



**PHELPS COUNTY REGIONAL
MEDICAL CENTER**



Annual Cancer Report

World-Class Healthcare Close To Home

(Contains 2012 Statistics)

2012 Cancer Committee

Chairman: Ruth Ann Nevils, MD, Medical Oncology

Cancer Liaison: Mary Graham, MD, Radiation Oncology

Cancer Registry Quality Coordinator: Syed Huq, MD, Medical Oncology

Members:

Yaqoob Ali, MD	Medical Oncology
Kristi Atkins, RN	Cancer Research
Hillary Bleckman, RN	Cancer Research
Joseph Bond, DO	Medical Oncology
Lorie Bourne MS, RD, LD, CNSC	Dietary
Paul Cook, DO	Pathology
Leah Wylde, BS, MA	Education
Phil Cox, BA, MA, PhD	Pastoral Care
Dwayne Crabtree, MD	Pathology
James Davison, DO	OB/GYN
Edward Downey, DO	Radiology
Randee Jo Feco, PsyD	Psychology
Brenda Hughes	Administration
Pam Karr, MSN, RN-BC, CNL	CQM & Care Mgmt.
Nikki Leake	American Cancer Society
Helen Litz, RN, FNP	Breast Center
Linde Merrow, MS, RN	CQM
Mary Owen, MS, CGC	Genetic Counselor
Diana Pantaleo, RN	Radiation Oncology
Robin Pickup	Rehab
Amy Ross, MSN, RN, CNL	Medical Oncology
Cindy Searce, RN	Hospice
Vijay Sekhon, MD	Radiology
Jason Sharp, MBA	Radiation Oncology
Rhonda Teague, RN	Medical Oncology
Carolyn Tilford, RN, BSN	Education
Dana Voight, MD	Surgery
Carol Walter, MSN, RN	Nurse Navigator
Amy Weckman, Pharm. D	Pharmacy
Sarah Wiggins, BA, CTR	Cancer Registry
LeRoy Wombold, DO	Surgery
Christiane Zoghbi, MD	Medical Oncology



Cancer care services at Phelps County Regional Medical Center continue to expand in the goal to provide patient centered, world-class healthcare close to home.

Patients with a cancer diagnosis are supported with services expanded to make their diagnosis, treatment, and survivorship plans personalized and more efficient. Available services are as follows:

- The electronic medical record implementation continues to ensure instant access to the patients' records by their treatment and support team.
- Genetic counseling is available free of charge to high-risk patients on-site at PCRMC.
- The Nurse Navigator Program guides breast cancer patients from diagnosis and treatment planning to survivorship support once their treatment is finished.
- Nutritional counseling is available for all chemotherapy and radiation patients or any cancer patient wanting to improve his or her eating lifestyle.
- A social worker is available to help patients navigate the often confusing maze of financial and healthcare assistance options that may be available to them while on treatment.

Patients have access to participate in national clinical trials at PCRMC through the affiliation with Cancer Research for the Ozarks. PCRMC is able to offer PCRMC patients various phase II and phase III research trials through this continued partnership.

All physicians involved in cancer care at Phelps County Regional Medical Center continue to meet weekly to discuss new cancer cases. Through a multidisciplinary team approach, a treatment plan is designed for patients to ensure state-of-the-art care. The comprehensive cancer services team includes radiologists, medical and radiation oncologists, surgeons, gynecologists, pulmonologists and otolaryngologists.

We hope you find this report informative and helpful.

Ruth Ann Nevils, MD
Cancer Committee Chairman



Carol Walter, MSN, RN – Nurse Navigator

Nurse Navigator

A Nurse Navigator is an RN that serves as a guide for cancer patients and their family and support system. The Nurse Navigator provides education, support and coordination throughout the continuum of cancer care services including diagnosis, treatment and survivorship.

Cancer services can be confusing. Multiple clinicians and healthcare settings are often involved. Patients may experience unclear or unmet expectations that may be alleviated by having a single point person to contact throughout the entire patient process. Nurse Navigators act as a second pair of ears and eyes to help patients understand and navigate their diagnosis and treatment. A Nurse Navigator does not give suggestions on treatments or physicians, but only the information patients need to make informed decisions about their healthcare. By contacting the patient often, the Nurse Navigator has an opportunity to develop a relationship with the patient and reinforce the patient's treatment accomplishments. The Nurse Navigator is also able to offer clinical and psychosocial support at the times patients feel stressed by a particular problem or symptom.

