



# 2015 Cancer Program Annual Report

# CHAIRMAN'S REPORT



Cancer care services at Phelps County Regional Medical Center (PCRM) continue to expand in order to continue providing world-class, cutting edge care right here at home.

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

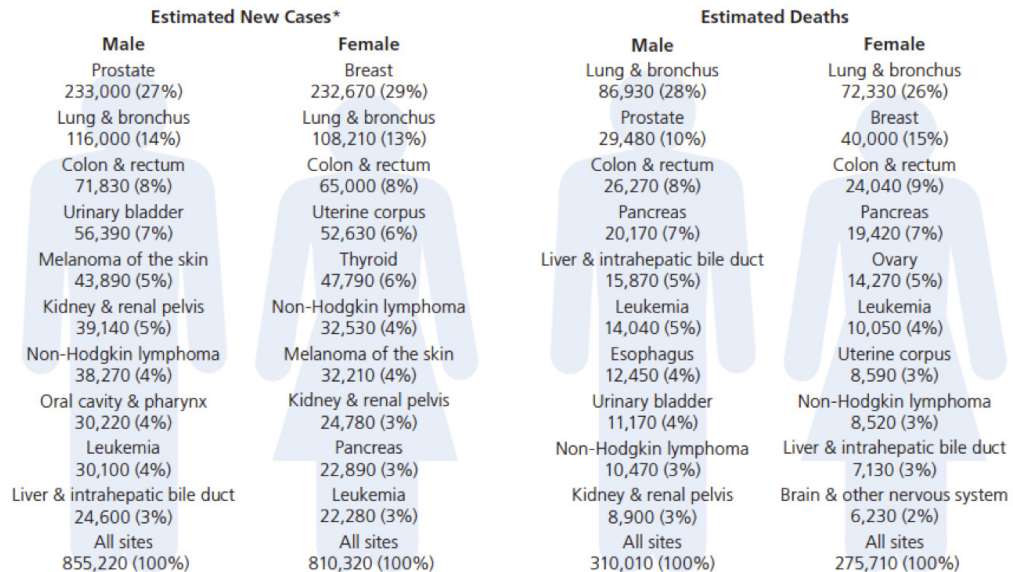
Electronic medical records implementation continues to ensure instant access to the patient's records by their treatment and support team.

Genetic counseling is available free of charge to high-risk patients on site at PCRM.

The Nurse Navigator program at PCRM guides and supports breast cancer patients by acting as a liaison for the patient by being the direct line to the many health care professionals involved in the treatment of a breast cancer patient. Patient advocacy is at the heart of the program, and the Nurse Navigator adds an additional layer of support to women facing a cancer diagnosis.

Nutritional counseling is available for all chemotherapy and radiation patients as well as

## Leading New Cancer Cases and Deaths – 2014 Estimates



\*Excludes basal and squamous cell skin cancers and in situ carcinoma except urinary bladder.

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any cancer patient that wants to improve his/her eating habits. 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 the option of participating in national clinical trials here at PCRM through our affiliation with Cancer Research for the Ozarks. We are able to offer 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 each week to discuss new cancer cases. Through this multidisciplinary team, a treatment plan is designed for each patient that ensures state-of-the-art care is available to them. This team includes radiologists, medical and radiation oncologists, surgeons, gynecologists and ENT physicians.

WE HOPE YOU FIND THIS REPORT INFORMATIVE AND HELPFUL.

Ruth Ann Nevils, MD  
Cancer Committee Chairman

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New Year's Day

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Martin Luther  
King Jr. Day

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**PHELPS COUNTY REGIONAL  
MEDICAL CENTER**

January 2015

# MEET THE DELBERT DAY CANCER INSTITUTE AT PCRMC ONCOLOGY TEAM



**Ruth Ann Nevils, MD**

Ruth Ann Nevils, MD, is board-certified in Internal Medicine and Medical Oncology. She became interested in Medical Oncology when she witnessed her brother in severe pain from melanoma. She knew there were options available to help him, and she made sure he was transferred to a medical oncologist who finally got him pain free. Then, as an intern at the University of Tennessee, she became impressed with the patient and physician interaction in oncology services. “I have found that cancer patients are very motivated to participate in their care, and a willingness to participate is needed when you are working to make them better,” says Dr. Nevils. “Every day I hope I have helped someone and made a positive difference in his or her life.”



