

Dorothy E. Schneider Cancer Center

2014 ANNUAL REPORT



Janet Wagner, Mills-Peninsula CEO

Mills-Peninsula's Dorothy E. Schneider Cancer Center offers advanced cancer treatment and state-of-the-art technology in a healing and compassionate environment. In 2014, we continued to invest in new technology that helps us deliver world-class care right here in our local community.

In early 2014, Mills-Peninsula installed five new 3D digital breast tomosynthesis machines in our Women's Center. 3D mammograms take multiple low-dose X-rays from different angles to create a three-dimensional view of breast tissue, giving doctors a better chance at identifying cancer in its earliest stages. During the first six months of using the new 3D machines, Harriet Borofsky, M.D., medical director of the Women's Center, discovered 23 suspicious lesions that would not have been visible on traditional mammograms. Of those, 12 turned out to be breast cancer, and another seven were precancerous lesions that were removed before they could turn into cancer.

In April, our patients began reaping benefits from another technological wonder: a new 4D PET/CT scanner, which works in tandem with our TrueBeam linear accelerator to pinpoint the exact shape and location of a tumor, resulting in more effective planning and treatment. Mills-Peninsula also is stepping up its efforts in cancer research by participating in its first clinical trial with a cancer drug developer. We are excited to be a part of a process that is vital to developing the next generation of effective cancer drugs and treatments. We are also expanding our genetic counseling services to help people who are born with a genetic mutation that predisposes them to an increased chance of developing certain types of cancers.

The Dorothy E. Schneider Cancer Center is renowned, locally and throughout the region, for providing expert and compassionate patient care, leveraging the most advanced treatments and latest technology. We are proud that our clinical outcomes exceed national benchmarks, and we are grateful for the opportunity to partner with our patients, to help them fight cancer with the best team and tools available.

Update on the Cancer Program~2014

Brian Henderson, M.D., Committee Chair/Medical Oncologist
Sheila Littrell, Cancer Program Administrator

The Dorothy E. Schneider Cancer Center celebrated its 14th year providing comprehensive cancer care to our patients and to our community. From expanding services to improving technology, 2014 brought many accomplishments.

Quality Improvements

As part of the 2014 Strategic Plan, the Cancer Program embarked on a needs assessment to understand how physicians and consumers view the cancer center. The results will guide our planning for 2015.

In 2014 the Genetic Counseling and Social Worker services were expanded. Genetic Counseling now includes weekend appointments. Social Worker services implemented a distress screening program.

Research Update

In the area of research, we launched our first independent clinical trial in partnership with a biotherapies company based in Burlingame. This clinical trial offers our patients the opportunity to contribute to the advancement and development of antibodies and antibody therapies that are potential new cancer treatments. Collaborations like this create a platform for community-based hospitals such as Mills-Peninsula to influence and participate in the research outcomes of the future.

New Technology Update

Not only is the cancer program advancing science, but together with the radiology department, purchased a new GE Discovery * 710 PET/CT. This state-of-the-art technology offers improved diagnostic imaging, as well as improving treatment planning for our recently installed TrueBeam STx linear accelerator.

Cancer Program Team 2014

Role	Member Name
Committee Chair/Medical Oncologist	Brian Henderson, M.D.
Liaison Physician/Surgical Oncologist	Kimberly Dalal, M.D.
Diagnostic Radiologist	Gregory Lim, M.D.
Pathologist	Keith Duncan, M.D.
Radiation Oncologist	Al Taira, M.D.
Interventional Radiologist	Gregory Lim, M.D.
Medical Director, Breast Imaging	Harriet Borofsky, M.D.
Medical Director, Breast Cancer Services	Andrea Metkus, M.D.
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Cancer Program Administrator	Sheila Littrell
Oncology Nurse	Marie Rinaldi, R.N., M.S.
Social Worker or Case Manager	Diane Malek, LCSW
Certified Tumor Registrar (CTR)	Lisa Syrett, CTR
Quality Management Representative	Bonnie Holland, R.N.
Palliative Care Team Member	Suzanne Pertsch, M.D.
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Cancer Conference Coordinator	Lisa Syrett, CTR
Quality Improvement Coordinator	Brian Henderson, M.D.
Cancer Registry Quality Coordinator	Stephen Weller, M.D.
Community Outreach Coordinator	Jennifer Vickerman, R.N., M.S.
Clinical Research Coordinator	Sue Neale-May, R.N., BSN, CCRC
Psychosocial Services Coordinator	Diane Malek, LCSW
Genetic Counselor	Lauren Schenck, M.S., LCGC
Registered Dietitian	Debbie Kurzrock, R.D.
Pharmacist	Kamran Shirazi, R.Ph.
Rehabilitation Representative	Tiffany DeAsis, P.T.
Pastoral care Representative	Sam Ortega
American Cancer Society Representative	Edmundo Nevel

