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Vidant Medical Center is accredited by the American College of Surgeons Commission on Cancer.

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On the cover

Vidant Medical Center cancer care navigators, left to right: Janet Reimer, Judy Koutlas, Teresa Parent, Chelsea Passwater and Kimberly Gardner.
Message from the cancer committee

The Vidant Health/Vidant Medical Center (VMC) Cancer Care purpose is to be the premier, trusted, integrated cancer care delivery system in eastern North Carolina by developing a national model for rural healthcare that will reduce mortality and provide ready access to prevention, early intervention, and quality, coordinated patient care.

Here at VMC, the Cancer Committee continues to assure that high quality cancer care is in place to meet the needs of cancer patients in eastern North Carolina. 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 our service area.

Vidant’s commitment to building a new cancer center and bed tower supports this as well. The facility will enhance efficiency of care delivery and improve the patient experience. In addition, Vidant Cancer Care (VCC) at VMC will focus on improving care for the top five cancer sites, increasing clinical trial availability and accruals, reducing barriers to care through patient navigation, continuing to increase public awareness of cancer prevention, early detection and screening, and collaborating with regional Vidant community hospitals to ensure seamless, high quality care across the continuum.

2016 cancer committee

Brian Brodish, MD, liaison physician  
Karl Chiang, MD  
Larry Dobbs, MD  
Timothy Fitzgerald, MD, liaison physician  
Eleanor Harris, MD  
Heng Hong, MD  
George Hucks, MD  
Tae Juon Lee, MD  
Clinton Leinweber, MD  
Pamela Lepera, MD  
Darla Liles, MD  
Mahvish Muzaffar, MD  
Daniel Moore, MD  
Chris Thomas, MD  
Nasreen Vohra, MD  
Paul Walker, MD  
Andrew Weil, MD

Jan Wong, MD  
Emmanuel Zervos, MD, chair  
Merrill Bright, RHIA, CTR  
Paula Brinn, RN, BSN  
Leslie Corbett, RN  
Felicia Collins, RN, MSN, CRRN  
Johnna Cowin, FNP, BC  
Marilyn Davis, chaplain  
Phyllis DeAntonio, RN, MSN, FAAMA  
Vickie Downing, RN, MSN, OCN  
Ginger Edwards, BSBA  
Susan Eubanks, RN, MSN, OCN  
Leighann Henley, RN, BSN  
Todd Hickey, FACHE  
Jennifer Higgins, MSW, LCSW, OSW-C  
Nikki Hyatt, BSN, OCN  
Ken Jones, RN, OCN  
Rosalyn Jordan, RN, MSN, OCN  
Evelina Kolychev, PharmD, BCOP  
Judy Koutlas, RN, MS, OCN  
Suzanne Lea, PhD  
Debra Mascarenhas, RN, BSN, CBCN  
Vicki McLawhorn, DNP, RN, FNP-BC  
Allyson Meyer, MS, CGC  
Janet Moye, PhD, RN, NEA-BC  
Teresa Parent, RN, BSN, OCN  
Chelsea Passwater, RN, BSN, OCN  
Ashley Penland, RDN, LDN  
Janet Reimer, RN, BSN, OCN  
Barbara Rouse, community member  
Debra Taft, FNP-C, ADCNP  
Robbie Tilley, ACS  
Catherine Wallace, PharmD, BCOP  
Chris Wood, RT (R)(T) MBA
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. Ensure 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 VCC policies/procedures for chemotherapy prescription, consents, order sets and administration throughout the Vidant Health region by the end of 2016.

These goals were approved and later revised by the Cancer Committee in January/July 2016.

2016 Accomplishments

The following are some of the noteworthy accomplishments for 2016:

- Continued partnership between 3-West Inpatient Oncology and Vidant Wellness Center to have personal trainers work with patients twice a week for inpatient Survivorship 101 program.
- Welcomed new physicians and staff: Dr. Musharraf Navaid; Debra Taft, MSN, RN, FNP-C, APP for medical oncology; Chris Wood, RT (R)(T) MBA, senior administrator, Leo W. Jenkins Cancer Center; Dannie Miller, RTT; Erica Bullock, RTT; Sarah Glaney, RTT (PRN); Brandi Roberson, RTT (PRN).
- Congratulated the following staff on CTR certifications: Sierra Adams, Reshida Briggs and Miranda Edwards.
- Implemented survivorship care plans for additional cancer sites: gynecologic cancer and myeloma.
- Provided more than 559 hours of community benefit.
- Offered many new support services and complementary/alternative therapies to cancer patients and caregivers including A Night at the Movies, Kayaking for Health/Healing, Cancer Transitions and Fishing Away Your Troubles.
- Jenny Higgins, MSW, LCSW, OSW-C, selected to attend Meaning Centered Psychotherapy Training at Memorial Sloan Kettering.
- Marilyn Davis, staff chaplain, achieved Shambhala Meditation Training Levels I and II.
- Provided cancer awareness/prevention/screening information to more than 53,000 people. Information disseminated via radio broadcasts, educational displays and packets, presentations, health fairs and information sessions. Provided more than 400 people with cancer screenings (breast, lung, skin, head and neck).
- Offered professional educational programs for physicians, nurses, allied health professionals and registrars.
- The cancer registry responded to 156 data requests for research and outcome studies, including VMC, Vidant Edgecombe Hospital, The Outer Banks Hospital and Vidant Beaufort Hospital site-specific information and case totals. Other requests include NAPBC report, survivorship care plan data, eastern NC specific data comparisons and mortality projections, colorectal cancer stage 2 & 3 data for quality studies, stage 4 breast cancer patients receiving chemo quality study, and Chowan and Bertie counties lung cancer incidence with stage for low dose CT research.
- New cancer tower construction continues. Project is on schedule and under budget with completion expected in March 2018.
- Held 7th Annual Pancreatic Cancer Awareness Dinner with more than 100 in attendance.
- Held 10th Annual Lung Cancer Awareness Dinner with 400 attendees.
- Pink Power breast cancer awareness event held at the Greenville Convention Center with 1,000 in attendance.
- Up to 92 percent chemotherapy administered as an outpatient.
- Clinical trials volume increased to greater than 15 percent of new cases seen.
- The Lung Cancer Initiative of North Carolina awarded Dr. Sulochana Cherukuri a $25,000 research grant for “Aromatase Inhibitors in Metastatic Non-Small Cell Lung Cancer in Post-menopausal Women.”
- The Lung Cancer Initiative of North Carolina awarded Dr. Meena Yogarajah a $25,000 research grant and the Lung Multidisciplinary Team a $10,000 grant for “Low-Dose CT Screening Initiative.”
- Dr. Nasreen Vohra was awarded a Susan G. Komen grant for $50,000 for bridging the gaps in breast cancer treatment.
- Completed 3-year reaccreditation survey by CoC.
- 39 user group meetings in place for the new tower to ensure occupancy by March 2018.
- Began five governance committees for VCC, including clinical integration, quality, operations and finance, facilities and technologies, and community and provider relations.
- Received grant from the 1 in 9 Foundation for assistance for women undergoing breast cancer treatment. 1st year – $10,000.
- Received a grant from the Women for Women Foundation for our Survivorship 101 program; total $1,380.
- Leo W. Jenkins Cancer Center was awarded the official designation as a Hospital Center of Excellence by the Addario Lung Cancer Foundation.
Clinical services