**Stephen Richard Toothaker, MD**

Stephen Richard Toothaker, MD, is board-certified in Oncology and Hematology. Dr. Toothaker received his degree from Dartmouth Medical School in Hanover, New Hampshire, completed his residency at the Maine Medical Center Internal Medicine Residency Program and completed a fellowship in Oncology and Hematology from Strong Memorial Hospital in Rochester, New York. Dr. Toothaker has over ten years of experience in Oncology and Hematology and specializes in bone marrow biopsy, an area he studied for six years. Dr. Toothaker is specially trained in lymphoma and has participated in complicated lymphoma procedures and research.



**Joe Bond, DO**

Joe Bond, DO, received his degree in Internal Medicine from the Kirksville College of Osteopathic Medicine and completed his Internal Medicine residency at Des Peres Hospital in St. Louis, which was followed by a two-year fellowship in Hematology and Medical Oncology at St. Louis University. He is board certified in Internal Medicine and Medical Oncology and his practicing specialty includes Hematology and Medical Oncology. Dr. Bond says he finds helping people to live longer and better lives is what he finds the most rewarding about his job. “In a rural area, people know you—people trust you. Although I could have practiced other places, I am so glad I chose Rolla. The people I have met and treated over the years have been wonderful.”



**Bruce Ellerin, MD**

Dr. Ellerin is certified in Radiation Oncology by the American Board of Radiology and brings over 14 years of experience in radiation oncology to the PCRMC team. Dr. Ellerin received his JD in 1985. After law school, he received a PhD in Government and Political Theory in 1991 from Cornell University in Ithaca, New York, where he also was a professor. He graduated from medical school at the University of North Carolina School of Medicine in Chapel Hill, North Carolina, in 1995. Following medical school, he completed a residency at Weill Medical College/New York Presbyterian Hospital in New York City in 2000. Dr. Ellerin has special interests in skin treatments, image-guided radiation therapy, stereotactic body radiation therapy, breast high-dose rate brachytherapy and RapidArc treatment.

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## Valentine's Day

21

## Ash Wednesday

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## Washington's Birthday



**PHELPS COUNTY REGIONAL  
MEDICAL CENTER**

February 2015

# THE CANCER REGISTRY

573-458-7506



- Provides data management services to meet mandatory state reporting regulations and data needs of clinicians, administrators and other users
- In 2013, there were 432 new cancer cases entered into the cancer registry.
- 365 of the 432 cases entered were newly diagnosed and/or treated at PCRCM (analytic cases); the other cases were new to PCRCM and treated for a recurrence or progression of their disease (non-analytic cases).
- 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.

## Five major sites for 2013 analytic cases:

Lung—75 cases (20.6%)

Breast—72 cases (19.7%)

Colorectal—41 cases (11.2%)

Bladder—20 (5.5%)

Non-Hodgkins Lymphoma—17 (4.6%)

