

2014 CANCER COMMITTEE

Annual Report



COMMUNITY OUTREACH COORDINATOR REPORT

REPORT BY MARY HILL, DNP, COMMUNITY OUTREACH COORDINATOR



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In 2014, North Florida Regional Medical Center (NFRMC) offered many cancer prevention, early detection and survivor support programs to meet the needs of the community. Programs were provided based on a needs assessment and focused on promoting smoking cessation; healthy eating, lifestyle and

obesity concerns; prevention and treatment of specific cancer types; early detection of specific cancer types; cancer survivorship support and education; building community resources for cancer patients.

Tobacco cessation classes were offered monthly at The Cancer Center of NFRMC providing a face-to-face 'Tools to Quit' onsite program in partnership with the Suwannee River Valley Area Health Education Center (AHEC). Each participant was provided a program workbook with a quit day, supply bag with tools and educational materials. A four-week supply of nicotine replacement therapy (NRT) was also provided. Topics addressed during the program included selecting a quit date, how to cope with withdrawal from nicotine and identify triggers, how to handle triggers, stress management and available NRTs. Bedside visits and counseling were provided throughout the year to hospitalized patients diagnosed with lung cancer. Those patients were also given referrals to smoking cessation programs available through Tobacco Free Florida. Personalized programs offered over-the-phone coaches, online programs and face-to-face programs. Nicotine replacement products are provided through Tobacco Free Florida to help patients stay tobacco free.

Education programs promoting healthy lifestyle to prevent cancer were provided by the cancer program and hospital staff and were offered as community health education to the citizens of North Central Florida throughout the year. Those included the following:

- Kingdom Women's Conference
- Breast Cancer Awareness Events
- Women and Wellness: Cancer-We are Coming for You
- Great American Smoke Out
- Community Health Events
- Healthy Work Environment and Safety Fair at NFRMC
- Smoking Cessation Education
- Women and Wellness: Obesity Epidemic

Monthly obesity management informational forums were also offered onsite by the hospital.

Educational programs aimed at reducing the incidence of specific cancer types provided to community residents, community physicians, nurses and allied health professionals included the following:

- Head and Neck Cancer: Risk Factors and Prevention
- Women's Cancers: What You Should Know and Do
- Ovarian Cancer: Screening and Genetic Testing
- Risk Factors and Risk Reduction
- Breast Cancer Awareness, Early Detection and Prevention

The use of staging, prognostic factors and evidence-based treatment guidelines were reviewed.

NFRMC worked in collaboration with the American Cancer Society as a local host site for the Great American Smoke Out during the Fall of 2014 with a total of 81 participants.

Screening programs aimed at decreasing the number of patients with late stage disease were also implemented, including the Lung Cancer Screening Program, which provided reduced cost lung cancer screening through low-dose computerized tomography (CT) scans to the eligible 21 individuals who were referred to the program during the year. This number was notably increased from the 12 screenings completed in 2013.

Eligibility requirements included people ages 55 to 74 years old who are asymptomatic and free from current disease and current or former smokers with a 30-pack-year smoking history. A plan is in place to refer and follow screened patients with positive findings.

The Cancer Center's Health and Healing Place hosted a variety of scheduled classes focused on cancer survivorship support and education. Weekly and monthly classes included the following:

- Heart of Healing Meditation – provided activities aimed at enhancing self awareness and creating a sense of wellbeing
- Look Good Feel Better – offered by the American Cancer Society, it provided information and cosmetic advice to women battling cancer
- Leukemia and Lymphoma Society and Waldenstrom's Lymphoma Support Groups – provided an opportunity for survivors of blood cancers to connect, network and provide encouragement and support to one another
- Art for Wellbeing Classes – offered in six-week sessions and allowed cancer survivors to support one another and to express themselves by creating artwork as a form of healing
- Caregiver Connections Support Group – offered three times a month at the NFRMC Senior Healthcare Centers, it provided an opportunity for caregivers of cancer patients and others with long term illness to discuss concerns in a supportive group setting.

The Cancer Program at North Florida Regional Medical Center works in collaboration with the American Cancer Society (ACS) to assist in meeting the needs of people diagnosed with cancer in the geographic region served by the hospital. The counties in North Central Florida that we serve are Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Putnam, Sumter, Suwannee and Union. We collaborate to develop community outreach activities and work

closely with our local American Cancer Society representative on new strategies to accomplish this goal. We seek to provide education from ACS guidelines regarding the prevention and early detection of cancer. We aim to ensure that prevention and early detection activities follow nationally-accepted evidence-based guidelines and evidence-based interventions.