As the PCRMC Nurse Navigator, Carol sees each new breast cancer patient as soon as she is aware of the patient's diagnosis and often even before the diagnosis at the biopsy. Carol saw 37 new breast cancer patients in 2013. She says, "My goal as a Nurse Navigator is to assist the breast cancer patient from diagnosis to survivorship by removing barriers and anticipating guidance. I offer education and support throughout the continuum of care, and I am available to reduce the sleepless nights of breast cancer patients and additional patients battling different types of cancer on a case-by-case basis."

"No person with cancer should spend more time fighting their way through the health care system than fighting their disease." - Dr. Harold Freeman, founder of Navigation Services

Survivorship Services

Research shows that a Nurse Navigator, as part of the patient's "Survivor" plan, can assist the patient with timely follow-up and symptom detection and prolong survival rates. The Nurse Navigator Program offers an internet patient portal that provides a link between the survivor and healthcare information and the rest of the cancer care team. The portal allows patients the ability to access all of their treatments, labs and health information from anywhere. The information is in one spot to share with other physicians and family anytime. The portal also shows patients the recommended follow-up plan created by the patients' physicians. PCPMC has added 122 new patients to the Survivorship Program in 2013.



Susan Buhr, MSW – Social Services

Social Services

Susan received her Master's Degree in Social Work from St. Louis University in 1996. She and her family moved to Rolla in 2008 and were blessed to find employment at PCPMC. She started working for the Delbert Day Cancer Institute (DDCI) in May 2013 and has provided services to 111 cancer patients.

She receives referrals from the doctors, nurses and ancillary staff. Susan meets with the patients and/or families during their treatments or at their doctor visits.

Susan's main goal at DDCI is to help patients and their families access community resources in order to try and meet the patients' psychosocial needs and to remove barriers. These needs can include financial, transportation, home health, in-home services, housing and even accessing medical supplies. Cancer patients and their families are often facing the most difficult time in their lives and are having to make many decisions regarding treatment, work, family and life. Some of the patients have to make large sacrifices during their treatments that can affect them financially and emotionally. As the social worker, Susan can help the patients and families sort through their feelings, reduce stress, cope and understand their grief. She meets with the patients and their families in order to provide counseling and emotional support. Susan acts as an advocate by referring patients to local support groups, providing educational material and utilizing mental health professionals.

Oncology Dietitian

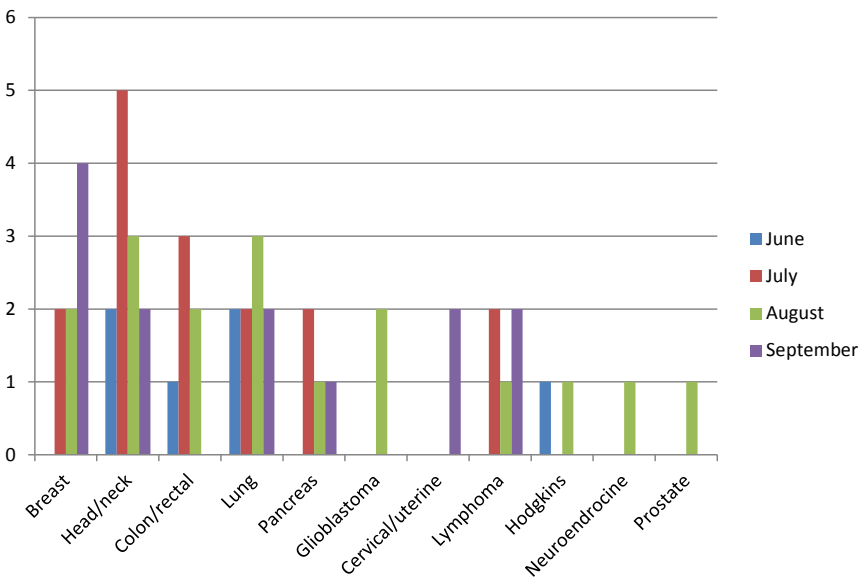
What does an Oncology Dietitian do?

A registered dietitian in oncology provides care across the continuum of the cancer experience including primary prevention, cancer treatment, secondary prevention, cancer recurrence and palliative care. During treatment a dietitian helps patients manage the side effects of treatment including nausea, vomiting, constipation, diarrhea, poor appetite, weight loss, taste changes, difficulty chewing or swallowing and feeding tubes.

