

# 2019 Oncology Annual Report

(With statistical data from 2018)



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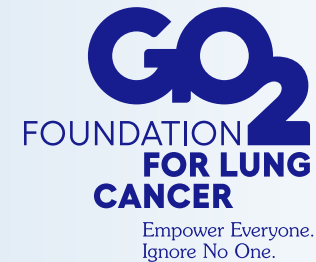
For more information about our services, personnel, or technology, call 970-298-7500 or toll free 1-800-458-3888.

## National Accreditations:

St. Mary's Medical Center is accredited by multiple nationally recognized organizations that require the highest standards in patient safety and quality of care.



A **QUALITY PROGRAM**  
of the AMERICAN COLLEGE  
OF SURGEONS



To learn more about SCL Health Cancer Centers of Colorado at St. Mary's Medical Center, visit [sclhealth.org/services/cancer](http://sclhealth.org/services/cancer) or call 970-298-7500.

# SCL Health Oncology Leadership Welcome



It has been a year of progress and growth for the SCL Health Cancer Centers of Colorado and Montana. We have welcomed new medical, radiation and surgical oncologists to our team. Systemwide we joined the Strata Oncology network of health systems. This partnership provides our patients with the latest in molecular profiling of their cancers, at no cost to them. This gives their physicians information on the genetic make-up of those cancers to help direct treatment. In November we launched Oncology News and Notes, a quarterly newsletter highlighting people and events in our centers.

In Montana there has been continued growth of the oncology clinical research program at St. Vincent's and the launching of a clinical research program at St. James. At Holy Rosary in Miles City, a newly renovated infusion center opened providing patients with increased comfort while receiving treatment. An exciting program was initiated across the region to increase lung cancer screenings for Native Americans. Low dose CT lung screening has been shown to reduce death from lung cancer in appropriately selected populations. Through a grant from George Washington University, our Montana SCL improvement initiative will endeavor to increase screenings and other healthcare services to the Crow and Northern Cheyenne tribes.

At St. Mary's in Grand Junction, we welcomed Dr. Lucas Gilbride (radiation oncology) and Dr. Alicia Swink (medical oncology). In addition Dr. Joyce Sekheran took over the medical directorship of our breast cancer program. St. Mary's completed the remodel of the Breast Care Center, including the Wilma B. Bacon Mammography Center. The new look provides an improved atmosphere of tranquility and healing.

On the Front Range we have welcomed surgical oncologist, Dr. Parth Shah (Saint Joseph and Good Samaritan), medical oncologists Lovie Bey (Lutheran) and Ike Onwere (Platte Valley). Dr. Julie Carlson (radiation oncologist) relocated from St. Mary's to Lutheran Medical Center in Wheat Ridge. A monthly art therapy program was launched at the Good Samaritan Cancer Center with growing participation from patients and care-givers. The Platte Valley oncology program showed continued growth with the arrival of Dr. Ike Onwere and Sloan's Lake, our free standing clinic continued to provide services to oncology as well as non-oncology patients receiving infusions.

All of this occurred as we continued to see increased treatment options for individuals with cancer, utilizing specifically targeted drugs, and immune directed therapies. Together the cancer death rate continues to shrink and the number of cancer survivors increases.

## **Alan M. Miller MD, PhD**

*Chief Medical Director of Oncology*

*To learn more about SCL Health Cancer Centers of Colorado at St. Mary's Medical Center, visit [sclhealth.org/services/cancer](https://sclhealth.org/services/cancer) or call 970-298-7500.*

# Cancer Committee and Service Leadership

| Member Name                 | Committee Role   |
|-----------------------------|--|
| Vernon King, MD             | Cancer Committee Chair<br>Radiation Oncology                       |
| Catherine Bieker, CTR, RHIT | Cancer Registry Quality Control<br>Cancer Registry                 |
| Brandi Byars, MSW, LSW      | Psychosocial Distress Coordinator<br>Social Work                   |
| Julie Carlson, MD           | Cancer Liaison Physician (CLP) Past<br>Radiation Oncology          |
| Autumn Clark, RN            | Quality Improvement Coordinator<br>Nursing                         |
| Amanda Cozart, MS CGC       | Genetics Counselor & Risk Assessment Past<br>Oncology Service Line |
| Gene Crafton, MD            | Gastroenterology   |
| Kevin Dryanski, MBA         | Cancer Program Administrator<br>Oncology Service Line              |
| Christine Dunlap RN         | Cancer Conference Coordinator<br>Nursing                           |
| Carol Fowler, MD            | Palliative Care Past   |
| R. Kim Gibson, MD           | Survivorship Coordinator<br>Medical Oncology                       |
| Christopher Hampson, MD     | Diagnostic Radiology   |
| Marty Jacobson, PhD         | Clinical Research Coordinator<br>Clinical Research                 |
| David James MD              | Pulmonology  |
| Joe Kaiser, PharmD, BCOP    | Pharmacy   |
| Page Kanopsic, NP           | Genetics Counselor & Risk Assessment<br>Medical Oncology           |
| Erica Kinsey, PhD           | Quality Improvement Coordinator<br>Radiation Oncology              |
| Stephanie Lape, MD          | Palliative Care  |
| Jennifer March, MS, CGC     | Genetics Counselor & Risk Assessment Past<br>Oncology Service Line |

