Contents

2015 Cancer Committee 2
Message from the Cancer Committee 3
Goals for 2015 3
2015 Accomplishments 4
Goals for 2016 5
Clinical Services 6
Clinical Trials 7
Cancer Care Navigation 8

Gamma Knife® Center 9
Community Benefit 10
Outreach Program 11
Support Services 13
Cancer Registry 16
Evidence-based Study 17
New Cancer Center and Bed Tower 18
Fundraising 19

2015 Cancer Committee

Brian Brodish, MD, liaison physician
Timothy Fitzgerald, MD
Mauro Grossi, MD
Eleanor Harris, MD
Heng Hong, MD
George Hucks, MD
Charles Knupp, MD
Peter Kragel, MD
Stuart Lee, MD
Tae Juon Lee, MD
Clinton Leinweber, MD
Pamela Lepera, MD
Darla Liles, MD
Mahvish Muzaffar, MD
Daniel Moore, MD
David Rodeberg, MD
Chris Thomas, MD
Nasreen Vohra, MD
Paul Walker, MD
Andrew Weil, MD
Fred Williams, MD
Jan Wong, MD
Emmanuel Zervos, MD, chair
Merrill Bright, RHIA, CTR
Paula Brinn, RN, BSN
Kimberly Chandra, RD
Johnna Cowin, FNP, BC
Phyllis DeAntonio, RN, MSN, FAAMA
Vickie Downing, RN, BSN, OCN
Ginger Edwards, BSBA
Debra Ellison
Kimberly Gardner, RN, BSN, OCN
Leighann Henley, RN, BSN
Todd Hickey, FACHE
Jennifer Higgins, MSW, LCSW, OSW-C
Daniel House, MSW, LCSW
Rosalyn Jordan, RN, MSN, OCN
Daryl Kelly, chaplain resident
Evelina Kolychev, PharmD, BCOP
Chloe Kongs, RN, BSN, OCN
Judy Koutlas, RN, MS, OCN
Suzanne Lea, PhD
Myra Lewis, MSN, RN, NE-BC
Stacie Markel-Clark, RD, CSO, CSG, LDN
Debra Mascarenhas, RN, BSN, CBCN
Henry Mascarenhas, RN, BSN
Vicki McLawhorn, DNP, RN, FNP-BC
Allyson Meyer, genetics counselor
Janet Moye, PhD, RN, NEA-BC
Kim Myatt, RN, BSN
Teresa Parent, RN, BSN, OCN
Chelsea Passwater, RN, BSN, OCN
Janet Reimer, RN, BSN, OCN
Barbara Rouse, community member
Robbie Tilley, ACS
Jackie Unger, RN, OCN, CCRC
Catherine Wallace, PharmD
Anna Weaver, RN, MSN, CNOR

Cover photo

Don Skinner was diagnosed with Stage 3A non-small cell carcinoma — lung cancer — in early 2014.
Message from the Cancer Committee

Our goal at Vidant Cancer Care is to become the premier provider of cancer care in eastern North Carolina, reducing mortality and improving outcomes through continued development of a sustainable, nationally recognized, integrated system designed to provide ready access to prevention, early intervention, and quality, coordinated patient care.

The Cancer Committee takes pride in making sure that high quality cancer care is available to meet the needs of cancer patients in eastern North Carolina. Continuum of care standards related to navigation, psychosocial distress and survivorship care plans have all been fully implemented and have added tremendous value in providing comprehensive cancer services.

Our staff, in conjunction with local private practice physicians, Vidant Medical Group physicians and physicians from The Brody School of Medicine at East Carolina University, work together to provide comprehensive cancer care across the continuum.

Vidant Medical Center’s commitment to building a new cancer center and bed tower supports this as well. The facility groundbreaking was on March 20, 2015, signaling the renewal of our pledge to enhance efficiency of care delivery and improve patient experience. In addition, Cancer Care at the medical center will focus on improving cancer care for the top five sites, increasing clinical trial availability, reducing barriers to care through patient navigation, continuing to increase public awareness of cancer prevention, early detection and screening, and collaborate with regional Vidant Health community hospitals to assure seamless, high-quality care across the continuum.

GOALS FOR 2015

1. Utilize Rapid Quality Reporting System (RQRS) data alerts to identify patients who are approaching noncompliance with national treatment standards. Discuss these patients at Cancer Committee and propose ways to expedite the nationally recommended treatment protocols.

2. Partner with the ACS and the state ACCCC (Advisory Committee for Cancer Coordination and Control) to increase colorectal cancer screening for early diagnosis, treatment and care. Provide at least one awareness, prevention and early detection and screening event for the top six cancers (lung, breast, colorectal, skin, cervical and prostate) as outlined by the N.C. Comprehensive Cancer Control Plan 2014-2020. Focus more specifically on the four deadliest cancers: lung, breast, colorectal and prostate.

3. Vidant Health Survivorship Charter Committee will meet monthly to develop a program to include psychosocial programs, clinics, survivorship care plans and clinical trials.

4. Improve quality of service delivery for psychosocial distress screening program on inpatient and outpatient units by monitoring compliance with screening completion and annually providing additional staff education regarding screening process.

5. Partner with our Community Health Programs division to conduct a community health needs assessment this year including focus groups in order to identify barriers to care for cancer patients and caregivers.

6. Cancer Care navigators will identify strategies to reduce barriers to care, which will include improving communication and transition of care from inpatient to outpatient and throughout the region. Evaluate annually.

7. New cancer center and bed tower groundbreaking to be held March 20, 2015. Facility will cluster all oncology services, inpatient and outpatient, under one roof. Completion scheduled for spring 2018.

8. Investigate current clinical trials portfolio to ensure that disease site specific studies meet the needs of the patient population from 2014 to 2015. (Assemble workgroup between ECU/VMC to recommend strategies to remove barriers to opening pharmaceutical and other sponsored studies in a timely manner. Increase accruals to 10 percent of total analytic caseload. Screen >95 percent of eligible patients for available clinical trials. Each Multidisciplinary Trials Group to open at least one new therapeutic study in 2015. Develop ways to provide access to clinical trials to a broader spectrum of patients, such as those seen by private practice physicians and at regional hospitals.)

9. Implement quality initiatives to meet expected outcomes (O-E). Medical director input and direction to be a priority.

10. Increase capacity to admit and accept transfers to Palliative Care Unit (PCU), increase admissions from Emergency Department to PCU, and increase education about hospice.

