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On behalf of the Cancer Committee we are privileged to introduce the 2018 Community Medical Centers cancer program annual report. This report covers the highlights of the Community Medical Centers cancer program from 2017-2018.

The commitment and hard work of all Cancer Committee members led our program to pass the Commission on Cancer (CoC) Survey in 2017 and receive full accreditation by the American College of Surgeons.

We’re thrilled to continue our mission of providing compassionate comprehensive cancer care with advanced clinical technologies and research trials in the new state-of-the-art Community Cancer Institute that opened this summer.

Here, patients have access to the Central Valley’s leaders in cancer care — including medical oncologists, radiation oncologists, other cancer specialists and surgeons — who see patients in multidisciplinary clinics. This provides convenient and coordinated care to our patients and allows them to stay close to home and loved ones while getting treatment.

Our Oncology Support Services continue to grow and now include nurse navigators, social support, nutritional support, as well as speech and physical therapy. Our palliative care program also continues to grow and is a great asset to patients and their families throughout their cancer journey.

Through collaboration with the University of California San Francisco, we continue to expand the research program and the number of clinical trials available to our patients. This will improve patient outcomes and change cancer treatments for the better.

We also plan to expand our multidisciplinary tumor boards by starting a new molecular tumor board. Our genetics department is helping patients and families detect inherited genetic mutations, prevent future cancers and create targeted therapies based on the patient’s own genetic profile.

Thank you to everyone who contributed to this report and to every team member who strives to provide excellent care for cancer patients. We look forward to the growth and success of the cancer program in 2019.

Dr. Haifaa Abdulhaq
Cancer Committee Chair

Dr. Deborah Gumina
Cancer Committee Chair

Dr. Amir Fathi
Cancer Liaison Physician
In their mission to improve survival and the quality of life of cancer patients, the American College of Surgeons (ACoS) established a quality standards-based program referred to as the Commission on Cancer (CoC). The CoC regularly surveys applicants to measure compliance with set standards. Not all cancer programs strive to meet these stringent standards.

Community Medical Centers is proud to be one of 11 academic comprehensive cancer programs (ACAD) in the State of California. Academic comprehensive cancer programs make up only 13% of the roughly 1,500 nationwide Commission on Cancer (CoC) accredited programs.

**Cancer Committee**
To earn accreditation, local cancer programs are required to have a governing body that is responsible to define and monitor progress and to implement continual improvements.

Members and designated coordinators of our cancer committee include physicians, nurses and allied health professionals who fill designated roles to ensure a well-rounded committee and program. Each required member or alternate must attend meetings regularly (only one acceptable absence per calendar year) and have specific responsibilities to ensure standards are met and quality is monitored in our program.

Additional healthcare professionals and outreach coordinators are also invited to participate to provide updates, feedback and collaborate on joint efforts to improve patient care.
## 2018 Cancer Committee Members

<table>
<thead>
<tr>
<th>Required Member</th>
<th>Designated Member Name</th>
<th>Designated Alternate Name</th>
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</thead>
<tbody>
<tr>
<td>Cancer Committee Chair</td>
<td>Haifaa Abdulhaq, MD</td>
<td>Deborah Gumina, MD</td>
</tr>
<tr>
<td>Diagnostic Radiologist</td>
<td>Jason Roberts, MD</td>
<td>Fred LoGalbo, MD</td>
</tr>
<tr>
<td>Pathologist</td>
<td>William Pitts, MD</td>
<td>David Barrett, MD</td>
</tr>
<tr>
<td>Surgeon</td>
<td>Amir Fathi, MD</td>
<td>Ibironke Adelaja, MD</td>
</tr>
<tr>
<td>Medical Oncologist</td>
<td>Mansoor Alam, MD</td>
<td>Li Li, MD, PhD</td>
</tr>
<tr>
<td>Radiation Oncologist</td>
<td>William Silveira, MD, PhD</td>
<td>Brent Kane, MD</td>
</tr>
<tr>
<td>Cancer Liaison Physician</td>
<td>Amir Fathi, MD</td>
<td>Daya Upadhyay, MD</td>
</tr>
<tr>
<td>Cancer Program Administrator</td>
<td>John Strubert, MBA, VP, Cancer Services</td>
<td>Jill Kienow, RN, BSN, CPHQ, Manager, Infusion Services</td>
</tr>
<tr>
<td>Oncology Nurse</td>
<td>Lori Soto, RN, BSN, Manager, Med-Surg</td>
<td>Jeff Zweifel, RN, Manager, Med-Surg</td>
</tr>
<tr>
<td>Social Worker/Case Manager</td>
<td>Cynthia Burton, MSW, LCSW, OSW-C</td>
<td>Lana Mak-Phanitsiri, MSW</td>
</tr>
<tr>
<td>Certified Tumor Registrar</td>
<td>Mary Leyser, CTR</td>
<td>Kelsey Wiltshire, CTR, CCRP</td>
</tr>
<tr>
<td>Palliative Medicine Physician</td>
<td>Patrick Macmillan, MD</td>
<td>Lidia Rodriguez, MD</td>
</tr>
<tr>
<td>Genetics Professional</td>
<td>Dawn Delozier, PhD</td>
<td>Cynthia Curry, MD</td>
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### Cancer Committee Coordinators