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

*Sarah Wiggins, B.A., CTR  
Certified Tumor Registrar*

*Andrea Litz  
Registry Trainee*

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## National Doctors' Day

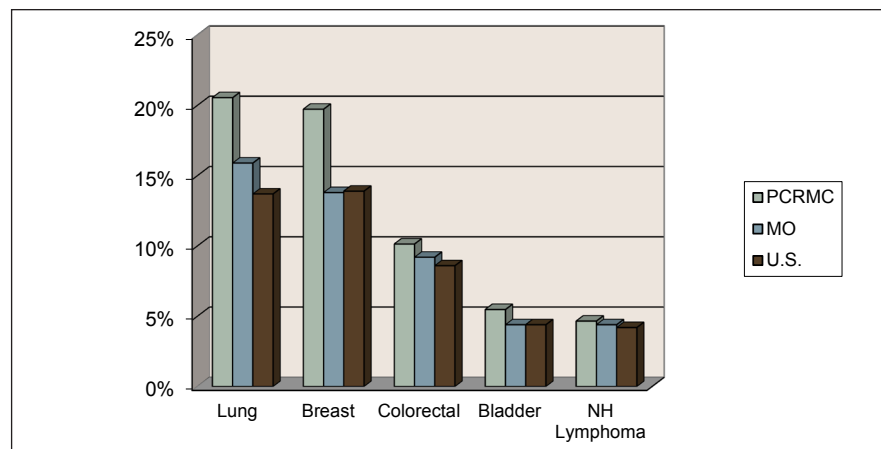


**PHELPS COUNTY REGIONAL  
MEDICAL CENTER**

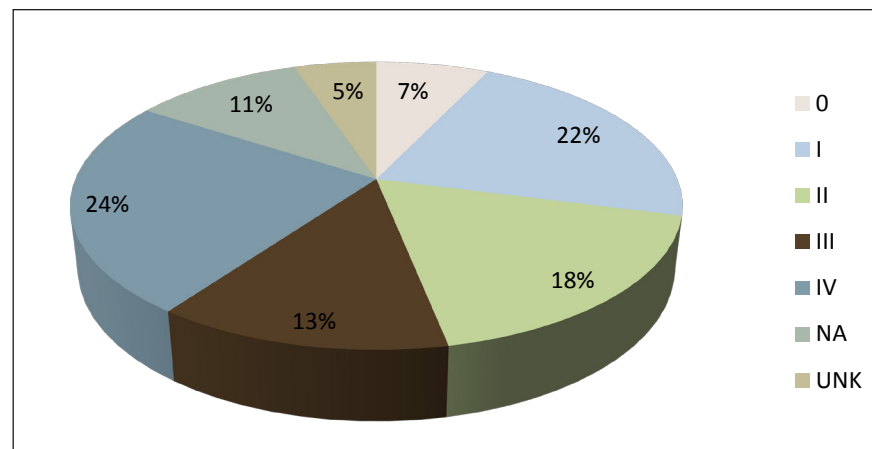
March 2015

# THE CANCER REGISTRY

## 2013 Top 5 Sites Distribution



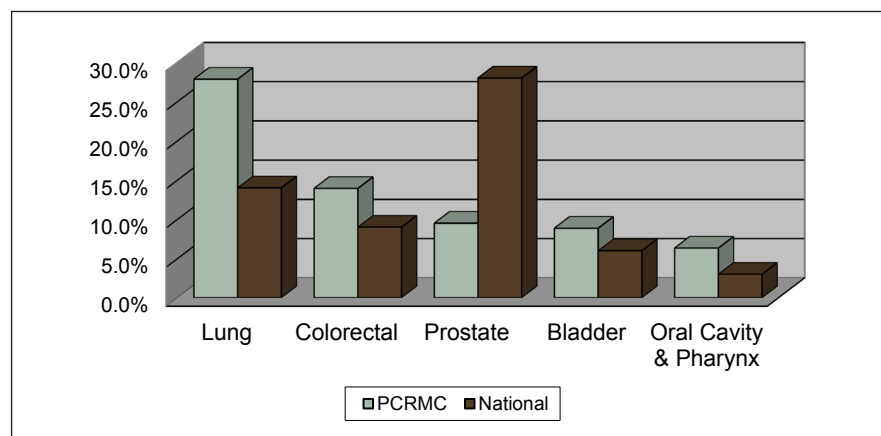
## Distribution by AJCC Stage



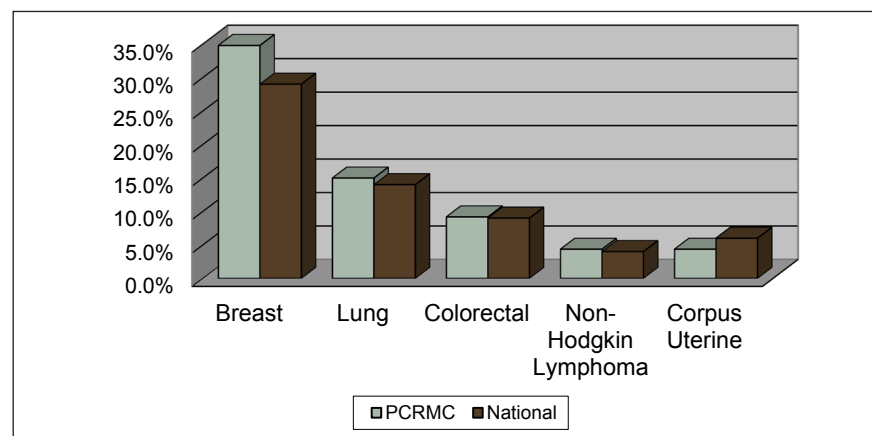
## Comparison Cancer Cases by Leading Sites and Gender

Phelps County Regional Medical Center (Analytic Cases Only)

### Males



### Females



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**PHELPS COUNTY REGIONAL  
MEDICAL CENTER**

April 2015

# REGISTERED OROPHARYNX CASES

## Monitoring Compliance with Evidence-Based Guidelines

Oropharynx Cancer, PCRMC, 2013 Cancer Registry Data

American College of Surgeons, Commission on Cancer–Standard 4.6 Requirement

Dr. Mary Graham, Radiation Oncologist, Report Completed September 10, 2014

The source of this study is all PCRMC registered oropharynx cases in 2013. There were nine total cases in the registry with oropharyngeal cancer. This site was chosen for review and evaluation because it had never been looked at before in previous years. We had some sense that we were treating a number of head and neck patients in our community and we wished to confirm that they were being treated per NCCN guidelines.

