

2014 Annual Report



Salem Cancer
Institute
A part of Salem Health



KNIGHT
CANCER INSTITUTE
Oregon Health & Science University

Affiliated for Better Health



A community gathering spot

Salem Cancer Institute is more than a cancer center. Thanks to the 2014 remodel, it is now a gathering spot that provides a unique experience for our community in a welcoming, restorative environment. Anyone coming into our interactive lobby can start a journal, knit a scarf, research cancer topics online and find support groups and classes. Our new Garden Bistro specializes in offering nutritious foods with our cancer patients in mind.

This space was the vision of Steven Taylor, Director of Cancer Services from 2009 to 2014. Our thanks to Steven for making his dream a reality for our patients, visitors and community. We invite you to come see for yourself!

Sincerely,

Nancy Boutin, MD
Medical Director,
Salem Cancer Institute

Beverly Smith, MSN, RN, OCN
Director,
Cancer Services



National accreditation

- Every three years, Salem Cancer Institute goes through a rigorous survey process to earn accreditation by the Commission on Cancer (CoC) and National Accreditation Program for Breast Centers (NAPBC). We were last surveyed in 2013 where we received the highest level of accreditation from the NAPBC and full accreditation from the CoC.
- Programs recognized by these national organizations are dedicated to providing the best in patient-centered care.



Physicians Eric Laro, cancer committee chair (right), and Mark Magilner, cancer liaison physician, are leading our cancer program and ensuring that we meet Commission on Cancer standards.

Survivorship

Moving beyond treatment—returning to wellness.

More people than ever are surviving cancer—The American Cancer Society, in collaboration with the National Cancer Institute, estimates there are nearly 14.5 million cancer survivors alive in the US today, and that number will grow to almost 19 million by 2024.

Survivorship is coming to the forefront nationwide, and beginning in 2015, the Commission on Cancer will require that patients receive a survivorship care plan to help address the physical and emotional challenges that remain after they complete treatment.

Salem Cancer Institute began a survivorship program in April 2014. During the first year, nurse navigators met one-on-one with more than 200 patients to discuss life after cancer and provide a survivorship care plan including a treatment summary and follow-up guidelines.

In November 2014, we opened our Survivorship Clinic, part of the Integrative Wellness Center, to better meet the needs of cancer survivors and address barriers to quality of life. The clinic focuses on managing ongoing symptoms, promoting wellness, and supporting patients and loved ones.

Our team of physicians, nurse practitioners, social workers, nurses, and support staff help connect patients with:

- Physical therapists and physical activity programs.
- Emotional support.
- Registered dietitians.
- Financial counselors.
- Education, classes and support groups.
- Activities to strengthen the mind-body connection.
- Integrative therapies like acupuncture and massage.

For more information, please call the Survivorship Clinic at 503-561-3133.

Survivor highlight

“When we first came to the oncology department, we were met with smiles—with warmth. I felt like they were family.”
—Linda Young, ovarian cancer survivor

Getting diagnosed with cancer is one of the most emotional experiences you can go through. To help our patients stay focused on the future, we offer delicious cancer-fighting foods, artistic outlets, a home-like environment and support every step of the way.



Gathering our data

Salem Cancer Institute sees nearly 2,000 cancer cases each year. Our cancer registry gathers data on each case to help evaluate patient outcomes, treatment trends and efficacy. Physicians use registry information to improve treatment planning, staging and continuity of care. Our registry provides data on survival, treatment and extent of disease to the National Cancer Data Base, the CoC and the Oregon State Cancer Registry.

Salem's Cancer Registry is among the oldest in the U.S., established in 1960. The registry is the cornerstone of achieving the coveted status of CoC accreditation from the American College of Surgeons.

Significant volumes

Case Distribution

Primary site	New cases* seen in 2013	New cases* seen in 2014	Total of cases in registry 2000-2014
Breast	368	361	5,869
Colorectal	137	128	2,442
Lung	260	238	3,433
Lymphoma/Leukemia	158	137	2,154
Prostate	219	234	4,284
Other/Undefined	800	769	8,274
Total	1,942	1,867	26,459

*New Cases: Total number of new cases seen at Salem Hospital that used services – includes all Class of Cases.

Survivor highlight

“Cancer forces a new reality on you and your partner. It’s a relief when you can talk about it openly with other couples who are going through the same thing.”