These goals were approved by the Cancer Committee in December 2014.
The following are some noteworthy accomplishments for 2015:

- Continued partnership between 3-West and Vidant Wellness Center to have personal trainers work with patients twice a week for inpatient Survivorship 101 program.
- Welcomed new physicians and staff: Drs. Andy Weil and Sulochana Cherukuri; Jennifer Higgins, MSW, LCSW, OSW-C — support/survivorship coordinator; Nikki Hyatt, RN — outreach coordinator. 3-West/1-South welcomed 27 new grads and eight experienced RNs.
- Applauded Logan Pearce, 3-West Inpatient Oncology, as the recipient of the Daisy Award.
- Congratulated the following staff on certifications: Sierra Adams and Reshida Briggs — CTR; Kimberly Gardner, nurse navigator for GI - OCN. 30 percent of staff OCN-certified.
- Survivorship care plans implemented for top cancer sites: lung, breast, GI, heme, GU and colorectal.
- Provided community benefit of 783.5 hours ($52,222).
- Offered support services and complementary/alternative therapies to cancer patients and family members, including 18th year of Camp Dove, Survivorship 101: Exercise and Nutrition program (grant funded), more than 10 support programs; and pet, art, massage, healing touch, and reiki therapy. Caring Conversations and Making It support groups continue to have high attendance. Survivorship program outcomes for 2015: seven patients participated in Survivorship 101; 92 inpatients participated in personal training in conjunction with Vidant Wellness Center; 12 participants attended the 18th Annual Camp Dove Retreat; three patients participated in the horse therapy program; more than 150 attendees at Spring Alive event at the Hilton Greenville and 30 attended the Fall Refresher, benefiting from Tea for the Soul, massage and reiki.
- Provided cancer awareness, prevention and screening information to more than 4,500 people. Used the following media to disseminate information: radio broadcasts, educational displays and packets, presentations, health fairs and information sessions. Provided more than 293 people with cancer screenings (breast, lung and skin).
- Offered professional educational programs for physicians, nurses, allied health and registrars.
GOALS FOR 2016

1. Decrease 2016 observed mortality index compared to 2015 by increasing prognostic awareness discussions to at least 80 percent of oncology patients.

2. Assure Vidant Health Nurse Navigation program is in compliance with Oncology Nursing Society (ONS) and the Association of Oncology Social Work (AOSW) professional standards by conducting review of core competencies at all regional sites during performance reviews during 2016.

3. Establish standardization of Vidant Cancer Care policies/procedures for chemotherapy prescription, consents, order sets and administration throughout the Vidant Health region by the end of 2016.

4. Increase patient accruals into clinical trials by four percent at Vidant community hospitals by December 2016 through the work of the Clinical Trial Charter Workgroup and its efforts of increasing awareness, developing a plan to open studies and reviewing barriers to progress quarterly.

5. Will promote the national 80 percent by 2018 Colorectal Screening Objective by overseeing four events during 2016 focused on advocating cancer screening in eastern North Carolina.

Annette Swain-Leo has been living with Stage 4 liver cancer since 2008.
Inpatient Medical Oncology

Our medical oncology units, both 3-West Oncology and 1-East Inpatient Oncology, include 46 beds with the ability to serve up to intermediate-level patients. This helps assure cancer survivors requiring inpatient care can remain on their specialty unit throughout all levels of care excluding the intensive care level. Specialty-trained physicians and nurses provide comprehensive care to cancer survivors with diagnoses including, but not limited to, leukemia, lymphoma, breast, lung, prostate, esophagus and myelomas. In addition, the medical oncology unit provides care to patients with coagulopathies and anemias including sickle cell disease.

Specialization is our focus

The medical oncology team consists of hematology/oncology physicians, oncology fellows and residents. The interdisciplinary team also includes nurses, care partners, unit secretaries, supply clerk, nurse practitioners, nurse case managers, social work case managers, recreation therapists, pharmacists, dietitians, staff development assistants, education nurse specialists and clinical nurse specialists. This team collaborates to provide patient- and family-focused comprehensive care.

Staff nurses, many of whom are either already nationally certified oncology nurses or are studying for certification, are encouraged and supported in their professional and specialty growth. Clinical ladder opportunities enable nurses to address patient educational and clinical needs as well as provide educational opportunities for their peers promoting expertise in bedside nursing. The medical oncology unit supports and participates in the local Oncology Nursing Society chapter with two staff members serving on the chapter’s boards. The chapter presents educational dinners as well as supporting oncology nursing education. Focus on increasing our number of Oncology Certified Nurses (OCN) continues with several nurses earning their certifications and several of our nurses preparing for examination for the OCN which validates expertise in oncology nursing.

Patient safety and compassionate care are our goal

Patient safety is reflected in our quality focus. Preventing central venous line infections and urinary tract infections in patients have been our target. Central venous line infections were decreased by 50 percent over the past year. Continued compliance with evidence-based practice guidelines has been sustained throughout the year. BEACON order sets have been implemented and are ensuring correct chemotherapy drugs, dosages and cycles are being documented.

Questions referrals occurred with advanced cancer patients. The card will continue to be utilized by the oncology team in both inpatient and outpatient settings.

A healing environment is necessary to achieve the best possible patient outcomes. Promoting this on the medical oncology unit has been a joint project among the staff, patients and their families. Patient advisors have been essential in discovering new and innovative ways to meet this goal. Comfortable chairs, sleeper chairs, chemo and isolation carts resembling furniture rather than utility and other amenities are in place. Quiet times are observed on the unit to enhance the healing environment. Vidant Wellness Center trainers continue to come to the medical oncology unit to help patients stay as active as possible using our exercise equipment on the unit. Several of these patients have subsequently signed up for Survivorship 101 classes as Vidant Wellness Center. Pet therapy continues to be a special highlight of the week for patients, creating smiles and laughter.

1-South Inpatient Surgical/Oncology Unit

The 1-South Surgical Oncology Unit, consisting of 30 beds, provides general, general monitored and intermediate levels of care. We offer a seamless transition from surgical oncology care to medical oncology treatment. Patient care is provided for the following surgical areas: gastrointestinal, genitourinary, head/neck and gynecology. Our surgical oncology team includes physicians, advance practice practitioners, nurses, nurse case manager, social worker case manager, dietitian, pharmacist, physical/occupational therapist and care partners. The surgical staff utilizes a team approach with our preoperative and postoperative care. This collaborative team approach provides patients and their families with the knowledge and skills necessary for transitioning to independence and recovery in their home environment.

