Community Cancer Care
Annual Report 2016
with 2015 data
As 2016 draws to a close, we look back on a busy, successful year. Our women’s center became the first in the community to offer 3D mammography, which is said to enhance detection of breast cancer and false positive results. In radiation oncology we added a new vault and are welcoming our second treatment machine, offering state-of-the-art radiation therapy technology. Two new staff and four new volunteers have enabled us to schedule more patients and keep more patients closer to getting the treatment they need.

While medical oncology, our physicians are doing more with gene mutation, conforming a patient’s treatment for them. The physicians can take their cases to our molecular tumor board to discuss with the pathology specialist and other specialists to define the best treatment for the patient. Our collaboration with MD Anderson has proven beneficial for many patients. Our oncologists and surgeons collaborate with their peer experts to come up with the best plan of action for unique cases, keeping the patients from having to travel out of state.

While Community Cancer Care experienced a great 2016 with many successful patient outcomes, we know there is still work to be done. Globally, cancer rates continue to rise each year. Early detection programs and cancer treatments have helped to increase survival rates. While the overall mortality rate for cancer has decreased, research suggests that by 2020, cancer will surpass heart disease as the leading cause of death in the United States. Despite these alarming statistics, our great team of physicians, nurses, navigators, therapists and many more will continue to fight for our patients. We are very proud of our cancer program and I am proud to be part of a cutting edge team.

Marsha Sherrill, director of cancer services

Community Cancer Staff

Shirbro Parshad, MD, medical oncologist
Bilal Sididi, MD, medical oncologist
Natalia Redeck Amakrankar, medical oncologist
Jennifer Zook, MD, radiation oncologist
Joel Yeza, VNA, medical oncology nurse practitioner
Marsha Sherrill, administrative director
Angel Lyons, RN, OCN, clinical director
Lon Read, radiation oncology manager
Katie Elliott, oncology quality and navigator manager
Sharlet Gandy, office manager, medical oncology
Michelle Anders, oncology navigator
Angie Ledford, RN, breast health navigator
Pam Davis, RN, breast health navigator
Samantha Fouch, medical oncology nurse
Susan Gray, medical records technician
Kayla Smith, front office assistant
Vicki Walsh, charge analyst
Jamie Johnson, front office assistant
Rhonda Goodman, front office assistant
Mary Klosek, insurance verification specialist
Michael Henson, front office assistant
Paula Blythe, navigation support specialist
Debbie Smith, patient access specialist
Allison Dell, patient access specialist
Gloria Hoyle, PharmD, pharmacist
Chris Pohland, RPh, pharmacist
Lisa Metzker, chemotherapy technician
Allison Thomas, chemotherapy technician
Judy Overby, RN, OCN
Shanna Kirchenhausen, RN, OCN
Teri Reaum, RN, OCN
Melanie King, RN
Joni Godpaster, RN
Melissa Jessie, RN
Beth Bonnine, RN
Kristi Gill, RN
Patricia Neal, LPN
Stacey Huffman, LPN
CT Philips, PA
Crystalsina Smith, LPN
Kasey Stanberry, dosimetrist
Ana Michael, physicist
Nancy Davis, medical oncologist, radiation therapist
Heather Clawson, lead radiation therapist
Leigh Ann Hayes, cancer registrar
Nancy Hunt, CTR, radiation therapist
Kathie Ollard, administrative assistant
Michelle Anders, oncology patient navigator
Jennifer Nemunaitis-Keller, MD, OB/GYN
D. Benjamin McCurdy, MD, general surgery including breast surgery
Boguslaw Uchman, MD, diagnostic radiologist
Jennifer Zook, MD, medical oncologist
spokesperson

Program Accreditations

The cancer committee leadership is responsible for goal setting, as well as, planning, implementing, evaluating and improving all cancer-related activities. Our organization is accredited by the American College of Surgeons/Commission on Cancer.