—Dennis T., pictured with wife Gerrie, cancer survivors

Some of the best medicine is low-tech—a shoulder to cry on, a hand to hold, an understanding smile. Find a support group that feels right for you at salemhealth.org/CancerSupport.



Exemplary outcomes

The combination of highly skilled physicians and specialists, comprehensive treatment options, significant volume and advanced technology has made Salem Cancer Institute a leader in treatment outcomes. The chart below summarizes key data points from the CoC's National Cancer Data Base.

Profile report

Performance rates, 2013*

	Salem Cancer Institute	All CoC-approved programs**
Breast cancer - Select measures		
Breast conservation surgery rate for women with AJCC clinical stage 0, I, or II Breast Cancer. [BCS]	68.6%	68.9%
Needle biopsy to establish diagnosis of cancer precedes surgical excision/resection. [nBx]	92.8%	92.3%
Radiation therapy is considered or administered following any mastectomy within 1 year (365 days) of diagnosis of breast cancer for women with ≥ 4 positive regional lymph nodes. [MAST/RT]	100%	95.4%
Radiation therapy is administered within one year of diagnosis for women under age 70 receiving breast-conserving surgery for breast cancer. [BCS/RT]	98.9%	98.9%
Combination chemotherapy is considered or administered within four months of diagnosis for women under age 70 with AJCC T1c No Mo, or Stage II or III ERA and PRA positive breast cancer. [MAC]	100%	93.3%
Tamoxifen or third-generation aromatase inhibitor is considered or administered within one year of diagnosis for women with AJCC T1c No Mo, or Stage II or III ERA and/or PRA positive breast cancer. [HT]	97.7%	99%
Colon cancer - Select measures		
Adjuvant chemotherapy is considered or administered within four months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer. [ACT]	100%	93.6%
At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer. [12RLN]	93.8%	91.1%
Rectal cancer - Select measures		
Radiation therapy is considered or administered within six months (180 days) of diagnosis for patients under the age of 80 with clinical or pathologic AJCC T4 No Mo or Stage III receiving surgical resection for rectal cancer. [REC/RT]	100%	100%

*Latest performance data available nationally.

**Rates computed based on data directly reported to the NCDB using specifications endorsed by the National Quality Forum.

Tumor site committees: Improving cancer care through collaboration



Breast committee
Beth Dayton, MD, Chair
Natasha Tiffany, MD, Vice-Chair

- Met 11 times during 2014 with physicians representing the full spectrum of cancer care, including primary care.
- Reviewed quality standards and performance at each meeting.
- Updated and approved clinical practice guidelines for surgical oncology margins.
- Provided lymphedema education for pre-surgery and pre-surgical screening staff.
- Assessed lymphedema education efforts to cancer specialists.
- Discussed dense breast legislation and consistent messaging for our community.
- Implemented quality improvement projects including increasing breast imaging capacity and offering mastectomy patients a preoperative referral to a reconstructive/plastic surgeon.
- Created a survey to assess the needs of Latina breast cancer patients.
- Developed and implemented a synoptic op report for breast surgical cases.



Gastrointestinal (GI) committee
Robert Ponec, MD, Chair

- Met six times during 2014 with physicians representing the full spectrum of cancer care.
- Reviewed quality standards and performance at each meeting.
- Collaborated with OHSU to improve care for shared liver cancer patients by:
 - Developing a Liver Clinical Pathways Group that created a joint referral process and algorithm for managing liver cancer.
 - Continuing to develop the TransArterial ChemoEmbolization (TACE) program at Salem Hospital.
 - Holding a successful Liver Symposium for Primary Care on Nov. 19, 2014, with more than 80 providers in attendance.
- Supported offering Y-90 at Salem Hospital as a treatment for liver cancer.
- Discussed the importance of genetic counseling for colon cancer patients with lynch syndrome.



