# GOOD SAMARITAN HOSPITAL

Part of Good Samaritan Health system

2017 Cancer Program Annual Report



Joseph DeSchryver Chief Executive Officer

# Cancer Care at Good Samaritan Hospital

Good Samaritan Hospital is proud of the innovative, quality care we deliver at our Comprehensive Cancer Center. We are known throughout the Silicon Valley as a destination for state-of-the-art treatment with superior outcomes, provided by board-certified cancer specialists, certified oncology nurses, and exceptional staff.

We are among an elite group of cancer programs repeatedly recognized with the Outstanding Achievement Award by the American College of Surgeons (ACoS) Commission on Cancer. Good Samaritan Hospital's Cancer Center is one of only three programs in the entire country to receive this esteemed award for five consecutive surveys, and we are the only HCA facility to have this distinction.

At our Cancer Center, a wide range of cancers are screened, diagnosed, and treated. We are recognized for being a Lung Cancer Screening Center and a Breast Center of Excellence by National Accreditation Program for Breast Centers (NAPBC), and have Radiation Oncology accreditation by the American College of Radiology (ACR).

We are dedicated to accessible, quality, patient-centric care, led by a team of innovative physicians who are mindful of each patient's unique experience. We value every patient and their families, and continue to innovate for the future health of our community.





# Patient Profile — A Mom's Love Just Keeps Going

John Lennon wrote, "Life is what happens to you while you're busy making other plans." No one knows this better than Merrill Sutherland.

On January 1, 2016, the 47-year-old former semiconductor sales operations manager and mother of two active teenagers was full of plans for the year ahead. Four days later, everything changed when she was diagnosed with stage 2 lobular breast cancer.

"My daughter was in the middle of a high stakes college selection process, with high school graduation not far off," explains Merrill. "Meantime, my son had his own activities and schedule. It was very important to me, as a mom, to be there for both of them."

Merrill's team of doctors—including oncologist Elwyn Cabebe, MD, and radiation oncologist Rakesh Patel, MD—was very understanding and supportive of her personal and family needs.

With additional input from Good Samaritan Hospital's multidisciplinary Tumor Board, the team recommended a treatment regimen of chemotherapy followed by bilateral mastectomy.

During the first half of the year, Merrill went through four months of chemotherapy. There were difficult days, but she was able to attend all her daughter's college visitations, end-of-school events, and graduation. In mid-summer, Merrill had surgery to remove both breasts and prepare for reconstruction. A month later, she and her husband Will were with their daughter as she moved into her college dorm.



Analysis after surgery showed the cancer had affected some lymph nodes, so in the winter she underwent six weeks of radiation therapy. Reconstruction surgery was performed this past summer. Today, according to her doctors, Merrill's outlook for the future is very positive.

"People ask if the worst day of my life was the day I learned I had cancer, but I don't look at it that way," she says. "I will always be mindful that I've had cancer, but it's important to just keep going."

Merrill is overwhelmed and grateful for the amazing support she received from her husband, kids and family, as well as many friends, especially the moms of her daughter's middle school classmates.





#### Patient Profile — A Passion for Living and Learning

Rebecca Gilden has been battling breast cancer for seven years. She'll be the first to tell you things haven't turned out the way she had hoped. Even so, the 47-year-old Silicon Valley computer engineer is now more passionate than ever about living life her way and educating other women about the importance of early screening.

It all started in 2010 when she found a lump in her left breast. Six months before, when she turned 40, a baseline mammogram was normal.

By 2016, Rebecca had endured three bouts with breast cancer. Treatments included multiple rounds of chemotherapy, radiation therapy and hormone blocking medication. She had surgeries to remove the

original tumor and numerous lymph nodes, as well as her uterus and ovaries. Rebecca and her Good Samaritan Cancer Program team, including Dr. Elwyn Cabebe and Dr. Rakesh Patel, were hopeful they had won the battle.

Late that year, a tumor was detected in her spine. Then, tumors were found in her lungs and liver.

"This was daunting," said Rebecca. "It meant I have metastatic disease that will shorten my life span. The good news is new drugs are extending the length of time women with breast cancer can live productive lives."

Rebecca continues seeing Dr. Cabebe to monitor her condition and find treatments to help control her symptoms. She works full time, stays active, and spends as much time as possible with her husband—who she calls her "rock"—and their two teenage children.

She is grateful to her doctors, including Cynthia Sigler, MD, medical director of the Good Samaritan Breast Care Center, for their excellent teamwork, personal care, and ability to think "out of the box" in developing the best possible treatments for her individual condition and lifestyle.

And, Rebecca also feels stronger than ever about educating and mentoring breast cancer patients and young women. Based on her experience, she advocates for baseline mammograms for women at age 40 and regular scans for those with a history of breast cancer.

