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ACCREDITATIONS

Elkhart Regional Cancer Center



Three-year Accreditation by the American College of Radiation Oncology



Certified Quality Breast Center of Excellence, Certification Level III Breast Imaging Center of Excellence



Three-year Accreditation by the American College of Radiology Accreditation for our Breast Care Center and Radiology Department

CT Lung Cancer Screening Center Breast Imaging Center of Excellence



A QUALITY PROGRAM of the AMERICAN COLLEGE OF SURGEONS



The Joint Commission
Hospital Accreditation Program



This past year has been an exciting time at Elkhart General Hospital (EGH). Our cancer services at EGH were awarded full accreditation with commendation status for the next three years. The cancer committee continues to be dedicated to bringing high quality and efficient care to our patients. This annual report includes details on the various projects we have completed in 2019.

Over the past year, the Radiation Oncology department at EGH underwent a major renovation of all clinical spaces while adding the most advanced Varian TrueBeam® treatment machine and a VisionRT® 3D positioning system. Together, these allow for faster and more precise treatments while also providing the capability of performing stereotactic radiosurgery for select patients with small brain tumors. A new CT simulator was also added to the department with a variety of features to allow for faster, higher quality planning imaging.

Similarly, in an effort to expand the medical oncology capabilities at EGH, a major renovation of the Decio Pavilion is underway. Construction is expected to be completed in early 2020. The renovation includes a relocation and expansion of the ambulatory infusion department as well as the creation of office spaces for two new Beacon medical oncologists who have joined EGH.

Our goal is to earn the privilege of being the provider of choice for our patients. Without the teamwork, perseverance, compassion, and expertise put forth by our physicians and staff, this would not be possible. I thank everyone for their dedication over the past year and am excited to see what 2020 will bring for our cancer program.

Respectfully submitted, Lauren Das MD, Radiation Oncologist Chair, Cancer Committee

Respectfully submitted,

Lauren Das MD

Lauren Das MD, Radiation Oncologist Chair, Cancer Committee

MESSAGE FROM MEDICAL LEADERSHIP



Lauren Das, MD



CANCER PROGRAM Services



Hematology-Medical Oncology

In-Patient: The Medical Oncology Unit is a 12-room inpatient unit that specializes in the treatment of cancer patients. Our goal is to support patients and their families through their cancer journey by offering state-of-the-art medical care, up to-date treatments and medications and access to the latest in imaging technology, along with personal and spiritual guidance. We have oncology-certified nurses who ensure that high-quality care is delivered to our patients. With 12 private rooms, convenience and comfort have been "built in" for patients, families, physicians and nurses. Relaxing, pleasant earth tones, reinforce the homelike atmosphere. Just as you have complete freedom to come and go in your own home, so it is with our unit. Family can visit 24 hours a day or stay 24 hours with the patient.

Outpatient: The ambulatory Hematology/ Medical Oncology office at Elkhart General Hospital specializes in not only cancer diagnoses, but hematology disorders and syndromes. We have two, board certified physicians who oversee the management of these diseases and a nurse practitioner who is an extension of the physicians, to help manage the symptoms of their patients and provide education to the patients and their family members. Our office has 6 exam rooms and 1 consultation room, which are all fully equipped with their own computer, vitals board, power exam chairs that are easier for the patients to sit on during examination, and white boards for continued education. In one of the exam rooms, we will have a procedure table for the physicians to perform bone marrow biopsies for those patients who need one right away and are not complex cases.

Cancer Survivorship Clinic

The patient and oncology nurse review the detailed cancer treatment summary together as well as an individualized survivorship care plan. The survivorship care plan outlines short-term and long-term follow-up, how to monitor for late side effects, routine screening for other cancers and recommendations for health promotion. At the end of the visit, the patient receives a copy of the cancer treatment summary and survivorship care plan to keep for their personal records and all members of the patient's care team receive a copy as well. The visit to the Survivorship Clinic also includes an appointment with a registered dietitian for a personalized evaluation, if desired.



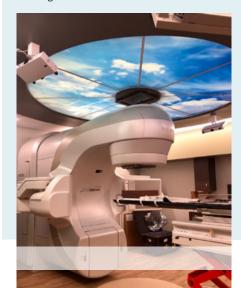
Ambulatory Infusion Center

The Ambulatory Infusion Center provides a comfortable, convenient and safe environment to receive treatment as an outpatient. The center is monitored by oncology certified registered nurses. In our eight-chair infusion clinic we offer flexible hours seven days a week to meet the needs of our patients. Some of the treatments available are: chemotherapy infusions, blood transfusions, Inserting and removing of different types of IV devices, central line care, antibiotic therapy, and injections.