Inpatient Medical Oncology
Our medical oncology unit, 3-West Oncology, provides 36 beds with the ability to serve from general level up to intermediate level patients. This helps ensure that 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 patients and survivors with diagnoses including, but not limited to, leukemia, lymphoma, breast cancer, lung cancer, colon cancer, prostate cancer, esophageal cancer 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, a supply clerk, nurse practitioners, nurse case managers, social work case managers, recreational therapists, pharmacists, dietitians, professional development coordinator, an education nurse specialist and a clinical nurse specialist. 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 that promote 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 board. The chapter presents educational dinners and supports oncology nursing education. Focus continues on increasing our number of Oncology Certified Nurses (OCN) with several nurses earning their certifications and several nurses preparing for examination, 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.

Nursing recognition
- Phyllis DeAntonio, system service line administrator for VCC, and Judy Koutlas, navigation coordinator, in partnership with ECU faculty members, Essie Torres and Alice Richmond, served as co-investigators in a Merck-funded study entitled “A Randomized Longitudinal Intervention Study to Assess the Efficacy and Feasibility of Telehealth Based Strategies to Increase Oral Chemotherapeutic Agent Medication Adherence and Health Literacy among Cancer Patients in Rural Eastern NC.”
- Vicki McLawhorn, DNP, inpatient unit NP, had a poster presentation at the ONS Congress focused on prognostic awareness.
- Judy Koutlas presented at ONS Congress on navigation data collection and the EHR integration.
- Debra Mascarenhas, cancer care navigator, breast cancer, presented a poster at the AONN conference on overcoming barriers to lymphedema education and treatment for breast cancer patients in rural eastern NC.
- Phyllis DeAntonio earned the 2017 ONS Linda Arenth Excellence in Cancer Nursing Management Award, a national achievement.
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 optimize 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. Physicians 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 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 their normal life routines as much as possible. The center provides the best of both worlds by providing an outpatient service located within a major medical center.

1-East is currently a 34-bed/chair infusion center and treats 60-70 patients daily from across eastern NC. Currently, 1-East has six private rooms and 28 infusion chairs. 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 per week, and a resource room for patients and families. Shuttle and valet services are available to all patients to assist with transportation to and from the parking areas. There is an onsite pharmacy to provide safe and timely access to chemotherapy, decreasing patient wait times and increasing patient satisfaction. Patient/family advisory groups are involved to give their input on support and survivorship, TVs, meal trays, iPads and art therapy.

The 1-East staff of nurses, care partners and unit secretary work closely with all referring providers. Nurses are chemotherapy certified with an average of 20 years of 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.

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**Sabrina Oleskey, BSN, OCN, Daisy Award recipient**

Sabrina Oleskey, BSN, OCN, is a Daisy Award recipient. This award is a national recognition. “The DAISY Award for Extraordinary Nurses (The DAISY Award) is awarded to honor the super-human work nurses do for patients and families every day,” Oleskey exemplifies the compassion and caring our oncology nurses exhibit on a daily basis. Laura Schandert, BSN, OCN, has also been selected to serve as a Vidant Health ambassador promoting the professional excellence and the caring of the nursing staff.

A healing environment is necessary to achieve the best patient outcomes. Promoting this on the medical oncology unit has been a joint project between 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, and other amenities are in place. Quiet times are observed on the unit to enhance the healing environment. Vidant Wellness trainers continue to visit the medical oncology unit to assist patients in staying as active as possible by using exercise equipment on the unit. Several of these patients have subsequently signed up for Survivor 101 classes at the 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, is capable of providing general, general monitored and intermediate levels of care. We provide a seamless transition from surgical oncology care to medical oncology treatment. Patient care is provided for the following surgical procedures: gastrointestinal, genitourinary, head/neck and gynecology. Our surgical oncology team includes physicians, advance practice practitioners, nurses, a nurse case manager, a social worker case manager, a dietitian, a pharmacist, a physical/occupational therapist and care partners. The surgical staff utilizes a team approach with preoperative and postoperative care. This collaborative approach provides patients and their families with the knowledge and skills necessary for transitioning to independence and recovery in their home environment.
Early detection, screening, treatment and technology. Multidisciplinary care at its best.