### Sometimes It's the Little Things ...

Have you ever wondered how your physicians can be certain that you have cancer? Or how they decide which specific combination of surgery, chemotherapy and radiation therapy is appropriate for you? The answer involves a team of physicians and medical professionals at Good Samaritan Hospital who are working behind the scenes to ensure there are ongoing accurate, timely diagnoses for every patient who is facing the challenges of a new cancer diagnosis. This process requires a variety of scientific techniques, some that are over a century old and others that utilize cutting-edge medical technology.

In order to diagnose cancer physicians need a sample of the involved tissue, called a biopsy. The biopsy is sent to the Pathology Department, where the tissue is preserved in formalin, embedded in wax, cut into paper thin sections, affixed to a slide, and stained with a combination of dyes. This initial procedure, which is carried out for every tissue biopsy, has been virtually unchanged since the early twentieth century. The stained slides are then examined under a microscope by specialized physicians called pathologists who are trained to interpret these unique microscopic images. All it takes is one person to interpret the changes as malignant for a diagnosis of cancer to be rendered, but for the past several decades at Good Samaritan Hospital all new diagnoses of cancer have been reviewed by up to 6 physicians who must all agree on the diagnosis of malignancy. Because the interpretation of these images is both an art and a science, there can be a variety of opinions on any one individual case; by requiring multiple physicians to agree on the presence of cancer we are able to be certain of the diagnosis when the results leave the laboratory.

This process is the first step in establishing the diagnosis of cancer. Afterwards, additional testing is done on the cancer tissue to determine which particular treatments will be most effective. This involves identifying which combination of genes and proteins are expressed by the cancer cells in an individual patient. In order to do this the biopsy tissue may be digested to extract the nucleic acids (DNA and/or RNA) from the tumor, exposed to antibodies that recognize specific proteins, or stained with fluorescently labeled nucleic acids to identify certain genetic alterations.

The technology available today to examine an individual tumor is creating an exponential increase in the amount of data that we can obtain from a small sample of cancer. Performing the correct combination of tests on the correct tumors in a timely fashion is what provides our caregivers with the information they need to provide the most efficient, effective care for every patient. At Good Samaritan Hospital our physicians who specialize in cancer diagnosis have created a streamlined algorithm that allows each individual patient to have their tumor tested with the appropriate medical technology at initial diagnosis. All of this work goes on behind the scenes to ensure that our multidisciplinary team of caregivers is always prepared to guide you through each step of the cancer treatment process.



Drs. Gonzales, Dabiri, Ranchod, Bala, Berkeley, West and Douglas.



# **Breast Care Services**

The Good Samaritan Hospital Breast Care Center, located in Los Gatos, CA, is designated as a Breast Imaging Center of Excellence by the American College of Radiology (ACR). By awarding facilities the status of a Breast Imaging Center of Excellence, the ACR recognizes breast imaging centers that have earned accreditation in mammography, stereotactic breast biopsy, and breast ultrasound (including ultrasound-guided breast biopsy) and breast MRI. Peer-review evaluations, conducted in each breast imaging modality by board-certified physicians and medical physicists who are experts in the field, have determined that this facility has achieved high practice standards in image quality, personnel qualifications, facility equipment, quality control procedures, and quality assurance programs.

The Breast Care Center offers some of the most complete breast care services in the county. Cynthia Sigler MD, a fellowship trained mammographer from Georgetown University Hospital in Washington, D.C., is serving as Medical

Medical Director Breast Care Center Good Samaritan Hospital

Cynthia Sigler, MD

Director of the Breast Care Center, along with other Fellowship trained physicians. Certified by the FDA and Accredited by the American College of Radiology, the center has three digital mammography rooms with Tomosynthesis (3-D mammography), two ultrasound rooms, a prone stereotactic table & bone densitometry. The facility offers annual routine screening exams for women 40 and above.

Good Samaritan Hospital utilizes sophisticated breast cancer screening and detection technologies. We pride ourselves on having one of the best medical staff in the region to provide exceptional care. Our Breast Care Center also offers same-day appointments.

Diagnostic options for women with breast problems include:

- Screening and Diagnostic 2D and 3D Digital Mammography
- Computer Aided Detection (CAD)
- Automated Whole Breast Ultrasound (ABUS)
- Diagnostic Ultrasound
- Stereotactic and Ultrasound Guided Core Biopsy Procedures
- Magnetic Resonance Imaging (MRI)
- MRI guided Core Biopsies and Needle Localizations
- Pre-Operative Needle and SAVI SCOUT Localizations
- Bone Density

The Breast Care Center also screens patients to determine if they are "High Risk" for breast cancer. All patients are evaluated for breast density and patients and physicians are notified of the findings.