| Member Name               | Committee Role  |
|---------------------------|---|
| Douglas Rock, MD          | Cancer Committee Co-Chair<br>Cancer Liaison Physician (CLP)<br>Radiation Oncology |
| Tara Marshall, MD         | Pathology   |
| James Merrell, MD         | Otolaryngology  |
| Alan Miller, MD, PhD      | SCL Health Chief of Oncology<br>System Services                                   |
| Herbert Mooney, MD        | Pathology   |
| Kathy Mowat, MSW, LCSW    | Psychosocial Distress Coordinator Past<br>Social Work                             |
| Bryan Newman, M.Div., BCC | Psychosocial Distress Coordinator<br>Social Work - Palliative Care                |
| Steven O'Day MD           | Surgery   |
| Cindy Ortiz, MBA          | Community Outreach Coordinator<br>Breast Care Center - Medical Oncology           |
| Stacy Petersen, RN        | Cancer Conference Coordinator<br>Nursing  |
| Katie Ryan, RD, CSO       | Dietician   |
| Zoe Ryder, BSN, RN, OCN   | Clinical Research Coordinator<br>Clinical Research                                |
| Joyce Sekharan, MD        | Surgery   |
| Samuel Steury, MD         | Diagnostic Radiology  |
| Mary Lou Stevens, PA      | Palliative Care Past  |
| Rita Stevens, OTR         | Occupational Therapist<br>Cancer Rehabilitation                                   |
| Dan Thomas                | Community Outreach Coordinator<br>Oncology Business Office Manager                |
| Michele Webb, CTR         | Cancer Registry Quality Control<br>Cancer Registry                                |
| Missy Wright              | Account Representative<br>American Cancer Society                                 |
| Kyle Work, DO             | Medical Oncology  |

To learn more about SCL Health Cancer Centers of Colorado at St. Mary's Medical Center, visit [sclhealth.org/services/cancer](https://www.sclhealth.org/services/cancer) or call 970-298-7500.



# Summary of Data 2018

## Primary Site Tabulation for 2018 St. Mary's Medical Center Analytical Case

This report includes 2018 analytical cases; those diagnosed and/or treated at St. Mary's Medical Center in 2018.

New Diagnoses only, does not include recurrences.

| Primary Site            | Total Analytical Cases | Percent of Total Cases | Male       | Female     |
|-------------------------|------------------------|------------------------|------------|------------|
| <b>All Sites</b>        | <b>847</b>             |                        | <b>380</b> | <b>467</b> |
| <b>Oral Cavity</b>      | <b>26</b>              | <b>3.1</b>             | <b>20</b>  | <b>6</b>   |
| Lip                     | 1                      | 0.1                    | 1          | 0          |
| Tongue                  | 10                     | 1.2                    | 9          | 1          |
| Oropharynx              | 2                      | 0.2                    | 2          | 0          |
| Hypopharynx             | 0                      | 0.0                    | 0          | 0          |
| Other                   | 13                     | 1.5                    | 8          | 5          |
| <b>Digestive System</b> | <b>129</b>             | <b>15.2</b>            | <b>78</b>  | <b>51</b>  |
| Esophagus               | 4                      | 0.5                    | 3          | 1          |
| Stomach                 | 6                      | 0.7                    | 5          | 1          |
| Colon                   | 45                     | 5.3                    | 31         | 14         |
| Rectum                  | 21                     | 2.5                    | 11         | 10         |
| Anus/Anal Canal         | 3                      | 0.4                    | 1          | 2          |
| Liver                   | 17                     | 2.1                    | 14         | 3          |
| Pancreas                | 22                     | 2.6                    | 11         | 11         |
| Other                   | 11                     | 1.3                    | 2          | 9          |

| Primary Site                                     | Total Analytical Cases | Percent of Total Cases | Male      | Female    |
|--|------------------------|------------------------|-----------|-----------|
| <b>Respiratory System</b>                        | <b>127</b>             | <b>15.0</b>            | <b>77</b> | <b>50</b> |
| Nasal/Sinus                                      | 1                      | 0.1                    | 0         | 1         |
| Larynx   | 14                     | 1.7                    | 12        | 2         |
| Other  | 2                      | 0.2                    | 1         | 1         |
| Lung/Bronc-Small Cell                            | 15                     | 1.8                    | 6         | 9         |
| Lung/Bronc-Non Small Cell                        | 87                     | 10.3                   | 53        | 34        |
| Other Bronchus & Lung                            | 8                      | 0.9                    | 5         | 3         |
| <b>Blood &amp; Bone Marrow</b>                   | <b>49</b>              | <b>5.8</b>             | <b>28</b> | <b>21</b> |
| Leukemia   | 26                     | 3.1                    | 14        | 12        |
| Multiple Myeloma                                 | 10                     | 1.2                    | 6         | 4         |
| Other  | 13                     | 1.5                    | 8         | 5         |
| <b>Bone</b>                                      | <b>0</b>               | <b>0.0</b>             | <b>0</b>  | <b>0</b>  |
| <b>Connect/Soft Tissue</b>                       | <b>2</b>               | <b>0.2</b>             | <b>1</b>  | <b>1</b>  |
| <b>Skin – Excludes Basal &amp; Squamous Cell</b> | <b>19</b>              | <b>2.2</b>             | <b>8</b>  | <b>11</b> |
| Melanoma   | 19                     | 2.2                    | 8         | 11        |
| Other  | 0                      | 0.0                    | 0         | 0         |

## Summary of Data 2018 *(continued)*

### Primary Site Tabulation for 2018 St. Mary's Medical Center Analytical Case

This report includes 2018 analytical cases; those diagnosed and/or treated at St. Mary's Medical Center in 2018.