Radiation Oncology Center

The Radiation Oncology Center at Elkhart General Hospital offers leading-edge radiation treatments under the direction of board-certified radiation oncology physicians, Dr. Russell Johnson and Dr. Lauren Das. Enabling patients to have the best care close to home, specialized therapies such as Rapid Arc, IMRT, Stereotactic Radiosurgery (SRS) and Stereotactic Body Radiation Therapy are available to patients at Elkhart. The center offers flexible appointment times, allowing patients to continue a normal personal schedule while going through their radiation treatments.





Ribbon of Hope staff members from (L to R): Cheryl DeJohn, Loretta Salchert, Mona Conrad

Ribbon of Hope

Ribbon of Hope is a nondenominational cancer support ministry with a mission to provide emotional and spiritual support for cancer patients, caregivers and family members. Volunteers log over 8,000 patient service hours annually, with patient interactions that complement the technical side of cancer care through encouragement and practical acts of kindness, such as phone calls, uplifting notes, transportation to appointments and occasional meals and household assistance. Each year concludes with the annual Holiday Adopt a Family project. Through the support of Elkhart General staff and community members, Ribbon of Hope provides Christmas gifts, food items and non-food care boxes to families and seniors.

Genetics Counseling

At Elkhart Hospital, our genetic counselor works with patients to identify the risk for certain types of cancer. The genetic counselor also works with patients to develop a plan that includes possible genetic testing, screening recommendations, and other strategies to prevent cancer or to catch it in its earliest stages. The genetic counselor reviews and discusses personal and family medical history, identify possible genetics risk, discuss genetic testing options, create a prevention and early detection plan, and provide information and support to patients and their families.

Palliative Care

The intra-disciplinary team includes nurses, a physician and social worker, chaplains and pharmacists who assist patients in symptom management who are currently or previously have undergone anticancer therapies. They provide spiritual and emotional support to patients and families while coordinating care and assisting in communication. The service is consult-based in the hospital and also follows patients in their outpatient clinic. In providing support to both inpatient and outpatient, the service works to improve patient satisfaction, and reduce readmissions to the hospital.



Palliative Care staff from (L to R): Angie Poorman, Dr. Amberly Burger, MiChelle Redding



Oncology Care Coordinators

Oncology Care Coordinators are available to patients who need education, encouragement, financial assistance referrals, resource identification, support and advocacy. Our coordinators communicate with patients throughout their treatment, providing understanding and reassurance to them and their family members as well.

2019 TEAM MEMBER AWARDS

Each month Beacon Health System gives recognition to associates who are not only outstanding in their role but are also committed to upholding the Beacon values. These awards include "Doc You Rock," "Associate of the Month," "Sunshine Award" and the nursing "Daisy Award." Awardees are nominated and voted on by their patients and their peers.



MAYO CLINIC CARE NETWORK

The oncologists at Beacon Health System and medical experts at Mayo Clinic are working together to resolve hard-to-solve medical problems. Beacon oncologists can consult with Mayo Clinic specialists using technology that allows Mayo Clinic doctors to review complex cases and provide additional input when the provider believes it would be helpful to the patient. When appropriate, patients can receive an electronic second opinion (eConsult) from a Mayo Clinic physician. The eConsult can be in regards to diagnosis, treatment plan, or follow up care. The eConsult is provided to the patient free of charge without the hassle of traveling to Mayo Clinic.

Beacon Health System physicians also participate in Mayo Clinic eTumor Boards. These are live teleconferences that allow Beacon physicians to participate in and discuss how to best manage complex cancer cases with teams of Mayo Clinic specialists. The eTumor Boards allow Beacon physicians to collaborate with a multi-disciplinary team at Mayo Clinic to determine the best course of treatment for patients with complex cases.





PRECISE CANCER CARE CLOSE TO HOME



Varian TrueBeam®

The cancer care team at Elkhart General Hospital recently brought a new linear accelerator online for patients whose care plans include radiation therapy. The latest Varian TrueBeam® offers unparalleled submillimeter accuracy for precise custom treatment.

The new equipment is proof that Beacon continues to enhance services for the Elkhart community.

Radiation therapy uses a type of energy to kill cancer cells and shrink tumors. It damages and destroys cancer cells in the targeted area.