Mills-Peninsula Cancer Program Services

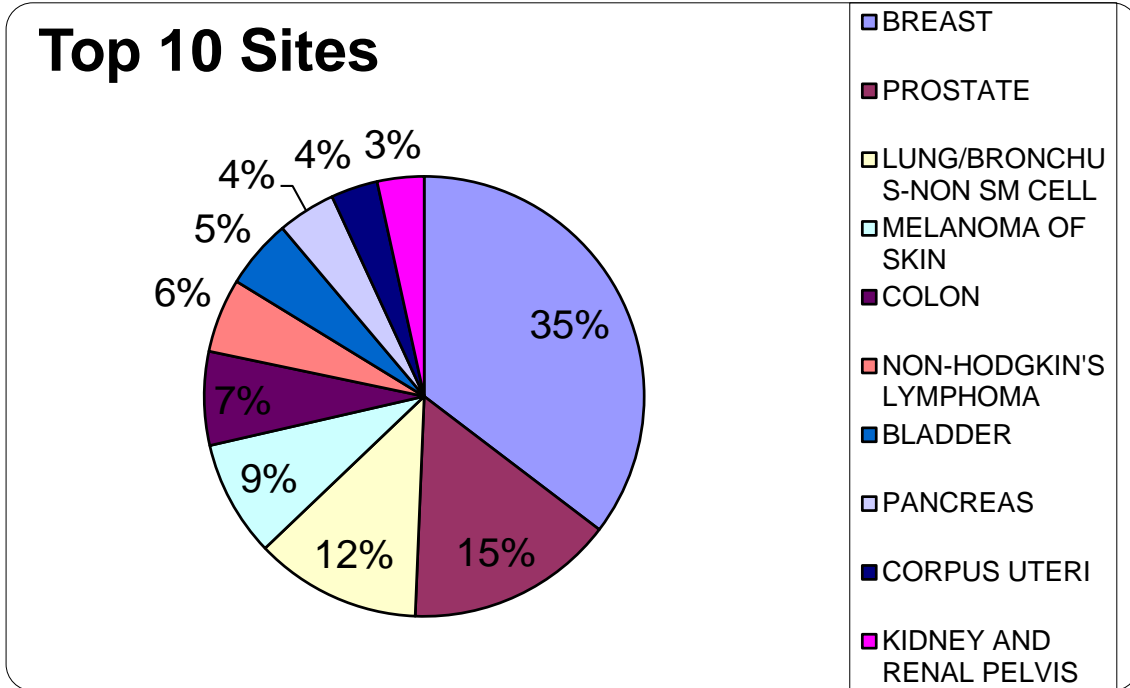
Cancer Center Services
American College of Surgeons (ACoS)-Certified Cancer Center
Chemotherapy & Infusion Treatment
Radiation Oncology Services <ul style="list-style-type: none"> ➤ Stereotactic Radiosurgery ➤ Image-Guided Radiation Therapy ➤ Brachytherapy
Comprehensive Breast Center <ul style="list-style-type: none"> ➤ 3D Mammography-Tomosynthesis ➤ Core Needle Biopsy-Stereotactic & Ultrasound
Nutrition Services
Social Services
Cancer Clinical Trials and Prevention Trials
Oncology Rehabilitation and Indoor Pool
Lymphedema Program
In-house Tumor Registry

Cancer Support Services
Cancer Surgery/Fellowship-trained Surgical Oncologists
Minimally Invasive Surgery
Robotic-assisted Surgery
Cancer Education Programs
Diagnostic and Interventional Radiology
Radiofrequency Ablation
Home Care and Hospice
Cancer Support Groups