Who needs a dietitian?

- Any cancer patient with a cancer of the gastrointestinal tract that might have problems with nutrition (head and neck cancers, esophageal cancers, gastric cancers, colon and rectal cancers, pancreatic cancers).
- Any cancer patient on treatment experiencing weight loss, taste changes, difficulty chewing or swallowing, diarrhea, constipation, nausea, vomiting and any patient with a feeding tube.
- Any cancer patient finished with treatment that wants to eat healthier and prevent further cancer.

In the past 4 months the PCRMC oncology dietitian has seen 53 patients with the following cancers: Breast, Head and Neck/Esophagus, Neuroendocrine, Colon/Rectal/Anal, Hodgkins, Lung, Pancreas, Glioblastoma, Lymphoma, Peritoneal, Prostate, and Cervical/Uterine





Lorie Bourne, MS, RD, LD, CNSC – Dietitian

My name is Lorie Bourne, and I have been a registered dietitian for over 20 years. I graduated from North Dakota State University in Fargo ND with a Bachelor's of Science Degree in Food and Nutrition. I received a Masters Degree in Clinical Nutrition from the University of Kansas Medical Center in Kansas City. I am a Certified Nutrition Support Clinician.

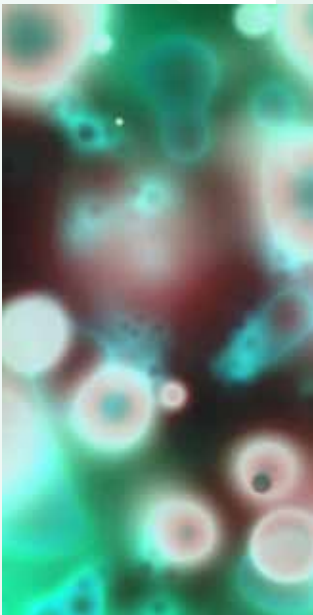
Throughout my career I have worked with many different types of patients. I began my career working in a Diabetes Treatment Center and have since worked with the WIC program and a cancer program in Kansas City where I saw patients receiving chemotherapy and radiation therapy. Currently, I am a clinical dietitian at PCRM and see ICU and medical oncology patients with many different nutritional issues.

When presented with the opportunity to work with cancer patients at the Delbert Day Cancer Institute, I was very excited to work in cancer services again. I increased my work schedule as the need has increased. I also received additional certification in Nutrition Support to be able to help patients manage feeding tubes. I enjoy working with cancer patients and helping them to get through treatments and live healthier lives.



2012 Cancer Conference Prospective Presentation

Anatomical Site	Number of Cases
Lung	36
Breast	34
Colorectal	21
Lymphoma	15
Head & Neck	13
Bone Marrow	12
Gastrointestinal	10
Gynecologic	6
Skin	5
Prostate	4
Other	15



Multidisciplinary Cancer Conferences

Cancer Conferences are held Thursdays at 7:00 am. A multidisciplinary team of physicians and other healthcare professionals attend the conferences. The meetings include discussions of patient medical history, diagnostic testing, surgical procedures, state of disease at diagnosis and treatment options including palliative care, pain management and survival outcomes. The latest in diagnostic technology and research protocols are discussed.

Representative Disciplines:

- Surgery
- Radiation Oncology
- Pathology
- Nutrition
- Medical Oncology
- Radiology
- Nursing



*Sarah Wiggins, BA, CTR
Certified Tumor Registrar*



*Viengmala McPhaul, CTR
Certified Tumor Registrar*

*For data requests,
please contact the
Cancer Registry at
(573) 458-7506.*

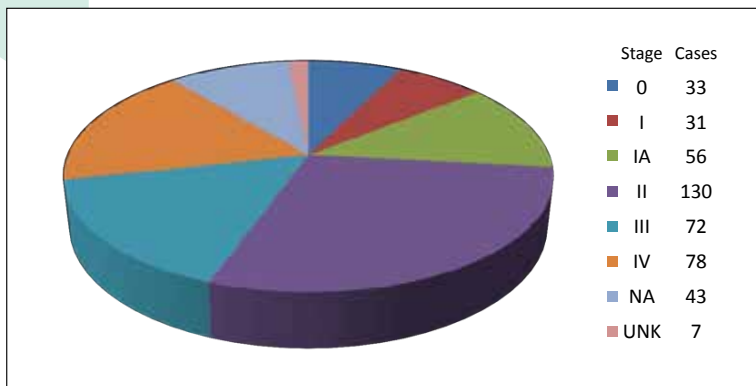
FIVE MAJOR SITES FOR 2012 ANALYTIC CASES:

Breast-96 cases (23.2%)	Lung-65 cases (15.8%)
Colorectal-50 cases (12.1%)	Prostate-21 cases (5.1%)
Bladder-19 cases (4.6%)	

Cancer Registry Snapshot

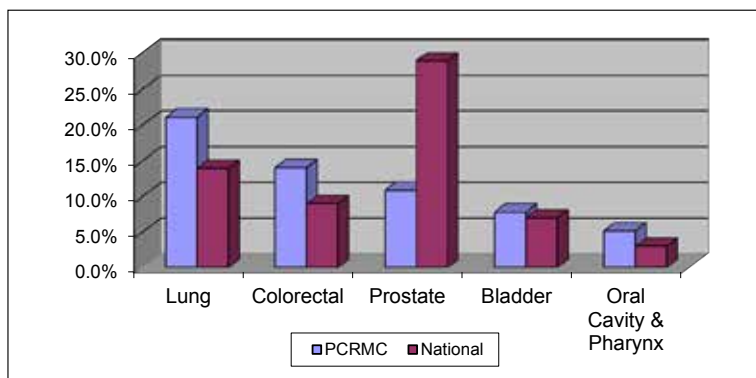
- Provides data management services to meet mandatory state reporting regulations and data needs of clinicians, administrators and other users.
- In 2012, there were 466 new cancer cases entered into the cancer registry.
- 413 of the 466 cases entered were newly diagnosed and/or treated at PCRM (analytic cases); the other cases were new to PCRM and treated for a recurrence or progression of their disease (non-analytic cases).
- Collects, manages and analyzes data on cancer patients, and maintains lifetime follow-up for all analytic cases in compliance with the standards of the American College of Surgeons, Commission on Cancer.
- Statistics can be retrieved from the Cancer Registry upon request to be used to study treatment outcomes, evaluate patient care and assist in administrative planning and cancer research.
- Data is reported annually to, and used for comparison with, the Missouri State Cancer Registry (MCR) and the National Cancer Database (NCDB) for cancer case incidence and cancer survival data.

PCRMC 2012 Cases by Stage

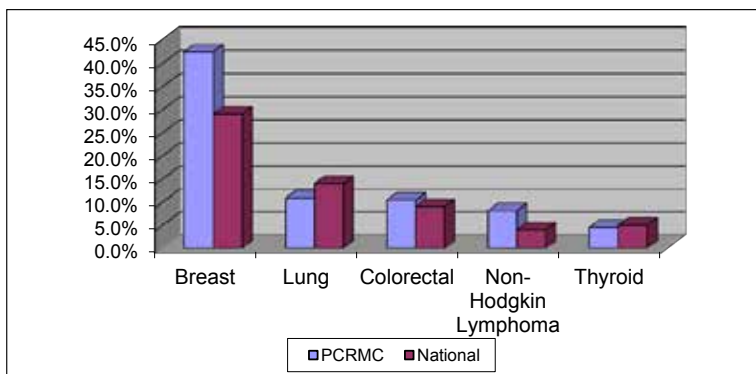


Comparison Cancer Cases by Leading Sites and Gender *Phelps County Regional Medical Center (Analytic Cases Only)*

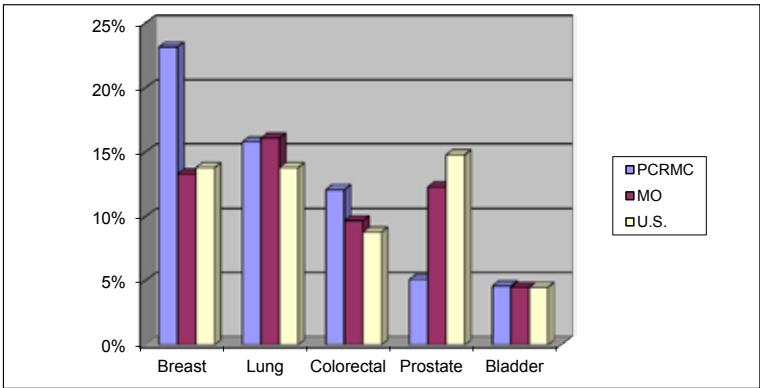
Males



Females



2012 Top 5 Sites Distribution



Source:
PCRMC Cancer Registry
ACS Cancer Facts & Figures 2012

COMMUNITY ENGAGEMENT



Annual Cancer Gala

The 28th Annual Cancer Gala in 2013 raised \$93,000 for PCRMC’s Joy of Caring Fund and the Delbert Day Fund. In 2014, the Cancer Gala’s theme will be “Black and White Ball” and will be held on February 8th at the Missouri S&T Havener Center.