- Participant in cancer detection "Every Woman Counts" screening program
- Fellowship Trained Radiologists specializing in Mammography
- Multidisciplinary Consultative Breast Tumor Board
- Breast Clinical Coordinator

Good Samaritan Hospital's Breast Care Center is one of only two centers in San Jose that provide this level of comprehensive care, from screening to diagnosis to treatment.

# BreastPLUS High Risk Prevention Telegenetics Program

Hereditary cancer testing can provide useful information to high-risk family members who choose to be tested. To better serve the patients in our community, the Breast Care Center implemented the BreastPLUS enhanced high-risk screening and prevention program at Good Samaritan Hospital in September 2017.

This unique program uses detailed family history to identify patients at elevated risk. The program follows the National Comprehensive Cancer Network Guidelines to determine patient eligibility for counseling and testing. Pre-testing counseling includes an overview of hereditary cancer, the value of screening and early detection. Testing clarifies risks and assists patients in making more informed healthcare decisions.

Healthy mutation carriers can develop strategies to reduce cancer risk and detect tumors at an early stage. Individuals already diagnosed with breast cancer can use the information in clinical decision-making. Knowledge of hereditary cancer testing results benefits carriers, non-carriers and their children by alleviating uncertainty and anxiety. Furthermore, studies show that among high-risk women who had BRCA1/2 testing, neither test results nor the decision to undergo prophylactic mastectomy impacted quality of life or cancer-specific distress. A more recent prospective study found no negative effects on anxiety, depression, and quality of life among women at hereditary risk for breast cancer, including those with BRCA1/2 mutations, during the year following bilateral prophylactic mastectomy, and in fact, researchers observed an improvement in anxiety levels.

A reasonable standard of care warrants clinical evaluation by a qualified healthcare professional to determine the appropriateness of hereditary cancer testing. Medical management strategies can be tailored depending upon the hereditary cancer testing results and can include increased surveillance, chemoprevention and prophylactic surgery.



## **Radiation Oncology**

The Radiation Oncology department is a key element in the continuum of oncology care and combines high-end technology with leading clinical expertise. Patients receive state of the art radiation therapy on an inpatient or outpatient basis in an atmosphere of caring and compassion. The department is led by Rakesh Patel MD, Medical Director, and his associate Gordon W. Wong MD.

The department is equipped with some of the most advanced technology including:

- Cyberknife, Robotic Radiosurgery System from Accuray. The precision system is designed to treat tumors anywhere in the body non-invasively with sub-millimeter accuracy and dynamic tumor motion management.
- 3-D HDR (High-dose rate) Brachytherapy is offered at Good Samaritan Hospital for breast and gynecologic cancers. Targeted procedures temporarily place a radioactive seed inside of a catheter that is directly within or adjacent to tumor tissue. The HDR program at Good Samaritan Hospital is one of the busiest in California for partial breast irradiation using the SAVI and Multi-Lumen catheter therapy; for appropriate cases it can reduce the overall treatment time from six weeks to just five days.
- IMRT Good Samaritan Hospital was the first hospital in the South Bay to offer Intensity Modulated Radiation Therapy (IMRT), an external beam radiotherapy delivering more precisely targeted radiation beams to tumors, while sparing the surrounding healthy organs and tissues.



- IGRT Image Guided Radiotherapy allows tumors and normal structures to be visualized by x-ray or CT scan to verify location just before treatment is delivered. In conjunction with IMRT, this allows for unprecedented accuracy in delivering radiotherapy along with RapidArc technology for expedited treatment time. GSH was the first community hospital to offer IGRT beginning April 2007.
- Varian equipment: SmartBeam Intensity Modulated Radiotherapy (IMRT), Varian iX includes MLC plus Cone Beam CT capability, OBI features, a wide-bore CT-Simulator (Advantage Simulator), and the Varian iX Varisource High Dose Rate Brachytherapy is utilized for partial breast irradiation and gynecological cancers.
- Varian Eclipse and BrachyVision Treatment Planning System (TPS) and ARiA Record & Verify System (RVS).
- 4D CT evaluates respiratory tumor motion.
- MIM advanced fusion and contouring software.



Rakesh Patel, MD Medical Director Radiation Oncology Good Samaritan Hospital

# **Oncology Unit**

For specialized patient care we offer an oncology unit with all private rooms, a model health library for patients and families and a hospice room. Patients with cancer are cared for by an interdisciplinary team that includes medical directors, oncologists, radiation oncologists, surgeons, oncology nursing staff, oncology social workers, physical rehabilitation, occupational and speech therapists, pharmacists, dietitians, discharge planners, chaplains and volunteers who visit with patients. Complementary services include massage, music, guided imagery, acupressure and Reiki.

