



Cancer Program 2018 Annual Report

Table of Contents

Cancer Committee Members

Radiation Oncology Services

Medical Oncology Services

Patient Navigation

Cancer Conferences

Cancer Registry

Cancer Education, Prevention, and Early Detection

Physician Liaison Report, Standard 4.3

Accountability Measures, Standard 4.4

Quality Improvement Measures, Standard 4.5

Monitoring Compliance with Evidence-Based Guidelines, Standard 4.6

Cancer Committee Members

Physicians	Non-Physicians	
<p><i>Pathology</i> James M. Pond, MD Chairman</p>	<p><i>Program Administrator</i> Joseph Johnston, MBA, CMPE</p>	<p><i>Nursing Leadership</i> Linda DeGrazia, MSN, APRN, ANP-BC Kelly Duma, RN, BSN, NE-BC</p>
<p><i>Medical Oncology</i> Julianne W. Childs, DO Robert M. Goldberg, MD</p>	<p><i>American Cancer Society</i> Jason Plaia</p>	<p><i>Nursing</i> Patricia Lynn, RN, OCN Eileen Stephens, RN, OCN</p>
<p><i>Radiation Oncology</i> Hemangini Shah, DO</p>	<p><i>Cancer Program</i> Kimberly Kaczmarek, ROCC</p>	<p><i>Nutritional Services</i> Saba Zahid, RD</p>
<p><i>Diagnostic Imaging</i> Ilene Burrach, MD</p>	<p><i>Cancer Registry</i> Michelle Bob, RHIT, CTR</p>	<p><i>Palliative Care</i> Maureen Deely, RN, APN</p>
<p><i>Surgery</i> Desiree D'Angelo-Donovan, DO David May, MD John Millili, DO</p>	<p><i>Cancer Education/Early Detection</i> Angela Bailey, LSW Joia Di Stefano, MPH</p>	<p><i>Pharmacy</i> Timothy Guse, PharmD</p>
<p><i>Hospitalist</i> Sridevi Yangala, MD</p>	<p><i>Clinical Research</i> Eileen Stephens, RN, OCN</p>	<p><i>Quality Improvement</i> Valerie DeJoseph, MS, RDMS Margaret O'Brien, RN, BSN</p>
	<p><i>Diagnostic Imaging</i> Mei Gavrell, RT(R)</p>	<p><i>Radiation Oncology</i> Robin Royer, RT(R)(T)</p>
	<p><i>Executive Administration</i> Linda Kenwood, CNO/COO</p>	<p><i>Social Services</i> Iraida Melendez, MSW Stephanie Bordonaro, CSW Patricia Ayers, LCSW</p>

Our Cancer Committee members, which includes Physicians and Caregivers are committed to providing high-quality, patient-centered care. It is our patients' courage and spirit that motivates all of us and is the essence of our work.

Radiation Oncology

The radiation oncology department contains a Varian 21EX Linear Accelerator which can deliver standard and conformal external beam radiation therapy as well as intensity modulated radiation therapy (IMRT) and Stereotactic Body Radiation Therapy (SBRT). Image-Guided Radiation Therapy (IGRT) is performed through the linear accelerator's on-board imager (OBI) utilizing cone-beam CT and KV imaging.

Joseph Lattanzi, MD, Medical Director, Hemangini Shah, DO, and Rajesh Iyer, MD provide exceptional evidence-based care to all patients at Shore's Cancer Center.

The department is accredited by the American College of Radiology.

Medical Oncology

The medical oncology department has an infusion suite with eight chairs, an on-site pharmacy and three exam rooms. All nurses are oncology certified nurses (OCN) or are required to be certified within two years of employment and chemo certified. The medical oncologists at Shore's Cancer Center: Julianne Childs, DO, Medical Director, Hemang Dave, MD, Kaleem Ahmad MD and Tiffany Pompa, MD provide quality patient centered care.

Patient Navigation

Patient navigation in cancer care at Shore offers individualized guidance and support to people faced with a suspicious finding or a diagnosis of cancer. The patient navigation service is engineered to meet the needs of both patients and their family members. Every patient receives personalized patient-centered care.

Our nurses are available to provide information to guide the patient through the treatment process, helping them understand the surgery, procedure, and/or treatment that may be performed and addressing any questions or concerns.

Cancer Conferences

Shore Medical Center's Cancer Program's Henry Seidel, MD Cancer Conferences and Prospective Breast Cancer Conferences are essential forums for prospective review of cancer cases and multidisciplinary involvement in the patient management process. During these conferences, the cases presented included the hospital's five major sites, cases with unusual sites and histology, and difficult management issues.

American Joint Committee on Cancer (AJCC) Stage and National Comprehensive Cancer Network (NCCN) Clinical Practice Guidelines in Oncology were referenced for 100% of the cases during these conferences. Discussion of the availability of clinical trials for each case presented is discussed at every conference. Each conference in 2018 was designated for a maximum of 1 AMA PRA Category I CME by the Perelman School of Medicine at the University of Pennsylvania.

Cancer Registry

The Cancer Registry is an important component of the Cancer Care Program and is responsible for collecting, reporting, following, and maintaining the data of all patients diagnosed and/or treated with cancer at Shore Medical Center.

The data collected in the Registry is reported to the New Jersey State Cancer Registry, as required by law, and to the National Cancer Data Base (NCDB), as required for American College of Surgeons (AcoS) Commission on Cancer (CoC) accreditation. All data is private and confidential and the Registry staff strictly adheres to hospital-wide confidentiality policies.

Physicians and staff at SMC routinely utilize aggregate data for retrospective quality improvement review and initiatives, as well as outcomes analysis. Data collected in the Registry database is regularly reviewed for accuracy by physician members of the Cancer Committee to assure quality data is being collected and maintained at all times.