<table>
<thead>
<tr>
<th>Required Member</th>
<th>Designated Member Name</th>
<th>Designated Alternate Name</th>
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</thead>
<tbody>
<tr>
<td>Cancer Conference Coordinator</td>
<td>William Silveira, MD, PhD</td>
<td>Constance Stoehr, MD</td>
</tr>
<tr>
<td>Quality Improvement Coordinator</td>
<td>Midori Kondo, Pharm.D., MHA, Director, Cancer Services</td>
<td>Julie Gilpin, BSN, RN</td>
</tr>
<tr>
<td>Cancer Registry Quality Coordinator</td>
<td>Mary Leyser, CTR</td>
<td>Kelsey Wiltshire, CTR, CCRP</td>
</tr>
<tr>
<td>Community Outreach Coordinator</td>
<td>Bonnie Harkins, RN, OCN, CCRP</td>
<td>Alexandra Castillo, Pharm.D, Manager, Oncology Support Services</td>
</tr>
<tr>
<td>Clinical Research Coordinator</td>
<td>Cynthia Ho, BA, CCRC, CPhT, CMPE</td>
<td>Joseph Mosholder, MS</td>
</tr>
<tr>
<td>Psychosocial Services Coordinator</td>
<td>Cynthia Burton, MSW, LCSW, OSW-C</td>
<td>Lana Mak-Phanitsiri, MSW</td>
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### Other Participants — Additional Recommended Members

<table>
<thead>
<tr>
<th>Title</th>
<th>Member Name</th>
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</thead>
<tbody>
<tr>
<td>Registered Dietitian Nutritionist</td>
<td>Lauren Nowak, RD</td>
</tr>
<tr>
<td>Pharmacist</td>
<td>Jeff Shinoda, Pharm.D., Manager, Infusion Pharmacy</td>
</tr>
<tr>
<td>Rehabilitation Services Representatives</td>
<td>Crystal Rodriguez, M.A., CCC-SLP</td>
</tr>
<tr>
<td></td>
<td>Lori Relph, DPT</td>
</tr>
<tr>
<td>American Cancer Society Representative</td>
<td>Jennifer Giese</td>
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</table>
Patients benefit greatly when providers come together to discuss all aspects of care and to create tailor-made treatment plans. As a Commission on Cancer accredited facility, we are required to present at least 15% of the cases we diagnose or treat at a multidisciplinary Cancer Conference.

Here, specialists in medical oncology, radiation oncology, surgical oncology, pathology and diagnostic radiology all come together to discuss patient history, laboratory results, surgical procedures, extent and stage of disease as well as options for treatment and surveillance. Treatment recommendations are based on national evidence-based guidelines and the potential for clinical trial participation is always discussed, when appropriate.

In 2017, we were required to present about 350 cases to a multidisciplinary Cancer Conference. We presented more than 800 cases which is more than double the requirement at 33%.

Community Medical Centers currently facilitates nine general and site-specific multidisciplinary Cancer Conferences and we expect to add more.