Palliative Care/Surveillance Team

Katie Elliott, oncology quality and navigation manager
Michelle Anders, oncology navigator
Jill Hensley, RN, breast health navigator
Pam Davis, RN, breast health navigator
Angela Ledford, RN, cancer specialty navigator
Marsha Sherrill, administrative director oncology
Angel Lyons, RN, OCN, clinical director oncology
Danielle Ohn, RN, clinical director radiation oncology
Pat Woods, RN, director case management
Kendra Pooe, Community Long Term Care

Jennifer Zook, MD, radiation oncologist, COC liaison
Borgulac Ulcman, MD, pathologist, chair
Bilal Sididi, MD, medical oncology/hematologist
Roger Brockman, MD, diagnostic radiologist
D. Benjamin McCurdy, MD, general surgery including breast surgery
Jennifer Nemunaitis-Keller, MD, OB/GYN
Marsha Sherrill, administrative director oncology, cancer registry coordinator
Coral Wheaton, RN, vice president of patient care services
Beth Tharp, RN, president/CEO
Angel Lyons, RN, OCN, clinical director oncology, community outreach coordinator
Nancy Hunt, CTR, cancer registrar, cancer conference coordinator
Katie Elliott, oncology quality and navigation manager, quality improvement coordinator
Leigh Ann Hayes, cancer registrar
Jill Hensley, RN, breast health navigator
Michelle Anders, oncology patient navigator

Cancer Committee

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Judy Overby, RN, OCN, oncology nurse
Pam Davis, RN, breast health navigator
Vicki Walsh, RN, breast health navigator
Judy Overby, RN, OCN, oncology nurse
Pat Woods, RN, director case management
Nancy Hunt, CTR, cancer registrar
Danielle Ohne, RN, clinical director radiation oncology
Leigh Ann Hayes, cancer registrar
Melissa Anders, lead radiation therapist

Kendra Pooe, Community Long Term Care

Jackie Edelman, speech therapist
rebroadcast services representative
Tabitha Lohman, Lifeslines services
Jodi Nixon, PhD, psychologist
Lon Read, radiation oncology manager
Nancy Hunt, CTR, cancer registrar
Tabitha Lohman, RN, radiation oncology manager
Leigh Ann Hayes, cancer registrar
Melissa Anders, lead radiation therapist

Lifestream services
Jodi Nixon, PhD, psychologist
Nancy Hunt, CTR, cancer registrar
Nicole Robinson, RN, radiation therapist
Leigh Ann Hayes, cancer registrar
Melissa Anders, lead radiation therapist
3D mammography
The Community Hospital Anderson Women’s Center recently introduced 3D mammography, becoming the only hospital in Madison County to offer it. This new technology allows the doctor to examine breast tissue layer by layer. So instead of viewing all of the breast’s complexities in a flat image, fine details are more visible. Research has shown that the 3D mammography detects 41% more invasive breast cancers and reduces false positives by up to 40%.

Community Anderson is accredited by the American College of Radiology (ACR) to offer mammography services. The Women’s Center has dedicated digital mammography equipment and technologists and radiologists who are specially trained in mammography. For more information about 3D mammography, call 765-298-1617.

TrueBeam
Community Hospital Anderson installed new state-of-the-art equipment for our radiation oncology patients – TrueBeam™ by Varian Medical Systems. This machine will allow us to provide advanced cancer care to our patients.

TrueBeam provides highly targeted treatments, utilizing stereotactic body radiotherapy (SBRT), a technique that allows our staff to deliver high doses of radiation to a focused target. This treatment can be accomplished in fewer sessions and eliminates some side effects. In many cases, SBRT is also more effective than traditional treatments.

MD Anderson
All five of Community Health Network cancer centers have met the rigorous standards to treat cancer patients with MD Anderson evidence-based guidelines and best practices: Community Hospitals Anderson, East, North, South and Howard Regional Health in Kokomo. Community was the first healthcare organization in the nation to achieve this system-wide recognition.

This means that Community Hospital Anderson’s certified physicians are able to regularly confer with experts from MD Anderson Cancer Center in Houston, TX. Our patients receive world class care – right here in Anderson.

Meet our oncologists
Shiroo Parshad, MD, is board-certified in medical oncology and hematology. She attended medical school at All India Institute of Medical Sciences in New Delhi and completed her residency at Albert Einstein Medical Center in Pennsylvania.

Bilal Siddiqui, MD, is board-certified in medical oncology and hematology. He completed his residency at Long Island Jewish Center, New York and his fellowship at IU Medical Center in Indianapolis.

Natraj Reddy Ammakkanavar, MD, is board-certified in medical oncology and hematology. Dr. Reddy attended medical school at Mysore Medical College in Mysore, India. Completed his residency at St. Luke’s Roosevelt Hospital Center in New York City. He completed his fellowship in hematology/oncology with Indiana University Health.

Jennifer Zook, MD, is board-certified in radiation oncology by the American Board of Radiology. She graduated from medical school at Rush Medical College in Chicago, Illinois and received her residency training at Indiana University Medical Center. Dr. Zook has a special interest in the treatment of breast cancer.