In North Carolina, 22 people are diagnosed with lung cancer every day. It claims more lives yearly than breast, colon, prostate and kidney cancer combined. But VCC and the thoracic oncology team at Leo W. Jenkins Cancer Center (LWJCC) are on a mission to raise awareness and make a difference for those facing the disease.

On Nov. 15, 2016, VCC hosted the 10th Annual Lung Cancer Awareness Dinner at Rock Springs Center. The message of Changing the Face of Lung Cancer was shared with almost 400 guests. Dr. Paul Walker and Dr. Mark Bowling shared information about lung cancer and the work of the thoracic oncology program at LWJCC. Keynote speaker Chris Draft, retired NFL player, inspired the audience with the story of losing his young wife to lung cancer and charged the audience to help change the face of lung cancer across the nation.

Vidant Health locations throughout the region are offering low-dose computed tomography (CT) as an early screening tool for lung cancer. When detected early, lung cancer is easier to treat and has a higher survival rate. In eastern North Carolina, we’re detecting lung cancer at a rate far higher than the national average. For this reason, we’re working hard to reach every person who qualifies for screening. Since November 2014 when screening began, we have scanned approximately 594 patients and identified 22 cancers throughout the region. The early identification of these cancers, before symptoms occur, allows for earlier intervention and improved outcomes for each patient.

Individuals at high risk for developing lung cancer can participate in the lung cancer screening program if they meet certain eligibility criteria. Low-dose CT is one of the easiest screening exams you can have, with no medications or needles, and taking less than 10 minutes.

This year, VMC was honored to receive an access grant from the Lung Cancer Initiative of North Carolina. This grant will help to provide screening for individuals in the area who are uninsured or underinsured, and might not otherwise be able to be screened for lung cancer due to cost.

In addition to earlier detection of lung cancer, VMC became the first hospital in the world to use a new FDA-approved lung biopsy device, the CrossCountry™ that helps patients get earlier diagnoses and undergo fewer invasive procedures. The use of Electromagnetic Navigation Bronchoscopy (ENB) helps guide biopsy tools, allowing for access to difficult-to-reach areas of the lung, leading to more timely diagnosis and treatment of lung cancer. VMC is committed to ensuring that the people of eastern North Carolina have access to advanced options in cancer care.

Leo W. Jenkins Cancer Center, a joint venture of VMC and the Brody School of Medicine at East Carolina University, has been named a Center of Excellence for thoracic oncology. We’re one of only 13 in the United States to achieve this level of recognition from the Bonnie J. Addario Lung Cancer Foundation. This award recognizes hospitals and cancer centers for their individualized care and treatment of lung cancer patients.
Clinical trials

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 at LWJCC and in all areas of VMC. 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 Cancer Network Clinical Trials (UNCCN) and we are able to offer some of their investigator-initiated studies to patients here in eastern North Carolina. 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. The year 2016 has been one of the best years in recent history for our program with a marked increase in the number of clinical trials available to our patients as well as an increase in accrual to clinical trials. The following summarizes accrual information for calendar year 2016.

Clinical trials
January 1 – December 15, 2016

<table>
<thead>
<tr>
<th>Category</th>
<th>Adult</th>
<th>Pediatric</th>
<th>Total accrued</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevention trials</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Screening trials</td>
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<tr>
<td>Treatment trials</td>
<td>313</td>
<td>56</td>
<td>369</td>
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<tr>
<td>Quality of life trials</td>
<td>20</td>
<td>0</td>
<td>20</td>
</tr>
<tr>
<td>Other</td>
<td>139</td>
<td>13</td>
<td>152</td>
</tr>
<tr>
<td><strong>Total adult patients accrued</strong></td>
<td><strong>486</strong></td>
<td><strong>69</strong></td>
<td><strong>555</strong></td>
</tr>
</tbody>
</table>

Cancer care navigation

Being diagnosed with cancer is overwhelming for the individual as well as for their family and loved ones. Our cancer care navigators help cancer patients and their caregivers find answers and feel supported. Every cancer patient receiving care through a Vidant Health facility has access to one of our experienced navigators to guide them through the healthcare system, identify local and national resources, and provide education about the many aspects of cancer and its treatment. In 2016, approximately 1,400 newly diagnosed cancer patients received navigation services in our 29 counties served in eastern North Carolina. Our team provided more than 8,500 encounter visits which included identifying barriers to care and providing appropriate interventions and referrals.

The VMC cancer care 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 350 patients. Our regional collaboration provides for seamless, timely access to quality cancer care across the health care system for every cancer patient. This year, fifteen of the navigators working throughout the east met at Marion L. Shepard Cancer Center to discuss communication and data collection improvements. Standardizing navigation core competencies across the health care system was implemented.

Navigators provided 480 referrals to local and national assistance programs for medical and living expenses related to cancer treatment. Through efforts of the breast cancer navigator, grant funds were received from the 1 in 9 Foundation to assist breast and gynecologic cancer patients with financial assistance. The navigators referred 350 patients to supportive care service members including dietitians, financial counselors, social workers, genetic counselors, as well as many others who assist throughout the health care continuum. The navigators actively facilitate Caring Conversations and Making It support groups that meet monthly as well as a quarterly multiple myeloma support group. Navigators participate routinely in survivorship programs including annual community events for breast, lung and pancreatic cancer awareness. Our team members are expert speakers and provide education at numerous community events for early detection, screening and prevention programs.