STAGE	HISTORY & PHYSICAL	BIOPSY	HPV TEST DONE	CT NECK	PET SCAN	DENTAL EVAL	NUTRITION	CANCER CONFERENCE	NCCN TX FOLLOWED	CHEMO	RADIATION
T3, N2, M0, STG IVA	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
T1, N2B, M0, STG IVA	YES	YES	YES	YES	YES	YES	YES	NO	YES	YES	YES
T3, N2C, M0, STG IVA	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
T1, N2, M0, STG IVA	YES	YES	YES	YES	INSUR DENIED	YES	YES	NO	YES	YES	YES
T3, N2C, M0, STG IVA	YES	YES	NO	YES	YES	YES	YES	YES	YES	YES	YES
T3, N2C, M0, STG IVA	YES	YES	NO	YES	YES	NO MENTION	YES	YES	YES	YES	YES
T2, N2A, M0, STG IVA	YES	YES	NO	YES	YES	YES	YES	YES	YES	YES	YES
T1, N0, M0, STG I	YES	YES	YES	YES	YES	YES	YES	NO	YES	NO	YES
T2, N1, M0, STG III	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES

## NOTES:

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## Cinco De Mayo

National Nurses  
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## Mother's Day

Armed Forces Day

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**PHELPS COUNTY REGIONAL  
MEDICAL CENTER**

May 2015

**Findings:**

Patients were evaluated for the following criteria: staging, presence of a history and physical examination, pathologic confirmation of correct malignancy (squamous cell carcinoma of the oropharynx), P16/HPV status, diagnostic CT imaging, diagnostic PET imaging, dental evaluation prior to treatment, nutritional counseling during treatment, prospective tumor board presentation prior to treatment, adherence to NCCN guidelines and whether combined modality treatment was given, including chemotherapy and radiation therapy.