The oncology nursing staff employs the team nursing concept to provide care for oncology patients. All RN staff are trained by the Oncology Nursing Society to provide chemotherapy and biotherapy. Staff nurses are specially trained in caring for the oncology patient, administering chemotherapy, use of access devices and special equipment, surgical post-operative care, pain and symptom management, and management of other oncology care issues. They also specialize in and provide sensitive support and care to meet the complex physical and emotional needs of patients and their families. Our palliative care consultative service provides resources and support for the cancer patient and the family.

ACCESS, Good Samaritan Hospital's auxiliary volunteer program, provides support for transportation and housing based on need, as assessed by social services, and also provides snacks for caregivers in the library. In a special joint project, RNs and social workers assess caregivers for caregiving stress and provide additional follow-up support as needed.

# **Patient Navigation and Survivorship**

Good Samaritan Hospital has developed the Survivorship Program to provide patients education and resources to enhance their medical care and quality of life from the time of diagnosis to life after cancer treatment. A Survivorship Care Plan is a written or electronic document completed at the end of treatment that helps the patient and their medical team coordinate their future care. The important information about the given treatment, the need for future check-ups and cancer tests, the potential long-term late effects of the treatment they received and ideas for improving their health are vital for survivorship.

Cancer care is often complex, with many patients facing complicated treatment regimens, individualized therapies and rapidly changing evidential recommendations for existing therapies. Good Samaritan Hospital nurse navigators take some of this burden from the patient and help guide patients with cancer through complex treatments during a formidable time. The support of our nurse navigators, as part of the multidisciplinary healthcare team, provides a better experience for our patients and improves outcomes.

# Social Support & Education

The oncology social work staff are specialists in the area of illness-related problems and are available for individual/family consultation and inpatient counseling. Social Workers can help patients and their family cope with the emotional impact of the diagnosis and treatment, coordinate care, facilitate post hospital care and help connect patients and families to community resources. The Cancer Center has access to a full range of support groups, community education, screenings, nutrition counseling, massage therapy, pain management, palliative care, physical and occupational therapy to help our patients and their caregivers. We refer patients and their families to the American Cancer Society for additional education and support such as transportation to treatment, peer support, and other services. We also host the American Cancer Society's Look Good, Feel Better program which meets quarterly. Additionally, patients are referred to Cancer CAREpoint for multiple services, the most popular being counseling, exercise and nutrition.



#### **Clinical Trials**

Clinical trials compare standard treatments with new treatments doctors hope will provide improved outcomes. Many types of treatments are tested, such as new drugs, new approaches to surgery or radiation therapy, new combinations of treatments or new methods such as gene therapy.

A HIPEC (Hyperthermic Intraperitoneal Chemotherapy) clinical trial is available at Good Samaritan Hospital. HIPEC is a salvage treatment for relapsed and primary peritoneal surface tumors of gastrointestinal and genito-urinary origin. Surgery is combined with heated intra-operative chemotherapy to provide patients with traditionally intractable primary or recurrent cancers a chance at long term remission. This program has been active for nine years now and has demonstrated safety and improved outcomes.



Jeff Lin MD Surgeon Clinical Research Coordinator Good Samaritan Hospital

The Universal Breast Cancer Genetic Testing Registry will enroll 1,000 breast cancer patients across multiple locations in the United States including Good Samaritan Hospital. The enrollees will be tested with Invitae's multi-cancer panel, an 80-gene hereditary cancer test that includes genes associated with hereditary cancers in eight major organ systems. Any patient with a current or previous diagnosis of breast cancer can be enrolled in the study and receive genetic testing regardless of whether they meet established testing criteria. The goal of the study is to gather clinical and genetic information on every patient to better clarify the prevalence of gene alterations associated with breast cancer, the relationship of specific alterations with clinical presentation, and the impact of genetic information on clinical care and genetic counseling for the family.

The XPAND II (AirXpanders Patient Activated CoNtrolleD Tissue Expander System for Breast Reconstruction) clinical trial is a continued access of the previous clinical study (XPAND) designed to evaluate a new tissue expansion method for women who are undergoing breast reconstruction. It is a randomized, controlled clinical study to directly compare the outcomes of the traditional saline tissue expansion method to an investigational, remote-controlled, needle-free, tissue expansion system. This continued access study (FDA approved to allow patients continued access to this device) while AirXpanders, Inc. completes its marketing application and during the review process by FDA. We were the busiest center in the country for the first trial and completed patient enrollment in the XPAND II study in 2017.

