







To our valued colleagues.

2012 found us raising the bar even higher at Salem Cancer Institute. Our tumor site committees are even more organized and focused on monitoring clinical quality and streamlining care for patients. Our volumes grew by 7.5% and our patient satisfaction scores advanced to the next level. More primary care physicians are becoming involved with Salem Cancer Institute through our tumor site committees, focus groups, and participation at our educational symposiums. Our goal is to become a best of class cancer program. We are well on our way of achieving this goal with your help.

Sincerely,

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Nancy Boutin, MD Medical Director. Salem Cancer Institute

Director. Salem Cancer Institute

Commission on Cancer

Salem Cancer Institute has been accredited by the Commission on Cancer (CoC) since 1952. Our most recent survey was in 2011 where we earned our highest score ever and received full accreditation with commendation.

Physicians Eric Laro, Cancer Committee chair and Mark Magilner, Cancer Liason physician, launched numerous initiatives to comply with the more stringent 2012 standards. We achieved our program goal of improving the coordination and processes of care between primary care and cancer physicians through our physician directory, diagnostic algorithms, and Cancer Symposiums for Primary Care.

Our clinical goal is being addressed by the various projects of our Thoracic Committee, including the implementation of our lung cancer screening program, as we work to decrease the number of Stage III Lung Cancer presentations at Salem Health. Our next survey is scheduled for December 2013.



Mark Magilner, MD (left) and Eric Laro, MD.







Engaging local physicians

Over the past two years, Salem Cancer Institute has been busy engaging primary care physicians in local cancer services. From our monthly email newsletter and office visits to our Cancer Symposiums for Primary care, we have reached 200 providers in Salem and our surrounding communities.

Our cancer specialists have led the way with their involvement in our Tumor Site Committees, Cancer Committee, Cancer Conference and symposiums. They have been eager to collaborate with their primary care colleagues on new clinical practice guidelines and programs. We now look to primary care physicians to learn how we can help them manage cancer patients in their busy practice.

Cancer Symposiums for Primary Care

In 2012 we held two interactive, educational symposiums to bring local primary care providers together with cancer specialists.

On April 6, 2012 we had 107 people in attendance at our first annual event, Diagnosing Cancer in the Primary Care Practice. Each tumor site committee was represented and presented information through interactive panel discussions and case studies. Our new physician directory and mobile application were introduced, including diagnostic algorithms, as a helpful resource for providers working up a suspected cancer diagnosis.

Building on this first success, a mini symposium was offered on November 14, 2012 focusing on Lung Cancer Screening in the Primary Care Practice. 79 people attended. Participant feedback from our evaluations told us that 99% felt the symposiums met their expectations, and 87% would recommend to a PCP colleague who didn't attend.



In 2012, 125 providers downloaded this resource to their mobile device.

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 in Oregon and the western United States. The chart below summarizes key data points from the CoC's National Cancer Data Base. In every key measurement, Salem Cancer Institute performs at levels significantly above the national and statewide average.

Cancer Program Practice Profile Reports Performance Rates, 2010*		All CoC- approved programs**
Breast cancer - Select measures		
Radiation therapy is administered within one year of diagnosis for women under age 70 receiving breast-conserving surgery for breast cancer [BCS/RT]	98.6%	90.2%
Combination chemotherapy is considered or administered within four months of diagnosis for women under age 70 with AJCC T ₁ c N ₀ M ₀ , or Stage II or III ERA and PRA positive breast cancer [HT]		91.2%
Tamoxifen or third-generation aromatase inhibitor is considered or administered within one year of diagnosis for women with AJCC $T_1c\ N_0\ M_0$, or Stage II or III ERA and/or PRA positive breast cancer [HT]		86.6%
Colon cancer - Select measures		
Adjuvant chemotherapy is considered or administered within four months of diagnosis for patients under age 80 with AJCC Stage III (lymph node positive) colon cancer [ACT]		91.7%
At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer [12RLN]		86.6%
Rectal cancer - Select measures		
Radiation therapy is considered or administered within six months of diagnosis for patients under age 80 with clinical or pathologic AJCC T_4 N_0 M_0 or Stage III receiving surgical resection for rectal cancer [AdjRT]	100%	92.2%

^{*}Latest performance data available nationally.

On the average day, Salem Cancer Institute cares for 325 patients, led by our Radiation Oncology and Medical Oncology teams.