According to Dr. Lauren Das, a radiation oncologist at Elkhart General Hospital, the Varian TrueBeam® radiotherapy system enables shorter and more precise treatments.

For each patient, an individualized and detailed treatment plan is created using CT scans that render tumor location in four dimensions (including movement), allowing the radiation oncologists, dosimetrists and radiation physicists to plan the treatment delivery.

"Our experienced and dedicated team creates a unique plan for each patient's body and disease," Dr. Das explained. "We incorporate the most advanced technology to target the cancer while sparing the healthy surrounding tissues. This minimizes side effects and achieves the best possible outcomes." Another tool the team uses is surface-guided radiation therapy. The VisionRT® system's 3D stereo cameras track patient positioning during set up and treatment. The system can pause radiation if the patient moves out of position. "If the patient moves out of position, our camera system is able to detect it immediately, pausing the radiation until the patient is back in the perfect position," Dr. Das explained.

"The enhanced tools with surface and image guidance help us avoid radiation exposure to the heart, for example, during treatment of breast cancer," added Dr. Russell Johnson, radiation oncologist at Elkhart.

The TrueBeam also enables the team to offer a new service to the community – stereotactic radiosurgery. This technique is used to treat small tumors in the brain, delivering a high dose of radiation to a small area and completing treatment in just one day.

Renovations are underway throughout the radiation therapy department, all with an eye toward patient comfort, convenience and ease. The TrueBeam patient treatment room is spacious with a sky mural on the ceiling. Patients may choose to listen to music and select a custom lighting color for the room.

Construction of five new consultation rooms, family meeting room, and conference room in the Radiation Oncology Center is expected to be completed by early December.

Elkhart General Hospital CANCER REGISTRY REVIEW

By Judy Libera, CTR, Cancer Registry Coordinator



Stacy Hirst, RN, CTR
Cancer Registrar



Judy Libera, CTR
Cancer Registry Coordinator

The Cancer Registry at Beacon Health System-Elkhart General Hospital has a beginning reference date of 1 January 1998 and is under the management and direction of Oncology Administration, Cancer Committee as well as strict adherence to the Commission on Cancer (CoC) Program Standards. The Cancer Registry is charged with the collection of data which provides the whole picture of the patient's disease. The data is maintained and inclusive of but not limited to: patient demographics; date of diagnosis; primary site; histology; stage of disease; treatment; clinical trial, recurrence; and follow-up data and provides physicians and hospital administration with statistics for research, education and strategic planning. In recent year's higher education and certification standards for Cancer Registrars were mandated to ensure the accuracy of the collected data and ultimately impact the overall care of the patients at Beacon Health System-Elkhart General Hospital.

In 2018 a total of 706 cancer incidences were accessioned by a team consisting of two Certified Tumor Registrars. The data from the registry is submitted to the Indiana State Department of Health Cancer Data System as well as to the National Database in accordance with guidelines. Reliable data is essential in the evaluation of cancer prevention, treatment programs, quality of care & outcomes. Confidentiality of patient identification and related medical data are strictly maintained and only aggregate data are analyzed and published.

Our cancer patient receives lifetime surveillance to determine treatment outcomes so that we can assess and improve the efficacy of the treatments we administer. The Cancer Registry is responsible for maintaining lifetime follow-up on all analytic patients. The current rate of 95.53% (90% or greater required) is based on patients diagnosed within the past five years. Additional required follow-up is based on all patients within the database with the current rate at 93.10% (80% or greater required). The respective rates significantly exceed the established benchmarks mandated by the CoC and attests to the continued teamwork approach to patient care at Beacon Health System-Elkhart General Hospital.

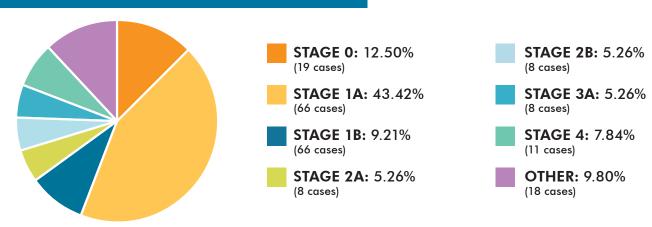
REGISTRY ACCOMPLISHMENTS FOR 2019:

- Maintained bimonthly General Cancer Conferences & Breast Conferences along with an once a month Neuro-Oncology conference.
 These are multidisciplinary case presentations and lectures.
- Attended Thoracic Oncology Clinics.
- Submitted required data to the National Cancer Data Base timely and free of errors; achieved standard commendation status.
- Reported required incidence of cancer to the Indiana State Cancer Registry within six months of diagnosis on a monthly basis.
- Maintained Rapid Quality Reporting System (RQRS) per Commission on Cancer contract guidelines.
- Collaborated with abstracting software provider (METRIQ) to incorporate system upgrades.
- Maintained on-going quality review of data via annual physician review of 10% analytic cases inclusive of monthly state edits and periodic internal audits.
- Maintained on-going annual Case-finding review.
- Instrumental in supplying data for Continuous Quality Improvement ("benchmark"), Physician requests for research, Administration, Marketing and Planning, Community Outreach, Education and Cancer Conferences.
- All Registrars participated in educational webinars for professional development.
- All Registrars participated in local or regional conferences for professional development.

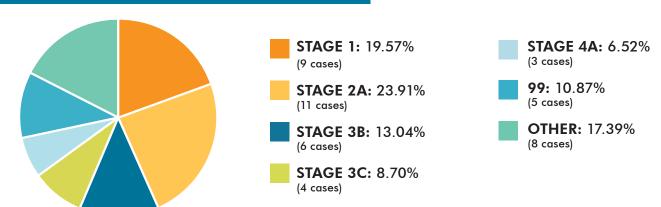
BREAST, COLON AND LUNG CANCER INCIDENCE BY STAGE

*Based on 2018 Cancer Registry Data

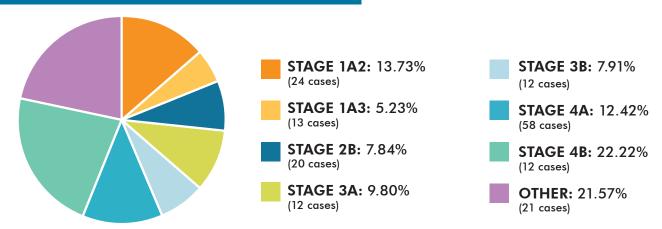
BREAST CANCER STAGE AT DIAGNOSIS



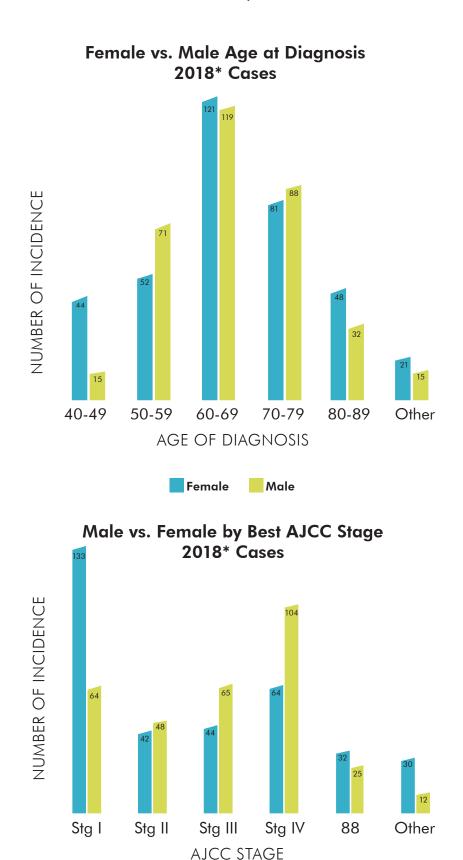
COLON CANCER STAGE AT DIAGNOSIS

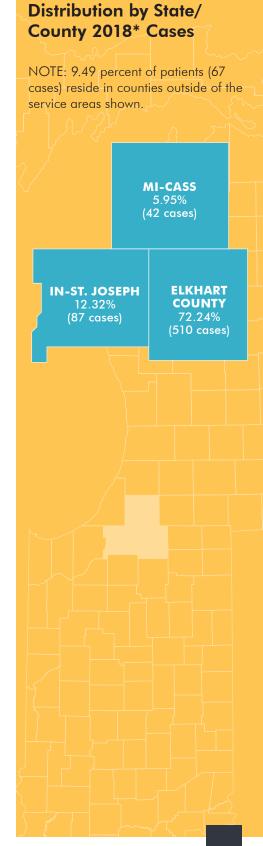


LUNG CANCER STAGE OF DIAGNOSIS