We also began a pilot project involving a lay model of navigation. The patient navigator will provide volunteer, nonprofessional one-on-one assistance to patients, guiding them through the health care system to ensure timely screening, diagnosis, treatment and/or post treatment cancer care and supportive services. They will collaborate with the cancer care navigators to appropriately assess and address the needs of the patients served.
An abstract entitled, Integration of Data into the Electronic Health Record EPIC: A Comprehensive Approach to Improving Navigation Outcomes and Reporting was chosen as a podium presentation at the annual ONS Nursing Society meeting in San Antonio, Texas. This work was also accepted and presented as a poster at the 25th Annual Collaborative Research Day at East Carolina Heart Institute at ECU. Additionally, an abstract was accepted for poster presentation at the 7th Annual Academy of Oncology Nurse and Patient Navigator meeting entitled, Overcoming Barriers to Lymphedema Education and Treatment for Breast Cancer Patients in Rural Eastern North Carolina.

Cancer care navigators

<table>
<thead>
<tr>
<th>Navigator/area of specialty</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Judy Koutlas, RN, MS, OCN, coordinator</td>
<td>252-814-3580</td>
</tr>
<tr>
<td>Kimberly Gardner RN, BSN, OCN Gastrointestinal cancers</td>
<td>252-717-1931</td>
</tr>
<tr>
<td>Ken Jones, RN Brain cancer</td>
<td>252-847-2611</td>
</tr>
<tr>
<td>Debra Mascarenhas, RN, BSN, CBCN Breast cancers</td>
<td>252-341-0917</td>
</tr>
<tr>
<td>Teresa Parent, RN, BSN, OCN Lung and esophageal cancers</td>
<td>252-341-0834</td>
</tr>
<tr>
<td>Chelsea Passwater, RN, BSN, OCN Hematologic malignancies</td>
<td>252-531-2680</td>
</tr>
<tr>
<td>Janet Reimer, RN, BSN, OCN Head and neck cancers; genitourinary cancers</td>
<td>252-341-3688</td>
</tr>
</tbody>
</table>

Survivorship care plans

According to the American Cancer Society, approximately 13.7 million Americans are alive with a history of a cancer diagnosis, and this number is expected to grow to 18 million by 2022. Cancer survivorship begins on the day of diagnosis. A Survivorship Care Plan (SCP) is a document that summarizes all the active cancer treatment received including surgery, chemotherapy and radiation. It provides recommendations for follow-up care, management of potential late side effects, and referrals to support services needed going forward pertinent to the survivor’s care.

Vidant Cancer Care has developed care plan documents for all the top cancer sites including: breast, lung, colorectal, lymphoma, myeloma, head/neck, pancreatic and prostate. Survivorship visits are scheduled with a health care provider within 3-6 months after all active treatment is completed. The NCCN distress tool is used to assess the patient’s distress level, and appropriate referrals/interventions are made at the time of visit. More than 200 cancer survivors were provided an SCP in 2016, which addressed their personalized post-treatment needs and provided information on follow-up care to improve health and quality of life. A copy of the SCP, along with other written information, is provided to the survivor at the visit and sent to the primary care physician to improve communication and collaboration between the health care teams.

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 our multidisciplinary team to identify patients with acute distress and connect them to appropriate resources and/or referral sources to support their psychosocial needs. Of our patients, 20 percent reported a distress level of 6 or greater.

VMC continues to incorporate this standard into daily cancer care. The Accreditation Committee, a sub-committee, pilot programs and a detailed policy have helped to identify an approach to best practice. The distress screening process, like at other comprehensive cancer centers, is implemented in an outpatient setting to best assess patients’ psychosocial needs.
Gamma Knife® Center

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
- Arteriovenous malformations (AVMs) and cavernous malformations

**Outcomes**

- Patient satisfaction surveys in the mid-90 percentile
- Treated metastatic brain tumors, the No. 1 indicator for Gamma Knife
- Excellent success at achieving local control of disease in these patients
- Superb outcomes for control of tumor size in patients with benign tumors such as meningioma and acoustic schwannoma
- AVM cases increased by 369 percent, from 3 to 11 cases, due to dedicated endovascular neurosurgery
- Brain metastases increased by 10 percent, from 70 to 77 cases
- Increased awareness of Gamma Knife treatment among referring physicians due to efforts by VH Strategic Development Department

**Gamma Knife cases FY 2015-2016**

![Gamma Knife cases chart]

**VMC community benefit**

Community benefit is designed to promote the health of a population broad enough to assist the community as a whole. VMC 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.

VMC’s mission statement is “to improve the health and well-being of eastern North Carolina.” These words have deep significance and provide a framework for service to community. VCC takes a proactive approach to healthcare through its involvement in various community service events. During the past year, we provided 559.25 hours of community services.

Community benefit activities include support group meetings, cancer screenings, awareness presentations, resource fairs/clinics, health symposiums, complementary therapies, survivorship programs and dinner-and-learn health information sessions. This information is detailed in various sections of our report. For our staff, the ultimate reward comes from the participants’ expressions of appreciation for the services and information they received.
Accreditation standards
Vidant Cancer Care is accredited by the American College of Surgeons Commission on Cancer. The commission has defined the following standards for our outreach team to follow and exceed:

**Standard 4.1 prevention programs**
Each calendar year, the cancer committee organizes and offers at least one cancer prevention program designed to reduce the incidence of a specific cancer type and targeted to meet the prevention needs of the community. Each prevention program is consistent with evidence-based national guidelines for cancer prevention.