Thomas Logan Pearce, BSN, receives the Daisy Award, a national honor.
High quality care and clinical decisions respectfully include the individual’s preferences, values and needs. Enhanced Recovery After Surgery (ERAS) pathway is followed to reduce the surgical stress response and optimizing recovery, thus reducing the length of hospital stay for the patient.

Professionalism, compassionate care and a commitment to continuous improvement are key qualities of our health care team with a priority focus on competency training. The physicians and nurses partner annually for training specific to the needs of oncology patients. Physician and nurses engage in the unit and hospital practice councils for decision making and clinical practice recommendations. Nursing development is encouraged through advancement in higher level degrees, professional organizations, specialty certifications and participation in professional clinical pathways.

Physicians and nurses participate in quality improvement projects to bring awareness to quality initiatives and improve patient experience and quality outcomes.

**1-East Outpatient Infusion Center**

1-East is an infusion center designed to deliver chemotherapy, blood products and other infusions in an outpatient setting. The infusion center delivers necessary treatments and therapies to patients while allowing them to maintain, as much as possible, their normal life routines. The center provides the best of both worlds by providing an outpatient service located within a major medical center.

1-East is a 34-bed/chair infusion center with six private rooms and 28 state-of-the-art infusion chairs. About 60-70 patients are seen daily, coming from across eastern North Carolina. It offers the following amenities to keep patients comfortable and entertained during their stay; TVs for every patient with individual controls; art therapy provided twice a week; and a resource room for patients and families with information about support groups and various treatment therapies. Shuttle and valet services are available to all patients to assist with transportation from the parking areas and from Leo W. Jenkins Cancer Center. There is an onsite specialty pharmacy to provide safe and timely access to chemotherapy, decreasing patient wait times and increasing patient satisfaction. Patient and family advisory groups are involved to give their input on support and survivorship, TVs, meal trays, iPads and art therapy.

The 1-East staff, consisting of nurses, care partners and a unit secretary, work closely with all referring providers. Nurses are chemotherapy-certified with an average of 20 years nursing experience. Eleven are certified oncology nurses and others are working toward this goal. Certification is the gold standard of oncology nursing, and every nurse on 1-East has a true passion for oncology patients.

Realizing the need to spend time at home with loved ones, patients on 1-East receive the highest quality, most efficient care possible. The staff remain dedicated to enhancing the quality of life for patients and their families.

The Oncology Clinical Trials Office coordinates and facilitates clinical research to improve the cancer care of tomorrow and to provide patients in eastern North Carolina access to novel therapies and the latest advancements in cancer care. Patients are seen in the outpatient setting of Leo W. Jenkins Cancer Center and in all areas of Vidant Medical Center. Our participation in the research process establishes a connection with the National Cancer Institute and the National Clinical Trials Network (NCTN) oncology cooperative groups that currently include Alliance, NRG, ECOG-ACRIN, SWOG and COG. East Carolina University maintains a collaborative relationship with UNC-Chapel Hill’s Cancer Network clinical trials (UNCCN), and we are able to offer some of their investigator-initiated studies to patients in our region. In addition, our own oncology physicians write protocols to specifically meet the needs of our patient population. Some of these include patients in translational research studies. We work directly with pharmaceutical companies on selected studies which can offer emerging new therapies not otherwise available. 2015 has been one of the best years in recent history with a marked increase in the number of clinical trials available to patients as well as an increase in accrual to clinical trials. The following summarizes accrual information for calendar year 2015.

### Clinical trials
**January 1 – December 15, 2015**

<table>
<thead>
<tr>
<th>Category</th>
<th>Adult</th>
<th>Pediatric</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prevention trials</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Screening trials</td>
<td>0</td>
<td>37</td>
</tr>
<tr>
<td>Treatment trials</td>
<td>105</td>
<td>12</td>
</tr>
<tr>
<td>Quality of life trials</td>
<td>102</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>196</td>
<td>63</td>
</tr>
<tr>
<td><strong>Total adult patients accrued</strong></td>
<td><strong>403</strong></td>
<td><strong>112</strong></td>
</tr>
<tr>
<td><strong>Total pediatric patients accrued</strong></td>
<td><strong>515</strong></td>
<td><strong>515</strong></td>
</tr>
<tr>
<td><strong>Total accruals</strong></td>
<td><strong>515</strong></td>
<td><strong>515</strong></td>
</tr>
</tbody>
</table>
Our navigation program continues to grow and develop strategies to improve the experience of cancer patients and their caregivers. Every cancer patient receiving care through a Vidant Health facility has access to one of our specialized, experienced navigators who are either an oncology nurse or social worker. In 2015, approximately 1,250 newly diagnosed cancer patients received navigation services in the 29 counties we serve. Our team provided more than 10,300 encounter visits which included identifying barriers to care and providing appropriate interventions and referrals. Our regional team collaboration provides for seamless, timely access to quality cancer care across the health care system.

Vidant Medical Center nurse navigators are an integral part of the multidisciplinary cancer care teams and serve to improve communication among providers and assist with transitioning care closer to home for approximately 450 patients. In 2015, the navigators participated in daily inpatient care rounds to improve transitions from hospital to home. A quality improvement study was conducted to identify barriers to obtaining medications at discharge, timeliness of follow-up care and improve patient satisfaction. More than 200 patients and families were contacted in this two-phase project with results discussed at the Cancer Committee. The program is developing metrics to identify measures to decrease emergency room visits and hospital readmissions.

Also new in 2015, navigation consult/referral requests started being incorporated into the electronic medical record. This has resulted in increased referrals to the navigation program from other providers and staff both within Vidant Health and from outside provider offices and community agencies. In a small sample survey (33) of providers and staff, 99 percent of respondents rated the nurse navigator as “excellent” or “very good” in coordinating care, helping patients to understand and cope better with their disease, and linking patients with appropriate resources to meet their needs.