Our 3D mammography system is endorsed by award-winning singer and breast cancer survivor, Sheryl Crow.
Study of Malignant Brain Tumors
An analysis by Jennifer Zook, MD, radiation oncologist

A Comparison of National Data (NCDB) and Community Hospital Anderson, looking at years 2011-2014 (The NCDB most recent data is from 2014)

High grade gliomas are malignant brain tumors including Grade III (anaplastic astrocytoma, anaplastic oligodendroglioma, anaplastic oligoastrocytoma, anaplastic ependymoma) and Grade IV (glioblastoma) tumors. Gliomas represent the most common primary brain tumor in adults. Treatment generally includes a combination of surgery, chemotherapy and radiation therapy.

An analysis was performed on the diagnosis and treatment of high grade gliomas from the years of 2011-2014 at Community Hospital Anderson (CHA) compared to data from the National Cancer Data Base (NCDB).

Below is a table looking at the age of diagnosis at CHA compared to the NCDB. When compared to the NCDB, the age of diagnosis in patients at CHA appears to be generally similar:

<table>
<thead>
<tr>
<th>Age</th>
<th>CHA</th>
<th>National</th>
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</thead>
<tbody>
<tr>
<td>Under 20</td>
<td>6%</td>
<td>5%</td>
</tr>
<tr>
<td>20-29</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>30-39</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>40-49</td>
<td>20%</td>
<td>20%</td>
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<tr>
<td>50-59</td>
<td>20%</td>
<td>20%</td>
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<tr>
<td>60-69</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>70-79</td>
<td>3%</td>
<td>10%</td>
</tr>
<tr>
<td>Over 80</td>
<td>1%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Below is a table looking at different treatments given at CHA compared to the NCDB. When compared to the NCDB, treatments appear to be generally similar:

<table>
<thead>
<tr>
<th>Treatment</th>
<th>CHA</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgery Only</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>Radiation Only</td>
<td>5%</td>
<td>10%</td>
</tr>
<tr>
<td>Surgery &amp; Radiation</td>
<td>20%</td>
<td>3%</td>
</tr>
<tr>
<td>Radiation &amp; Chemo</td>
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<tr>
<td>Chemo Only</td>
<td>20%</td>
<td>10%</td>
</tr>
<tr>
<td>Surgery, Radiation &amp; Chemo</td>
<td>50%</td>
<td>60%</td>
</tr>
</tbody>
</table>

In addition to reviewing diagnosed cases from 2011-2014 and comparing them to the NCDB database, it was decided to review more recent diagnosed cases from 2015-2016 and compare received treatments to national guidelines. At Community Hospital Anderson, there has been an increase in the number of high grade gliomas that have been diagnosed and treated over the past few years due to the addition of a Neurosurgery program led by Dr. James Callahan and Dr. Daniel Kim. This second study was done to ensure that patients were receiving the recommended treatments compared to national guidelines. After reviewing all the patients diagnosed and treated during the years 2015-2016, 100% received treatment per national guideline recommendations.

A look at Community Hospital Anderson’s Malignant High Grade Gliomas, comparing treatment to national treatment guidelines.
2015 Annual Cases

Stage at diagnosis

<table>
<thead>
<tr>
<th>Site</th>
<th>I</th>
<th>II</th>
<th>III</th>
<th>IV</th>
<th>Unk</th>
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</thead>
<tbody>
<tr>
<td>Breast</td>
<td>9</td>
<td>31</td>
<td>21</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Lung/Bronchus</td>
<td>1</td>
<td>9</td>
<td>2</td>
<td>15</td>
<td>4</td>
</tr>
<tr>
<td>Prostate</td>
<td>0</td>
<td>6</td>
<td>30</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Non-Hodgkins Lymphoma</td>
<td>0</td>
<td>2</td>
<td>7</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

Age at diagnosis

<table>
<thead>
<tr>
<th>Site</th>
<th>20-29</th>
<th>30-39</th>
<th>40-49</th>
<th>50-59</th>
<th>60-69</th>
<th>70-79</th>
<th>over 80</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast</td>
<td>8</td>
<td>4</td>
<td>13</td>
<td>18</td>
<td>17</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>Lung/Bronchus</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>15</td>
<td>18</td>
<td>17</td>
<td>12</td>
</tr>
<tr>
<td>Prostate</td>
<td>0</td>
<td>0</td>
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<td>12</td>
<td>14</td>
<td>17</td>
<td>3</td>
</tr>
<tr>
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<td>1</td>
<td>0</td>
<td>2</td>
<td>4</td>
<td>9</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Colon</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>3</td>
<td>5</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

Breast health

Jill and Pam meet with every patient who has a breast biopsy. While many of these patients will not be diagnosed with cancer, the navigators are there to assist them and to provide support during an uncertain time.