**Standard 4.2 screening programs**
Each calendar year, the cancer committee organizes and offers at least one cancer screening program that is designed to decrease the number of patients with late-stage disease and is targeted to meet the screening needs of the community. Each screening program is consistent with evidence-based national guidelines and interventions and must have a formal process developed to follow up on all positive findings.

## Awareness and prevention
According to North Carolina Central Cancer Registry, cancer has been the leading cause of death in North Carolina since 2009. It is estimated, however, that approximately one third of the most common cancers in the United States could be prevented by a healthy diet, physical activity and weight management.

Colorectal cancer causes approximately 1,500 deaths each year in North Carolina. Though it is one of the most preventable cancers, only 68 percent of North Carolinians are up-to-date with the recommended colorectal cancer screening. As part of the 80 percent by 2018 initiative, groups around the nation are working toward the same goal of seeing 80 percent of eligible adults be regularly screened for colorectal cancer by the year 2018. VCC has pledged to work toward increasing colorectal cancer screening rates in the Vidant Health service area.

Recognizing the low screening rate among our own 12,000 employees, we have put systems in place to increase screening rates here, so that as a health system, we can be an example to our community. As we work on the prevention and early detection of our own employees, we are also starting to reach out to the public, spreading the word about the importance of colorectal cancer screening.

Skin cancer is by far the most common type of cancer. One specific type of skin cancer, melanoma, is responsible for approximately 75 percent of all skin cancer deaths in North Carolina. These numbers can be prevented by avoiding indoor tanning beds, using sunscreen and limiting sun exposure. This year, VCC provided education on skin cancer prevention to almost 1,000 individuals, including kids in summer camps, college students and senior adults.

## Fiscal year 2016 outreach events
January – November 2016

<table>
<thead>
<tr>
<th>Targeted Cancer</th>
<th>Awareness and prevention events</th>
<th>Attendance</th>
<th>Broadcast and media awareness events</th>
<th>Audience number</th>
<th>Screenings</th>
<th>Attendance</th>
<th>Number of positive results</th>
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<tbody>
<tr>
<td>General cancer</td>
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<td>Breast</td>
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<tr>
<td>Cervical</td>
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<td>168</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Colorectal</td>
<td>12</td>
<td>1,732</td>
<td>4</td>
<td>41,000</td>
<td>11+</td>
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<tr>
<td>Head and Neck</td>
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<td></td>
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<td></td>
<td>1</td>
<td>46</td>
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<tr>
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<td>60</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Liver</td>
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<td>15</td>
<td></td>
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<td>Lung</td>
<td>7</td>
<td>785</td>
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<td></td>
<td>Ongoing</td>
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<td>9</td>
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<tr>
<td>Ovarian</td>
<td>1</td>
<td>35</td>
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<td>Prostate</td>
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<td>199</td>
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<tr>
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<td>8</td>
<td>148</td>
<td></td>
<td></td>
<td>2</td>
<td>51</td>
<td>9</td>
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<td>Total</td>
<td>57</td>
<td>12,007</td>
<td>4</td>
<td>41,000</td>
<td>11+</td>
<td>400</td>
<td>19</td>
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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 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 tobacco cessation in this area.

VMC hosted its annual Pink Power dinner event on October 18, with almost 1,000 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 power against breast cancer. The evening’s message stressed the importance of knowledge, support and early detection. Lynette Taylor, WITN-TV news anchor, served as the mistress of ceremonies. Phyllis DeAntonio introduced VCC and discussed our programs and services. Dr. Bruce Schroeder (Carolina Breast Imaging Specialists) and Dr. Nasreen Vohra (LWJCC) gave a presentation entitled What you need to know about breast cancer. Our keynote speaker, Rev. Susan Sparks, a breast cancer survivor, lawyer, comedian and preacher, shared how we can find grace and healing through humor.

On a national level, Vidant Health participated this year in the Cancer Moonshot Initiative led by Vice President Joe Biden. We hosted one of approximately 300 events held nationwide, marking the first time that individuals and organizations spanning the entire cancer community and beyond convened under the national charge of doubling the rate of progress toward a cure and accelerating advances in cancer prevention, diagnosis and treatment. Vidant Health gathered more than 100 physicians, nurses, patients, advocates, administrators and researchers to begin the discussion. After the summit, a report was sent back to the White House, highlighting cancer care at Vidant Health and offering ideas for advances in cancer.

Knowing the numbers of cancer cases that could potentially be prevented provides VCC with a great challenge. However, it is also empowering to know that the right education could possibly lower the number of deaths from cancer in our area. To help offset the task of prevention education and awareness, we continue to partner 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 informative events.

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Vidant Health’s Pink Power Tour is a series of fun, informative breast cancer events designed to share information and give women power against breast cancer. Rev. Susan Sparks, a trial lawyer turned stand-up comedian and Baptist minister, was this year’s featured speaker.
Screenings
For our screening programs, VCC follows evidence-based guidelines, such as American Cancer Society, United States Preventative Services Task Force and National Comprehensive Cancer Network. 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 breast cancer, The Pitt County Breast Wellness Initiative has screened 154 women in 2016 through a grant provided by the Susan G. Komen North Carolina Triangle to Coast Affiliate. The project is led by Dr. Kathryn Verbanac, a scientist and professor of surgery at the medical school, and Dr. Ann Schreier, a nursing professor at the ECU College of Nursing.