**Navigators**

<table>
<thead>
<tr>
<th>Navigators</th>
<th>Area of specialty</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Judy Koutlas, RN, MS, OCN, coordinator</td>
<td>Melanoma and other sites</td>
<td>252-814-3580</td>
</tr>
<tr>
<td>Kimberly Gardner RN, BSN, OCN</td>
<td>Gastrointestinal cancers</td>
<td>252-717-1931</td>
</tr>
<tr>
<td>Debra Mascarenhas, RN, BSN, CBCN</td>
<td>Breast cancers</td>
<td>252-341-0917</td>
</tr>
<tr>
<td>Teresa Parent, RN, BSN, OCN</td>
<td>Lung and esophageal cancers</td>
<td>252-341-0834</td>
</tr>
<tr>
<td>Chelsea Passwater, RN, BSN, OCN</td>
<td>Hematologic malignancies</td>
<td>252-531-2680</td>
</tr>
<tr>
<td>Janet Reimer, RN, BSN, OCN</td>
<td>Head and neck; genitourinary cancers</td>
<td>252-341-3688</td>
</tr>
</tbody>
</table>
Navigators provided 350 referrals to local and national assistance programs for medical and living expenses related to cancer treatment. Sixty-eight uninsured/underinsured patients residing in eastern North Carolina were provided lymphedema services through assistance from a Susan G. Komen grant. The team ensures patients are seen by supportive care service members including dietitians, financial counselors, social workers, genetic counselors, as well as many others who assist throughout the health care continuum. Navigators actively facilitate Caring Conversations and Making It support groups that meet monthly. They also participate routinely in survivorship programs including annual community events for breast, lung and pancreatic cancer awareness. With the launch of the lung cancer CT screening program, our thoracic navigator coordinates timely referral and access to needed services for the detection of early-stage lung cancers. Our team also participates in numerous community events for early detection, screening and prevention programs.

Our cancer navigation poster was accepted and presented at the 24th annual collaborative research day at East Carolina Heart Institute at East Carolina University, entitled “Coordinating Care and Cutting Costs: Utilizing Navigation to Provide Pegfilgrastim and Rituximab Closer to Home.”

Survivorship care plans
Survivorship care planning began as a pilot program initiated by the breast cancer multidisciplinary team in late 2014. The Cancer Committee approved the breast cancer care plan in early 2015 and recommended the addition of other top cancer sites for care plan implementation, which included lung, colorectal, Hodgkin’s lymphoma, diffuse large B-cell lymphoma and prostate. The template is consistent for all sites including sections for treatment summary, recommended follow-up care, possible late effects related to cancer treatment, recommendations for healthy lifestyle goals and other support/services provided during or after treatment (financial, genetic counseling, dietary counseling or clinical trial participation).

Survivorship visits are scheduled by the mid-level provider for the specific multidisciplinary team within three to six months after treatment completion. The NCCN distress tool is used to assess the patient’s distress level and appropriate referrals/interventions are made at the time of visit. We also provide to the survivors a survivorship folder that includes a copy of the care plan, important phone contacts, nutrition and exercise information and current support/survivorship programs available. The care plan is also sent to the patient’s primary care provider.

The Gamma Knife Center reached a milestone on Oct. 27, 2015, when the 1,000th patient was treated by the team. A celebration was held on Friday, November 20, with a press conference involving two patients and several of the team members. Also on Nov. 20, Dr. Stuart Lee was the featured presenter for the VMC Cancer Conference. The topic was “The Role of Gamma Knife Radiosurgery in the Treatment of Metastatic Brain Tumors.” Physicians from the region were invited to attend either locally or via Webex. As a thank you, those in attendance received a Vidant Health flash drive. A card announcing the milestone was sent to the regional physicians.

Gamma Knife offers hope for patients with brain lesions that were once considered inoperable. The use of Gamma Knife alleviates much of the pain, scarring and long recovery time normally associated with cases treated with intracranial surgery.

Gamma Knife gives surgeons the ability to effectively treat abnormalities in the brain through stereotactic radiosurgery. Stereotactic radiosurgery is defined as the delivery of a single high dose of radiation to a small and critically located intracranial target without opening the skull. Physicians can remove intracranial lesions by focusing multiple gamma rays on a precisely defined target.

Gamma Knife therapy avoids many risks associated with open brain surgery. Patients experience a minimal amount of pain and they typically tolerate the procedure with local anesthesia. Shorter hospital stays and less invasive surgery make Gamma Knife a more cost-effective option than conventional neurosurgery.
Indications for Gamma Knife therapy
Patients undergoing Gamma Knife radiosurgery are evaluated by a team of specialists including neurosurgeons and radiation oncologists. Diagnoses that indicate Gamma Knife therapy include:

- Meningiomas, acoustic neuromas, pituitary adenomas, craniopharyngiomas and other benign tumors
- Trigeminal neuralgia
- Primary or recurrent malignant brain tumors including astrocytomas and oligodendrogliomas
- Brain metastases
- Intracranial tumors such as nasopharyngeal carcinomas and ocular melanomas
- Anteriovenous malformations and cavernous malformations

Outcomes

- Exceeded budgeted volumes for 2015
- Scored in the mid-90 percentile on patient satisfaction surveys
- Treated metastatic brain tumors, the top indicator for Gamma Knife
- Achieved excellent success at local control of disease in these patients
- Documented superb outcomes for control of tumor size in patients with benign tumors such as meningioma and acoustic schwannoma
- Experienced 75 percent increase in AVM cases due to dedicated endovascular neurosurgery
- Increased awareness of Gamma Knife treatment among referring physicians due to efforts of Vidant Health Strategic Development

Community benefit is designed to promote the health of a population broad enough to assist the community as a whole. Vidant Medical Center defines community benefit as a program or activity that responds to a demonstrated health-related community need and seeks to achieve at least one of the four community benefit objectives: improve access to health services, enhance public health, advance knowledge or relieve government burden.

The medical center strives “to improve the health and well-being of eastern North Carolina,” as noted in the Vidant Health mission statement. These words have deep significance and provide a framework for service to our community. Cancer Care takes a proactive approach to health care through its involvement in various community service events. During the past year, Cancer Care provided 783.5 hours ($52,222) of community benefit services.

Community benefit activities include support group meetings, cancer screenings, awareness presentations, resource fairs/clinics, health symposia, complementary therapies, survivorship programs and dinner-and-learn health information sessions. This information is detailed in various sections of our report. For Cancer Care staff, the ultimate reward comes from the participants’ expression of appreciation for the services and information they received.