<table>
<thead>
<tr>
<th>CANCER CONFERENCES</th>
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<tbody>
<tr>
<td><strong>Cancer Conference</strong></td>
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<tr>
<td>Community Regional Medical Center General Conference</td>
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<tr>
<td>Hepatobiliary Conference</td>
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<tr>
<td>UCSF-Fresno Breast Conference</td>
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<tr>
<td>Thoracic (Lung Nodule Program) Conference</td>
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<tr>
<td>Radin Breast Conference</td>
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<tr>
<td>Neuro-Oncology Conference</td>
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<tr>
<td>Clovis Community Medical Center General Conference</td>
</tr>
<tr>
<td>Hematology Conference</td>
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<tr>
<td>Head and Neck Conference</td>
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OUR GOALS FOR 2017-2018

Each year, the Cancer Committee at Community Medical Centers chooses at least two goals that will improve cancer care within the organization. One must be a clinical goal involving the diagnosis, treatment, services and care of the program’s patients. Another must be a programmatic goal directed toward the scope, coordination, practices and processes of cancer care at the program.

We were very successful in 2017-2018. We established two outpatient specialty clinics and successfully started a patient family advisory council to help shape our patient-centered program. And we opened the Community Cancer Institute where patients have easy access to a wide variety of the latest outpatient diagnostic, treatment and support services.

Goal 1: Establish an outpatient palliative care clinic in 2017

Palliative care is specialized medical care for people living with a serious illness. It focuses on providing relief from symptoms and stress. Palliative care aims to improve quality of life for both the patient and the family. The palliative care team of doctors, nurses, social workers and other professionals work together and with the patient’s other doctors to provide an extra layer of support. It is appropriate at any age and at any stage in a serious illness and can be provided along with curative treatment.

In August of 2017, our program established an outpatient palliative care clinic to assist oncology patients achieve an optimal state of wellbeing. Services started at our California Cancer Center location, one day a week with one provider. Within a year, 254 patients were seen with 839 total visits.

In August of 2018, the outpatient service was moved to the new Community Cancer Institute and expanded to two full days, with two providers, a fellow and a fully integrated support team to increase access.

Our palliative care team can help patients with difficult to manage symptoms like breathing problems, depression, loss of appetite, nausea, fatigue, constipation, trouble sleeping, as well as emotional support, medical decision making, planning and supporting family members.

Goal 2: Establish a neuro multidisciplinary clinic (MDC) in 2017

In the fall of 2017, we opened the multidisciplinary neuro-oncology clinic at Community Regional Medical Center. Comprised of doctors with specialties that include neurosurgery, medical oncology and radiation oncology, this clinic allows patients to see all their care team in one visit and provides better coordinated care.

In 2018, the neuro-oncology clinic moved to the Community Cancer Institute where patients also have access to the latest diagnostic and therapeutic services and a comprehensive range of support services. Here, a multidisciplinary team meets regularly to diagnose, assess patient care and design treatment plans tailored to each patient’s situation. These treatments may include surgery, radiation and/or chemotherapy.
Diseases and Tumors Treated by the Neuro MDC:

- Low- and high-grade Glioma’s (tumors that start in the brain or spinal cord)
- Meningioma’s (tumors that start from the membranes surrounding the brain and spinal cord.)
- Metastasis to the brain (cancer that spreads to a different part of the body from where it began)
- Previously resected brain tumors
- Skull-based brain tumors

Goal 3: Improve the patient experience by soliciting patient and family perspective

The Patient & Family Advisory Council (PFAC) was created to engage patients and family members to improve and help design our cancer services. The PFAC is a partnership of patients, family members, staff and health care providers dedicated to improving the patient and family experience through a compassionate, quality and collaborative partnership.

Goal 4: Open the Community Cancer Institute in 2018

Surveys revealed the thing cancer patients want most is to receive all their care under one roof. So we set out to consolidate services and provide a seamless experience for our patients. Like many other organizations, Community Medical Centers had previously spread cancer care and specialty services across several locations, including Community Regional Medical Center in downtown Fresno, the California Cancer Center in north Fresno and Clovis Community.