New Diagnoses only, does not include recurrences

| Primary Site          | Total Analytical Cases | Percent of Total Cases | Male      | Female     |
|-----------------------|------------------------|------------------------|-----------|------------|
| <b>Breast</b>         | <b>164</b>             | <b>19.4</b>            | <b>1</b>  | <b>163</b> |
| <b>Female Genital</b> | <b>48</b>              | <b>5.7</b>             | <b>0</b>  | <b>48</b>  |
| Cervix Uteri          | 6                      | 0.7                    | 0         | 6          |
| Corpus Uteri          | 23                     | 2.7                    | 0         | 23         |
| Ovary                 | 16                     | 1.9                    | 0         | 16         |
| Vulva                 | 0                      | 0.0                    | 0         | 0          |
| Other                 | 3                      | 0.4                    | 0         | 3          |
| <b>Male Genital</b>   | <b>82</b>              | <b>9.7</b>             | <b>82</b> | <b>0</b>   |
| Prostate              | 78                     | 9.2                    | 78        | 0          |
| Testis                | 4                      | 0.5                    | 4         | 0          |
| Other                 | 0                      | 0.0                    | 0         | 0          |
| <b>Urinary System</b> | <b>67</b>              | <b>7.9</b>             | <b>44</b> | <b>23</b>  |
| Bladder               | 31                     | 3.7                    | 25        | 6          |
| Kidney/Renal          | 34                     | 4.0                    | 17        | 17         |
| Other                 | 2                      | 0.2                    | 2         | 0          |

| Primary Site             | Total Analytical Cases | Percent of Total Cases | Male      | Female    |
|--------------------------|------------------------|------------------------|-----------|-----------|
| <b>Brain &amp; Cns</b>   | <b>52</b>              | <b>6.1</b>             | <b>15</b> | <b>37</b> |
| Brain (Benign)           | 3                      | 0.4                    | 1         | 2         |
| Brain (Malignant)        | 16                     | 1.9                    | 7         | 9         |
| Other                    | 33                     | 3.9                    | 7         | 26        |
| <b>Endocrine</b>         | <b>47</b>              | <b>5.5</b>             | <b>9</b>  | <b>38</b> |
| Thyroid                  | 37                     | 4.4                    | 5         | 32        |
| Other                    | 10                     | 1.2                    | 4         | 6         |
| <b>Lymphatic System</b>  | <b>20</b>              | <b>2.4</b>             | <b>9</b>  | <b>11</b> |
| Hodgkin's Disease        | 0                      | 0.0                    | 0         | 0         |
| Non-Hodgkin's            | 20                     | 2.4                    | 9         | 11        |
| <b>Unknown Primary</b>   | <b>13</b>              | <b>1.5</b>             | <b>7</b>  | <b>6</b>  |
| <b>Other/III-Defined</b> | <b>2</b>               | <b>0.2</b>             | <b>1</b>  | <b>1</b>  |

Data Source: SCL Health System Cancer Registry October 29, 2019 SRS

# SCL Health System Cancer Registry

## Cancer Registry Overview

St. Mary's Medical Center's oncology cases are abstracted by the SCL Health Cancer Registry. The cases or abstracts are housed in a secure data base and patient privacy laws are strictly adhered.

For the year 2018 the Cancer Registry abstracted 847 analytical cases for St. Mary's. Analytical cases are newly diagnosed cancer cases that meet the following criteria. The cancer was 1) diagnosed, 2) diagnosed and treated, or 3) diagnosed elsewhere and treated at St. Mary's. The top cancer body sites in 2018 were; breast, lung, prostate, colorectal, and blood & bone marrow.

The Cancer Registry works closely with the Cancer Committee to support the Comprehensive Community Cancer Program (CCCP) accreditation awarded by the American College of Surgeons Commission on Cancer (ACoS CoC). St. Mary's Regional Cancer Center Cancer Program is accredited through 2021.

The SCL Health Cancer Registry exceeds the Colorado Central Cancer Registry's (CCCR) requirements in timeliness and accuracy and follows each patient annually for the rest of their lives to record disease status and survival. Every registrar receives education annually and abstractors are required to be a Certified Tumor Registrar (CTR).