In 2018, the Registry continued to maintain compliance with CoC standards, including timely abstracting of cases, as well as maintaining lifetime annual follow-up rates within the required standards.

The Cancer Registry at SMC is managed by *NThrive* and is staffed by a Cancer Data Coordinator, who is a Certified Tumor Registrar (CTR). Registry staff routinely receives continuing education in oncology data management and maintains membership in the National Cancer Registrar's Association (NCRA) organization.

Cancer Education, Prevention, and Early Detection

The Cancer Committee monitors the provision of community-based cancer education, prevention and early detection programs. These programs are provided and coordinated by the Cancer Community Outreach Department. Each year two projects are chosen by the committee as the focus of prevention (standard 4.1) and screening (standard 4.2).

Shore Medical Center has been the lead agency for the New Jersey Cancer Education and Early Detection Program (NJCEED) in Atlantic County since July of 1997. This program, which is supported by federal and state grant funds, provides screening and diagnostic procedures for breast, cervical, colorectal and prostate cancers for the underserved. All NJCEED patients are followed by a social work case manager and are navigated appropriately to diagnosis and/or treatment services. In addition, Shore Medical Center is in 100% compliance with the Centers for Disease Control and Prevention (CDC) and NJCEED's performance requirements.

To further enhance cancer prevention, Shore Medical Center is the lead agency for the enhanced implementation of the New Jersey Office of Cancer Control and Prevention grant. The purpose is to develop and maintain an active regional coalition to focus on cancer prevention, early detection and policy. System and environmental change initiatives are also a focus. The Cape Atlantic Coalition for Health represents over 30 healthcare agencies, civic groups, and community organizations that come together to work on various initiatives such as screening events, workshops, media campaigns, etc. A variety of workshops are offered throughout the year through the community outreach department.

**Cancer Liaison Physician Report:
Standard 4.3**

Dr. David May, Cancer Liaison Physician for Shore Medical Center’s Cancer Committee utilized the Commission on Cancer’s Cancer Program Practice Profile Report (CP3R), National Cancer Database (NCDB), Cancer Quality Improvement Program (CQIP) and Rapid Quality Reporting System (RQRS) to measure quality and patient outcomes. Dr. May reported to the Cancer Committee on a quarterly basis covering the following cancer sites during 2018:

- Breast Cancer
- Lung Cancer
- Colon Cancer
- Rectal Cancer
- Gastric Cancer

**Commission on Cancer Standard 4.4:
Accountability Measures**

Evidence-based measures or accountability measures promote improvements in care delivery and are the highest standard for measurement. A high level of evidence supports accountability measures including multiple randomized control trials. The following table demonstrates Shore Medical Center’s estimated performance rate (EPR):

MEASURE	CANCER TYPE	CoC STANDARD'S EPR	PROGRAM'S 2015 EPR	MY CoC PROGRAM TYPE (CCP)	ALL CoC APPROVED PROGRAMS	COMPLIANT
BCSRT	BREAST	90%	100%	90%	92%	YES
HT	BREAST	90%	100%	91%	93%	YES
MASTRT	BREAST	90%	100%	85%	90%	YES
MAC	BREAST	NA	100%	93%	93%	YES
ACT	COLON	NA	100%	89.1%	89.4%	YES

Shore Medical Center rated at **100%** for the most recent data the Commission on Cancer has for the five Accountability Measures

Cancer Liaison Physician Report
Commission on Cancer Standard 4.5:
Quality Improvement Measures

The quality improvement measures set by the Commission on Cancer (CoC) are used to monitor the need for quality improvement or remediation. Generally, these measures are for individual program use. The following is a table of Shore Medical Center’s performance which shows that the programs estimated performance rate (EPR) is consistently above the Commission on Cancer’s EPR:

MEASURE	CANCER TYPE	CoC STANDARD'S EPR	PROGRAM'S 2015 EPR	MY CoC PROGRAM TYPE (CCP)	ALL CoC APPROVED PROGRAMS	COMPLIANT
nBx	BREAST	80%	100%	92%	92%	YES
12LRN	COLON	85%	90.9%	89.7%	92.3%	YES
RECRCT	RECTUM	85%	100%	89.9%	88.7%	YES
G15RLN	GASTRIC	80%	NO DATA	43.4%	61.7%	NA
LCT	LUNG	85%	NO DATA	91%	92%	NA
LNoSurg	LUNG	85%	100%	95%	93%	YES

Commission on Cancer Standard 4.6:
Monitoring Compliance with Evidence-Based Guidelines

The Robert J. Beach Oncology Practice Guidelines was held three times in 2018. A multi-disciplinary team utilized the National Comprehensive Cancer Network (NCCN) Practice Guidelines in Oncology and the National Cancer Data Base (NCDB) Hospital Comparison Reports to measure quality and patient outcomes on the following cancer sites in 2018:

- Breast Cancer
 - The management of twenty-two cases of breast cancer compared with NCCN recommendations was conducted on the following stages:
 - Stage 0 –3 cases
 - Stage I – 13 cases
 - Stage II -4 cases
 - Stage III – 1 case
 - Stage IV – 1 case
- Lung Cancer
 - The management of twenty cases of lung cancer compared with NCCN recommendations was conducted on the following stages:
 - Stage I – 2 cases
 - Stage II – 3 cases
 - Stage III – 4 cases
 - Stage IV – 11 cases

- Colorectal Cancer
 - The management of twenty-three cases of colorectal cancer compared with NCCN recommendations was conducted on the following stages:
 - Stage I – 6 cases
 - Stage II – 9 cases
 - Stage III – 4 cases
 - Stage IV – 2 cases
 - unknown stage – 2 cases