With the opening of Community Cancer Institute in August 2018, comprehensive outpatient services are all offered in one place. Here, multidisciplinary teams of physicians and support staff work together to provide clinic visits, lab work, treatments and support services.

From diagnosis through treatment and into life after cancer, we take a holistic approach to cancer care. Our team of specialists leads the fight, using the latest treatment therapies. First-class technologies speed detection, diagnosis and treatment. And we have patient-focused services to support patients through their entire journey.

Within the first month of opening, Community Cancer Institute served nearly 1,300 patients and held almost 3,000 appointments.
## EXPERTISE AT COMMUNITY CANCER INSTITUTE

<table>
<thead>
<tr>
<th>Ambassadors and Greeters</th>
<th>Nurse Navigators</th>
<th>Radiation Nurses</th>
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<tbody>
<tr>
<td>Assistant Care Coordinators</td>
<td>Oncology Leadership</td>
<td>Radiation Oncologists</td>
</tr>
<tr>
<td>Certified Cancer Registrars</td>
<td>Palliative Physicians</td>
<td>Radiation Therapists</td>
</tr>
<tr>
<td>Clinical Lab Scientists</td>
<td>Pathologists</td>
<td>Radiologists</td>
</tr>
<tr>
<td>Dosimetrists</td>
<td>Patient Care Assistants</td>
<td>Registered Dietitians</td>
</tr>
<tr>
<td>Financial Counselors</td>
<td>PET CT Technologist</td>
<td>Registration Staff</td>
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<tr>
<td>Infusion Nurses</td>
<td>Pharmacists</td>
<td>Scheduling Staff</td>
</tr>
<tr>
<td>Insurance Authorization Specialists</td>
<td>Pharmacy Technicians</td>
<td>Social Workers</td>
</tr>
<tr>
<td>Medical Geneticists</td>
<td>Phlebotomists</td>
<td>Speech Language Pathologists</td>
</tr>
<tr>
<td>Medical Office Assistants</td>
<td>Physical and Occupational Therapists</td>
<td>Surgical Oncologists</td>
</tr>
<tr>
<td>Medical Oncologists</td>
<td>Physician Fellows</td>
<td>Telephone Operators</td>
</tr>
<tr>
<td>Medical Residents</td>
<td>Physicists</td>
<td>Volunteers</td>
</tr>
<tr>
<td>MRI Technologists</td>
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## FACILITY FEATURES

**Floor 1**
- Radiation oncology and imaging equipment
- Full-Digital 3Tesi MRI Scanner
- Full-Digital PET/CT Scanner
- Cyberknife M6
- High Dose Rate (HDR) brachytherapy
- Linear Accelerators
  - 2 Elekta Infinity Units
  - 1 Varian TrueBeam
- Reception area with ambassadors
- Laboratory
- Resource center
- Serenity room

**Floor 2**
- Medical Oncology
- 2 Exam-consult rooms
- 6 Consult-only rooms
- Oncology Support Services

**Floor 3**
- Infusion Services
  - 48 Open infusion chairs
  - 4 Injection chairs
  - 1 Private infusion room
  - Compounding pharmacy
- Clinical research
- Cancer Registry
ATTACKING CANCER FROM ALL ANGLES

From the moment they hear the news, cancer patients and their families can face radical changes and life-altering decisions. And sometimes it takes more than the best medicine and technology to see patients and their supporters through the fight. Like no one else in central California, we surround cancer patients and their loved ones with resources that relieve stress and guide them through their unfamiliar and often confusing journey.

We’ve gathered the specialists and technology you’d expect from a leading cancer center. But what really sets us apart is how they work together and how we support patients and families through nearly every aspect of their journey.

**Medical Oncology**

Our physicians are board-certified in medical oncology and hematology and work hand-in-hand with a team of oncology-certified nurses and pharmacists to ensure drugs and treatments are specifically optimized for each patient’s condition and to minimize adverse effects of treatment.

We’ve dedicated more than 20,000 square feet of clinic space in Community Cancer Institute for Medical Oncologists and Hematologists to care for patients.