2014 Cancer Program Profile

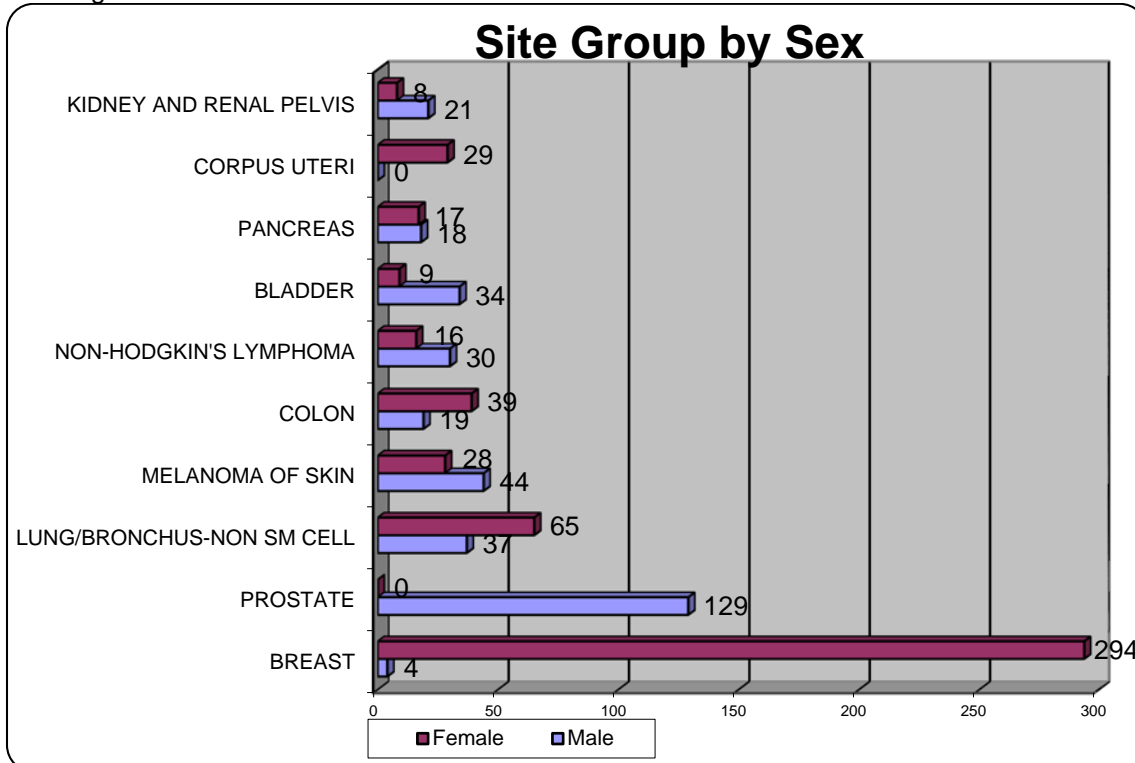
Our Analytic Cases by Disease Site • 2013

The Mills-Peninsula Cancer Program serves the needs of our community and surrounding areas. The chart below reflects the numbers and disease sites of the 959 analytic cases in 2013.



Our Analytic Cases by Gender • 2013

Among the top 10 sites diagnosed at Mills-Peninsula, breast cancer continues to represent the leading cancer diagnosis.

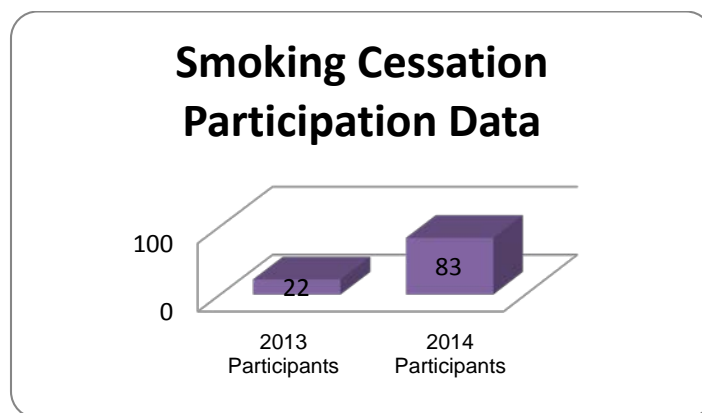


Cancer Prevention Program

In 2014, one of the cancer program's goals was to provide a prevention program for smoking cessation to help reduce smoking-related illness and deaths in our community. In San Mateo County, smoking continues to be a significant health issue with data from 2013 showing 8.7 percent of females and 14.2 percent of males continuing to smoke. In 2013, the highest rate of smoking was among the black population at 17.1 percent and the lowest smoking prevalence was among Hispanics at 6.6 percent. When age is considered, adults age 65 and older smoked the least (6.1 percent), while 18 to 39 year-olds had the most smokers (11.9 percent). (2013 Community Health Needs Assessment). National data also highlights the consequences of cigarette smoking. The National Cancer Institute (NCI) reports that "cigarette smoke causes an estimated 443,000 deaths each year, including approximately 49,000 deaths due to exposure to secondhand smoke."