Gamma Knife® Center continued

Gamma Knife cases
October 2013 – September 2014

COMMUNITY BENEFIT

Vidant Health mission
To improve the health and well-being of eastern North Carolina
Fiscal year 2015 outreach events

<table>
<thead>
<tr>
<th>Targeted Cancer</th>
<th>Targeted Prevention and Screening Awareness Attendance</th>
<th>Broadcast and media awareness events</th>
<th>Audience number</th>
<th>Screenings Attendance</th>
<th>Number of positive results</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Cancer</td>
<td>4 130</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breast</td>
<td>6 732</td>
<td></td>
<td></td>
<td>8 167</td>
<td>0</td>
</tr>
<tr>
<td>Colorectal</td>
<td>1 20</td>
<td>2</td>
<td>1400</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Head and Neck</td>
<td>1 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lung</td>
<td>5 161</td>
<td></td>
<td></td>
<td>Ongoing* 75</td>
<td>7</td>
</tr>
<tr>
<td>Ovarian</td>
<td>--</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pancreatic</td>
<td>1 95</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prostate</td>
<td>5 199</td>
<td></td>
<td></td>
<td>2 51</td>
<td>9</td>
</tr>
<tr>
<td>Skin</td>
<td>4 148</td>
<td></td>
<td></td>
<td>10+ 293</td>
<td>16</td>
</tr>
<tr>
<td>Thyroid</td>
<td>--</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>27 1,490</td>
<td>2</td>
<td>1400</td>
<td>10+ 293</td>
<td>16</td>
</tr>
</tbody>
</table>

*Low Dose Lung Cancer Screening now offered by referral/appointment.

In addition, each year in the United States, more than 5.4 million cases of non-melanoma skin cancer are treated in more than 3.3 million people, meaning that there are more new cases of skin cancer than the combined incidence of cancers of the breast, prostate, lung and colon. These numbers can be prevented by avoiding indoor tanning beds, using sunscreen and limiting sun exposure. This year, Cancer Care provided education on skin cancer prevention to approximately 150 people including support groups, East Carolina University college students and seniors.

Tobacco use is another significant modifiable risk factor. According to the American Cancer Society, lung cancer is the most preventable form of cancer death in the world. Based on the 2014 U.S. Surgeon General’s Report, it is estimated that more than 87 percent of lung cancer death results from smoking. In North Carolina, the death rate from lung and bronchus cancer is higher than the national rate. These statistics provide the motivation needed to continue education related to smoking cessation and lung cancer awareness in this area. In 2015, more than 150 people in the community attended lung cancer awareness, prevention and screening events offered through Cancer Care.

Knowing that our efforts in Cancer Care can change these numbers is challenging yet empowering. To enhance prevention and awareness, we have partnered with regional health care providers, faith-based organizations, colleges, community groups and businesses. With the help of such diverse organizations, we have a greater capacity to meet the needs of the community by participating in health fairs, speaking engagements, presentations, visual displays and other events.
Outreach program continued

Pink Power
Vidant Medical Center hosted its annual Pink Power dinner event on Oct. 13 at Rock Springs Center with 670 in attendance. This was one of eight breast cancer awareness events presented across our region by Vidant Health. The goal of these events is to celebrate women in a fun, special environment designed to share pertinent information and give women the power against breast cancer. The evening’s message touched on knowledge, support and stressed the importance of early detection. Lynette Taylor, WITN-TV news anchor, served as the mistress of ceremonies. She introduced the three speakers for the evening — Dr. Mahvish Muzaffar, hematologist oncology; Dr. Anjali Malik, radiologist; and Mamie McCullough, PhD, motivational speaker and psychologist. Dr. Muzaffar provided a strong presentation on the importance of early detection. Dr. Malik provided information on mammograms and testing. Dr. McCullough, the keynote speaker, captivated the audience with a message that instilled motivation, storytelling and laughter.

Screenings
For our screening programs, Cancer Care follows American Cancer Society’s screening guidelines. Research shows that screening for cervical, skin and colorectal cancers as recommended helps prevent these diseases by finding precancerous lesions so they can be treated before they become cancerous. Screening for cervical, colorectal, lung, skin and breast cancers also helps find these diseases at an early stage, when treatment works best.

In addition, a large focus has been placed on the 80 percent by 2018 initiative from the National Colorectal Cancer Roundtable. It focuses on working toward the shared goal of screening 80 percent of adults aged 50 and older for colorectal cancer by 2018. Vidant Medical Center Cancer Care continues to partner with organizations including the N.C. Advisory Committee on Cancer Coordination and Control and the N.C. Colorectal Cancer Roundtable. In North Carolina, one in three adults between the ages 50 to 75 are not getting their recommended screenings. To further the initiative in eastern North Carolina, a Vidant Medical Center Task Force has been formed which includes gastroenterologists, GI surgeons, medical oncologists, oncology nurses and cancer care administration. The goal of this committee is to lead the efforts of 80 percent by 2018 throughout Vidant Health.
For breast cancer, “The Pitt County Breast Wellness Initiative” has screened 167 women this year through a grant provided by the Susan G. Komen foundation. The project is led by Dr. Kathryn Verbanac, a scientist and professor of surgery at The Brody School of Medicine at ECU, and Dr. Naseem Vohra, a surgical oncologist and assistant professor of surgery at the medical school.

In the summer, two skin cancer screenings were held in partnership with ECU. Both screenings were conducted using guidelines and intervention recommendations from the American Academy of Dermatology. Of the 51 students screened, nine were identified including actinic keratosis, suspicious moles and possible basal cell carcinoma. Each positive result was referred to Eastern Dermatology for further assessment and intervention and followed up by the outreach coordinator.

Specifically in lung cancer, early diagnosis and treatment is critical due to the poor prognosis at advanced stages of the disease. Lung cancer is the leading cause of cancer death, though unfortunately underfunded when compared to other cancers. The use of low-dose CT scanning to screen high-risk patients has shown to be beneficial this year. This early detection method was initiated by Vidant Medical Center to decrease lung cancer mortality in eastern North Carolina. The guidelines were taken from the National Comprehensive Cancer Network. In 2015, 75 patients were screened for lung cancer at Vidant Medical Center and ECU. Thus far, seven scans have produced findings to include nodules that require further work-up and nodules that require further monitoring. These patients are being cared for within Vidant Health by the multidisciplinary team. Earlier detection will hopefully lead to earlier treatment and better outcomes for our region.

Psychosocial distress screening standard 3.2
Standard 3.2 outlines criteria for accredited facilities to implement a process to assess oncology patients for distress during pivotal points throughout the continuum of their care. This process includes having patients complete a screening tool, referred to as the Distress Thermometer. After thorough evaluation, this tool allows various medical providers to identify patients with acute distress and connect them to appropriate resources and/or referral sources to support their psychosocial needs.