Relay For Life

PCRMC received the honor of being a top fundraiser for the American Cancer Society’s (ACS) Relay For Life event in 2012. The PCRMC team raised \$17,866 and was recognized at the annual ACS luncheon as the third-highest fundraiser in Southwest Missouri, which consisted of 36 counties and 721 teams.



National Cancer Survivors’ Day

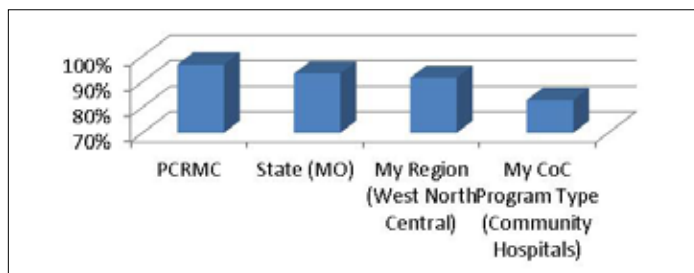
In 2014, PCRMC will be participating in National Cancer Survivors’ Day on June 1, 2014.

ACCOUNTABILITY MEASURES

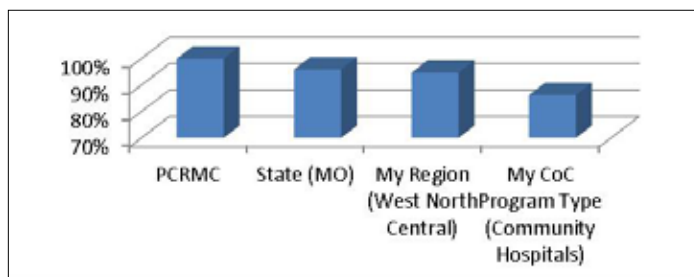
PCRMC's Cancer Committee ensures patients with cancer are treated according to nationally accepted standards as measured by compliance with the current Commission on Cancer quality reporting tools. An accountability measure is the standard of care based on clinical evidence.

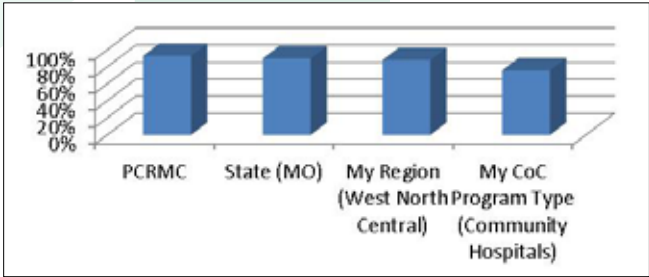
Cancer Program Practice Profile Reports (CP3R) 2011 (Most Current Available) Data

Measure 1: Radiation therapy is administered within one year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer.

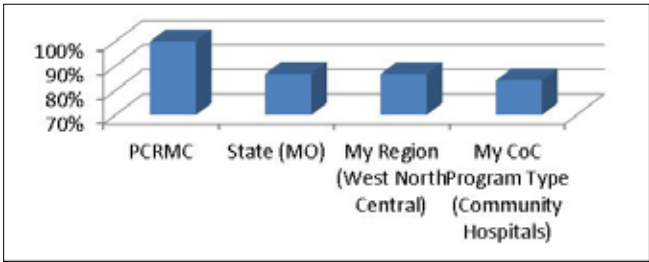


Measure 2: Combination chemotherapy is considered or administered within four months (120 days) for women under age 70 with AJCC T1cNOMO or stage II or III hormone receptor negative breast cancer.