In the summer, VCC partnered with ECU Dermatology to provide a skin cancer screening for the community. It was free of charge and located at LWJCC. The screening was conducted as part of the “Spot Me” program, using guidelines and intervention recommendations from the American Academy of Dermatology. Each participant also received education on skin self-examination and take-home materials. Of the 60 community members screened, 17 people were advised to follow up with a dermatologist, nine of whom required biopsy. At least two cancers were identified. Follow up calls were made by the outreach coordinator to each individual in need of further treatment or assessment to ensure timely intervention.

Specifically in lung cancer, early diagnosis and treatment is critical due to the poor prognosis at advanced stages of the disease. The lung cancer screening is an early detection method that was initiated by ECU and VMC to decrease lung cancer mortality in eastern North Carolina using guidelines from the National Comprehensive Cancer Network. In the first 11 months of 2016, 134 patients were screened with nine cancers identified. Through the use of low dose CT scanning at VMC/ECU, lung cancer is being diagnosed before symptoms occur, leading to better outcomes for the patient.

Support services
VCC is proud to report to eastern North Carolina communities the extensive growth and expansion in our support services to cancer survivors and their caregivers. Over the last year there have been a wide variety of new programs, services and events that have been well received and valued by participants. Our innovative approach to biopsychosocial-spiritual healing has made a considerable impact on the overall well-being of those we serve. Some of our most notable services throughout 2016 are reviewed below.

Support Groupers (A chartered deep-sea fishing excursion)
This energizing experience collectively captivated the attention of 52 survivors and caregivers from eastern North Carolina. Participants were given the opportunity to engage in an enjoyable fishing trip where laughter, stories and the thrill of adventure allowed them to leave behind their troubles and take part in an experience of a lifetime. Participants bonded over their catch of the day and thrived on cheerful interactions during this positive and meaningful event.

One cancer survivor said, “Today was the first day in months that I have not thought about my cancer, and I feel that this event is just another form of therapy.” Many others also offered comments of appreciation, gratitude and the desire to attend the event in 2017.

Staff mutually felt honored to observe participants’ smiles and the happiness that permeated throughout the trip. A staff member shared that she “enjoyed hearing the peoples’ laughter and witnessing their enjoyment.” We thank our participants, staff and Captain Stacy and his crew for providing exceptional expertise and guidance in deep sea fishing.

More than 50 survivors and their caregivers enjoyed a full day of fishing off the coast of Morehead City, NC.
The Dove Retreat
The Dove Retreat, formerly known as Camp Dove, is scheduled to be held August 25-27, 2017 at the Trinity Center in Salter Path. Cancer survivors attending the retreat reap the following benefits:

- Education about your health
- Decreased stress
- Improved quality of life
- Peace and comfort in serene outdoor setting
- Supportive fellowship
- Restorative physical activity
- Support for coping

There have been new developments in programming to enhance the therapeutic experience and opportunities for restoring the mind, body and spirit. Services include an art activity, yoga at sunrise, Tai Chi, individual massage, guided imagery walk on the beach, exercise programming, a celebration and so much more. Cancer survivors are invited for a relaxing and revitalizing take on life. For more information, call 252-847-7943.

Support groups
Support and Survivorship understands the need for support pertaining to various facets of an individual's experience throughout the continuum of the cancer journey. We genuinely strive to provide current programs of quality as well as 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.

Healing with Horses
VCC, in partnership with Rocking Horse Ranch, offers a 10- and 12-week therapeutic equine-assisted program designed for adult cancer survivors. This therapy encourages the development of positive coping skills that can be applied to the daily stressors of having cancer though interactions and activities with horses. After each session, participants meet with a licensed and certified clinical oncology social worker and horse trainer to share experiences and support one another. For more information, call 252-847-7943.

Caring Conversations
Together members learn more about the various aspects of what it means to have cancer, managing their care and receiving support in an interactive setting. This group is open to all cancer survivors and their family members or caregivers. They meet on the second Tuesday of each month from 5:00 pm to 6:30 pm at the Hope Lodge. For more information, call 252-847-9738.

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 252-847-8405.

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 Hope Lodge conference room. For more information, call 252-847-6550.

Connecting Caregivers
This support group allows caregivers the opportunity to explore shared experiences and concerns that are unique to caring for someone who is chronically or terminally ill. Together we cope through caregiving effectively through supportive discussion, therapeutic activities and the use of positive coping strategies. For more information, call 252-847-7943.

Cancer Transitions
Four inspiring sessions will help cancer survivors adjust to life after treatment. Get hands-on experience pertaining to the benefits of exercise, nutrition, emotional well-being, medical care and awareness. Together we'll strive to support one another in our efforts to nurture futures in health and happiness. For more information, call 252-847-7943.

Thriving and Surviving: A Support Group for Young Adults
The needs of young adults vary from other populations. This group is designed to focus on specific matters pertaining to cancer in early adulthood. Some topics that most young adults have in common include intimate and social relationships, managing a career and education, appearance, physical limitations and other shared experiences. For more information, call 252-847-7943.

Integrative therapies
In addition to support groups, many of our VCC 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. For information, call 252-847-7943.

Art is Good Medicine
This is a partnership between VCC and Emerge Gallery and Art Center where professional artists who specialize in various mediums work with adult and pediatric cancer patients and survivors. Through the arts, patients and their caregivers can begin to cope through creativity and expression.
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, VCC is able to offer this therapy to patients and their families on a weekly basis. It 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, however 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.

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

Mindful Meditation
A useful mental exercise to clear and calm the mind. This relaxing action is a helpful tool to decrease anxiety. Meditation can help us redirect our negative thinking process so one can focus.