## What information is collected?

The cancer registry is responsible for identifying all eligible cancer cases seen at St. Mary's through an extensive medical record review process called case finding. Once an eligible case is identified Certified Tumor Registrars (CTR's) abstract the required information. The complete medical record is reviewed and diagnostic, treatment and disease status is abstracted in detail. Abstracted data fields include but are not limited to; patient demographics, histology, tumor grade, AJCC stage of disease at diagnosis, tumor markers, tumor size, regional

lymph node status, first course of therapy, and annual follow-up for disease status. In addition to the information required by the ACoS CoC, the Cancer Registry also collects supplemental prognostic and predictive factors for the CCCR CDPHE and St. Mary's Cancer Program. Once entered into the SCL Health Cancer Registry Database, the data is checked for quality and reported to the Colorado Central Cancer Registry (CCCR) and the National Cancer Database (NCDB).

## How is the data used?

By monitoring diagnosed cases and the treatments received, the CCCR (a division of the Colorado Dept. of Health and Public Environment) can develop prevention and screening programs for Colorado's residents. Additionally, researchers can assess treatment for effectiveness with the goal of providing future cancer patients with improved treatment and outcomes. St. Mary's leadership and the SCL Health Oncology Service Line use the registry's data to ensure community and patient needs are being met and the highest quality of care is provided. Patient privacy laws are strictly adhered to throughout the entire reporting process.

Through St. Mary's ACOS CoC accreditation data is reported to the National Cancer Database (NCDB). By submitting this data, St. Mary's can participate in the Cancer Program Practice Profile Reports also known as the CP<sup>3</sup>R(v3) and the Rapid Quality Reporting System (RQRSv1.1). The CP<sup>3</sup>R reports provide the ability to benchmark evidence-based care standards against other accredited facilities at the state and national level for; bladder, breast, cervix, colon, endometrium, gastric, kidney, lung, ovary and rectum. In addition, reports can be pulled for any cancer body site and comparisons made against other CoC accredited programs. Examples of reports include, but are not limited to; stage at diagnosis, survival by stage and treatment modalities.

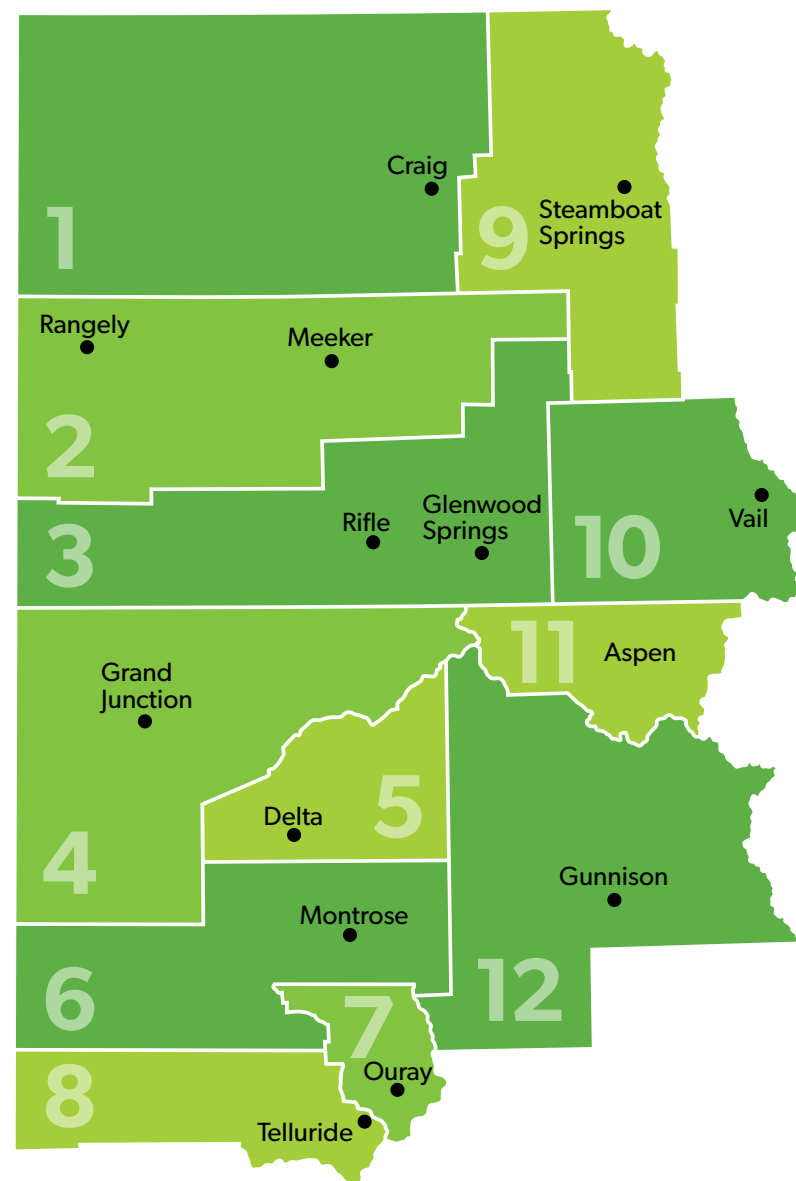
*To learn more about SCL Health Cancer Centers of Colorado at St. Mary's Medical Center, visit [sclhealth.org/services/cancer](https://sclhealth.org/services/cancer) or call 970-298-7500.*