Over the last two years, Vidant Medical Center has taken the initiative to incorporate this standard into its daily cancer care. The Distress Screening Subcommittee, pilot programs and a detailed policy have helped to identify an approach for best practice. The Distress Screening process, as in other comprehensive cancer centers, is implemented in an outpatient setting to best assess the psychosocial needs of patients.

Vidant Medical Center Cancer Care is committed to ensuring that all residents of eastern North Carolina have access to exceptional care. This includes providing comprehensive supportive services to patients and their caregivers that promote healing of the mind, body and spirit.

Camp Dove (now Dove Retreat)
The 18th Annual Camp Dove retreat was held Sept. 2–4 at the Eastern 4-H Environmental Center in Columbia, NC. This event facilitated fellowship among survivors and their guests and allowed survivors the opportunity to explore supportive and meaningful experiences.

This year’s participants enjoyed various restorative activities, including integrative therapies. Some activities reported most beneficial by participants were art therapy, yoga at sunrise, meditation, massage and music therapy, spirituality endeavors and the symbolic release of rice paper lanterns on the waterfront. In addition, a celebratory event was held in the evening that allowed for dancing, laughter and support through newfound friendships.

As we continue to strive for excellence, we are committed to providing progressive and meaningful care. Our committee recognizes the importance of growth and as we move forward with keeping the biopsychosocial and spiritual aspects of the human experience in mind, we felt it important to give the retreat a new name that embraces this perspective. We are proud to announce that Camp Dove is now the Dove Retreat. Our goal is to promote peace and healing from within while preserving and honoring the historical foundation of this retreat for adult cancer survivors.

This year’s success was shared by an outstanding team of social workers, nurses and a chaplain who provided compassionate support to survivors and caregivers through inspiring and healing objectives. Participants walked away feeling rejuvenated and were encouraged to stay positive, even when faced with the most difficult of circumstances in life. It was truly a positive and life-changing experience for all.

Celebrate the Season
Celebrate the Season is a tradition that began more than a decade ago. This program gives hospital employees the privilege of providing for less fortunate families living in eastern North Carolina. Employees have the opportunity to donate food, which is distributed to cancer patients and their families who are in need during the holiday season. This year 30 bags of food were distributed.
Support and Survivorship understands the need for support throughout the cancer journey. We genuinely strive to provide current programs of quality and implement new services that will encompass the needs of our evolving cancer community and region. The following support groups are available to help cancer patients, families and caregivers as they cope with the effects of cancer. These groups provide patients with the opportunity to learn more about their disease and receive support for their psychosocial needs.

**Breathe Easier** – a support group for people with lung and/or thoracic cancer. The group meets the first Tuesday of the month at noon at McConnell-Raab Hope Lodge. For more information, call 252-847-7943.

**Brother to Brother** – support group for men with prostate cancer that meets the last Friday of the month at 9:00 am at the Seahorse Restaurant in Greenville. For more information, call 252-847-7943.

**Caring Conversations** – a support group for anyone who has been touched by any form of cancer including patients, survivors, family members, spouses, caregivers and friends. Meets the second Tuesday of each month at 5:00 pm at McConnell-Raab Hope Lodge. For more information, call 252-847-9738.

**Healing with Horses**
Cancer Services in partnership with Rocking Horse Ranch offers a 10- and 12-week therapeutic equine-assisted program designed for adult cancer survivors. Equine-assisted therapy encourages the development of positive coping skills that can be applied to the daily stressors of having cancer through interactions and activities with horses. After each session, participants meet with a licensed, certified clinical oncology social worker and horse trainer to share experiences and support one another.

**Living On After Loss** – a support group for adults dealing with the loss of a family member or loved one. This eight-week series is offered quarterly and includes two education sessions and six support sessions. Registration is required. For more information, or to register, call 252-847-7943.

**Look Good...Feel Better** – a support group that helps patients confront and deal with changes in physical appearance resulting from cancer treatment. Call the American Cancer Society toll free at 866-227-8837.

**Making It** – a support group for patients with breast cancer that meets at 5:30 pm on the second Monday of each month in the McConnell-Raab Hope Lodge conference room. For more information, call 252-341-0917.

**Positive Image** – a support group for cancer patients focusing on mutual support and stress management that meets at 5:30 pm on the first and third Monday of each month at Jarvis United Methodist Church. For more information call 252-940-0994.
**Integrative therapies**
In addition to support groups, many of our Cancer Care programs offer or incorporate a variety of integrative therapies for individuals who have been diagnosed with cancer. These programs are designed to assist in the healing process. Integrative therapies focus on improving physical, emotional, social and spiritual well-being throughout one’s cancer journey.

**Art is Good Medicine**
This is a partnership between Cancer Care and Emerge Gallery and Art Center in uptown Greenville where professional artists who specialize in various mediums work with adult and pediatric cancer patients and survivors. Through creativity and expression inspired by the arts, patients and their caregivers can begin to cope with health challenges.

**Animal-assisted therapy**
Animals have an amazing ability to lift our spirits and help us heal during times of sickness. With cooperation from the Delta Society, Cancer Care is able to offer animal-assisted therapy to patients and their families on a weekly basis. This therapy allows patients and their families an opportunity to enjoy the unconditional love from a specially trained canine.

**Yoga**
Yoga is a philosophy and discipline that incorporates breathing, meditation and restorative body postures to create relaxation, build endurance and increase flexibility. This practice is not a religion, but can be utilized as a time for prayer, tranquility or to bring about greater awareness. Yoga has been seen by many as a tool to promote a greater sense of well-being.

**Healing Touch**
Healing Touch is a relaxing, nurturing energy therapy. Gentle touch assists in balancing your physical, mental, emotional and spiritual well-being. Healing Touch works with your energy field to support your natural ability to heal. It is safe for all ages and works in harmony with standard medical care.

**Massage therapy**
Massage involves the manipulation of muscles and soft tissues to enhance the functionality of the tissue and promote relaxation. Massage has the ability to decrease stress, anxiety, depression and pain. With the help of massage therapy volunteers, Cancer Care has been able to offer this treatment to cancer patients during their hospital stay.

**Reiki therapy**
Reiki is a Japanese energy-based therapy that promotes healing and wellness. In this therapy, the Reiki practitioner will place his or her hands above the patient’s body and transmit “life force energy” to the patient. Cancer Care is able to offer this unique treatment through the help of volunteers who are trained Reiki practitioners.