Once a patient receives a breast cancer diagnosis, the navigators will coordinate her care—working with the primary care provider, surgeon and oncologists to ensure she is receiving all the necessary treatments. They provide educational materials. They check health and family history, making referrals for genetic testing when appropriate. The navigators continue to provide follow-up on their patients for at least five years after treatment, and then work with the patient’s oncologist to provide a survivorship care plan.

Jill and Pam are also active in the community, advocating for women’s health. They speak to groups, encouraging all women to regularly receive clinical breast exams and mammograms. Both Jill and Pam are certified to provide free clinical breast exams by appointment. If patients are uninsured or underinsured, the navigators can connect them with one of our programs to help pay for these services. Community receives grants that provide funding for screening and diagnostic mammograms as well as breast ultrasound and biopsies. Community is a provider of the Indiana Breast Cancer/Cervical Cancer Program (BCCP) for women between the ages of 40-59.

Patient Navigation

Community Hospital Anderson’s navigation program continues to grow each year. We now have four patient navigators. Michelle Anders and Angie Ledford, RN are the general oncology navigators. Jill Henley, RN and Pam Davis, RN are the breast health navigators.

General oncology

Upon diagnosis, each patient meets with Michelle or Angie. The navigators work with all physicians involved in a patient’s care to provide seamless navigation throughout their cancer journey. The navigators can be a patient’s primary resource when they are unsure who to call or what to do in any situation. The navigators will help to ease the burden for the patient by connecting them with resources before, during and after treatment. Also, the navigation team continues to follow all patients, for at least five years after their treatment is completed, working with the patient’s oncologist to provide a survivorship care plan. The navigators are always available for their patients and provide exceptional care outside of the direct patient care that we pride ourselves in already.

Community received grants that provide funding for screening and diagnostic mammograms as well as breast ultrasound and biopsies. Community is a provider of the Indiana Breast Cancer/Cervical Cancer Program (BCCP) for women between the ages of 40-59.
Clinical research
Community Clinical Research Center conducts clinical trials in many specialties. Our patients benefit from this research by gaining access to new treatments before they are widely available. Also, research patients receive top quality medical care monitored by board-certified physicians, as well as our clinical research staff.

Current trials:
• University of Nebraska data study for personal and/or family history of breast cancer
• Hoosier Cancer Research Network – triple negative breast cancer study
• Janssen Cassini – blood thinner for patients first starting chemotherapy
• Bristol-Myers Squibb Research – lung cancer study

Nutrition
Danielle Olney, board certified oncology specialized dietitian, meets with patients before, during and after their medical and radiation oncology treatments to help them meet their survival and lifestyle goals. Chemotherapy can cause side effects such as a poor appetite, nausea, vomiting, diarrhea and/or constipation. Danielle assists her patients in curtailing these side effects and maintaining their lean muscle mass. She also reviews any potential nutrition related interaction that could occur with the various chemotherapy drugs and provides that education to the patient. Danielle provides tailored high calorie or high protein recipes to patients and offers nutritional guidance for those who must use a feeding tube.

To earn this certification, she was required to have at least 2000 hours of oncology experience in the past five years, two years of experience as a dietitian and pass an exam. She is one of only 16 certified oncology specialized dietitians in the state of Indiana.

Psychosocial therapy
A cancer diagnosis can be devastating, not just for the patient, but for his or her family as well. Jodi Nixon, PhD, psychologist, visits the cancer center each week. She meets with patients and/or their families, providing support and guidance during this difficult time.

Cancer Genetic Counseling
Mutations are a factor in all cancers, but mutations associated with hereditary cancer syndromes can be inherited from a person’s parents. It is estimated that inherited mutations play a role in the development of about 5 to 10 percent of all cancers. Cancers commonly associated with family history include breast, colorectal, ovarian, prostate and endocrine. Patterns in family members may indicate a hereditary cancer syndrome. Some family history patterns that indicate an increased risk for a hereditary cancer syndrome are young age of cancer diagnosis, similar cancers in multiple family members, and certain combinations of cancer type. Genetic testing for hereditary predisposition to disease such as cancer can help determine the following:
• If a person's condition is the result of an inherited syndrome.
• Whether or not family members have a suspected gene mutation.
• If a person with no symptoms has the same gene mutation as known carriers in the family, and is therefore at increased risk of developing disease.
• A person's chance of passing on a genetic disorder to children.