Thoracic committee
Everett Mozell, MD, Chair
Natasha Tiffany, MD, Chair

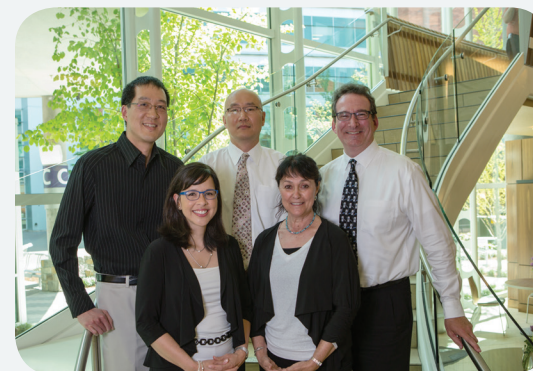
- Met 10 times during 2014 with physicians representing the full spectrum of cancer care, including primary care.
- Reviewed quality standards and performance at each meeting.
- Continued to monitor and improve our lung cancer screening program with 534 total enrolled in the program from Jan. 14, 2013, through Dec. 31, 2014.
- Developed a work group to implement priority projects including defining quality metrics, standardizing care processes/creating clinical pathways, and considering a lung cancer nurse navigator to help coordinate care and communication between physicians and patients.
- Held a community event, Shine a Light on Lung Cancer, to provide education and awareness on smoking cessation.
- Recognized Everett Mozell, MD, for his work as committee chair from 2010 to 2014.
- Welcomed Natasha Tiffany, MD, as the new committee chair.



Genito-Urinary (GU) committee
Nancy Reyes-Molyneux, MD, Co-Chair
Jaffer Bashey, MD, Co-Chair

- Met six times during 2014 with physicians representing the full spectrum of cancer care.
- Reviewed quality standards and performance at each meeting.
- Organized a well-attended dinner meeting for urologists to discuss local standards of care.
- Partnered with Willamette Urology to hold a Journal Club in November 2014 to bring topics of interest to local physicians.
- Adopted NCCN follow-up guidelines for prostate cancer.
- Offered the MEAL study as a clinical research opportunity to prostate cancer patients.
- Conducted a retrospective study of Muscle Invasive Bladder Cancers and developed clinical pathways.

Led by our Radiation Oncology and Medical Oncology teams, Salem Cancer Institute cares for an average of 300 patients each day.



Radiation Oncology team, from left: Sam Wang, MD, PhD; Nancy Reyes-Molyneux, MD; Matt Kang, MD; Arnella Hennig, MD; Matt Gordon, MD.



Medical Oncology team, from left: Natasha Tiffany, MD; Chuck Petrunin, MD; Renee Prins, MD; John Strother, MD; Bud Pierce, MD, PhD.

Partnering with OHSU Knight Cancer Institute

We have had an affiliation with OHSU Knight Cancer Institute since 2007. Through this important partnership, cancer specialists from Salem Cancer Institute and OHSU are combining efforts and expertise to strengthen a comprehensive, coordinated cancer program.

2014 affiliation highlights:

- Strengthened our gynecologic oncology program through quarterly planning meetings with OHSU.
- Jointly recruited a full-time genetic counselor to see patients weekly in Salem.
- Continued joint education symposiums between physicians.
- Collaborated to improve care for liver cancer patients through a shared clinical pathway and TransArterial ChemoEmbolization program.
- Audited OHSU Connect/Epic Everywhere for ease of sharing patients between our two institutions.
- OHSU and Salem cancer program leaders on the Operations Work Group and Executive Steering Committee met regularly to advance our affiliation.

Gynecologic oncology

Our gynecologic oncology program is a busy practice with OHSU physicians Koenraad De Geest, MD, and Melissa Moffitt, MD, seeing patients in clinic and performing surgery weekly at Salem Health. Meagan McFarland, FNP, is a full-time provider and training as a registered nurse first assist for surgery. This program is a model as Salem Health explores expanding the OHSU affiliation.



Providers, from left: Meagan McFarland, FNP; Koenraad De Geest, MD; Melissa Moffitt, MD



Staff, from left: Kelsey Mix, RN; Kelly Newkirk, CNA; Karlene Sprayberry, CNA; Karen Tutmark, RN

Clinical research

The Salem Health Clinical Research department has a variety of treatment and quality-of-life protocols available in partnership with our medical and radiation oncology providers. Some of our trials focus on the genetic mutations associated with cancer. These are some of the same trials offered by large academic institutions, thus bringing cutting-edge research to our community. We have an average of 12 to 16 active trials available that affect treatment and quality-of-life issues of patients with cancer. We also have an affiliation with Southwest Oncology Group (SWOG) through our affiliation with OHSU that provides greater access to clinical trials.



Team, from left: Carolyn Preston; John Strother, MD; Alison Eshleman, RN; Cheryl LaBronte, RN; Whitney Higginbotham; Jack Schwarte, RN

In hospital care and support

The integrated inpatient oncology unit includes 15 oncology certified nurses, five medical surgical certified nurses, and one hospice and palliative care nurse. An oncology certified dietitian helps patients in the hospital manage treatment effects through diet and nutrition.

