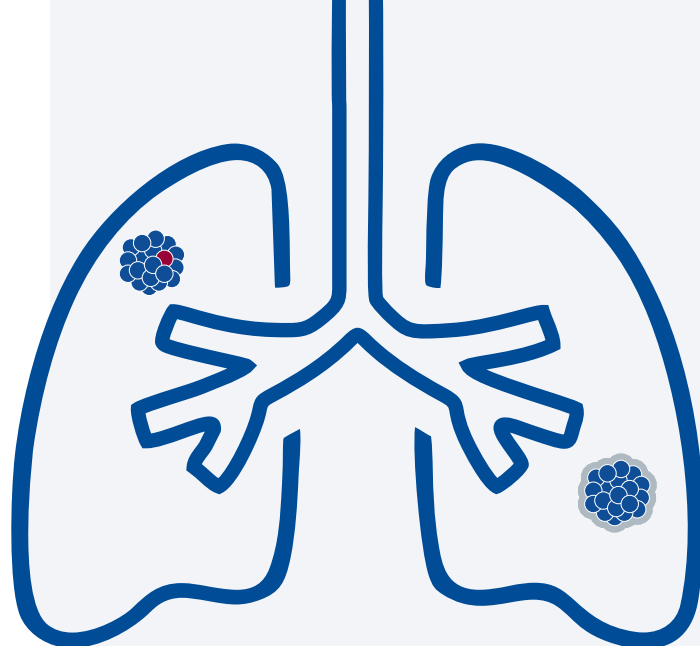
Biopsy or surgery to look at cells within the nodule more closely for cancer.

Low to Moderate Risk 5-65%

More tests needed to gain more information. You may be a candidate for Nodify Lung[®] blood-based nodule risk assessment testing. Through one simple blood draw, Nodify Lung[®] testing can help your physician better understand your lung nodule's risk of cancer.

Very Low Risk <5%

Follow up with chest CT to look for changes to the nodule over time.



What is a Lung Nodule?

A lung nodule or pulmonary nodule is an abnormal growth that forms in the lungs <30 mm.

- There can be one or several nodules.
- Nodules can develop on both lungs, in any spot.
- Lung nodules are common. **Up to 1/3 of adults who get chest X-rays or CT scans have them¹.**

Who is at risk?

Any person can develop a lung nodule. You may be higher risk due to³:



Smoking history



Older Age



History of prior cancer



Exposure to toxins or pollution

What are noncancerous causes?

- Inflammation from autoimmune diseases or lung disease, like sarcoidosis and rheumatoid arthritis
- Irritants and pollutants in the air
- Infection in the lungs, like pneumonia and tuberculosis
- Scar tissue from previous inflammation
- Fungal infections, like histoplasmosis



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