Genetic counseling and testing is offered at Community Cancer Care by referral from an oncologist. The genetic counselor will counsel the patient and family on genetic testing and what testing options may be right for them.

Cancer Registry
Nancy Hunt, certified tumor registrar and Leigh Ann Hayes, work in cancer registry collecting patient data and entering it into a database. This is sent to the state registry and the national cancer database. This information is disseminated anonymously by the American College of Surgeons Commission on Cancer. Information provided through this database includes patient survival, age at diagnosis, staging at diagnosis and treatment. This data goes into a national database for local and national comparison. The cancer committee reviews the data annually.

Lymphedema
People who have had surgery to remove lymph nodes and/or radiation therapy are at risk for developing lymphedema, a condition that causes significant swelling of the arm or leg due to extracellular fluid buildup in that part of the body. Community Hospital Anderson's cancer program provides comprehensive lymphedema services, beginning with diagnosis. Community's navigators are trained to administer L-Dex, a measurement system that aids in the assessment of lymphedema. The L-Dex can diagnose lymphedema in its earliest stage, before symptoms are obvious to the patient or physician. Patients who are diagnosed are then referred to see our certified lymphedema specialist for treatment.

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Danielle's board certification helps solidify her experience in oncology nutrition and provides her with professional resources. To earn this certification, she was required to have at least 2000 hours of oncology experience in the past five years, two years of experience as a dietitian and pass an exam. She is one of only 16 certified oncology specialized dietitians in the state of Indiana.

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The Comfort Shoppe

Our boutique provides the full shopping experience for breast cancer survivors and their families. The shop offers personally fitted forms, bras, bathing suits and lingerie. Radiation/post-mastectomy garments, bras and breast forms are covered yearly by Medicare and most insurance plans. Judy Wood, certified mastectomy fitter, provides each patient with a personal consultation.

The Comfort Shoppe is conveniently located right next to Community Hospital Anderson’s Women’s Center. Our certified mastectomy fitter is available. Please schedule an appointment so that she can guarantee you receive uninterrupted service. Call 765-298-1622 for more information.

Funded breast programs

There are many women in our community who are uninsured or underinsured and cannot afford an annual mammogram, or the necessary follow up care. With a grant from the Indiana Breast Cancer Awareness/License Plate Grant (IBCAT), and as a provider of the Breast and Cervical Cancer Program (BCCP), Community Hospital Anderson’s breast center has found the resources to provide services to these women. In 2015 we served 157 women with these funds.

- Free Mammograms
  - 66 with IBCAT funds
  - 33 with BCCP funds

- Free Breast Ultrasounds
  - 16 with IBCAT funds
  - 16 with BCCP funds

- Free Pap Smears/Cervical Screenings
  - 26 with BCCP funds

For more information about the services available in our breast center, contact our breast health navigators at 765-298-1617.

Community Hospital Anderson hosted its annual Breast Cancer Survivors’ Tea on Saturday, Oct. 8. Over 100 women attend every year and enjoy a relaxing lunch. All survivors receive a teapot each year.

Community’s transport team provides valet service at the event.

Leadership Team

Jennifer Zook, MD, radiation oncologist, breast program lead
Boguslaw Uchman, MD, pathologist
Bilal Siddiqui, MD, medical oncologist/hematologist
Roger Bromschan, MD, diagnostic radiologist
D. Benjamin McCurdy, MD, general surgery including breast surgery
Jennifer Nemunaitis-Keller, MD, OB/GYN
Marsha Sherrell, administrative director oncology
Carol Whitehead, RN, vice president of patient care services

Pat Woods, RN, director case management
Stephanie Mace, RN, certified lymphedema specialist
Danielle Olivry, RD, oncology specialized dietitian
Rebekah Krukenberg, certified genetics counselor
Gloria Hoyle, PharmD, oncology pharmacist
Judy Wood, certified mastectomy fitter
Paul Brown, American Cancer Society
Sonia Smythe, RN, quality assurance
Brandi Hill, marketing/community relations manager

Judy Wood, The Comfort Shoppe coordinator, shares all of the items from the shop.

Breast Center

Community Hospital Anderson’s breast program is accredited by the American College of Surgeons, National Accreditation Program for Breast Centers. The breast health leadership team is responsible for goal setting, as well as planning, initiating, implementing, evaluating and improving all breast related activities. The Women’s Center is accredited by the American College of Radiology and has been named an ACR Breast Center of Excellence.