Support services for patients and families

SCI Support Services

Support services are available from point of concern throughout treatment.

Services include:

- Comprehensive needs assessment
- Problem solving, education and resources
- Coping strategies, counseling and support
- Resources for financial, transportation and practical issues
- Peer Navigators and support groups
- Dietitian appointments (insurance billed)
- Genetic counseling (insurance billed)

Team includes:

- Oncology certified nurses navigators
- Oncology certified social worker
- Social worker with financial focus

Contact: 503-562-4321

Location: Building C, 1st floor

Cost: No cost

Survivorship Clinic

Survivorship services are available at the completion of treatment.

Services include:

- Wellness and quality of life
- Symptom management
- Education on late and long term effects of treatment
- Survivor Passport & Treatment Summary
- Connection to:
 - physical activity programs
 - emotional support
 - registered dietitians
 - financial counselors
 - education, classes and support groups
 - activities to strengthen mind-body connection
 - integrative therapies

Team includes:

- Physician, nurse practitioner, nurse, social worker

Contact: 503-561-3133

Location: A part of the Integrative Wellness Center at Salem Cancer Institute, Building C, 2nd floor

Cost: Insurance billed

Palliative Care

Palliative Care provides an extra layer of support at any stage of disease.

Services include:

- Inpatient and outpatient consultations
- Managing the physical, emotional and spiritual needs of our patients
- Helping families have difficult conversations
- Coordinating communication with members of the care team, including family
- Helping patients and families understand treatment options

Team includes:

- Physician
- Nurse practitioners
- Nurses
- Social workers
- Chaplains

Contact: 503-561-3133

Location: A part of the Integrative Wellness Center at Salem Cancer Institute, Building C, 2nd floor

Cost: Insurance billed

Thank you to The Salem Hospital Foundation

The Salem Hospital Foundation continued their generous support of cancer services in 2014. One example is the capital investment of \$365,000 to support the development of an integrative wellness center that includes outpatient palliative care services, oncology symptom management and a survivorship clinic. They supported our lung cancer screening program by dedicating \$24,750 to provide screenings for up to 250 patients who could not otherwise afford to participate. Contributions of just over \$74,018 supported patient assistance programs such as transportation, pharmacy cards, chemotherapy and one-time small cash grants for cancer patients in need. Another \$10,500 provided ongoing support for Salem Cancer Institute programs, including education materials, a yoga instructor, Chemo Bags, and SOFTEE recovery camisoles for women recovering from breast cancer surgery.

Lung cancer screening program

After a very successful launch in 2013, our Lung Cancer Screening Program continues to be a model program, one of the largest in the nation. Compared to the average 25 patients screened per year at other facilities, Salem Cancer Institute more than doubled the total number of patients enrolled in the program with 242 new referrals in 2014.

By the end of the year, eight patients had been diagnosed with lung cancer as a result of the screenings. The majority of these were in the early stages with better treatment options and outcomes. Because lung cancer often has no obvious symptoms, these are cases that may not have been found otherwise until advanced stages.

Screening eligibility

The \$99 lung cancer screening is offered to high-risk patients who:

- Are between 55 and 74 years old.
- Have smoked at least 30 pack-years (pack-years are calculated by multiplying the number of packs per day by the number of years smoked).
- Currently smoke or have quit within the last 15 years.
- Have no symptoms of a lung condition or a history of lung cancer at the time of screening.

For more information, please call 503-561-7226 (SCAN).

Salem Cancer Institute lung cancer screening scorecard

Jan. 14, 2013 to Dec. 31, 2014

Total patients enrolled	534
Normal results	395
Follow-up recommended	139
Biopsies	10
Cancer diagnosis (2 stage I, 2 stage IV)	8

Survivor highlight

“My husband and I are taking more time for each other now. We want to enjoy life... because we realize how short it can be.”

—Kathrine Reed, cancer survivor

Longtime smokers have a fighting chance against lung cancer if it's caught in the earliest stages. Kathrine quit smoking after 50 years and what Kathrine's doctor told her about lung screenings saved her life. Hear about his advice at salemhealth.org/LDCT.



A team of cancer care specialists

Our cancer specialists are committed to providing coordinated oncology care for each patient. They work closely with referring providers to ensure the best clinical outcomes. Every physician at Salem Hospital is board-certified or board-eligible and will be certified within five years of initial appointment.