STANDARD 4.6 MONITORING COMPLIANCE WITH EVIDENCE-BASED GUIDELINES



Each year, a physician member of the cancer committee performs a study to assess whether patients within the program are evaluated and treated according to evidence-based national treatment guidelines. The study must determine that diagnostic evaluation is adequate, and the treatment plan is concordant with recognized guidelines.

The NFRMC Cancer Committee chose the site of the thyroid, based on an identified concern that there was a 45 percent increase in cases from 2012 to 2013, and the increase seemed to come from the older

population. The committee asked if we were providing the right treatment to the patients and was the increase because of an environmental reason. Dr. Patricia Goldblatt reviewed the charts to note demographics and the treatments the patients received to confirm if National Comprehensive Cancer Network (NCCN) guidelines were being followed on this particular patient population and if there was a performance improvement that was applicable as required by standard 4.6.

STUDY DATA:

Study data included the following criteria:

- (a) Thyroid cases diagnosed from January 1, 2012 through December 31, 2013 receiving treatment at NFRMC
- (b) A demographic study reviewing male/female, age at diagnosis and zip code of diagnosis
- (c) Primary treatment comparison recommendations according to NCCN guidelines

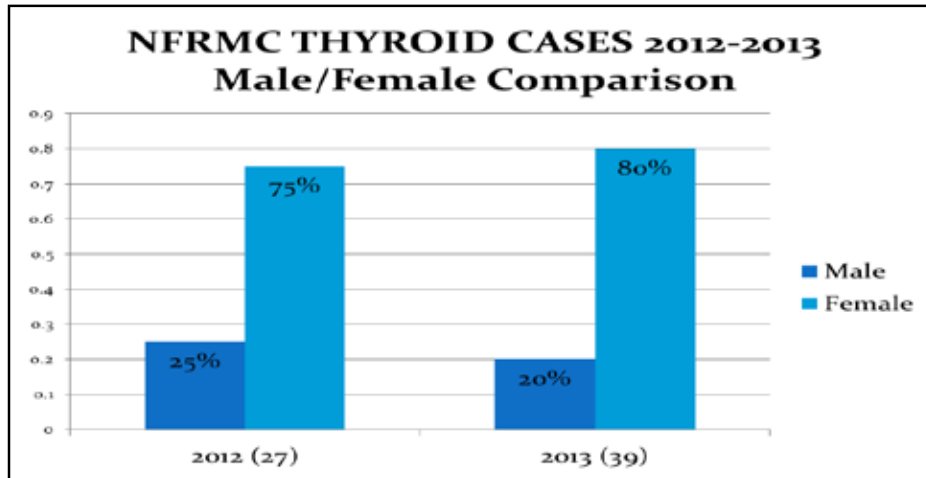
ASSESSMENT:

The cancer registry prepared the data, and it was reviewed by Dr. Goldblatt. The demographic data was reviewed to determine if the cases came from one specific area, and it was noted that this was not the case. The zip code assessment noted no particular larger amount of populace in one zip code over any other. The conclusion drawn by Dr. Goldblatt and the committee was that NFRMC serviced more patients from zip codes further away in 2013 than 2012.

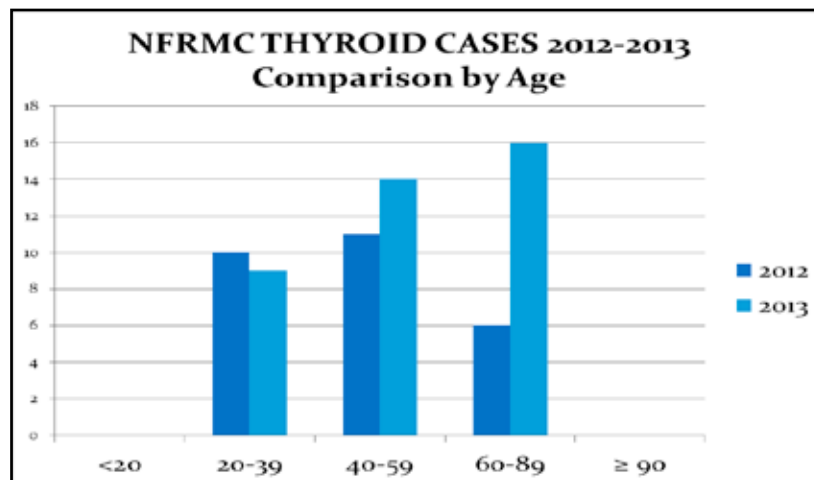
CONCLUSIONS:

During the years of the selected study, 66 charts fit the profile of having a diagnosis of thyroid cancer. It was noted that, as expected according to the National Cancer Institute What You Need to Know about Thyroid Cancer in 2013, about 45,000 women and 15,000 men will be diagnosed with thyroid cancer. At NFRMC for both years, larger populations of women than men were diagnosed with thyroid cancer.