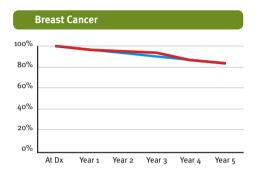
^{**}Rates computed based on data directly reported to the NCDB using specifications endorsed by the National Quality Forum.

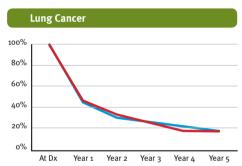
Five-year observed survival rates

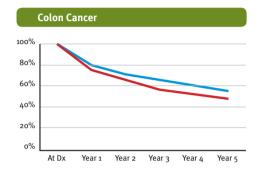
The Commission on Cancer (CoC) tracks survival rates by tumor site and cancer stage, compiling data from 1,480 CoC-approved facilities nationwide. The comprehensive and impartial data gathered for this effort shows survival rates at Salem Cancer Institute to be comparable to or higher than the national average.

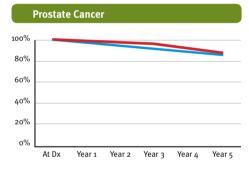
Salem Cancer Institute vs. CoC Comprehensive Community Centers

Salem Cancer Institute CoC Comprehensive Community Centers











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



Medical Oncology team, from left: Ed Orlowski, MD; Chuck Petrunin, MD; Natasha Tiffany, MD; Bud Pierce, MD; John Strother, MD.

Tumor site committees: Improving cancer care through collaboration





Breast committee highlights
NAPBC Nationally Accredited Breast Center
Beth Dayton, MD, Chair
Natasha Tiffany, MD, Vice-Chair

- Met 12 times during 2012 with physicians representing the full spectrum of cancer care, including primary care.
- Developed and approved clinical practice guidelines including referrals to specialists, surgical management of the axilla, and the assessment and treatment of lymphedema.
- Created a lymphedema assessment form and patient education brochure.
- Conducted a survey among cancer specialists to determine ways to improve follow up care for breast cancer patients.
- Supported Salem Hospital Women's Imaging in their quest to become a Breast Imaging Center of Excellence.



Thoracic committee highlights
Everett Mozell, MD, Chair

- Met nine times during 2012 with physicians representing the full spectrum of cancer care, including primary care.
- Planned and developed a Lung Cancer Screening Pilot Program that launched January 14, 2013.
- Created a smoking cessation patient education brochure.
- Provided education to local primary care providers through our symposium, Lung Cancer Screening in the Primary Care Practice, held November 14, 2012.
- Held a community event, Shine a Light on Lung Cancer, to raise awareness and inform the public about lung cancer screening.
- Initiated a weekly Multidisciplinary Thoracic Oncology Rounds where all new cases of lung and esophageal cancer
 are screened by a panel of thoracic and oncologic physicians for appropriate evaluation and expeditious care.
- Partnered with Salem Pulmonary Associates to continue to develop the Lung Nodule Clinic. In 2012, 160 patients
 were seen in the nodule clinic, all within a week of referral.
- Instituted navigational brochoscopy in mid-2012 with 33 procedures performed.
- Added two primary care physicians as committee members.





Gastrointestinal (GI) committee highlights Robert Ponec, MD, Chair

- Met six times during 2012 with physicians representing the full spectrum of cancer care.
- Reviewed stage II colon cancer cases to ensure appropriate referrals to medical oncology.
- Approved testing every new colon cancer at Salem Hospital for Microsatellite Instability (MSI) using immunohistochemistry (IHC).
- Implemented a Transarterial Chemoembolization (TACE) program as a treatment option for patients with liver cancer.
- Supported colon cancer awareness and screening with the distribution of 500 stool testing kits at various community locations including West Salem Clinic, The Physician's Building, Salem Hospital Pharmacy, Willamette Health Partners, Salem Free Medical Clinic, and Salem Clinic.





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

- Met nine times during 2012 with physicians representing the full spectrum of cancer care.
- Developed prostate cancer screening guidelines for local physicians in response to the US Preventive Services Task Force.
- Analyzed multidisciplinary management of genitor-urinary cancers.
- Created awareness in Urology and Radiation Oncology regarding bladder conservation therapy for appropriate candidates.
- Identified the need to improve clinical staging documentation prior to the first course of treatment.