CANCER INCIDENCE BY AGE, STAGE AND DISTRIBUTION





Primary Site Table BASED ON 2018 STATISTICS

				Class of Case		Stage at DX				
Primary Site	Total	Male	Female	Analytic	Non- Analytic	Stg 0	Stg I	Stg II	Stg III	Stg IV
ORAL CAVITY & PHARYNX	25	23	2	22	3	0	- 11	3	2	5
Tongue	5	5	0	5	0	0	3	1	1	0
Salivary Glands	1	1	0	1	0	0	0	0	0	1
Floor of Mouth	1	1	0	0	1	0	0	0	0	0
Gum & Other Mouth	2	0	2	2	0	0	0	1	0	1
Tonsil	11	11	0	10	1	0	7	0	1	2
Oropharynx	3	3	0	3	0	0	1	1	0	0
Hypopharynx	2	2	0	1	1	0	0	0	0	1
DIGESTIVE SYSTEM	124	82	42	104	20	2	13	23	32	27
Esophagus	11	10	1	9	2	0	0	0	2	6
Stomach	9	8	1	7	2	0	1	0	3	3
Small Intestine	1	1	0	1	0	0	0	0	1	0
Colon Excluding Rectum	46	26	20	43	3	2	9	13	11	4
Cecum	6	3	3	6	0	0	1	2	3	0
Appendix	4	2	2	4	0	1	1	1	0	0
Ascending Colon	10	4	6	10	0	1	4	2	2	0
Hepatic Flexure	1	1	0	1	0	0	0	0	1	0
Transverse Colon	7	4	3	6	1	0	1	2	2	0
Descending Colon	2	1	1	2	0	0	0	1	0	1
Sigmoid Colon	13	9	4	12	1	0	1	5	3	2
Large Intestine, NOS	3	2	1	2	1	0	1	0	0	1
Rectum & Rectosigmoid	16	9	7	12	4	0	3	4	5	0
Rectosigmoid Junction	1	1	0	0	1	0	0	0	0	0
Rectum	15	8	7	12	3	0	3	4	5	0
Anus, Anal Canal & Anorectum	5	4	1	3	2	0	0	0	3	0
Liver & Intrahepatic Bile Duct	6	5	1	6	0	0	0	1	4	1
Liver	4	4	0	4	0	0	0	1	3	0
Intrahepatic Bile Duct	2	1	1	2	0	0	0	0	1	1
Gallbladder	1	0	1	1	0	0	0	0	0	1
Other Biliary	5	2	3	4	1	0	0	1	1	0
Pancreas	22	16	6	17	5	0	0	4	1	12
Retroperitoneum	1	1	0	1	0	0	0	0	1	0
Other Digestive Organs	1	0	1	0	1	0	0	0	0	0
RESPIRATORY SYSTEM	158	84	74	131	27	0	30	17	25	50
Nose, Nasal Cavity & Middle Ear	1	1	0	0	1	0	0	0	0	0
Larynx	7	5	2	6	1	0	1	2	1	2
Lung & Bronchus	150	78	72	125	25	0	29	15	24	48
BONES & JOINTS	1	0	1	1	0	0	0	0	0	0