STANDARD 4.6 MONITORING COMPLIANCE WITH EVIDENCE-BASED GUIDELINES (CONT.)



In comparison by age, there was a large increase in the patient population ages 60-89 in 2013 compared to 2012.



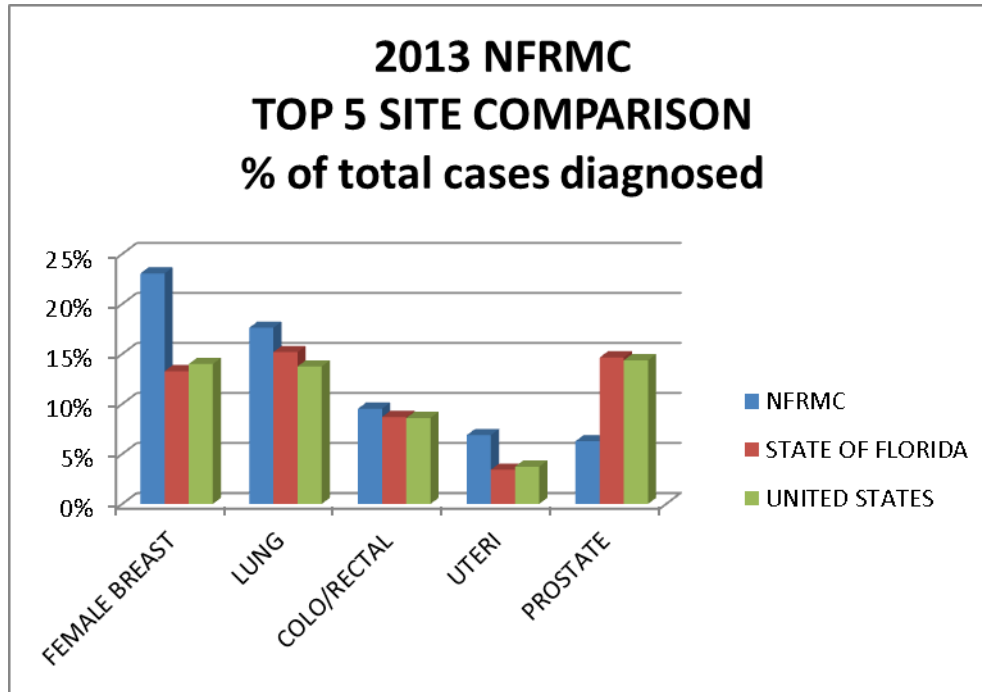
PRESENTATION and RECOMMENDATIONS:

This study was presented to the cancer committee on June 24, 2014 by Dr. Goldblatt and then to the Quality Council. The study reviewed the charts for concordance according to NCCN guidelines and found the following results:

- Of the 66 patients, 58 patients received surgery only or surgery with I-131 ablation or surgery, radiation and the offer of hormone therapy which is concordant with NCCN guidelines.
- Three patients were late stage and medically inoperable and were offered radiation therapy.
- Two patients had surgery elsewhere and chose to have I-131 ablation at this facility.
- Three patients after diagnosis refused treatment.

Dr. Goldblatt and the committee found the cases to be concordant with NCCN guidelines. The study was presented to Quality Council on August 13, 2014.

2013 NFRMC TOP 5 SITE COMPARISON



2013	NFRMC		STATE OF FLORIDA		UNITED STATES	
	NUMBER OF CASES	PERCENTAGE	NUMBER OF CASES	PERCENTAGE	NUMBER OF CASES	PERCENTAGE
FEMALE BREAST	305	23%	15,710	13%	232,340	14%
LUNG	233	18%	17,960	15%	228,190	14%
COLO/RECTAL	126	10%	10,290	9%	142,820	9%
UTERI	91	7%	4,050	3%	61,900	4%
PROSTATE	83	6%	17,330	15%	238,590	14%
ALL SITES	1,323		118,320		1,660,290	