Breast Center Leadership Team

Jennifer Zook, MD, radiation oncologist, breast program lead
Boguslaw Uchman, MD, pathologist
Bilal Siddiqui, MD, medical oncologist/hematologist
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Pat Woods, RN, director case management
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Paul Brown, American Cancer Society
Sonia Smythe, RN, quality assurance
Brandi Hill, marketing/community relations manager

Judy Wood, The Comfort Shoppe coordinator, shares all of the items from the shop.
Prevention

Our 2016 prevention efforts focused on a specific disease site. Community Cancer Care continues to see the same number of breast cancer diagnoses each year in varying age groups and varying stages, although usually in early stage.

Community Cancer Care representatives conducted two speaking engagements in the community. The first was for Senior Access, a hospital-sponsored senior group for those over age 55. The speaker focused on the importance of monitoring breast health, having a clinical exam annually and continuing screening mammograms. The second speaking engagement was to a larger group of varying ages, which included men and women who live in low-income housing. We did a pre-test to see what kind of knowledge the group had prior to speaking and a post-test after speaking to the group. Again, information was presented about taking care of your body, having clinical breast exams and mammograms. Cancer statistics were shared with both groups. Guidelines from the American Cancer Society and the NCCN guidelines were shared with the groups. Between the two events, information was shared with 26 people. Throughout the year, the Community Cancer Care team also shares breast health information at other community events, health fairs and more.

Screenings

In 2016, our screening efforts focused on prostate cancer screening. Community Cancer Care saw 44 patients diagnosed with prostate cancer in 2014 and 57 patients in 2013. Although there has been a slight drop in the number diagnosed, and the patients are presenting mostly with Stage II disease, this is still a top site. An age comparison indicated that most men in the community are diagnosed between the ages of 60-79.

Onisuru Okotie, M.D., urologist conducted our prostate cancer screenings on Saturday, Oct. 1. Of the 50 men participating, 42 men had benign prostatic hyperplasia (BPH or an enlarged prostate gland) and 8 men had BPH and an elevated prostate specific antigen blood test and no other abnormal exam. All elevated PSAs were between 5-10 results. Forty-three or 86% of the men seen were between the ages of 60-79, which was our target audience.

<table>
<thead>
<tr>
<th>Total Patients Seen</th>
<th>50</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ages: &lt;39</td>
<td>1</td>
</tr>
<tr>
<td>40-49</td>
<td>0</td>
</tr>
<tr>
<td>50-59</td>
<td>6</td>
</tr>
<tr>
<td>60-69</td>
<td>21</td>
</tr>
<tr>
<td>70+</td>
<td>22</td>
</tr>
<tr>
<td>BPH Only</td>
<td>42</td>
</tr>
<tr>
<td>BPH and Elevated PSA</td>
<td>8</td>
</tr>
<tr>
<td>Abnormal Exam Only</td>
<td>0</td>
</tr>
</tbody>
</table>

The Community Hospital Anderson Foundation has provided incredible financial support for our cancer program.

The Foundation paid for the Serenity garden, located next to the medical oncology center in the 1629 building. The garden features beautiful landscaping, multiple seating options and a fountain. Patients at the medical oncology center can enjoy a view of the garden during their treatment, as the patient rooms all overlook it.

In 2016, the Foundation has purchased much needed equipment for the radiation oncology center, as well as a new television set for one of the treatment rooms.

A cancer diagnosis can lead to financial hardship for an individual or family. In addition to medical bills, cancer patients might not be able to work due to their treatment. The Community Foundation has provided gas cards to our patients to help ease their transportation challenges, and assisted with other hardships when our patients are having a difficult time. Easing these burdens for patients can help them to fully focus on their recovery.

For more information or to donate to the Community Hospital Anderson Foundation, call 765-298-5133.
Important phone numbers

Community Cancer Care/Medical Oncology  765-298-4220
Community Cancer Care/Radiation Oncology  765-298-4770
Oncology navigation  765-298-4232
Breast health navigators  765-298-1617
The Comfort Shoppe  765-298-1622
The American Cancer Society  800-227-2345

Web sites

Community Hospital Anderson  CommunityAnderson.com
American Cancer Society  cancer.org

Dates to remember

Madison County ACS Relay For Life kickoff  January 2017
World Cancer Day  February 4, 2017
Community Hospital Anderson Walk of Life  May 6, 2017
National Cancer Survivor’s Day  June 4, 2017
Madison County ACS Relay For Life  June 9, 2017