Some of the other trials being offered to Good Samaritan Hospital patients include:

- TheraSphere® Yttrium-90 Glass Microspheres. Humanitarian Use Device (HUD)- an approved FDA device
- Excised Breast Tumor Gene Profile Analysis. Previous title: Breast Biopsy Microarray Gene Analysis
- CARE STUDY: Inamed Corporation Style 410 Silicone-Filled Breast Implant Continued Access Reconstruction/Revision Expansion
- Study of Denosumab as Adjuvant Treatment for Women W/High Risk Early Breast Cancer Receiving Neoadjuvant or Adjuvant Therapy (D-CARE)

Many other community based outpatient clinical trial opportunities are offered through our staff physicians' private offices. Patients can contact their physician for further information or to see if they are eligible to participate in a clinical research trial.

#### Surgery

As a high-volume surgery center, Good Samaritan Hospital has a medical team with the kind of expertise that truly makes a difference. We are skilled in all the latest surgical techniques including minimally invasive surgery and have an outstanding track record of superior patient outcomes and fast recoveries. We provide a wide spectrum of surgical procedures and have an extensive list of specialists on our medical staff.

#### **Robotic Surgery**

Robotic surgery is minimally invasive surgery widely employed in the field of medicine to perform surgeries related to general surgery, gynecology, urology and others. Many of the complex surgical procedures are performed with the latest generation da Vinci® robotic system which allows even smaller incisions and better optics and ergonomics than the previous generation, which many hospitals are currently using. The da Vinci System features a 10x magnified, 3D high definition vision system and tiny wristed instruments that bend and rotate far greater than the human wrist and as a result, da Vinci enables our surgeons to operate with enhanced vision, precision, dexterity and control. The benefits include minimal trauma to the surrounding tissues, including nerves; faster recovery time; less post-operative pain; reduced blood loss and need for transfusion; minimal scarring and shorter hospitalizations.

#### Neurosurgery

Good Samaritan's neurosurgery department continues to be at the forefront of surgery for the brain and spine. With rapid advances in brain surgery, our neurosurgeons now use state-of-the art imaging equipment that can zero in on brain tumors with a higher precision than ever before. In addition, our back specialists use new specialized instrumentation to fuse the back - in fact, one of our surgeons helped design implants for this approach. When it comes to neurosurgery, patients can rest assured that they are in good hands at Good Samaritan.

#### **Tumor Board**

The Good Samaritan Hospital Tumor Board meets weekly to discuss the management of patients with cancer. The multidisciplinary approach assures the patient will receive timely and comprehensive recommendations regarding the diagnosis and treatment of his or her cancer. Discussions include staging, site specific prognostic factors and treatment options based on national treatment guidelines. Our Breast Multidisciplinary Case Conference is also held on a weekly basis. Twice per month, we offer a Head and Neck Tumor Board Conference where head and neck malignancies are presented in a multidisciplinary and prospective format for decision-making purposes. Once per month we hold a Craniospinal Stereotactic Radiotherapy Tumor Board.



Elwyn Cabebe MD Cancer Committee Chair Medical Director of Oncology Good Samaritan Hospital

#### **Cancer** Committee

The Good Samaritan Hospital Cancer Committee is comprised of specialists in all areas dealing with cancer and is responsible for maintaining an exemplary hospital cancer program for the benefit of patients with cancer. The committee works closely with the American Cancer Society to coordinate cancer control efforts and to participate in support and educational activities within the community. Cancer Committee also includes the following subcommittees: Oncology Strategic Planning, Lung Screening Program, Community Outreach, Palliative Care, Breast Program Leadership, Chemo Wait Time, Colon Cancer Free Zone and an Executive Committee.

#### Homecare & Hospice

A wide range of homecare services are provided to cancer patients through various community homecare and hospice agencies. Social workers and discharge planners work closely together to assist patients and their families in arranging home nursing, physical, occupational and speech therapy, home health aide assistance, social services, home medical equipment, and other specialized services such as home intravenous therapy and hospice. Short term Hospice general inpatient care (GIP) is also offered in the hospital if needed for management of uncontrolled symptoms.

#### **Palliative Care**

The Palliative Care Consultation Service provides compassionate patient-centered management for patients with complex care needs and/or uncontrolled distressing symptoms. Board certified Palliative Care physicians, along with our interdisciplinary team, support the primary physician by providing symptom management expertise and collaboratively coordinating patient care toward outcome goals. Adjunctive services promoted and coordinated by Palliative Care include: Healing Arts of the Good Samaritan Auxiliary, "No One Dies Alone" volunteer vigil services, and spiritual support. Our team's supportive arms include: Bioethics Committee, Administration and Cancer Care Committee.