**Medical Oncologists at Community Cancer Institute**

Haifaa Abdulhaq, MD  
M. Mansoor Alam, MD  
Mohammed Sani Bukari, MD  
Uzair Chaudhary, MD  
Dina Ibrahim, MD  
Li Li, MD, PhD  
Andrea Stebel, MD  
Constance Stoehr, MD

**Radiation Oncology**

Our Department of Radiation Oncology is one of California’s premier radiation treatment centers. Our board-certified radiation oncologists, trained at some of the best institutions in the country, are equipped with cutting-edge technology to treat cancers of the breast, lung, prostate, brain, head and neck, skin, gastrointestinal tract and those of gynecologic origin.

CONTINUED ON NEXT PAGE
Radiation Oncologists at Community Cancer Institute
Brent Kane, MD
William Silveira, MD, PhD

Surgical Oncology
Our surgical oncology team is made up of fellowship trained surgeons and surgeons with extensive experience and strong interest in the surgical management of cancer. Surgery is considered part of a larger treatment plan. Cases are discussed with medical and radiation oncologists prior to surgery to ensure best practice pathways are followed. Patients undergo both curative intent surgery and palliative surgery to lessen or relieve symptoms related to their cancer.

There are many oncology experienced surgeons in our health system with a large list of providers focused on your cancer care. Over 3,000 surgical interventions have been performed at Community Medical Centers. Some of the cancers we treat with surgery include but are not limited to:

- Bladder Cancer
- Bone Cancer
- Brain Cancer
- Breast Cancer
- Gastrointestinal Cancer
- Gynecologic Cancer
- Head & Neck Cancer
- Kidney Cancer
- Liver Cancer
- Lung Cancer
- Prostate Cancer
- Skin Cancer
- Spinal cord tumors and metastasis

Clinical Trials
Working in partnership with UCSF and as a member of three large cooperative groups sponsored by the National Cancer Institute (NCI), we bring international clinical trials to patients in the Central Valley — providing access to promising new treatments before they're available to the public. We have a team of clinical trial coordinators who assist providers and patients in enrolling in cancer research.

We offer clinical trials for cancers in breast, cervical/endometrial, lung, pancreatic, prostate, renal cell, colon, rectal, HCC and anaplastic glioma tumors. And our partners at the UCSF clinical research program are pursuing research opportunities in Hodgkin's Lymphoma and NHL, multiple myeloma, AML, metastatic NSCLC and brain tumors, among others.

Genetic Counseling
About 5-10 percent of cancer cases are hereditary, and even more involve the interaction of cancer-risk genes with the patient’s environment. We conduct genetic consultations to reveal cancer that “runs in the family” and alert relatives of a cancer patient if they have an increased risk of developing cancer too.

These consultations can help determine the best treatments for patients and determine whether laboratory gene testing is recommended.

Did You Know?
Located to the left of the first-floor lobby, the Meditation Room is a quiet space for patients, friends and families to relax and find some solitude.
The results of genetic testing may help identify a more precise treatment plan or identify additional cancer risks for the patient or their family members.

**Infusion**

Community Medical Centers has two locations for infusion therapy. The best location for each patient depends on the type of infusion the patient requires and patient preference.

The infusion center at Community Regional Medical Center and Clovis campuses are comfortable and safe places for patients who need non-chemotherapeutic agents to get their infusion therapies. Here, registered nurses administer and supervise the patient’s treatment at all times and patients can read, relax or watch TV in comfortable chairs.

At Community Cancer Institute on the Clovis Community Medical Centers campus, we have spacious infusion bays, comfortable recliners, floor-to-ceiling windows, private rooms and an outdoor terrace for patients and their visitors to enjoy. Since infusion therapy can take hours, we provide iPads so patients can log into their favorite streaming application to watch shows while they receive their infusion therapy.

**Laboratory Services**

The lab plays an important role in establishing and monitoring treatment plans. Our testing is performed by Licensed Clinical Laboratory Scientists who follow the College of American Pathologist guidelines. Patients of Community Cancer Institute are typically scheduled for lab work just prior to their physician appointments so they don’t have to make additional trips and the results will be available to their providers in time for their appointment.