Music therapy
A partnership with ECU School of Music, this program invites both inpatient and outpatient cancer survivors to enjoy the therapeutic benefits of a wide variety of techniques and instruments used to promote wellness through music.

Spiritual care
VCC recognizes the importance of spirituality and has a designated chaplain who specializes in providing spiritual support to our oncology community. The chaplain takes great pride in being attentive to the spirits of those who have been touched by cancer. Patients, families, caregivers and staff benefit from uplifting services such as prayer, meditation, attentive listening, bereavement support, emotional healing, consoling and numerous denominational or religious services.

Additional 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. We offer survivorship programs designed to assist patients throughout their survivorship continuum and improve overall quality of life.

Survivorship Celebration Days
These monthly regional events promote happiness and help cancer survivors find the joy in living. This opportunity allows survivors throughout the east to connect with others who share similar experiences in a positive setting. Events offer encouragement, hope and empowerment that inspires participants to be creative, adventurous and to just have fun. For more information call 252-847-7943.

Highlights of 2016
• Kicking Cancer with Cuisine
• Painting for Positivity
• Healthy Harvesting
• Kayaking for Life
• National Cancer Survivors Day
• A Night at the Movies
• Support Groupers
• Zen Gardening
• Courage to Canvas
**Nutrition programs**
Most cancer survivors want to know 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 can validate 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 treatment in an effort to increase stamina and prevent the recurrence of cancer. With this in mind, VCC continues to partner with Vidant Wellness Center for Survivorship 101: Exercise and Nutrition. This 12-week program gives survivors the opportunity to be a member of the wellness center, receive 36 group personal training sessions and attend two nutrition classes with a registered dietitian.

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

**Cancer Registry Team**
The registry team consists of a supervisor, assistant supervisor and four oncology data abstractors, all of which are Certified Tumor Registrars (CTR’s), and one follow-up analyst. 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 needs in the community for resources 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. Data for these studies include county-based data, follow-up and annual case load statistics. Hospital-specific case totals and other information were reported for Vidant Edgecombe, Outer Banks and Vidant Beaufort hospitals. Treatment related data requests such as the number of patients that received radiation and many breast cancer correlated study requests were fulfilled.

Information was analyzed and reported for the medical school’s National Accreditation Program for Breast Centers Survey. Cancer registry data is utilized to report standard compliance with the American College of Surgeons Commission on Cancer for accreditation purposes. The cancer registry reports annually the National Cancer Data Base (NCDB) and quarterly to the North Carolina Central Cancer Registry. Data reported to the NCDB is used in the Cancer Program Practice Profile Report tool to monitor compliance with national standard treatment guidelines of care.

**Rapid Quality Reporting System (RQRS)**
The VMC participates in the American College of Surgeons Commission on Cancer Rapid Quality Reporting System (RQRS). The objective is to promote and facilitate evidence-based cancer care at CoC-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.” We use the RQRS alerts to help ensure the utmost quality of care is provided to patients.

**Cancer Program Practice Profile Reports (CP³R)**
These reports are a quality reporting tool and are available each year for American College of Surgeons Commission on Cancer (ACoS CoC) Accredited Cancer Programs. These reports are comprised of Accountability Measures, Quality Improvement Measures and measures that are currently deemed “not applicable” but may be in the future based on NCDB surveillance. There are three accountability measures for breast cancer, six quality improvement measures for breast, colon, gastric, lung and rectal cancers, and 11 not-applicable measures for bladder, breast, cervical, colon, endometrial, lung and ovarian cancer.

The CP³R are reviewed and studied each year by the Cancer Committee. When a cancer program does not meet the expected estimated performance rate set by the ACoS CoC an action plan is created to identify the cause of failing to meet the national standard of care derived from evidence-based data and how the cancer program can improve processes to raise the performance percentage for the program.
VMC is excelling in five of the nine accountability and quality improvement measures, but areas for improvement include:

- Removing and pathologically examining 12 lymph nodes for resected colon cancer and 15 lymph nodes for resected gastric cancer
- Administering radiation therapy within one year after mastectomy for breast cancer patients
- Administering chemotherapy within 4 months to day pre-operatively or day of surgery to 6 months postoperatively, or it is recommended for surgically resected cases with pathologic lymph node-positive (pN1) and (pN2) non-small cell lung cancer patients (This line is still confusing to me.)

Striving to meet and exceed the performance rates established by the CoC is a priority for us. These measures promote improvements in the delivery of care.

**Education**

The VMC 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, year round. The purpose is to educate cancer registrars on updates to abstracting, coding, treatment modalities and statistics.

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**2015 leading cancer sites**