# 2017 Cancer Program Activities, Community Connections & Patient Care Service Improvements

• GSH participated in and helped sponsor the Senior Wellness Fair at the Jewish Community Center. GSH had 8 services lines present and the event was well attended.



- GSH sponsored the American Cancer Society Relay for Life. Team Good Sam participated in the 24 hour walk on July 15-16th. Good Sam closely partnered with the ACS in the Campbell Relay for Life, increasing overall contributions, adding active participants to the walking and fund-raising teams and maintaining a 24-hour presence at the event. Good Sam's team staffed the Cancer Action Network booth, recruiting new volunteers for ACS, enrolling individuals in pledges to make lifestyle changes to reduce their personal risk of cancer and signing up participants interested in becoming grassroots activists in support of cancer research and health and wellness oriented legislation.
- Music in the Park GSH sponsors this event. Every Sunday through Labor Day. BCC, Rad/Onc and DI hosted.
- Silicon Valley ONS meeting TNM 8th Edition Lung Cancer Staging, Elwyn Cabebe MD
- Good Samaritan Hospital participated in the Saratoga Health and Wellness Fair for the 3rd consecutive year located at the Joan Pisani Community Center in Saratoga put on by the Saratoga Area Senior Coordinating Council. The event started at 9 am and concluded at 12 pm. Good Sam occupied 2 tables at the event featuring GSH Radiation Oncology discussing all the services that Good Sam has to offer to the

community including a free smoking cessation class offered weekly and the GSH Joint Replacement Center occupied the second table discussing bone and joint health with the community. We had 2 nurses in attendance as well taking and documenting blood pressures for the attendees.

 3rd Cancer Survivor Event – June 15, 2017 at the Jewish Community Center. Speakers included Drs. Cabebe and Patel along with Christine Miaskowski, RN, PhD, FAAN from UCSF and 3 short talks on clinical nutrition, CyberKnife and the Oncology Rehab Program. 120 in attendance.



risk patients in order to provide a personalized care plan designed to prevent cancers & save lives.





The team from the GSH Breast Care Center won the BRA Day 2017, October 12th at Hotel Valencia in San Jose. All proceeds raised at this event directly benefit Cancer CarePoint.

Good Sam is a sponsor at this educational and inspiring annual event that brings support of women dealing with breast cancer during Breast Cancer Awareness Month.

The theme of this year's entry was "A Yearly Squeeze Could Help Save These!"



- GSH sponsored Bra Day 2017 at Hotel Valencia, an evening providing education and support to women dealing with breast cancer with all proceeds benefitting Cancer CAREpoint for providing personalized support services for anyone impacted by cancer in Silicon Valley, at no-cost. There was also a Bra Decorating Competition and the team from the GSH Breast Care Center took first place with their bra themed "A Yearly Squeeze Could Help Save These!". Dr. Zeidler presented updates in breast reconstruction techniques and a special patient shared her journey.
- Good Samaritan Hospital participated in the American Cancer Society's 2017 Making Strides Against Breast Cancer walk in San Jose on Saturday, October 28th. Passionate walk participants raised critical funds that will enable the American Cancer Society to fund innovative research; provide free, information and support to anyone touched by breast cancer; and help people reduce their breast cancer risk or find it early when it's most treatable.



The 2nd Annual Lung Health and Wellness Forum was held in the GSH auditorium. Lung Cancer is the leading cause of cancer death in our community - find out what you can do to avoid it. The event focused on prevention of lung diseases and cancer including topics related to prevention of lung disease - ways to keep your lungs strong and healthy; smoking cannabis - effects & risk of lung cancer; and a demonstration of SuperD (Navigational Bronchoscopy System) & da Vinci (Robotic Surgical System) featuring the following presentations: Optimizing Lung Health through Prevention by Sheila Brennan, RN, OCN, Lung Navigator; New Therapies in the Treatment of Lung Cancer by George Labban MD, Medical Oncologist; State of the Art Diagnosis and Surgical Intervention by Steven Schwartz MD, Thoracic Surgeon; and CyberKnife, Revolutionary Treatment for Lung Cancer by Gordon Wong MD, Radiation Oncologist.



• Free Skin Cancer Screening was held in the GSH Cancer Center. There were a total of 30 available screening appointments and all were filled. The first appointment was at 6:00 pm and the last at 8:15 pm. Three people were screened every 15 minutes. The screening included a full body check and each attendee was given education and prevention information. This included a hat, sunscreen, lip balm (containing sunscreen) as well as printed educational materials regarding limiting sun exposure and signs and

symptoms of skin cancer.