## Referrals Per County – 2018

|           |                           |            |
|-----------|---------------------------|------------|
| <b>1</b>  | <b>Moffat</b>             | <b>18</b>  |
| <b>2</b>  | <b>Rio Blanco</b>         | <b>15</b>  |
| <b>3</b>  | <b>Garfield</b>           | <b>43</b>  |
| <b>4</b>  | <b>Mesa</b>               | <b>570</b> |
| <b>5</b>  | <b>Delta</b>              | <b>56</b>  |
| <b>6</b>  | <b>Montrose</b>           | <b>47</b>  |
| <b>7</b>  | <b>Ouray</b>              | <b>5</b>   |
| <b>8</b>  | <b>San Miguel</b>         | <b>9</b>   |
| <b>9</b>  | <b>Routt</b>              | <b>3</b>   |
| <b>10</b> | <b>Eagle</b>              | <b>2</b>   |
| <b>11</b> | <b>Pitkin</b>             | <b>4</b>   |
| <b>12</b> | <b>Gunnison</b>           | <b>8</b>   |
|           | <b>All other counties</b> | <b>23</b>  |
|           | <b>Out of state</b>       | <b>44</b>  |

|   |            |
|---|------------|
| Total analytical cases at Cancer Centers of Colorado in 2018              | <b>847</b> |
| Total cases diagnosed and treated at Cancer Centers of Colorado           | <b>490</b> |
| Total cases diagnosed only at Cancer Centers of Colorado                  | <b>65</b>  |
| Total cases diagnosed elsewhere and treated at Cancer Centers of Colorado | <b>292</b> |

|  |            |
|--|------------|
| Number of General Cancer Conference meetings Jan-Oct 2019      | <b>106</b> |
| Number of cases presented at Cancer Conference Jan-Oct 2019    | <b>537</b> |
| Number of Cancer Committee meetings 2019                       | <b>4</b>   |
| Special requests for cancer registry data in 2019 Jan-Oct 2019 | <b>68</b>  |



To learn more about SCL Health Cancer Centers of Colorado at St. Mary's Medical Center, visit [sclhealth.org/services/cancer](http://sclhealth.org/services/cancer) or call 970-298-7500.



# Major Cancer Sites

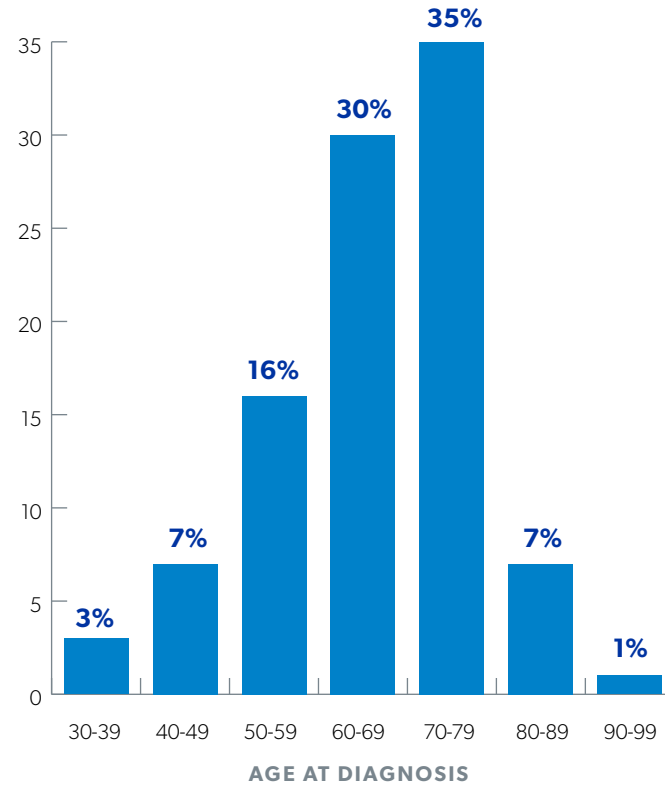
## Breast Cancer

Cancer Centers of Colorado at St. Mary's Medical Center reported 163 new cases of breast cancer in 2018.

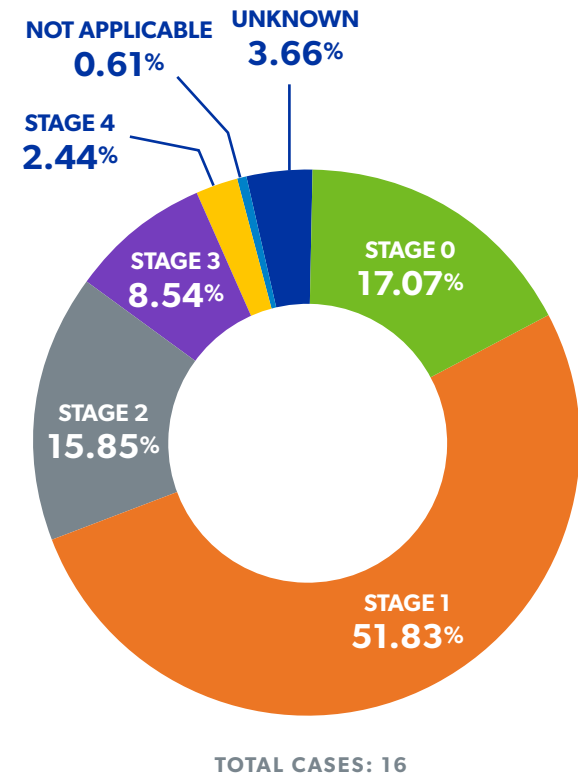
The American Cancer Society estimates 268,600 new cases of breast cancers diagnosed in women, in the United States for 2019. Of those approximately 41,760 women will die from their breast cancer.