- There was one patient with stage I disease and one with stage III. Both of these patients were reviewed and treated in accordance with NCCN guidelines for their respective stages.
- There were seven additional patients with Stage IVA disease by virtue of N2 or higher disease. All patients were reviewed for their staging and deemed to be correct and appropriate. All had history, and physical examinations documented pathologic confirmation of squamous cell carcinoma.
- There were 3/7 patients in whom the P16/HPV status could not be confirmed. All of these patients came to PCRMC from a different institution.
- All patients had a diagnostic CT scan of the head and neck region. In 1/7 patients the PET was denied by their insurance, and thus not performed.
- In 6/7 patients a dental evaluation was documented as having been done prior to treatment, although a formal dental report was not in the PCRMC records.
- All patients had nutritional counseling and support during treatment. 5/7 patient were presented at tumor boards prospectively.
- All patients received treatment per the NCCN guidelines including chemotherapy and radiation therapy.

**Recommendations:**

1. Improved documentation of HPV status. This goal will be discussed at our next Cancer Conference and with our pathologists. When pathology has been obtained at a different institution, we will request the status result, and if it has not been done, proceed with ordering it.
2. Improved dental evaluation documentation. This goal will be discussed at our next Cancer Conference. We will develop a form to send to the dentists to be filled out at the time of the dental evaluation and then returned for documentation in ARIA. This is expected to improve not only the obtaining of the dental evaluation, but also improve the sharing of information with the treatment team and document the evaluating dentist's name as a part of the team.
3. Increased presentation of the oropharyngeal cases prospectively at Tumor Board. Six out of nine patients (66%) were presented prospectively, and this is an acceptable percentage. However, because of the complexity of these patients, their significant needs and the coordination of combined modality treatments, prospective presentation of each new case is desirable. This recommendation will be presented to the Cancer Committee

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June 2015

# COMMUNITY OUTREACH



## **2014 Cancer Gala**

Saturday, February 8, 2014

The 2014 Cancer Gala fundraised over \$160,000 for the Delbert Day Cancer Institute at PCRMC and the Joy of Caring Fund through the Phelps Regional Health Care Foundation. All the proceeds stayed local. The 30th Annual Cancer Gala is scheduled for Saturday, February 21st, 2015 and is Mardi Gras themed.

## **PCRMC Cancer Survivor Day 2014**

Sunday, June 1st, 2014

Over 450 people gathered to celebrate local survivors at the first annual PCRMC Cancer Survivor Day. The community outreach event honored over 150 survivors attending from Phelps, Dent, Pulaski, Maries, Crawford and Texas counties. Survivors were treated to goody bags, a BBQ meal and live music. The community came together to donate over 50 gift baskets, which were then raffled and gifted to Survivors.

## **Relay for Life 2014**

Saturday, October 4th, 2014

Phelps County Regional Medical Center (PCRMC) is a proud supporter of the American Cancer Society and the American Cancer Society's annual Relay For Life events. Relay For Life is a life-changing day that brings people and their communities together to celebrate the lives of those who have battled cancer, remember loved ones who have lost their fight with cancer and empower individuals and communities to fight back against a disease that takes too much. The Delbert Day Cancer Institute at PCRMC Relay for Life team is the largest fundraiser in the area and has fundraised almost \$50,000 in the past 3 years to help end the fight against cancer.

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**PHELPS COUNTY REGIONAL  
MEDICAL CENTER**

July 2015

# CANCER SUPPORT SERVICES



**Carol Walter, MSN, RN – Nurse Navigator**

Carol has a Bachelor's and Master's Degree in Nursing from the University of Missouri – Columbia. In 34 years of nursing she has had many experiences, including Hospice and Public Health – both helpful in assisting cancer patients. She has been with PCRMC 7+ years, after moving to Salem in 2007.

## **What is a Nurse Navigator?**

A Nurse Navigator is an RN that serves as a guide to cancer patients, and their family and support system, providing education, support and coordination throughout the continuum of cancer care services, including diagnosis, treatment, support care 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, often accompanying them to the doctor visits to help patients understand and navigate their diagnosis and treatment. A Nurse Navigator does NOT give suggestions on treatments or physicians, only the information needed for the patient to make their own 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 and offer clinical and

psychosocial support at the times they feel stressed by a particular problem or symptom.