Gastroenterology

Richard Brandes, MD
Michael Buck, MD
Makkaleem Em, MD
Lawrence Gates Jr., MD
Katherine Hoda, MD
Patricia Kao, MD
Robert Ponec, MD
Edward Schultheiss, MD
Christian Speer, MD
Srinivasan Subramanian, MD

General surgery

Catherine Boulay, MD
Glena Caton, MD
Christine Clarke, MD
G. Andrew Clarke, MD
Beth Dayton, MD
Kristopher Dozier, MD
Jonathan Durning, MD
Juan Esguerra, MD
Ronald Jaecks, MD
Jiyoun (Liz) Kim, MD
Eric Laro, MD
Gloria Marlowe, MD
Everett Mozell, MD
Rajan Nair, MD
Alison Smith, MD

Thoracic surgery

Kai Engstad, MD
Eric Laro, MD
Everett Mozell, MD

Genetics

Jone Sampson, MD

Gynecologic oncology

Koenraad De Geest, MD
Meagan McFarland, NP
Melissa Moffitt, MD

Medical oncology

Charles Petrunin, MD
William Pierce, MD, PhD
Renee Prins, MD
Mark Rarick, MD
Jeffery Schwab, FNP
John Strother, MD
Natasha Tiffany, MD

Neurosurgery

Magdalena Banasiak, MD
Maurice Collada, MD
Valerie Coon, MD
Charles Hatchette, MD
Jerry Hubbard, MD
Julie York, MD

Otolaryngology

Joseph Allan, MD
John Donovan, MD
Bruce Johnson, MD
Gary Nishioka, MD
Douglas Skarada, MD
Clark Thompson, MD

Palliative care

Nancy Boutin, MD
Julie Hinson, NP
Beverly JeffsSteele, MD
Jennifer Neahring, MD
Eriko Onishi, MD
Caroline Zaworski, NP

Pathology

Alicia Kavka, MD
Lawrence Konick, MD
Mark Magilner, MD
Clark McDonald, MD
Pamela Smith, MD
Penny Vanderveer, MD
Daryl Vogel, MD, PhD
Debbie Wu, MD

Plastic surgery

Edwin Austin, MD
Bruce Carter, MD
Dann Leonard, MD
Keith Neaman, MD

Pulmonary medicine

Fayez Bader, MD
Kamran Firoozi, MD
Saleh Ismail, MD
Martin Johnson, MD
Steven Marvel, MD
Nimeshkumar Mehta, MD
James Parosa, MD
Bharat Prakash, MD
Kavan Ramachandran, MD
Bijaya Shrestha, MD
Theodore Shultz, MD

Radiation oncology

Matthew Gordon, MD
Arnella Hennig, MD
Matthew Kang, MD
Nancy Reyes-Molyneux, MD
Samuel Wang, MD, PhD

Radiology

M. Brett Abbott, MD
Scott Ambruster, MD
John Bradshaw, MD
S. Leon Burrows, MD
Richard Collins, MD
Travis Fromwiller, MD
Michael George, MD
Sidney Green, MD
Tyler Green, MD
Michael Hanslits, MD
David Harrison, MD
Ken Hirasaki, MD
Kyu Kim, MD
Jose Novoa, MD
Michael Pass, MD
Jared Sadler, MD
Kathleen Scanlan, MD
Sean Stack, MD

Interventional radiology

Scott Ambruster, MD
Tyler Green, MD
Michael Hanslits, MD
Ken Hirasaki, MD
Michael Pass, MD
Sean Stack, MD

Urology





Jaffer Bashey, MD
Jason Crane, MD
David Elkins, MD
Timothy Fleming, MD
Anjana Ganeshappa, MD
Andrea Hatchette, MD
Alan Hay, MD
Mark Mhoon, MD
Bradley Warner, MD



Salem Cancer Institute

A part of Salem Health



-  **Salem Cancer Institute** ▲
Salem Cancer Institute
-  **Gynecological Oncology** ▲
Oncología ginecológica
-  **Infusion & Wound Care** ▲
Infusión y Cuidado de heridas
-  **Resource Center** ▲
Centro de recursos

Salem Hospital Campus, Building C | 875 Oak Street SE | Salem, Oregon 97301
503-562-4321 | TOLL-FREE 877-562-4321 | EMAIL: cancer.institute@salemhealth.org

Salem Cancer Institute is part of Salem Health, which includes Salem Hospital, West Valley Hospital, Willamette Health Partners and other affiliated health care organizations offering quality care to people in and around Oregon's Mid-Willamette Valley.



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