	Class of Case		of Case	e Stage at DX						
Primary Site	Total	Male	Female	Analytic	Non- Analytic	In-situ	Stg I	Stg II	Stg III	Stg IV
SOFT TISSUE (including Heart)	4	3	1	0	4	0	0	0	0	0
SKIN EXCLUDING BASAL & SQUAMOUS	11	10	1	10	1	4	3	2	0	1
Melanoma — Skin	11	10	1	10	1	4	3	2	0	1
BREAST	150	0	150	127	23	17	75	10	10	10
FEMALE GENITAL SYSTEM	24	0	24	13	11	0	6	1	2	2
Cervix Uteri	2	0	2	0	2	0	0	0	0	0
Corpus & Uterus, NOS	17	0	17	12	5	0	6	1	2	1
Corpus Uteri	16	0	16	12	4	0	6	1	2	1
Uterus, NOS	1	0	1	0	1	0	0	0	0	0
Ovary	3	0	3	1	2	0	0	0	0	1
Vulva	2	0	2	0	2	0	0	0	0	0
MALE GENITAL SYSTEM	50	50	0	30	20	0	3	10	7	10
Prostate	49	49	0	30	19	0	3	10	7	10
Testis	1	1	0	0	1	0	0	0	0	0
URINARY SYSTEM	56	39	17	41	15	0	18	3	2	9
Urinary Bladder	23	20	3	13	10	0	3	1	1	3
Kidney & Renal Pelvis	30	17	13	25	5	0	15	2	1	4
Ureter	2	2	0	2	0	0	0	0	0	2
Other Urinary Organs	1	0	1	1	0	0	0	0	0	0
BRAIN & OTHER NERVOUS SYSTEM	18	4	14	15	3	0	0	0	0	0
Brain	8	2	6	7	1	0	0	0	0	0
Cranial Nerves Other Nervous System	10	2	8	8	2	0	0	0	0	0
ENDOCRINE SYSTEM	18	5	13	17	1	0	15	1	0	0
Thyroid	13	4	9	13	0	0	13	0	0	0
Other Endocrine including Thymus	5	1	4	4	1	0	2	1	0	0
LYMPHOMA	38	20	18	29	9	0	6	6	6	9
Hodgkin Lymphoma	6	5	1	4	2	0	0	2	1	1
Non-Hodgkin Lymphoma	32	15	17	25	7	0	6	4	5	8
NHL - Nodal	21	10	11	15	6	0	2	3	4	5
NHL - Extranodal	11	5	6	10	1	0	4	1	1	3
MYELOMA	7	3	4	6	1	0	0	0	0	0
LEUKEMIA	6	5	1	3	3	0	0	0	0	2
Lymphocytic Leukemia	4	4	0	3	1	0	0	0	0	2
Acute Lymphocytic Leukemia	1	1	0	1	0	0	0	0	0	1
Chronic Lymphocytic Leukemia	3	3	0	2	1	0	0	0	0	1
Myeloid & Monocytic Leukemia	2	1	1	0	2	0	0	0	0	0
MISCELLANEOUS	16	12	4	12	4	0	0	0	0	2
Total	706	340	366	561	145	23	180	76	86	127

Standard 4.6 MONITORING COMPLIANCE WITH EVIDENCE-**BASED** GUIDELINES



The role of this standard is to ensure that evaluation and treatment conform to evidence-based national treatment guidelines. Each year, a physician member of the cancer committee performs a study to examine the evaluation and treatment of patients and ensure that it is compliant with evidence-based national guidelines. The study must determine that the diagnostic evaluation is adequate and the treatment plan is concordant with a recognized guideline. Any problems identified with the diagnostic evaluation or treatment planning process could serve as a source for a performance improvement.

Background

NCCN recommends that the clinician 'strongly consider' that a multigene assay be performed to evaluate the potential benefit of chemotherapy for patients with hormone receptor positive, Her-2 receptor negative breast cancers with ductal, lobular, mixed, or metaplastic histology and one of the following criteria:

- Stage pT1-3 and pN0 with tumor measuring >0.5cm
- pN1mi (<2mm axillary lymph node metastasis) or N1 (<4 lymph nodes) and patient is a candidate for chemotherapy

Intent of Review

Evaluate compliance with NCCN guidelines for multigene assay testing and first course of treatment

Data Pull: EGH 2018 Analytic Volume inclusive of all stage I-II Her2 negative breast cancer patients with hormone receptor status of ER positive or PR positive

Physician of Review: Lauren C. Das, MD (Radiation Oncologist)

Date of Review: All charts reviewed in August 2018

Presented to Cancer Committee: 9/5/18

Resources Associated with Review: NCCN Guidelines version 6.2017, METRIQ database.

Element Assessed: Age at DX, histology, grade, rectal site, margin status, clinical stage, pathologic stage, referral to Med Onc, chemo recommended, rational if chemo not recommended to patient, referral to Radiation Onc, radiation recommended, rational if radiation not recommended to patient.

Findings

- 59 charts reviewed
- Multigene testing (OncotypeDx or Mammaprint) performed in 34 patients (59%).
- Reasons for not performing the test in the remaining 25 patients included:
 - o Unknown reason 9 patients
 - o Age > 70 (NCCN footnote 'limited data to make chemotherapy recommendations for those patients >70 years old') -6 patients
 - o Favorable disease (favorable histology or size not requiring testing per NCCN) – 4 patients
 - o Clinically node-positive and received neoadjuvant chemotherapy 2 patients
 - o SLN positive and received adjuvant chemotherapy without multigene assay testing – 2 patients
 - o Patient declined 1 patient
 - o Insurance refused coverage for testing 1 patient
- Recommendation of first course of therapy (including surgery, radiation, hormone therapy, and chemotherapy if high risk OncotypeDx/Mammaprint) was appropriate in 98% of patients. Six patients (10%) refused some portion of the recommended therapy despite counseling of its benefits.