**Palliative Medicine**

Palliative care improves quality of life for both the patient and the family by providing relief from symptoms and stress. Our palliative care team helps patients and their loved ones cope with difficult symptoms like breathing problems, depression, loss of appetite, nausea, fatigue, constipation, trouble sleeping, as well as emotional support, medical decision making, planning and supporting family members.
MORE THAN GOOD MEDICINE

Our specialized oncology support services form an integrated network to support patients and their families as they move forward in this new, unfamiliar reality. These services are led by an experienced team of social workers, nurse navigators, care coordinators, speech language pathologists, dietitians, rehabilitation specialists and others to give patients an unprecedented level of individualized and effective care.

Nurse Navigation
All of our cancer patients have access to a Nurse Navigator who specializes in their type of cancer. Nurse Navigators follow the patient’s progress through all stages of treatment and take an active role when needed to coordinate care, explain options and eliminate barriers to optimal care. It’s like having a personal concierge to help with things like:

• Preparing a list of questions for a doctor before an office visit
• Understanding diagnosis and treatment
• Dealing with insurance issues and transportation barriers
• Gaining access to clinical trials, when appropriate

Psychosocial Support Services
It has been documented that increased psychosocial distress in the patient typically results in increased distress in the caregiver and vice versa. Our master’s-level prepared and specially trained licensed oncology social workers deliver the often overlooked aspect of cancer treatment of helping patients and families cope with the practical, emotional and social complexities associated with their diagnosis.

Social work services include:

• Assistance with advance care planning, advance health care directives, power of attorney and wills
• Counseling for patients, relatives, families and couples
• Support groups, meditation sessions and wellness seminars
• Grief and bereavement support for family members
Specialized Nutritional Care
Oncology dietitians provide support and nutrition education to cancer patients and their families that focus on optimizing a patient’s nutritional status during treatment and beyond. It is our mission to help each and every patient use nutrition as a powerful tool in their journey toward health.

Speech Language Pathology
For patients who experience changes in memory, thinking or speech, we offer on-site speech language pathology services. A speech language pathologist is also a specialist in swallowing and helps with swallowing issues caused by the location of the tumor, surgery, chemotherapy or radiation.

Lymphedema Therapy
Cancer treatments can bring unwanted side effects like Lymphedema, a build-up of fluid in the fatty tissues just under the skin that causes swelling, most often in the arms or legs. Our trained therapists help patients return to a normal life after treatment through education and rehabilitation programs that focus on each patient’s specific goals and lifestyle.

Survivorship Care Plans
So much emphasis is put on beating cancer that many patients don’t stop to think about how life might be different afterward. As patients near the end of treatment, we provide a Survivorship Care Plan. It contains details of the patient’s cancer diagnosis, care team and all the treatments the patient received. It also provides guidelines for what the patient should do to monitor and maintain their health going forward.

Did You Know?
Community Medical Centers offers pet therapy to those who need comfort and cuddles during treatment. Therapy dog Yankee is a cancer survivor himself!

This service is an important step that allows the patient to review with his or her Nurse Navigator the progress made and the steps the patient needs to take moving forward. The patient has the opportunity to ask questions about anything that remains unclear.

This document is provided to the patient to share with his or her primary care physician and others deemed important to ongoing health.
It’s quite simple — the earlier we see cancer, the sooner we can treat it. And if we can target it more precisely, we can spare healthy tissue. That’s why we’ve brought the world’s most sophisticated cancer-detecting and cancer-eradicating technologies to central California. These systems, paired with our multifunctional Elekta Infinities™ are designed to maximize patient comfort, minimize wait times and help us reach cancer in new ways.

One of the few cancer care centers in the world to have these technologies all under one roof — and the only one in central California — we can identify, monitor and treat cancer faster and more accurately than ever before.

CyberKnife®

CyberKnife enables physicians to target high-dose radiation at hard-to-reach tumors that otherwise might be impossible to treat. With pinpoint accuracy and from any angle imaginable, it destroys tumors with radiation while sparing surrounding healthy tissue, even if the tumor is moving.

Because of its ability to deliver high-dose radiation with absolute precision, CyberKnife can in some cases even reduce the number of treatments necessary. This means patients can get back to normal activities sooner.