Breast Cancer remains the most common cancer diagnosed in women and is the second leading cause of cancer death in women. Only lung cancer kills more women each year. Early detection and diagnosis through regular mammography reduces the risk of dying from breast cancer.

**ST. MARY'S 2018  
NEW BREAST CANCER DIAGNOSIS**



**ST. MARY'S 2018  
BREAST CASES STAGE AT DIAGNOSIS**



## Major Cancer Sites *(continued)*

### Lung Cancer

Lung cancer remains the number one cause of cancer deaths for both men and women in the United States. The high rate of death is attributed to lack of symptoms in early stage lung cancer, when there are more treatment options available that can provide better outcomes.

Advanced lung cancers are more difficult to treat and have often spread to other organs in the body.

Smoking is the primary risk factor; about 81% of lung cancer deaths are caused by smoking. The second leading cause is exposure to secondhand smoke. Other factors include exposure to radon gas, asbestos and environmental carcinogens (cancer causing substances).

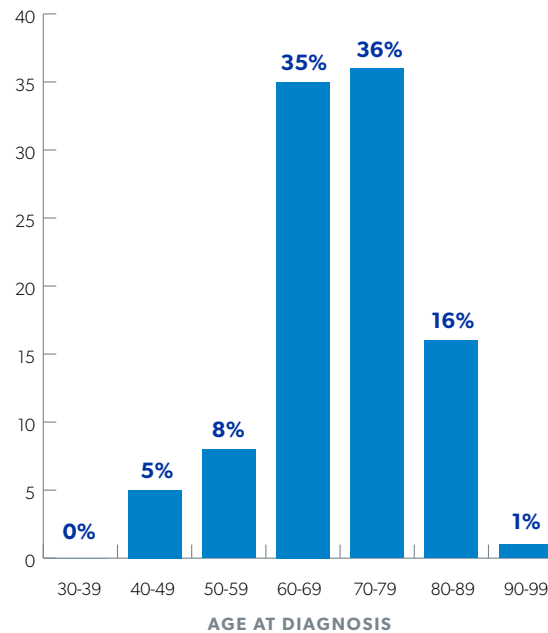
Clinicians with access to high-volume, high-quality lung cancer screening and treatment centers should initiate a discussion about annual lung cancer screening with apparently healthy patients ages 55-74 who have at least a 30 pack-year smoking history, and who currently smoke or have quit within the past 15 years.

Low-dose computed tomography (LDCT), which is offered at Cancer Centers of Colorado at St. Mary's, is the only recommended screening test to identify lung cancer. The U.S. Preventive Services Task Force has determined that those who could qualify for LDCT are between the ages of 55-80 years of age, have a 30 pack year history (number of

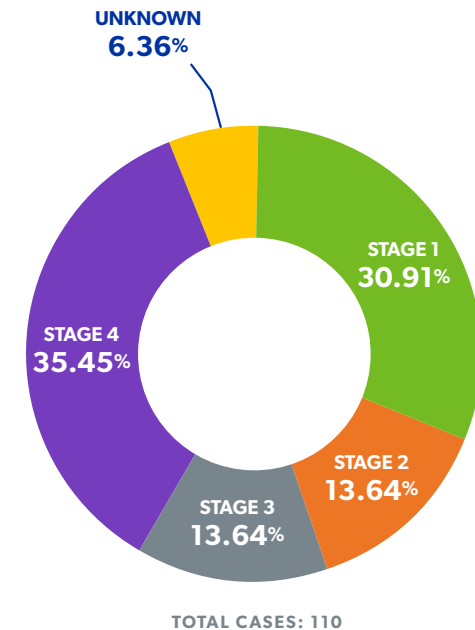
packs per day times the number of years smoked), or have quit smoking in the past 15 years.

Cancer Centers of Colorado reported 110 new lung cancer cases in 2018. The majority of these cases were diagnosed in the later, less treatable stages, which is comparable to the national trends in lung cancer. Prevention is the best way to decrease the risk of getting lung cancer.