**Survivorship programs**
Cancer survivors are living longer with the physical, psychological and social effects of cancer and treatments, which can extend years beyond the end of their acute diagnosis. Cancer Services has survivorship programs that are designed to assist patients throughout their survivorship continuum and improve overall quality of life.

**Survivorship Celebration Days**
A quarterly event that promotes happiness and helps cancer survivors find the joy in life. This opportunity allows survivors throughout our region to connect with others who share similar experiences in a positive setting. Events offer encouragement, hope and empowerment that enables participants to be creative, adventurous and to just have fun. For more information, call 252-847-7943.

**Dove Retreat (formerly Camp Dove)**
As previously discussed, this is a coastal retreat for adult cancer survivors designed to promote emotional and physical healing. It incorporates a wide variety of integrative therapies and meaningful experiences to strengthen, encourage and refresh the mind, body and spirit.

**Nutrition programs**
Most cancer survivors want knowledge of how to stay healthy after diagnosis and treatment, and most importantly, ways to prevent the cancer from recurring. Eating a healthy, well-balanced diet is a key component to staying healthy. Nutritionists are available to work with cancer survivors as they develop new healthier eating patterns. There are also cooking classes available for cancer survivors and their families throughout the year. These programs provide survivors with the opportunity to learn about proper nutrition through the experience of preparing healthy meals.

**Survivorship 101: Exercise and Nutrition**
Recent research validates that exercise can improve one’s mood, combat chronic diseases, manage weight, boost energy and promote better sleep. Most cancer survivors are looking for ways to stay healthy following their diagnosis and treatments in an effort to increase stamina and prevent the recurrence of cancer. With this in mind, Cancer Care, in partnership with Vidant Wellness Center, created Survivorship 101: Exercise and Nutrition. This 12-week program gives survivors the opportunity to be a member of Vidant Wellness Center, receive 36 group personal training sessions, and attend two nutrition classes with a registered dietitian.
When Sherry Vernelson learned she had Stage 3 breast cancer, she stood up to it with gutsy determination.

CANCER REGISTRY

A cancer registry is a data system for the collection, management and analysis of data on persons with a cancer diagnosis. The Vidant Medical Center cancer registry accesses more than 2,000 cases annually. The eight Vidant Health hospitals combined accession is more than 3,500 cases annually. The top five sites diagnosed and treated at the medical center are breast, lung, colon, prostate and kidney/renal cancer.

Vidant Health transition

In 2014, the Vidant Medical Center Cancer Registry successfully transferred all Vidant Health hospitals’ cancer registry services under one roof. Cancer registry data from all these hospitals is now collected and reported from one registry. This streamlined reporting model aids in the efficient and quality of data collected and reported for Vidant Health.

The cancer registry team

The cancer registry team consists of a supervisor, an assistant supervisor and five data abstractors, including five Certified Tumor Registrars (CTR). Cancer registrars are highly specialized data management experts who are at the heart of a cancer program. They review, interpret and capture a complete summary of patient history, demographics, diagnosis, staging, treatment modality and follow-up information. They also provide a valuable service to the hospital and public health professionals in determining resource needs in the community for cancer prevention, diagnosis and treatment services in order to address the cancer burden in eastern North Carolina.

Cancer registrars provide a valuable service leading to better monitoring of trends, designing and evaluating programs and providing data for leading-edge research.

Data usage

Cancer registry data is used continuously throughout the year. In 2015, there were more than 50 data requests for research and outcome studies. These include county-based data, follow-up and annual case-load statistics. Hospital-specific case totals and other information were reported for Edgecombe, The Outer Banks and Beaufort hospitals. Treatment-related data requests, such as the number of patients who received radiation, and many breast cancer correlated study requests were fulfilled.

Information was analyzed and reported for The Brody School of Medicine National Accreditation Program for Breast Centers Survey. Cancer registry data is utilized to report standard compliance to the American College of Surgeons Commission on Cancer for accreditation purposes. The cancer registry reports annually to the National Cancer Data Base (NCDB) and quarterly to the N.C. Central Cancer Registry. Data reported to the NCDB is used in the Cancer Programs Cancer Profile Practice Profile Reporting tool in order to monitor the facilities’ compliance with national standard treatment guidelines of care.

Rapid Quality Reporting System (RQRS)

The Vidant Medical Center Accredited Cancer Program participates in the American College of Surgeons Commission on Cancer Rapid Quality Reporting System (RQRS). The objective of the RQRS is to promote and facilitate evidence-based cancer care at Commission on Cancer accredited cancer programs. The RQRS serves to assess compliance with four National Quality Forum-endorsed quality performance measures for breast and colon cancers and two surveillance measures for colon and rectal cancers in real clinical time. Participation in RQRS provides our cancer program with real clinical time alerts for individual cases in which pending adjuvant treatment has not been reported to the system. These alerts have been developed to provide a warning system for cancer programs to prevent patients from slipping through the cracks. The Vidant Accredited Cancer Program uses the RQRS alerts to help ensure the utmost quality of care is provided to patients.

Education

The Vidant Medical Center cancer registry serves as the eastern North Carolina host site for the North American Association of Central Cancer Registries webinar series. Each site-specific webinar is hosted once a month through the year. Each webinar is geared to educate cancer registrars on updates to abstracting, coding, treatment modalities and statistics.

When Sherry Vernelson learned she had Stage 3 breast cancer, she stood up to it with gutsy determination.
2014 leading cancer sites