Conclusions/Recommendations

Multigene assay testing to evaluate the use of chemotherapy was performed in 59% of patients. The most common reasons for not performing this test included age, favorable pathologic criteria, positive LN, and unknown reason. Overall, 98% of patients were recommended their first course of treatment within NCCN guidelines. We recommend continuing to stress the NCCN recommendations for multigene assay testing in our twice monthly breast conference and daily clinical practice.

This format provides a forum in which experts from varied oncology disciplines are able to collaboratively discuss the clinical stage of disease, the different treatment options mandated by national treatment guidelines, availability clinical trials when applicable and referral for genetic counseling. Attendees include radiologists, pathologists, general surgeons, thoracic surgeon, medical oncologists, radiation oncologists, pulmonologists, palliative care and other specialists along with ancillary and/or support staff. Patient and family members are routinely invited and attend the conferences. Beacon Health System-Elkhart General Hospital is the only facility in the area that invites our patients to attend their own case presentation. This open forum provides the patient a unique and intimate opportunity to interact with each clinician during the discussion. Patients exit the conference with full knowledge and understanding of their cancer diagnosis, disease staging, treatment options and referral processes. Elkhart General Hospital's strong commitment to patient satisfaction and support of these open forums is yet another way to provide a positive experience as the patient begins their cancer journey.

Our Neuro-Oncology Conference video conference every 3rd Friday of the month is a Beacon Health System wide effort for all Physicians to have access to attend a video conference to discuss cases with a diagnosis of a Primary Brain, central nervous system cancer or metastatic disease to the Brain or Central nervous system from another primary site.

Analytic cases presented throughout the year are determined by incidence volume and tracked statistically as the "Top Five Sites." Based on the last completed abstracted volume year 2018 the sites rank in order by volume: Breast, Lung, Colon, Prostate and NHL. These cancer sites along with many others were presented at the various conference and clinics throughout the year to provide an opportunity to determine stage and treatment for the patient as well as education to physicians and ancillary staff. Occasionally, a presentation may be of didactic nature and provides education on unusual and/or rare cancers. The Commission on Cancer, a governing

body that oversees the cancer program at Elkhart General Hospital, requires a 15% benchmark of analytic cases be presented per calendar year. As of 12/31/18 Elkhart General Hospital exceeded that benchmark at 42% case presentations from the combined conferences. Elkhart General Hospital exceeded the 80% of Prospective case presentation at 82%.

South Bend Medical Foundation
Digital Pathology: After many years of
viewing pathology slides on a microscope
connection Elkhart General is the first
Health system to use Digital Pathology in
the area.

CONFERENCE SCHEDULE: Breast Clinic:

- Every 2nd Wednesday of each month at 7:00 am (Goddard-Dunfee Conference Room)
- Every 4th Wednesday of each month at 7:00 a.m. (Patel Family Auditorium-West Wing).

General Cancer Conference: Every 2nd and 4th Wednesday of each month at NOON (Patel Family Auditorium-West Wing).

Neuro-Oncology Conference: Every 3rd Friday of the month (Patel Family Auditorium-West Wing).

Thoracic Oncology Clinic: Every Thursday at 7:00 a.m. (Patel Family Auditorium-West Wing).

Commission on Cancer Standard

1.10: Several speakers are invited annually to provide cancer-focused presentations outlining the most up to date cancer treatments and/or trends; this element of expertise is of educational value to our physicians as well as ancillary staff. Cases relevant to the speaker topic follow the presentation.

Contact information to present cases:

Breast, General Cancer Conference & Neuro Oncology Rounds: Beacon Health System Cancer Registry at 574.647.7135.

Thoracic Oncology Clinic: Beacon Health System-Elkhart General Hospital Radiation Oncology Department at 574,296,6536. Beacon Health System— Elkhart General Hospital BREAST, GENERAL CANCER, NEURO-ONCOLOGY CONFERENCE & THORACIC ONCOLOGY CLINIC (TOC) SUMMARY 2019



ONCOLOGY PROVIDERS



LAUREN DAS, MD

Radiation Oncologist
and Cancer Committee Chair



RUSSELL JOHNSON, MD, FACRO

Radiation Oncologist
and Cancer Conference
Coordinator



M. OMER TOOR, MD, FACP

Medical Oncologist



M. UZAIR SAQLAIN, MD

Medical Oncologist



JAMES JIN, MD, PHD

Medical Oncologist
and Cancer Liaison Physician



AHSANUL HAQUE, MD

Medical Oncologist



Dur Team OF ONCOLOGY CERTIFIED NURSES

Trish Coatie
Heather Griffith
Liz Werling
Julie Pollock
Amanda Huff

Marcie Carlsen Shelly Penrose Liz Werling Heather Griffith Amanda Huff Brittani Beber Amy Anderson Kayla Grove

SPIRITUAL CARE TEAM

Chaplains offer a wide range of spiritual care and support to patient, families and staff. We respect all faith traditions. Chaplains are available 24 hours a day, 7 days a week.