Neurosurgical Cancer sub-committee highlights Magdalena Banasiak, MD, Chair

- Salem Cancer Institute collaborated quarterly with the neurosurgical team.
- Utilized new stereotactic radiosurgery capabilities in radiation oncology to treat 65 patients with neurological cancers.
- Continued quality improvement project to improve timeliness of post-operative MRI's following National Comprehensive Cancer Network Guidelines of one to three days.

Project results showed significant improvement:

January – June 2011 = 6 days

July - December 2011 = 2 days

January – June 2012 = 1.5 days

Clinical research

We continued to develop our Clinical Research Department in 2012 with a new team of nurses, Alison Eshleman and Cheryl LaBronte. As an experienced research nurse, Alison is leading the department and encouraging advanced training and education for the staff. This team works closely with John Strother, MD, the liaison for clinical research between Salem Cancer Institute and OHSU Knight Cancer Institute. An established steering committee meets regularly to review research department goals, create ongoing audit procedures and strengthen our affiliation with Southwest Oncology Group, one of the largest cooperative groups for cancer clinical trials in the United States. A variety of treatment and quality of life protocols are available through our medical oncology and radiation oncology partners.



Our clinical research team.

OHSU Knight Cancer Institute affiliation

We continue to build upon our partnership with OHSU Knight Cancer Institute. Through this important affiliation, cancer specialists from SCI and OHSU Knight are combining efforts and expertise to strengthen a comprehensive, coordinated cancer program.

In 2012 we...

- Analyzed improving services in Silverton, Mt. Angel and Woodburn. Hematology Oncology of Salem is now seeing patients weekly in Silverton.
- Improved telemedicine capabilities.
- Participated in a preceptorship offered by OHSU for Salem's TACE team.
- Strengthened our Gynecologic Oncology program by adding a second OHSU physician allowing a four day a week clinic.
- Continued joint education symposiums between physicians in both programs.

- Audited OHSU Connect and EPIC Everywhere for streamlined patient care and sharing of medical records.
- Welcomed OHSU genetic counselors to Salem once a month for patient consultations.
- Shared rotations between Salem and OHSU oncology nurses.
- Launched a community awareness campaign promoting the renewed affiliation between our programs.



ATTRACTING TOP SPECIALISTS | Gynecologic Oncology

Melissa Moffitt, MD

Dr. Moffitt joined our Gynecologic Oncology program in November 2011. She received her medical degree from University of California, Davis School of Medicine, completed her residency at University of Massachusetts Medical School, and did her fellowship training at Los Angeles County and University of Southern California. She currently practices at both Salem Cancer Institute and OHSU Knight Cancer Institute.

Coordinated care and support services

Cancer nurse navigators are oncology certified nurses, helping patients and families identify needs, solve problems and find resources as they navigate their cancer journey.

Our licensed clinical social worker provides counseling and coping strategies to manage the emotional aspects of cancer diagnosis, treatment and survivorship.

Cancer rehabilitation helps patients cope with treatment-related side effects and includes a cancer exercise specialist and lymphedema specialist who collaborate to create customized programs.

Nutrition consultations are available with a registered dietitian.

Peer navigator program provides the support and guidance of more than 20 cancer survivors who volunteer to share their experiences with patients and families.

Support groups and education opportunities are available to patients and family members.

Our team of social workers and cancer nurse navigators have more than 600 patient contacts a month.



Connecting with the community

Salem Cancer Institute partners with local organizations to support, host, and participate in many cancer awareness events and activities.

Over the past year we...

- Reached 977 cancer survivors through our support groups and yoga class.
- Had 531 people attend our cancer education and survivorship classes.
- Connected with over 4,000 people at local events including Relay for Life, Play for a
 Cure Oregon, the Discover Pink Walk and more.
- Held a skin cancer screening in partnership with Salem Free Clinics and the Dermatology Clinic.
- Promoted Colon Cancer Awareness Month with Salem Gastro.

In-hospital care and support services

Integrated inpatient oncology unit includes 15 oncology certified nurses, two hospice and palliative care nurses, and six medical-surgical certified nurses. Through a quality improvement project, this team addresses patients' emotional needs with a distress screening tool and monthly compassion committee meetings. Their patient satisfaction scores were above the 90th percentile for 2012.

Inpatient palliative care services focus on relief of symptoms, increased comfort and improved quality of life for patients and their families with any life-limiting disease. Our program brings combined expertise from multiple areas to address the physical, emotional and spiritual needs of our patients.

Oncology certified dietitian helps patients in the hospital manage treatment effects through diet and nutrition.