**ST. MARY'S 2018  
NEW LUNG CANCER DIAGNOSIS**



**ST. MARY'S 2018  
LUNG CASES STAGE AT DIAGNOSIS**



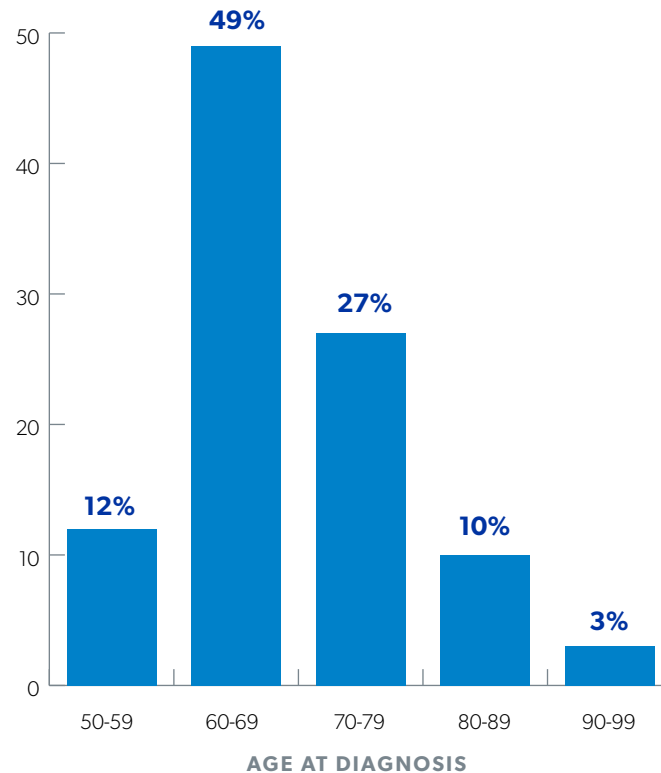
To learn more about SCL Health Cancer Centers of Colorado at St. Mary's Medical Center, visit [sclhealth.org/services/cancer](http://sclhealth.org/services/cancer) or call 970-298-7500.

## Major Cancer Sites *(continued)*

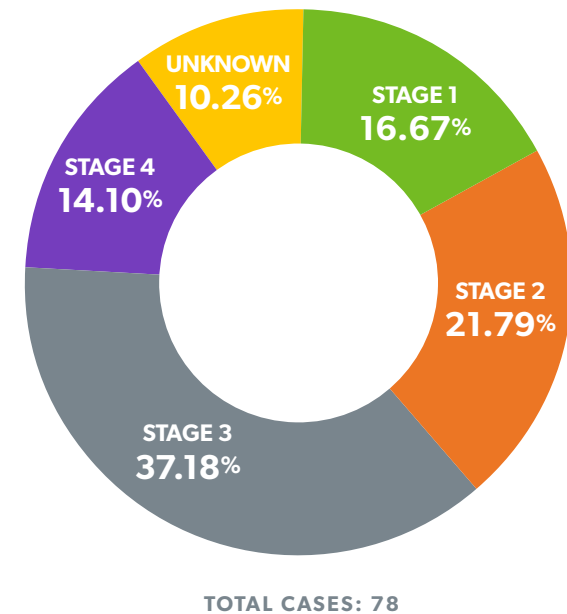
### Prostate Cancer

The American Cancer Society estimates 174,650 new prostate cancer diagnosis in the United States in 2019, resulting in approximately 31,620 deaths. Approximately one in nine men will be diagnosed with prostate cancer during their lifetime. Prostate cancer develops mainly in men 65 and older and is rarely seen before the age of 40. Prostate cancer is the second leading cause of cancer death in American men, behind lung cancer. Although prostate cancer can be a serious disease, most men diagnosed with prostate cancer will not die from it.

**ST. MARY'S 2018  
NEW PROSTATE CANCER DIAGNOSIS**



**ST. MARY'S 2018  
PROSTATE CASES STAGE AT DIAGNOSIS**



## Major Cancer Sites *(continued)*

### Colorectal Cancer

Colorectal cancer is the third most common cancer in both men and women in the US.

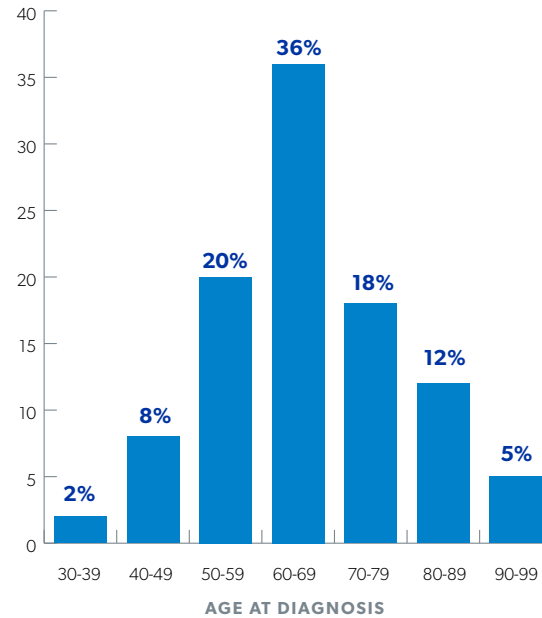
In 2018 the American Cancer Society updated their colorectal cancer screening guidelines. Patients with average risk are recommended to begin colorectal screening at the age of 45 instead of 50. Colorectal screening can actually prevent a diagnosis of colon cancer by identifying and removing precancerous polyps. A colonoscopy, which is a flexible video scope inserted into the colon is a common screening procedure that removes precancerous polyps and finds early stage cancers.

Cancer Centers of Colorado at St. Mary's Medical Center, in collaboration with local gastroenterologists (doctors who specialize in gastrointestinal diseases and disorders), continue to provide community education and colorectal cancer prevention, screening and early detection.