# 2017 Monitoring Compliance with National Evidence Based Guidelines for Ovarian Cancer

The cancer committee at Good Samaritan Hospital also performs studies to ensure that our patients are evaluated and treated according to evidence-based national treatment guidelines, using AJCC stage or other appropriate staging, including appropriate prognostic indicators. If any problems are identified with the diagnostic evaluation or treatment planning process they will serve as a source for performance improvements.

AJCC Stage	Stage Percent	Treatment	NCCN Recommendations GSH Results/Benchmark	Diagnostics	NCCN Recommendations GSH Results/Benchmark	Diagnostics	NCCN Guideline Recommendation
I	38% (6/16	Surgery alone: 3 Surgery + Chemo: 3	Surgery +/- Chemotherapy GSH: 100% Benchmark: 90%	CA-125: 6	CA-125 or other tumor markers GSH: 100% Benchmark: 90%	Ultrasound: 1 CT A/P: 5	Ultrasound and/or abdominal/pelvic CT GSH: 100% Benchmark: 90%
-	6% (1/16)	Surgery + Chemo: 1	Surgery + Chemotherapy 6SH: 100% Benchmark: 90%	CA-125: 1	CA-125 or other tumor markers GSH: 100% Benchmark: 90%	CT A/P: 1	Ultrasound and/or abdominal/pelvic CT GSH: 100% Benchmark: 90%
	38% (6/16)	Surgery + Chemo: 6	Surgery + chemotherapy 6SH: 100% Benchmark: 90%	CA-125: 6	CA-125 or other tumor markers GSH: 100% Benchmark: 90%	CT A/P: 6	Ultrasound and/or abdominal/pelvic CT GSH: 100% Benchmark: 90%
IV	18% (3/16)	Surgery + Chemo: 3	Surgery + Chemotherapy 6SH: 100% Benchmark: 90%	CA-125: 3	CA-125 or other tumor markers GSH: 100% Benchmark: 90%	CT A/P: 3	Ultrasound and/or abdominal/pelvic CT GSH: 100% Benchmark: 90%

# 2017 Good Samaritan Hospital Studies of Patient Care Quality

Name of Study: 2017 Re-audit of Days between Abnormal Screening and Diagnostic Mammograms

**Description of Study**: This study seeks to understand delays in the days between a patient's abnormal screening mammogram and day of diagnostic mammogram. The National Comprehensive Cancer Network (NCCN) benchmark is 7 days.

Study Period: Q2 2017

**Methodology and Source**: All patients with abnormal screening mammograms who are recommended for additional diagnostic evaluation are included in the denominator. Date of screening mammogram is time 0 and diagnostic mammogram is the day that the diagnostic mammogram was performed. Data is provided by the Breast Care Center.

Findings / Results	Days	NCCN Target
2015 Baseline	9.0	7.0
Q2017	4.62	7.0

**Conclusion/Analysis:** Beginning June 2016 all Radiologists transition to using Powerscribe for dictating resulting in a reduced turnaround time of reports. Barriers associated with delays in scheduling patients within the target number of days are patient request and unable the schedulers ability to contact the patient.

Plan: Continue periodic auditing to assure that targets continue to be met.



George Labban MD American College of Surgeons Cancer Liaison Physician

# **Cancer Registry**

Quality cancer data is central to the nation's cancer prevention and treatment efforts and cancer registrars are the first link in capturing that data. Cancer registrars are the professionals responsible for the collection and management of accurate and timely cancer patient information as part of the war on cancer. They serve as the primary link between patients and researchers and health professionals who need access to quality cancer data in order to provide for a healthier tomorrow for future generations. Cancer registrars work in a variety of cancer treatment and research settings and manage a wide range of demographic and medical data on those with cancer. The information is both submitted to and utilized by state and national cancer registries to enable cancer programs to accurately determine cancer patient populations, measure outcomes of treatment and survival and formulate plans for improvement. This data is included in the prestigious Annual Report to the Nation on the Status of Cancer, a collaboration of the American Cancer Society, the Centers for Disease Control and Prevention, the National Cancer Institute, and the North American Association of Central Cancer Registries, that uses cancer registry data to provide updated information on cancer occurrence and trends. The collection and analysis of Cancer Registry data allows the Good Samaritan Cancer Care Center to keep our quality of care equal to or higher than that of other health systems across the nation.