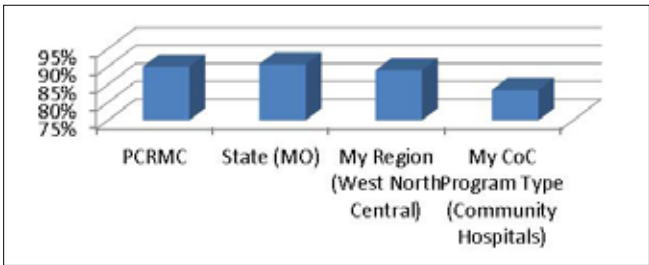




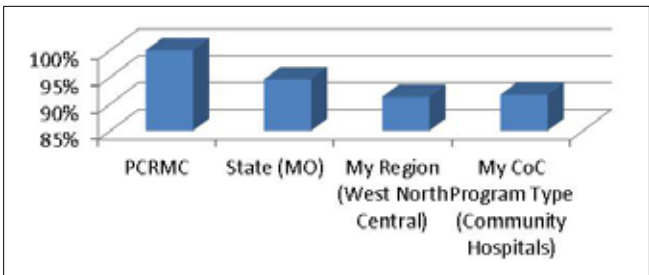
Measure 3: Tamoxifen or third generation aromatase inhibitor is considered or administered within one year (365 days) of diagnosis for women with AJCC T1cNOMO or stage II or III hormone receptor cancer.



Measure 4: Adjuvant chemotherapy is considered or administered within four months (120 days) of diagnoses for patients under the age of 80 with AJCC State III (lymph node positive) colon cancer.



Measure 5: At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer.



Measure 6: Radiation therapy is considered or administered within six months (180 days) of diagnosis for patients under the age 80 with clinical or pathologic AJCC T4NOMO or stage III receiving surgical resection for rectal cancer.



Hillary Bleckman, RN – Oncology Research Nurse

What are clinical trials?

Phelps County Regional Medical Center's Cancer Program, along with Mercy Oncology/Hematology

Clinic-Rolla, is an affiliate of the Cancer Research for the Ozarks. The PCRMC Cancer Program is designed to let local physicians offer their patients the same opportunities for cancer research trials as in a larger city. Clinical trials conducted at PCRMC follow the regulations designated by the National Cancer Institute and Cancer Research for the Ozarks.

Clinical trials are research programs that involve persons diagnosed with cancer. Many of the cancer treatments that we have today are the result of a clinical trial. Clinical trials follow very specific regulations and are particular about who can participate in the study. Each clinical trial is formulated with a precise plan called a protocol. Each clinical trial protocol clearly states the criteria for entering the trial as well as how the trial will be conducted. The reason the criteria must be narrowed down is to keep the participants as similar as possible so the results are based off of a group that share comparable traits, such as a patient's stage of cancer. What is the difference between a Prevention Trial and a Treatment Trial?

A prevention trial tries to find better ways to prevent people from getting cancer or lower the chances that people will get it.

A treatment trial finds better ways to treat cancer in people who already have it.

Weighing the Pros and Cons

The National Cancer Institute lists these as some of the possible benefits and drawbacks of participating in a clinical trial:

Possible Benefits

- Clinical trials offer high-quality cancer care. If you are in a randomized study and do not receive the new treatment being tested, you will receive the best known standard treatment.
- By looking at all your treatment choices, including clinical trials, you are taking an active role in a decision that affects your life.
- You have the chance to help others and improve cancer treatment.

Possible Drawbacks

- New treatments under study are not always better than, or even as good as, standard care.
- If you receive standard care instead of the new treatment being tested, it may not be as effective as the new approach.
- New treatments may have side effects that doctors do not expect or that are worse than those of standard treatment.
- Even if a new treatment has benefits, it may not work for you. Even standard treatments, proven effective for many people, do not help everyone.
- Health insurance and managed care providers may not cover all patient care costs in a study. What they cover varies by plan and by study. To find out in advance what costs are likely to be covered, check with your insurance company and the billing staff at the hospital or doctor's office.

PCPMC & Mercy Clinical Research Numbers

18 patients have been enrolled in a national clinical trial at PCPMC. These patients are actively monitored and followed by both their oncologist and the research nurse. New patients are screened daily and the program continues to grow.

Meet the Oncology Research Nurse

Hillary Bleckman, BS, RN, is the Oncology Research Nurse at PCPMC. Hillary serves as the primary contact for patients who enter clinical trials. She is responsible for screening potential candidates, enrolling patients into the study and monitoring them during the trial. If the patient is eligible for a trial and agrees to participate, Hillary makes sure consent is sent in and preliminary requirements are completed. Hillary then helps the patient stay on track with the study by ensuring the patient is following the trial's protocol and answering any questions the patient might have to ensure they are comfortable with the process. Patient participation in a trial is voluntary and can be stopped at any time.