CHAPLAIN DEAN



CHAPLAIN DORCAS



CHAPLAIN DOUG



CHAPLAIN DONNIE



CHAPLAIN VERA



JIM, INTERN

CANCER COMMITTEE

The Cancer Committee is comprised of primary and specialty care physicians, as well as hospital department staff members involved in the care of cancer patients. The multidisciplinary committee meets regularly to review and evaluate the quality and direction of the overall cancer program and makes recommendations for improvement.

Edwin Annan, MD

Pulmonology

Rachelle Anthony

American Cancer Society

Luis Benavente, MD

General Surgery

Charles Bower, MD

Radiology

Kassi Brooks

Genetics

Amberly Burger, MD

Medical Director, Palliative Care

Trish Coatie, RN, BSN, OCN

Cancer Survivorship Clinic Thoracic Oncology Clinic Community Outreach Coordinator

Lauren Das, MD

Radiation Oncology
Cancer Committee Chair

Alicia Dombkowski

Clinical Research Coordinator

Deanna Emmons, RD, CD, CNSC

Oncology Dietitian

Pam Green, RN

Oncology Care Coordinator

Kim Greising, RN, BSN

Director of Oncology Quality Improvement Coordinator

Ahsanul Haque, MD

Medical Oncology

Stacy Hirst, RN, CTR

Cancer Registrar

Kristen Jacobs, MD

Pathology

James Jin, MD, PhD

Medical Oncology Cancer Liaison Physician

Russell Johnson, MD

Radiation Oncology
Cancer Conference Coordinator

Heather Kistka, MD

Neurosurgeon

Allison Lamont, MD

Radiology

Jackie Lenfestey-DeMont, MSN, FNP, APRN-BC

Oncology Nurse Practitioner

Judy Libera, CTR

Cancer Registrar & Cancer Registry Data Quality Coordinator

Amy Luebbehusen, PharmD

Oncology, Pharmacy

Dawn McCandless, MSW, LCSW

Oncology Case Coordinator Psychosocial Services Coordinator

Cindie McPhie

Vice President of Operations

Mark Herriman

Executive Director, Operations

Emily Mitchell, DO

General Surgery

Angie Poorman

Palliative Care

Carl Risk II

Elkhart General Hospital President

Loretta Salchert

Ribbon of Hope

Uzair Saqlain, MD

Medical Hematology Oncology

Leah Schrock, LCSW

Inpatient Case Manager

Katie Shively

Manager of Radiation Oncology

Joyce Simpson, MD

Pathology

Rachel J. Stewart

Manager of Oncology

Omer Toor, MD

Medical Hematology Oncology



DIRECTORY

Area Code 574 unless noted otherwise.

Treatment and Clinical Services

Ambulatory Infusion Center	296.6444
Breast Care Center	296.6571
Cancer Survivorship Clinic	296.6536
Oncology Care Unit	523.3112
Palliative Care	523.3170
Radiation Oncology Center	523.7857
Thoracic Oncology Clinic	296.6536

Ancillary Services

Cancer Registry Office	389.4822
Center for Behavioral Medicine	523.3348
Center for Pain Management	523.3232
Home Care	800.284.8999
Home Care Infusion	647.2273
Home Medical Equipment	888.517.3100
Inpatient Rehabilitation Services	523.3443
Oncology Nursing Education	523.7978
Outpatient Pharmacy	523.3101
Outpatient Rehabilitation Services	523.3242
Outpatient Scheduling	523.3444

Professional Education/Research

Cancer Conferences	389.4822
Clinical Research	296.6536

Patient and Family Support

Breast Care Financial Assistance	296.6553
Case Management	523.3364
Chaplaincy Services	523.3142
Ribbon of Hope Cancer Support & Ministry	389.7379

Community Services

American Cancer Society	800.227.2345
Cancer Care Counseling Line	800.813.HOPE
ABCD (After Breast Cancer Diagnosis)	800.221.2141
National Cancer Institute Info Line	800.4CANCER
United Cancer Services	875.5158





574.523.7857

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