Cancer Registry professionals manage and analyze clinical cancer information for the purposes of processing, maintaining, compiling and reporting health information for:

- research
- quality management and improvement
- facility strategic planning and marketing
- monitoring patient outcomes
- cancer program development
- cancer prevention and surveillance
- evaluation of patient treatment and survival outcomes
- compliance with state reporting requirements and national accreditation standards

The data collected by the Cancer Registry are included in the National Cancer Data Base (NCDB), a joint program of the Commission on Cancer (CoC) of the American College of Surgeons (ACoS) and the American Cancer Society (ACS). The NCDB is a nationwide oncology outcomes database for more than 1,500 CoC accredited cancer programs in the United States and Puerto Rico. These data are used to explore trends in cancer care, to create regional and state benchmarks for participating hospitals, and to serve as the basis for quality improvement. The Cancer Registry uses the web-based applications provided by the NCDB to evaluate and compare the cancer care delivered to patients diagnosed and/or treated at Good Samaritan Hospital with that provided at state, regional and national cancer facilities.

Good Samaritan Hospital Cancer Registry data are also part of the National Cancer Institute's (NCI) Surveillance, Epidemiology and End Results (SEER) Program, a premier source for cancer statistics in the United States.

#### Inpatient Rehabilitation Program

The Inpatient Rehabilitation Program, which is accredited with the Commission on Accreditation of Rehabilitation Facilities (CARF) for adult inpatient rehab and as a stroke specialty program, provides comprehensive interdisciplinary therapeutic programs that significantly improve patient function after injury or illness. The acute rehab program includes a team of physiatrists, internal medicine physicians, occupational, physical, speech and certified recreational therapists, neuropsychologist, social worker and rehabilitation nurses. The unit, located at the Mission Oaks Campus, has 15 private rooms, as well as therapy spaces and equipment where patients and their families practice activities of daily living.

# Acknowledgments

Thanks to the many people who have assisted in the growth and development of the Good Samaritan Hospital Cancer Program, and to the staff providing care to our cancer patients. We especially wish to acknowledge the medical staff and their office personnel for their continuing cooperation with providing treatment information as well as to the staffs of the Pathology and Radiation Oncology departments. Thank you to Natalie Hayes and Patty Rondas for their continued assistance in support of the cancer program. Our gratitude to Carla Zaccheo for producing the patient profile section of the annual report and Allison Everman for her many valuable contributions. A special thanks to Graphic Ink Creative Group for the design and production of this report.

The 2017 Cancer Care Center Program Report was prepared by Katy Calios, RHIT, CTR. Questions regarding this report or requests for additional information may be directed to Katy Calios, Program Manager, Cancer Program Compliance at 408-358-8422 or katy.calios@hcahealthcare.com. This report can also be accessed via the Good Samaritan Hospital website: http://goodsamsanjose.com

Photography by Stan Olszewski, SOSKI photo and John Ho, John Ho Photography.

## **Cancer Committee Members**

Elwyn Cabebe MD, Chairman Medical Director Oncology

Rajeev Bala MD Pathology Cancer Registry Physician Advisor

George Labban MD ACoS Cancer Liaison Physician

Jeff Lin MD Surgery Clinical Research Coordinator

Rakesh Patel MD Medical Director Radiation Oncology

Ali Shirzadi MD Neuro-Oncology

Anup Singh MD Medical Director Diagnostic & Interventional Radiology

Kamakshi Zeidler MD Plastic Surgery



Patty Rondas, Service Coordinator in the Radiation Oncology Department, received the Good Samaritan Hospital Mighty Oak Award which was nominated by peers and physicians who shared a same theme, "She is one of the most helpful, kind, non-complaining, generous people I have had the pleasure to work with!", and "She genuinely cares about the staff and their families and what is going on their personal lives."

We are blessed to have Patty as a part of the Good Sam team. Congratulations Patty, we appreciate all you do! Lori Arias RT(T) MBA VP Oncology Service Line / Cancer Program Administrator

Meenu Arora MBA Manager, Quality / Quality Improvement Coordinator

Katy Calios RHIT CTR Manager, Cancer Program / Cancer Registry Quality Coordinator

Omar Chughtai MHA FACHE Chief Operating Officer / Administration

Stacey Contreras CRT(M) Director, Breast Care Center

Ronda Dohse LCSW Social Service / Psychosocial Services Coordinator

Allison Everman VP Marketing / Community Outreach Coordinator

Steven Hytry PsyD Executive Director, Behavioral Health Services

Robert Mackay MDiv BCCC BCPC CPETF Director, Chaplaincy / Pastoral Care Services

Lisa Mar MS LCGC Genetics

Christina Pedley MS LCGC *Genetics* 

Mei Poon PharmD Director, Pharmacy

Patricia Rondas Cancer Conference Coordinator

Cheryl Sinclair Health Systems Manager, American Cancer Society

Dana Stevens RN MHA BSN CN-BN Breast Nurse Navigator

Eva Yip MS RD *Clinical Nutrition* 

Sunny Yuan RN OCN MSN MBA Director, Oncology Unit / Palliative Care





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