<table>
<thead>
<tr>
<th></th>
<th>USA male</th>
<th>Vidant Medical Center male**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total new male cases</td>
<td>855,220</td>
<td>1,200</td>
</tr>
<tr>
<td>Prostate</td>
<td>27%</td>
<td>17%</td>
</tr>
<tr>
<td>Lung/bronchus</td>
<td>14%</td>
<td>22%</td>
</tr>
<tr>
<td>Colon/rectum</td>
<td>8%</td>
<td>8%</td>
</tr>
<tr>
<td>Bladder</td>
<td>7%</td>
<td>5%</td>
</tr>
<tr>
<td>Melanoma of skin</td>
<td>5%</td>
<td>3%</td>
</tr>
<tr>
<td>Kidney/renal pelvis</td>
<td>5%</td>
<td>5%</td>
</tr>
<tr>
<td>Non-Hodgkin lymphoma</td>
<td>4%</td>
<td>3%</td>
</tr>
<tr>
<td>Oral cavity and pharynx</td>
<td>4%</td>
<td>6%</td>
</tr>
<tr>
<td>Leukemia</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>Liver</td>
<td>3%</td>
<td>3%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>USA female</th>
<th>Vidant Medical Center female**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total new female cases</td>
<td>805,500</td>
<td>1,350</td>
</tr>
<tr>
<td>Breast</td>
<td>29%</td>
<td>37%</td>
</tr>
<tr>
<td>Lung/bronchus</td>
<td>14%</td>
<td>14%</td>
</tr>
<tr>
<td>Colon/rectum</td>
<td>9%</td>
<td>7%</td>
</tr>
<tr>
<td>Uterine corpus</td>
<td>6%</td>
<td>6%</td>
</tr>
<tr>
<td>Thyroid</td>
<td>6%</td>
<td>4%</td>
</tr>
<tr>
<td>Non-Hodgkin lymphoma</td>
<td>4%</td>
<td>2%</td>
</tr>
<tr>
<td>Melanoma of skin</td>
<td>4%</td>
<td>2%</td>
</tr>
<tr>
<td>Kidney/renal pelvis</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>Pancreas</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>Leukemia</td>
<td>3%</td>
<td>2%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>USA</th>
<th>Vidant Medical Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total males and females</td>
<td>1,665,540</td>
<td>2,550</td>
</tr>
</tbody>
</table>

*USA statistics were obtained from the American Cancer Society Cancer Facts & Figures 2014 publication

*Excludes basal and squamous cell skin cancers and in situ carcinoma except urinary bladder. (Leading Sites of New Cancer Cases -2014 Estimates)

**Vidant statistics were obtained from data collected by the Vidant Cancer Registry and reflects January – December 2014 cases.

*Excludes basal and squamous cell skin cancers and in situ carcinoma except urinary bladder.

---

**EVIDENCE-BASED STUDY**

Acute Lymphocytic Leukemia (ALL): A Statistical Data Comparison between SEER and VMC/LJCC

Authors – Darla Liles, MD; Katarzyna Rela, MSN, ANP-BC

Presented by – Darla Liles, MD

Purpose – To examine the data for the ALL (acute lymphoblastic leukemia) population seen at Vidant Medical Center and Leo W. Jenkins Cancer Center and compare results with SEER, the National Cancer Institute's surveillance, epidemiology and end results program, and the National Comprehensive Cancer Network (NCCN).

Source – Vidant Medical Center cancer registry (ALL 2010-2014) and SEER data (1992-2012)

Sample – We reviewed cases of ALL diagnosed at the medical center from 2010 to 2014 (5 years) Cases were compiled from the tumor registry. Both pediatric and adult cases were included in this review.

Method – We utilized the SEER data from 1992 to present and compare the data from the medical center and cancer center for the ALL population. Aspects such as number of new cases and deaths, age at diagnosis, race, ethnicity, gender, percent of new cases seen at the medical center and cancer center and survival rates were examined.

**Highlights over the course of the study**

The number of new cases since 2010 has risen from eight to 18.
- The number of deaths since 2010 has decreased from four to zero.
- 68.3 percent of the patients diagnosed with ALL are age 20 or younger.
- Non-hispanic males and females are more likely to be diagnosed with ALL.
- ALL represents 0.5 percent of cancer cases.
- Median age of death is 72.
- Median age at diagnosis is 10.
- The five-year survival rate is 81 percent.
- Prognostically, children and adolescents do better than adults.

**Summary and conclusions**

- Remain up-to-date on the latest ALL protocols and treatment guidelines.
- Treat with up-to-date protocols while using individualized treatment plans according to patient specific immunophenotype and cytogenetic subtype.
- Eliminate discrepancies of death between race and gender.
- Aim for 100 percent five-year survival rate.
- Look for protocols for elderly patients.
- Improve supportive care for elderly population.
- Optimize antibiotic prophylaxis and coverage.
New cancer center and bed tower to be completed by 2018
This new facility will serve as the hub of Vidant Cancer Care, a symbol of Vidant Health’s commitment to turning the tide against cancer throughout eastern North Carolina. This new facility, at a construction cost of more than $170 million, is being built adjacent to East Carolina Heart Institute at Vidant Medical Center, and will provide both inpatient and outpatient cancer services. It is designed to enhance the effectiveness and efficiency of care delivery and improve the patient experience. Features will include:

- 96 inpatient rooms
- A comprehensive breast care center
- Outdoor healing gardens for patients and staff
- 60 infusion areas with views of the outdoor healing gardens
- 60 multidisciplinary clinics and radiation treatment clinics
- Stereotactic radiosurgery technology for non-surgical tumor treatment
- Three linear accelerators providing radiation therapy
- Pharmacy
- Laboratory
- Resource room, including space for complementary therapies
- Image renewal boutique with wigs, scarves and accessories
- Conference space for cancer awareness and support programs

In addition, efforts are under way to place diagnostic and treatment facilities in communities in the region, staffed by mission-driven professionals who share our vision.
Cancer is the number one cause of death in eastern North Carolina. In our 29 counties of 1.4 million people, we have 15 percent higher mortality rates than the rest of North Carolina. An estimated 7,500 residents are diagnosed with cancer annually, and approximately 2,900 die from cancer each year. All of us either know someone who has cancer, or we have personally been affected by it.

At Vidant Health, we are embarking on a mission-critical journey to change this — to transform cancer care in our region. Vidant Health has the teams, technology and services that can save lives. To this end, we are moving forward in building a new state-of-the-art facility at the Vidant Medical Center campus in Greenville. It will serve as the hub of a regional network designed to bring cancer services closer to where people live. The plans are driven by this vision: to prevent the incidence of cancer whenever possible, diagnose the disease in its earliest stages and ensure every patient with cancer receives world-class care without having to leave the area.

We are proud to announce that more than $10 million has been committed to the campaign to help build this new facility and to provide the much-needed programs and services in Greenville and throughout the region. To further enhance coordination of care, Vidant Health provides a cancer care navigator at each of its hospitals. Navigators connect cancer patients to support and educational resources. In a typical month, the patient navigators have more than 800 patient interactions which help them physically adapt to their illness or help them cope with the emotional impact of a diagnosis.

The Cancer Care Campaign has a goal of $50 million. $40 million will help fund construction of Greenville facility and $10 million towards programs and services such as survivorship programs, complementary therapies and support groups that assist patients and their families.

This is an important moment for Vidant Health — and an important milestone in our ongoing journey to enhance the quality of life for the people and communities we serve, touch and support.
Vidant Medical Center is accredited by the American College of Surgeons Commission on Cancer.