• First-of-its-kind RoboCouch patient positioning system
• Synchrony Respiratory Tracking System enables continued treatment regardless of patient motion
• Stereoscopic X-ray System for real-time target identification

Varian TrueBeam® Linear Accelerator

This fully integrated system for image-guided radiotherapy and radiosurgery treats cancer anywhere in the body where radiation treatment is needed, including lung, breast, prostate, head and neck. It also can precisely image the patient.
We’re pleased with the progress we’re making and there are a few areas where the efforts of our team shine especially bright.

Lung Center of Excellence
Our program is recognized and accredited by the National Radiology Data Registry and the Addario Lung Cancer Foundation. We follow guidelines set by the American College of Chest Physicians, American Joint Committee on Cancer, and The National Comprehensive Cancer Network. The program consists of two distinct focal areas that work together so our patients have the best outcomes.

Lung Screening Program
One of the keys to beating lung cancer is catching it early. So we partnered with UCSF Fresno to do just that. We educate people who are at high risk for developing lung cancer and, using a type of CT scan called low-dose computed tomography (low-dose CT, or LDCT scan), we scan them to screen for cancer.

We offer a comprehensive lung cancer screening program that includes:
• Free annual screenings
• Patient educational resources
• A smoking-cessation program

Once enrolled, we ensure all patients are very carefully followed by the lung cancer screening team throughout their screening period. If the patient has an abnormal finding that indicates cancer, the patient is referred to the lung nodule program for rapid diagnosis and treatment.

Patients enrolled in our lung nodule program have shown to have a greater chance of survival and better outcomes.
Lung Nodule Program

Our Lung Nodule Program — in affiliation with UCSF Fresno — has worked relentlessly to speed up diagnosis and treatment of lung cancer. It is now one of the largest programs in the nation focused on early diagnosis and speedy treatment. This program is the first of its kind in the Central Valley and one of only a handful like it in the country. Our program focuses on three bedrock principles:

• Expedite lung cancer diagnosis and cancer staging using advanced technology and gene mutation studies
• Improve survival by rapid treatment access and meticulous patient follow-up for five years

Most of our cases are diagnosed within two weeks; and emergent cases in under 24 hours.

Our multidisciplinary team meets often to diagnose, assess and design targeted customized treatment plans based on the unique characteristics of each patient’s situation. Treatment plans may include surgery, CyberKnife, radiation and/or chemotherapy and targeted immunotherapy. Our Interventional Pulmonologists are highly trained in advanced procedures and perform electromagnetic navigation, EBUS, EUS, biopsies, as well as, EUS guided left adrenal gland biopsies. These advanced procedures provide patients with a one-step diagnostic biopsy and staging in lung cancer. In addition, cancer complications are managed by tumor coring, airway stenting, airway dilatation and pleural procedures.

We routinely test lung cancer using a comprehensive tumor gene mutation panel, including several important genes (EGFR, KRAS, ALK, HER2, and BRAF), in order to select the best possible treatment strategy. The multidisciplinary team and the UCSF Clinical Research Team determine if patients are eligible for clinical trials. Many of these clinical treatment trials include promising new cancer therapy drugs, targeted therapies, and new drug combinations, with the hope of overcoming drug resistance and improve survival in lung cancer.

“Before the lung nodule program, getting treatment was like a traffic jam,” Gordon Carlson, Lung Nodule Program patient, said. “I’m a NASCAR fan so being in the program is like being on a super speedway. The treatment is so organized and coordinated.”
Breast Screening
The Risk Assessment Screening Program at the Marjorie E. Radin Breast Care Center helps women evaluate their risk for breast cancer. Our nurse coordinators and genetic counselor provide:

- Breast cancer risk assessments
- Genetic counseling and testing (as indicated)
- Personalized screenings and prevention plans
- Referrals to breast care specialists who collaborate with primary care providers

Breast screening
Early detection means greater chances of survival. At the Marjorie E. Radin Breast Care Center, we use digital mammography exclusively. Digital images allow doctors to see subtle differences in breast tissue that traditional film mammograms do not. Our technology and proactive efforts mean we are detecting breast cancers earlier in the patient’s life when compared to other CoC programs.