Although trending downward, there is still a significant opportunity to decrease the smoking rates in San Mateo County. To that end, the Cancer Program collaborated with Joan Schoonover, R.N., TTS, smoking cessation clinician, to increase cancer patient participation in the Mills-Peninsula outpatient program, "Call it Quits." To raise awareness and educate patients and providers, flyers were distributed in the Cancer Center and Radiology Department. Flyers were also sent to the medical oncology and radiation oncology offices as well as to the primary care offices in the community.

Data has been compiled through October 2014 with a significant increase in overall participation; 83 participants through October 2014 as compared to 22 participants in 2013. This collaboration has been a great success and will continue to be a priority for Mills-Peninsula Health Services.



Cancer Program Outcomes Breast Cancer – 2012

Cancer Program Practice Profile Reports (CP3R)

The Cancer Program Practice Profile Reports (C3PR) is a quality reporting tool from the National Cancer Data Base of the Commission on Cancer (CoC) that is used to measure cancer care by comparing cancer programs based on nationally accepted guideline measures. As described below, Mills-Peninsula continues to not only meet, but exceed national benchmarks.

Outcome Measure – Breast Cancer	Performance Target	MPHS 2012
Image or palpation-guided needle biopsy (core or FNA) is performed to establish diagnosis of breast cancer.	80%	87.8%
Radiation therapy is considered or administered following mastectomy within one year of diagnosis for women with ≥ 4 regional lymph nodes.	90%	100%
Radiation is administered within one year following diagnosis for women <70 receiving breast conservation breast surgery.	90%	97.9%
Combination chemotherapy is considered or administered within 4 months of diagnosis for women <70 with stage I-III hormone receptor negative breast cancer.	90%	100%
Tamoxifen or 3 rd generation aromatase inhibitor is considered or administered within one year for women with Stage IB-III hormone receptor positive breast cancer.	90%	93.7%

Cancer Program Outcomes Surgical Outcomes, June 2013 - May 2014

Surgical oncology is an integral part of the cancer team at Mills-Peninsula, working closely with medical oncologists, radiation oncologists and specialists. Together they offer specialized interventions, tailored to individual patient needs. The surgical team provides minimally invasive (robotic or laparoscopic) surgery to limit incisions, thereby reducing pain and shortening recovery time. They offer a wide variety of curative resections as well as palliative procedures for patients with metastatic disease.

In 2014, U.S. News & World Report named Mills-Peninsula to its annual list of Best Hospitals 2014-15 for regional excellence in gastroenterology and gastrointestinal surgery. For the third year in a row, Mills-Peninsula was also recognized by National Safety Quality Improvement Project (NSQIP) for providing high-quality surgical care. This year, Mills-Peninsula was one of only 44 hospitals in the country (top 1% of all NSQIP hospitals — private practice and academic) commended for achieving meritorious surgical outcome performance.

As part of Mills-Peninsula's commitment to quality care, the cancer committee evaluated morbidity and 30-day mortality for surgical oncology patients. The following graph represents the results of the 263 patients who had cancer-related surgery at Mills-Peninsula between June 2013 and May 2014 as compared to actual performance data for gastrointestinal cancer surgeries from NSQIP for 2006 to 2011. Although not a direct comparative, this data supports that Mills-Peninsula outcomes meet and possibly exceed national averages.

Outcome Measure	N	Performance Rate	95% Confidence Interval	NSQIP 2006-2011 Gastrointestinal Cancer Cases*
30-Day Mortality Rate (Patients who have died within 30 days of their surgery compared to the total number of patients who received surgery.)	5/263	1.9%	0.25%-3.55%	1.1%-4.4%
Complication Rate (Complications that occurred during the post-operative period that were not present prior to surgery, compared to the total number of patients who received surgery.)	28/263	9.89%	6.92%-14.37%	21%-45%

*Surgery. 2014 Apr;155(4):593-601. doi: 10.1016/j.surg.2013.12.001. Epub 2013 Dec 14.