Carol sees each new breast cancer patient at PCRMC as soon as she is aware of their diagnosis, and often even before the diagnosis at the biopsy. She has seen 37 new breast cancer patients in 2013.

The goal of a Nurse Navigator is to assist the breast cancer patient from diagnosis to survivorship by removing barriers and anticipating guidance, education and support throughout the continuum of care, and to reduce the sleepless nights of breast patients, and all cancer patients as needed.

***“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 has shown 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. This service has an internet patient portal that provides a link between the survivor and healthcare information and the team.

The patient portal allows patients the ability to access all their treatments, labs and health information from anywhere. It gives the patient information in one spot to share with other physicians or family anytime.

It also shows their recommended follow-up plan, especially put together by the patient's physician. We have added 122 new patients to the survivorship program in 2013.



**Susan Buhr, MSW – Social Services**

Susan received her Master's Degree in Social Work from St. Louis University in 1996. She and her family moved to Rolla 5 years ago and were blessed to find employment at PCRMC. She started working for the DDCl in May 2013 and has provided services to 111 cancer patients. She receives referrals from the doctors, nurses and ancillary staff. Susan will meet with the patients and/or families during their treatments or at their doctor visits.

The main role as the social worker in the Cancer Center is to help patients and their families access community resources in order to try and meet the patients' psychosocial needs and to assist with solutions to many barriers. These needs can include: financial, transportation, home health, in-home services, housing and even accessing medical supplies. Cancer patients and their families are facing the most difficult time in their lives and have to make many decisions regarding treatment, work, family and life. Some of the patients have to make large sacrifices during their treatments which 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 will meet with the patients and their families in order to provide counseling and emotional support. Susan will act as their advocate, referring them to local support groups, providing educational material and utilize the mental health professionals if needed.

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**PHELPS COUNTY REGIONAL  
MEDICAL CENTER**

August 2015

## **PCRMC is an affiliate of Cancer Research for the Ozarks**

Phelps County Regional Medical Center's Cancer Program, along with the Mercy Oncology/Hematology Clinic-Rolla, is proud to be an affiliate of Cancer Research for the Ozarks. This organization was selected to become one of the thirty-four new National Cancer Institute's Community Oncology Research Program's Sites (NCORP). This means that we have access to a national network of the newest cancer treatments through participation in clinical trials close to home. Participation in Cancer Research is strictly voluntary, provides the chance to help others with cancer, and provides access to promising new treatments. Most of the cancer treatments we have today are the result of a clinical research trial. If you have any questions regarding the benefits of participating in a clinical trial, please call Linda Schumacher at 573-458-8776.



### **Meet the Oncology Research Nurse, Linda Schumacher, RN BSN**

I have been a registered nurse for almost 30 years. I received my Diploma in Nursing from St. Luke's Hospital in Kansas City in 1985. I later went back to school to receive my Bachelor's of Science in Nursing from the University of Missouri in 1998. I have spent most of my career in Oncology. I was selected by the University of Missouri staff to go to China as a People to People Ambassador for Oncology Nursing where I got to meet with Oncology nurses in China to exchange ideas regarding nursing care of our patients. I have worked in all phases of Oncology Nursing from Hospice, Chemotherapy Infusion, Home Health and Research. I am currently assisting patients as the Research Nurse for Phelps County Regional Medical Center, The Bond Clinic, and The Mercy Clinic.



### **Meet the Genetic Counselor, Mary Owen, MS, CGC**

Mary Owen is a Missouri native who grew up in Springfield, MO. She graduated from Drury University with a Bachelor's of Arts in biology, religion and philosophy. From there, Mary went on to graduate from the University of Colorado Anschutz Medical Campus in Denver, CO with a Master's of Science in biophysics and genetics through the genetic counseling program. Mary is a board-certified genetic counselor by the American Board of Genetic Counselors. Following graduate school, Mary returned to Springfield to establish the first cancer genetic counseling program of southern Missouri through CoxHealth. Mary is now bringing genetic counseling to PCRMC.