Thank you to The Salem Hospital Foundation

The Salem Hospital Foundation continued their generous support of cancer services in 2012.

One example is the capital investment of \$185,159 they granted to purchase Salem Hospital's Navigational Bronchoscopy. Contributions of nearly \$50,000 supported patient assistance programs such as transportation, pharmacy cards, chemotherapy, and one-time small cash grants for cancer patients in financial need.

Another \$19,000 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.



Thank you to our registry staff.

Salem Cancer Registry: Improving treatments and outcomes since 1960

At Salem Cancer Institute, we are committed to improving the future of cancer care by learning from the past. The Registry, among the oldest in the United States, includes data from 58,000 cases. Registry data allows physicians, researchers and public health professionals to track disease, treatment trends and efficacy.

Data is collected from Salem Cancer Institute, West Valley Hospital, Silverton Hospital, Santiam Hospital and local outpatient facilities. Physicians use Registry information to improve treatment planning, staging and continuity of care.

The Registry is the cornerstone of achieving the coveted status of CoC accreditation with commendation from the American College of Surgeons. The Registry also provides data on survival, treatment and extent of disease to the National Cancer Data Base, the CoC and the Oregon State Cancer Registry.

Salem Cancer Institute Cancer Registry

Case Distribution

Primary Site	New Cases* Seen in 2011	New Cases* Seen in 2012	Total # of Cases in Registry 2000-2012
Breast	383	361	4,402
Colorectal	128	147	2,021
Lung	232	234	2,753
Lymphoma/Leukemia	124	180	1,540
Prostate	268	250	3,611
Other/Undefined	739	830	8,399
Total	1,874	2,002	22,726

^{*} New Cases - Total number of new cases seen at Salem Hospital that utilized services - includes all Class of Cases.



ATTRACTING TOP SPECIALISTS | Palliative Care

Jennifer Neahring, MD

Dr. Neahring is a Palliative Care physician who graduated from Northwestern University. She trained in Internal Medicine and Nephrology at the University of Iowa and worked in private practice in Iowa for four years before relocating to Oregon. She established Kidney Care Physicians in Salem and worked as a nephrologist at Salem Hospital for 13 years before deciding to move to Palliative Care in 2011 in order to help grow this thriving new program. She is board certified in Internal Medicine, Nephrology and Hospice and Palliative Care Medicine.

Physicians specializing in cancer care

Our physicians 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.

Cardiothoracic

Kai Engstad, MD

Gastroenterology

Richard Brandes, MD
Michael Buck, MD
Makkalearn Em, MD
Lawrence Gates Jr., MD
Katherine Hoda, MD
Patricia Kao, MD
Robert Ponec, MD
Gregory Potter, 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 I. Mark Evans, MD Ronald Jaecks, MD Jiyoun (Liz) Kim, MD Eric Laro, MD Gloria Marlowe, MD Everett Mozell, MD Rajan Nair, MD Alison Smith, MD William S. Strauss, MD

Surgeons performing thoracic surgery

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

Gynecologic oncology

Melissa Moffitt, MD Elizabeth Munro, MD

Medical oncology

Edward Orlowski, MD Charles Petrunin, MD William Pierce, MD, PhD John Strother, MD Natasha Tiffany, MD

Neurosurgery

Magdalena Banasiak, MD Maurice Collada, MD Valerie Coon, MD Jerry Hubbard, MD Iulie York, MD

Otolaryngology

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

Pain management

Ahmed F. Edeid, MD Amr R. Hegazi, MD

Palliative care

Nancy Boutin, MD Jennifer Neahring, MD Eriko Onishi, MD Cynthia Wallace, MD

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 William Nisbet, MD

Pulmonary medicine

Fayez Bader, MD
Kamran Firoozi, MD
Saleh Ismail, MD
Martin Johnson, MD
Steven Marvel, MD
Nimeshkumar Mehta, MD
James Parosa, MD
Kavan Ramachandran, MD
Theodore Shultz, MD
John Silver, MD

Radiation oncology

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

Radiology

Iohn Bradshaw, MD S. Leon Burrows, MD Richard Collins, MD David Farthing, MD Travis Fromwiller, MD Michael George, MD Sidney 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 Michael Smolin, MD Sean Stack, MD

Interventional radiology

Michael Hanslits, MD Ken Hirasaki, MD Michael Pass, MD Michael Smolin, MD Sean Stack, MD

Urology

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



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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.