If you have any questions concerning clinical trials at Phelps County Regional Medical Center, please call Hillary at 573-458-8776.

C A N C E R P R O G R A M A T A G L A N C E

Delbert Day Cancer Institute

Medical Oncology **573-364-8823**

- Dr. Joseph Bond
- Dr. Ruth Ann Nevils
- Dr. Christiane Zoghbi

Intravenous, oral medications & targeted therapies (non-chemo drugs designed to treat specific tumor types)

Radiation Oncology **573-458-7500**

- Dr. Mary Graham

Linear Accelerator, Brachytherapy & PET/CT

Comprehensive Breast Center **573-458-3100**

Digital mammography, screening & diagnostic mammograms, stereotactic biopsies, needle localizations, galactograms, ultrasound guided breast biopsies, bone density screening

Cancer Rehabilitation **573-458-7146**

Help patients manage and reduce side effects of cancer including: physical fatigue, pain, nausea, sleep disturbance, heart disease, osteoporosis, lymphedema & peripheral neuropathy

Endoscopy **573-458-7860**

Upper GI Endoscopy (EGD), Colonoscopy, Flexible Sigmoidoscopy, ERCP, Esophageal Dilatation, Liver Biopsy, Small Bowel Enteroscopy, Bronchoscopy, Esophagoscopy with Radio Frequency, Capsule Endoscopy & Bravo ph

Ambulatory Surgery Unit **573-458-3224**

Main Surgery Unit **573-458-7941**

Surgical specialties include: Ear, nose & throat (ENT), Orthopedics, OB/GYN, General Surgery, Urology, Podiatry, Dental Surgery

Chaplaincy Program **573-458-7935**

Support for patient families, in-house chapel, liaison for local clergy, community contact and chaplain's prayer line 573-458-PRAY (7729)

Phelps Regional Homecare **573-364-2425**

- Home Health
- Hospice
- In-home services

Staff registered, licensed or certified in specific fields

Support Services

Social Services

573-458-8339

Contact: Susan Buhr

Help patients & families access community resources to try to meet needs including: psychosocial, financial, transportation, home health, in-home services, housing & accessing medical supplies

Nurse Navigation

573-458-7164

Contact: Carol Walter

Provides education, support and coordination throughout continuum of cancer care services

Survivorship Program

573-458-7164 (Carol Walter)

Allows patients the ability to access their Oncology records & follow-up plan via the internet

Nutritional Counseling

573-458-7630

Patients & families can work with dietitians to optimize cancer therapy through their diet

Cancer Research

573-458-8776

Contact: Hillary Bleckman

Patients are able to enroll in nationally approved clinical trials for cancer treatment & prevention

Education

573-458-7759

Contact: Carolyn Tilford

Chronic Disease Self-Management
Daytime & Evening Classes
throughout the year, among other classes and programs

Cancer Support Groups

Cancer Support Group

573-458-7500

Date: Every Wednesday

Time: 5-7 pm

Location: Radiation Oncology

Breast Cancer Support Group

573-458-3108

Date: Second Wednesday of
every month

Time: 2-3 pm

Location: Comprehensive
Breast Center



DIRECTIONS

From north of Rolla

Take Highway 63 South to 10th Street. Make a right on 10th Street and drive 0.4 miles. The hospital will be located on the right.

From south of Rolla

Take Highway 63 North to 10th Street. Turn left on 10th Street and drive 0.4 miles. The hospital will be located on the right.

From east of Rolla

Take Interstate 44 West to exit 185. Make a left hand turn at the top of the exit. Watch for Poole Avenue, make a right hand turn on it, and continue on Poole Avenue until 10th Street. Make a right on 10th Street, and the hospital will be on the right a short distance down the road.

From west of Rolla

Take Interstate 44 East to exit 184. Make a right hand turn at the top of the exit and go to the first stop light. Take a left turn at the stop light on to Fairgrounds Road. Follow Fairgrounds Road until it intersects with 10th Street. Make a right on to 10th Street and the hospital will be on the left.

Phelps County Regional Medical Center
World-Class Healthcare Close To Home
1000 West Tenth Street
Rolla, Missouri 65401
www.pcrmc.com