If a mammogram or ultrasound shows cancer, we quickly connect the patient with our...
team of specialists. We also accept referrals from other diagnostic centers.

We participate in the National Quality Measures for Breast Centers® program (NQMBC), a quality program developed by the National Consortium of Breast Centers™.

The NQMBC is a voluntary quality program that identifies quality care measures, provides immediate access to information and allows breast centers to compare their performance with other centers across the United States and beyond. Participants in the program can enter their qualitative data and compare their performance with other breast centers for the measures they submit data.

The program requires the organization to commit to improving quality in their health system by implementing, monitoring and measuring performance.

Recognized as a Certified Participant, this equates to a breast program’s entry level participation in the NQMBC program. After meeting the participation guidelines, and holding the designation of NQMBC Program Participant, the breast health facility is eligible to make application to become a Certified Participant.

**Skin Cancer Prevention and Screening**

We used Health Quest, our public education program, to hold a skin cancer prevention and screening event in early 2018. Here, 150 people from the community came for the skin cancer prevention presentation given by a board certified dermatologist. Attendees were asked to fill out a self-evaluation survey prior to the talk. The survey asked attendees about their current skin cancer prevention habits including whether they performed skin cancer self-exams, wear sunscreen or wear sun-protective clothing.

To evaluate the effectiveness of the prevention presentation, we questioned the attendees a few weeks later about how the presentation had changed their habits. In the weeks following the presentation, 12 attendees started performing skin screening self-exams, 10 started wearing sunscreen and 13 began wearing sun-protective clothing.

Immediately following the prevention presentation, attendees were offered a free skin cancer screening and 79 people were screened. There were nine positive findings in which suspicious lesions were detected. They were contacted in the weeks following the screening to ensure appropriate follow-up had been performed.

Through this event, we reached 150 members of the community and engaged them in a prevention presentation that motivated many attendees to adopt habits that will protect their skin. The screening was also a success, as 11% of those screened had a suspicious finding and sought additional workup and treatment.
WHO WE SERVE

About the Region
The Central Valley is the fastest growing region in California with a population of over 6.5 million. This region with the highest farm revenues in the country ranks among the poorest in the state and nation. Each year more than 10,000 residents here are diagnosed with invasive cancer, resulting in approximately 4,000 deaths. Due to the area’s rapid growth, the number of cancer cases has increased steadily nearly every year.

This data shows an upward trend in the number of cases seen in this organization. The Centers for Disease Control and Prevention (CDC) has estimated that the number of new cancer cases in the United States will increase about 24% in men and 21% in women over the years 2010 and 2020. As of 2017, our cancer program has already experienced an increase of over 20% since 2010. The majority of this trend can be attributed to an increase in several primary cancer sites such as blood and lymphoid malignancies, gynecologic malignancies and kidney cancers. Of note, each of these sites have seen an increase of over 50% between years 2013 and 2017.
There are about 46 hospitals in the Valley. Unfortunately, per US News hospital performance ranking, very few of them are nationally recognized or endorsed for comprehensive cancer care. This void of sophisticated cancer care has regrettably forced many cancer patients from the Valley to seek treatment elsewhere which causes tremendous emotional and financial burdens for the patients and their families.

Throughout past years, we have undertaken substantial initiatives to expand access to care. The hallmark of these efforts has been the opening of Community Cancer Institute in August of 2018.

**Patient Demographics**

Our 2017 data shows we treated significantly more women than men. And the majority were white non-Hispanic or white Hispanic.

**Primary cancers over five years**

As a participant in the national cancer registry, we review and categorize patient information and report on the cancer cases we diagnosed and/or for which we contributed to the first course of treatment. These cases are called “analytic” cases.

The top five sites of cancer we treat are breast, lung, prostate, colon and uterine. This closely aligns (although not exactly) with national data published by the CDC. Our data shows lung cancer is slightly more prevalent in the Central Valley than national averages.

For a more complete list of cancer types we’ve treated, please see the 2017 site table.
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NOTES
A special thanks to all members of our cancer committee, cancer program leadership and the authors of our surgical oncology section:

Dr. David Disbrow, MD
Dr. Chenwi M. Ambe, MD

Cancer Program Leadership:
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Manager, Patient Access

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