At PCRMC, we offer genetic counseling to our patients. The service is provided by the Delbert Day Cancer Institute. If you would like more information about the Genetic Counseling, please contact Mary Owen, MS, CGC, at (417) 269-2110. Mary Owen is at PCRMC to meet with patients on the 2nd Thursday of every month. To schedule an appointment, please contact Samra Norris at (573) 458-7500.



### **Meet the Dietician, Lorie Bourne, MS, RD, LD, CNSC**

My name is Lorie Bourne, I have been a registered dietitian for over 22 years. I graduated from North Dakota State University in Fargo ND with a Bachelor's of Science Degree in Food and Nutrition. I went on to get a Masters Degree in Clinical Nutrition from the University of Kansas Medical Center in Kansas City. I completed advanced education in the area of Nutrition Support as 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, a cancer program in Kansas City seeing patients receiving chemotherapy and radiation therapy, a clinical dietitian at PCRMC covering ICU and medical oncology patients which involved seeing patients with many different nutritional problems.

When the opportunity to work with cancer patients again presented with the Delbert Day Cancer Institute, I was very excited to move back into this area. I began working for the cancer center 2 years ago on a part-time basis and began working full time this spring. I completed the additional certification in Nutrition Support to be able to help patients manage feeding tubes. I have always enjoyed working with cancer patients and helping them to get through treatments and live healthier lives.

Lorie Bourne MS, RD, LD, CNSC

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Labor Day

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## Autumn Begins

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**PHELPS COUNTY REGIONAL  
MEDICAL CENTER**

September 2015

# DELBERT DAY CANCER INSTITUTE



The Delbert Day Cancer Institute (DDCI) is more than a name or building: it is a vision for exceptional cancer care. The oncology advisory team has developed a coordinated and centralized approach to providing cancer services in one location. At the same time, the Phelps Regional Healthcare Foundation has raised funds to assist in making the new building a reality.

While the actual building phase has not begun, there are a number of existing programs that support oncology services now and will also be included in the DDCI building:

- An Electronic Medical Record that ties radiation oncology, medical oncology and support services together.
- A research nurse is in place and PCRMC is able to offer clinical trials.
- A Nurse Navigator is available to assist patients through their journey.
- A genetics counselor is available to referred patients.
- A social worker is dedicated to assisting oncology patients.
- A dietitian is accessible to counsel patients.
- There are support groups available.
- The availability of wigs, scarfs and nutritional support has expanded.

The DDCI planning phase is close to completion as PCRMC engaged an architectural firm to help design the building to enhance the patient experience. PCRMC collaborated with current and former patients for focus groups, visited existing facilities and designed the building concept around the cancer treatment journey. In short, the Delbert Day Cancer Institute is already established and thriving. The construction of the physical building began in early 2015 with a targeted completion date in mid-2016.

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## Columbus Day

## National Boss Day

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## Halloween



**PHELPS COUNTY REGIONAL  
MEDICAL CENTER**

October 2015

# SIEMENS MAMMOMAT INSPIRATION PRIME MAMMOGRAPHY UNIT



Siemens Mammomat Inspiration Prime Mammography Unit is a full field digital unit with CAD that utilizes Volpara Breast Density Software to assess breast density on each patient. The Mammography Unit features the following:

- Special color changing LED mood light that provides a soothing patient environment.
- A breast compression paddle that provides a warm and smooth feeling for patient comfort during the exam.
- Individualize dosing and compression to optimally match the breast density and thickness of each patient.
- PCOMP function that indicates when optimal compression for each patient is achieved to avoid over compression.