PRIMARY SITE TABULATION FOR 2013 ANALYTIC CASES NORTH FLORIDA REGIONAL MEDICAL CENTER

PRIMARY SITE	TOTAL	CLASS		SEX		AJCC STATE GROUP						
		A	N/A	M	F	0	I	II	III	IV	UNK	N/A
ALL SITES	1323	1323	0	504	819	109	459	215	164	196	96	84
ORAL CAVITY	25	25	0	16	9	0	5	1	2	15	0	2
LIP	0	0	0	0	0	0	0	0	0	0	0	0
TONGUE	9	9	0	5	4	0	1	1	0	6	0	1
OROPHARYNX	0	0	0	0	0	0	0	0	0	0	0	0
HYPOPHARYNX	0	0	0	0	0	0	0	0	0	0	0	0
OTHER	16	16	0	11	5	0	4	0	2	9	0	1
DIGESTIVE SYSTEM	215	215	0	112	103	6	45	41	50	48	22	3
ESOPHAGUS	13	13	0	10	3	0	1	1	4	4	3	0
STOMACH	13	13	0	5	8	0	1	1	4	4	3	0
COLON	93	93	0	43	50	4	22	21	24	15	7	0
RECTUM	33	33	0	21	12	1	12	7	4	4	5	0
ANUS/ANAL CANAL	6	6	0	4	2	0	1	3	2	0	0	0
LIVER	8	8	0	4	4	0	4	1	1	1	0	1
PANCREAS	31	31	0	17	14	0	3	3	7	16	2	0
OTHER	18	18	0	8	10	1	1	4	4	4	2	2
RESPIRATORY SYSTEM	246	246	0	133	113	0	74	20	42	86	23	1
NASAL/SINUS	0	0	0	0	0	0	0	0	0	0	0	0
LARYNX	11	11	0	10	1	0	3	1	4	2	1	0
LUNG/BRONCHUS	233	233	0	123	110	0	70	19	38	84	22	0
OTHER	2	2	0	0	2	0	1	0	0	0	0	1
BLOOD & BONE MARROW	17	17	0	9	8	0	1	0	0	0	0	16
LEUKEMIA	10	10	0	6	4	0	1	0	0	0	0	9
MULTIPLE MYELOMA	4	4	0	2	2	0	0	0	0	0	0	4
OTHER	3	3	0	1	2	0	0	0	0	0	0	3
BONE	1	1	0	1	0	0	1	0	0	0	0	0
CONNECT/SOFT TISSUE	4	4	0	2	2	0	1	0	0	1	2	0
SKIN	48	48	0	30	18	4	11	6	5	2	19	1
MELANOMA	46	46	0	29	17	4	11	6	5	2	18	0
OTHER	2	2	0	1	1	0	0	0	0	0	1	1
BREAST	305	305	0	0	305	63	138	71	19	7	7	0
FEMALE GENITAL	131	131	0	0	131	5	87	3	20	12	3	1
CERVIX UTERI	10	10	0	0	10	0	6	0	2	2	0	0
CORPUS UTERI	81	81	0	0	81	0	68	2	4	5	2	0
OVARY	24	24	0	0	24	0	6	0	13	5	0	0
VULVA	11	11	0	0	11	4	7	0	0	0	0	0
OTHER	5	5	0	0	5	1	0	1	1	0	1	1

PRIMARY SITE TABULATION FOR 2013 ANALYTIC CASES NORTH FLORIDA REGIONAL MEDICAL CENTER (CONT.)

PRIMARY SITE	TOTAL	CLASS		SEX		AJCC STATE GROUP						
		A	N/A	M	F	0	I	II	III	IV	UNK	N/A
MALE GENITAL	88	88	0	88	0	0	25	50	7	5	1	0
PROSTATE	83	83	0	83	0	0	21	49	7	5	1	0
TESTIS	4	4	0	4	0	0	4	0	0	0	0	0
OTHER	1	1	0	1	0	0	0	1	0	0	0	0
URINARY SYSTEM	98	98	0	59	39	31	30	16	8	9	3	1
BLADDER	55	55	0	34	21	30	9	7	2	5	1	1
KIDNEY/RENAL	43	43	0	25	18	1	21	9	6	4	2	0
OTHER	0	0	0	0	0	0	0	0	0	0	0	0
BRAIN & CNS	14	14	0	5	9	0	0	0	0	0	0	14
BRAIN (BENIGN)	0	0	0	0	0	0	0	0	0	0	0	0
BRAIN (MALIGNANT)	1	1	0	1	0	0	0	0	0	0	0	1
OTHER	13	13	0	4	9	0	0	0	0	0	0	13
ENDOCRINE	48	48	0	9	39	0	23	1	7	5	4	8
THYROID	40	40	0	8	32	0	23	1	7	5	4	0
OTHER	8	8	0	1	7	0	0	0	0	0	0	8
LYMPHATIC SYSTEM	46	46	0	24	22	0	18	6	4	6	12	0
HODGKIN'S DISEASE	4	4	0	3	1	0	3	0	0	0	1	0
NON-HODGKIN'S	42	42	0	21	21	0	15	0	4	6	11	0
UNKNOWN PRIMARY	37	37	0	16	21	0	0	0	0	0	0	37
OTHER ILL-DEFINED	0	0	0	0	0	0	0	0	0	0	0	0