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<tr>
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<th>USA male*</th>
<th>Vidant Medical Center male**</th>
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<td>Total new male cases</td>
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<tr>
<td>Prostate</td>
<td>26%</td>
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<tr>
<td>Lung/bronchus</td>
<td>14%</td>
<td>19%</td>
</tr>
<tr>
<td>Colon/rectum</td>
<td>8%</td>
<td>10%</td>
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<tr>
<td>Bladder</td>
<td>7%</td>
<td>4%</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>4%</td>
</tr>
<tr>
<td>Non-Hodgkin lymphoma</td>
<td>5%</td>
<td>6%</td>
</tr>
<tr>
<td>Oral cavity and pharynx</td>
<td>4%</td>
<td>5%</td>
</tr>
<tr>
<td>Leukemia</td>
<td>4%</td>
<td>3%</td>
</tr>
<tr>
<td>Liver</td>
<td>3%</td>
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<tr>
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<th>USA female*</th>
<th>Vidant Medical Center female**</th>
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<tr>
<td>Total new female cases</td>
<td>810,170</td>
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<tr>
<td>Breast</td>
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<td>33%</td>
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<tr>
<td>Lung/bronchus</td>
<td>14%</td>
<td>14%</td>
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<tr>
<td>Colon/rectum</td>
<td>9%</td>
<td>7%</td>
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<tr>
<td>Uterine corpus</td>
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<td>7%</td>
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<tr>
<td>Thyroid</td>
<td>6%</td>
<td>4%</td>
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<tr>
<td>Non-Hodgkin lymphoma</td>
<td>4%</td>
<td>3%</td>
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<tr>
<td>Melanoma of skin</td>
<td>4%</td>
<td>2%</td>
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<tr>
<td>Pancreas</td>
<td>3%</td>
<td>3%</td>
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<tr>
<td>Leukemia</td>
<td>3%</td>
<td>2%</td>
</tr>
<tr>
<td>Kidney/renal pelvis</td>
<td>3%</td>
<td>3%</td>
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<table>
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<tr>
<th>Total males and females</th>
<th>USA</th>
<th>Vidant Medical Center</th>
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<tbody>
<tr>
<td>1,665,540</td>
<td>2,639</td>
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*USA statistics were obtained from the American Cancer Society Cancer Facts & Figures 2015 publication

*Excludes basal and squamous cell skin cancers and insitu carcinoma except urinary bladder. (Leading Sites of New Cancer Cases -2015 Estimates)

**Vidant statistics were obtained from data collected by the Vidant Cancer Registry and reflects January – December 2015 cases.

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

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Left to right: Sierra Adams, Miranda Edwards and Reshida Briggs earned certification as tumor registrars (CTRs) in 2016.
Effects of Health Literacy on Adherence to Oral Medications

Authors
Phyllis DeAntonio, RN, MSN, FAAMA, Vidant Cancer Care system service line administrator, Vidant Health
Judy Koutlas, RN, MS, OCN, Vidant cancer care navigation coordinator, Vidant Health
Alice R. Richman, PhD, MPH, associate professor, Department of Health Education and Promotion, ECU College of Health and Human Performance
Essie Torres, PhD, MPH, associate professor, Department of Health Education and Promotion, ECU College of Health and Human Performance

Presented by
Phyllis DeAntonio and Judy Koutlas

Purpose
To conduct a baseline study for medication adherence rates and health literacy among a sample of cancer patients.

Sample
Patients age 18 or older being treated at LWJCC and taking at least one chemotherapy pill by mouth one time per day. A total of 26 patients completed the surveys and tests.

Method
Survey questions were included from the Morisky Medication Assistance Scale-9 (MMAS), ASK12, and Realm-Revised. A variety of demographic data was collected including race, gender, household income, ethnicity, highest grade completed and type of health insurance. Patients with two or more incorrect answers on the REALM-R word list should be considered at risk for poor health literacy. The MMAS contained yes/no questions and participant responses included more ‘no’ than ‘yes.’

Conclusions
The mean age of participants was 55.8 years. 54 percent of the participants were at risk for poor health literacy. Health literacy level is at approximately 4th grade or below. Patients may be unable to read prescription labels and will need repeated oral instructions or alternate methods of education. Multiple education strategies to be utilized and two telehealth adherence strategies will be implemented.

Improvement Topic: Streamlining Hematology Referrals to LWJCC

Authors
Leslie Corbett, RN, nurse manager, LWJCC
Darla Liles, MD
Chelsea Passwater, RN, cancer care navigator for hematology
Andrew Weil, MD

Presented by
Chelsea Passwater

Purpose
To initiate a process for improving the timeliness of appointments for patients with benign and malignant hematological diagnoses. There were 57 patients reviewed. It was found that 49 percent of the hematology patients were not receiving an appointment within seven days because providers’ schedule lacked new patient availability or new patient appointments frequently were scheduled with minimal or no records.

Method
Pilot implemented August 1 through October 30. All new patient records and referrals are reviewed by the cancer care navigator for hematology and one of the hematologists. The navigator returns appointment information to the schedulers within three days (average is less than 24 hours) and a letter is generated with additional recommendations and sent to the referring physician.

Findings
All patients were scheduled within the seven-day window. There was improved communication with referring physician offices. New patient visits have been streamlined. Pilot to be discussed with LWJCC administration for further consideration.
**New cancer facility**

**New cancer center and bed tower to be completed by 2018**

This new facility is approaching the 60 percent completion target. Thirty-nine user groups have been engaged, working with moving or establishing services in this facility. This new center, at a construction cost of more than $170 million, is being built adjacent to East Carolina Heart Institute at VMC and will consolidate all inpatient and outpatient cancer services in one building.

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
- Five 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

Staff are eagerly preparing for this facility and are very excited about what it will bring to all in our region.

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**Fundraising**

Cancer is the leading cause of death in eastern North Carolina. In our 29-county region, we serve 1.4 million residents. There are 19 individuals diagnosed every day with cancer and eight of our residents pass away each day.

Vidant Health is on a mission-critical journey to change all of that — to transform cancer care in this region. 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.

More than $12.3 million has been committed to the campaign to help build this new facility and provide much-needed programs and services in Greenville and throughout the region. The fundraising goal is $50 million, with $40 million towards the facility and $10 million towards cancer care programs and services.

For information on supporting the campaign, contact Varessa K. Wall, director of development, at (252) 847-8994 and Varessa.Wall@VidantHealth.com.