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## Election Day

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## Veteran's Day

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## Thanksgiving Day

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**PHELPS COUNTY REGIONAL  
MEDICAL CENTER**

November 2015

# PATIENT QUALITY IMPROVEMENT IN RADIATION ONCOLOGY

**On Board Imaging (OBI) went live in March 2014**

**Clinical features of the OBI include the following:**

- High quality imaging allows healthcare providers to quickly see anatomical differences, therefore enabling quick and accurate decisions before treatment.
- Low dose imaging means daily imaging is safe and acceptable, if required.
- The OBI identifies the patient's position at the time of treatment so that small adjustments can be made to optimally position the patient. The system has two modes of operation, including radiographic repositioning, using fast, reliable automated tools for anatomical registration, or radio opaque marker registration and cone beam CT repositioning.
- The OBI is designed for convenience so that the patient repositioning process can be performed remotely, which saves time and simplifies the process.





# STAR PROGRAM<sup>®</sup>

Coming in 2015 to PCRMC is The STAR Program<sup>®</sup> Certification by Oncology Rehab Partners

The STAR Program<sup>®</sup> Certification (Survivorship Training and Rehabilitation) provide hospitals, cancer centers and group practices with the training, protocols and other tools needed to deliver evidence-based “best practices” cancer rehab services. The STAR Program certification has become the gold-standard in cancer rehabilitation care and many institutions throughout the United States have elected to undergo STAR Program Certification to improve quality of care, patient outcomes, referrals and reimbursement.



## **What is the STAR Program?**

- An evidence-based education and training program that hospitals and cancer centers offer to administrative and clinical staff in order to quickly and expertly develop superior oncology rehabilitation services
- Therapy-based protocols that interdisciplinary hospital teams can use to both provide optimal clinical care and track outcomes
- The gold-standard in cancer rehabilitation care
- A way to provide interdisciplinary oncology rehabilitation team facilities and individual clinicians with tools and systematic, proven programs to deliver excellent oncology rehabilitation care

# PCPMC'S CANCER PROGRAM AT-A-GLANCE

## Delbert Day Cancer Institute

Toll Free Number 1-855-406-3324

## Bond Clinic Medical Oncology

**573-364-8823**

–Dr. Joseph Bond, Dr. Ruth Ann Nevils  
& Dr. Stephen Toothaker  
–Intravenous, oral medications & targeted  
therapies (non-chemo drugs designed to  
treat specific tumor types)

## Radiation Oncology

**573-458-7500**

–Dr. Bruce Ellerin  
–Linear AccelerCT, 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

## Surgery

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

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

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

## Chaplaincy Program

**573-458-7935**

–Support for patient families, in-house chapel, liai-  
son for local clergy, community contact and chap-  
lain'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 (Susan Buhr)  
–Help patients & families access community  
resources to try to meet needs including: psychoso-  
cial, financial, transportation, home health, in-home  
services, housing & accessing medical supplies

**Nurse Navigation**

573-458-7164 (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

**573-458-8337 (Lorie Bourne)**

–Patients & families can work with dieticians to opti-  
mize cancer therapy through their diet

## Cancer Research

**573-458-8776 (Linda Schumacher)**

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

## Cancer Support Groups

**Cancer Support Group**

Radiation Oncology (573-458-7500)  
Every Wednesday (5-7 pm)

**Breast Cancer Support Group**

Breast Center (573-458-3108)  
2nd Wednesday of every month (2-3 pm)

## Education

**573-458-7759 (Carolyn Tilford)**

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



**PHELPS COUNTY REGIONAL  
MEDICAL CENTER**

# DIRECTIONS

## From north of Rolla

Take Highway 63 South until you get to 10th Street. Make a right on 10th Street and follow it until the hospital is on your right.

## From south of Rolla

Take Highway 63 North until you get to 10th Street. Make a left on 10th Street and follow it until the hospital is on your right.

## From east of Rolla

Take Interstate 44 West and get off at 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 your right a short distance down the road.

## From west of Rolla

Take Interstate 44 East and get off at 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 you will see the hospital on your left.