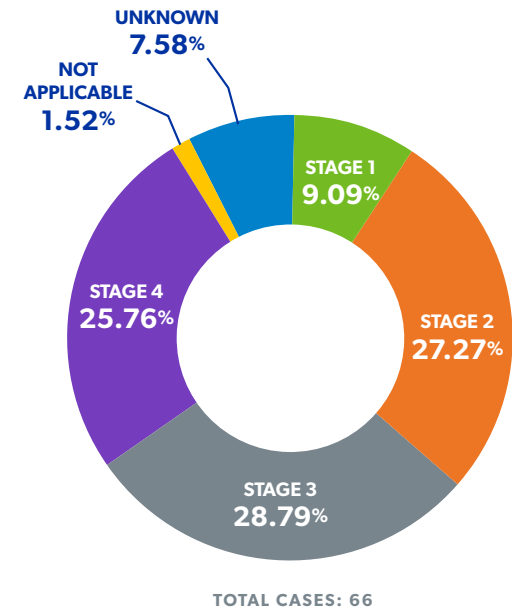
In 2018 a total of 66 cases of colorectal cancer were diagnosed at the Cancer Centers of Colorado.

Risk factors for colon cancer increase with age. Lifestyle habits can put you at increased risk for colorectal cancer.

**ST. MARY'S 2018  
NEW COLORECTAL CANCER DIAGNOSIS**



**ST. MARY'S 2018  
COLORECTAL CASES STAGE AT DIAGNOSIS**



These include obesity, physical inactivity, diets high in red and processed meats, heavy alcohol intake, and diet low in fiber. Smoking may also increase your risk for colorectal cancer.

People with a high number of polyps (small bulb like growths in the colon), inflammatory bowel disease, or a family history of colorectal cancer may have an increased risk and should consult their physician about starting screenings earlier than those with an average risk.

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## 2019 Activities, Patient Care Improvements, Community Connections & Resources

### Prevention Program

Cancer Prevention Programs are designed to reduce the incidence of a specific cancer type and targeted to meet the prevention needs of our community. Cancer Centers of Colorado at St. Mary's Medical Center participates in numerous local events each year educating the community at large on the importance of cancer prevention and early detection. Education on behaviors to reduce the chance of developing cancer as well as detecting cancer at an early stage improves overall survival and decreases morbidity.

**Breast Cancer:** The Wilma B. Bacon Breast Care Center at St. Mary's Medical Center provided one-on-one education on breast health and screening guidelines to 30 women. Mammography Technologists provided education on knowing one's risk, screening guidelines and tips on overall wellness to reduce cancer risk. Of the 30 women, 10 (33.3%) had their annual mammograms, five (16.7%) were breast cancer survivors, three (10%) self-reported the need for follow up but never did for various reasons and 10 (33.3%) did not know when to begin screenings. Overall, the opportunity to provide breast health education was well received, especially the recommended screening guidelines.

**Skin Cancer:** Cancer Centers of Colorado at St. Mary's Medical Center staff provided skin cancer prevention education to 162 high school youth to include: pool staff and a marching band, as their activities are spent in the sun. Of the 162 participants, 100% knew the ABCDEs of Melanoma and how to protect themselves from the sun, especially during peak hours, with the American Cancer Society's Slap! Slop! Slap! And Wrap! Campaign. Raising awareness in our local youth was the focus this year.



### Screening Programs

Cancer screenings provide an opportunity to meet the needs of our community, which are designed to decrease the number of patients with late-stage disease. The following were provided to our community and patients.

**Oral Cancer:** In collaboration with the local Federally Qualified Health Center (FQHC), 974 patients were screened for oral cancer during their regular dental visits, using "Identifi" with 0 suspicious lesions identified. This is the first year since implementation 0 lesions were identified.

**Lung Cancer:** Low Dose CT Lung Screening for High-Risk Patients. During 2019, 343 people were screened and 18 required follow up PET and/or CT and/or biopsy. Of those 18, 15 patients were diagnosed with lung cancer. Our results of 15 diagnoses per 343 screened, exceeds the NLST trials which have a rate of one diagnosis per 320 screened.

*To learn more about SCL Health Cancer Centers of Colorado at St. Mary's Medical Center, visit [sclhealth.org/services/cancer](https://sclhealth.org/services/cancer) or call 970-298-7500.*

## 2019 Activities, Patient Care Improvements, Community Connections & Resources *(continued)*

### 2019 Studies of Quality

#### Lab Turn Around Time Quality Study:

Delivery of cytotoxic therapy is a complex multifaceted process that requires collaboration between all clinicians and systems involved. Oncologists routinely order complete blood counts and comprehensive metabolic panels (CMP) to determine whether the patient is healthy enough for treatment. Even when a test is not ordered STAT, optimizing laboratory turnaround time (TAT) ensures timely delivery of chemotherapy. Improvements in TAT also translate into improved patient outcomes and satisfaction while reducing the associated costs and barriers to delivery of quality care by the facility.

**Inpatient Rounds Quality Study:** The Cancer Committee determined the need to study the impact of the weekly inpatient oncology service patient rounds process. This process is in place to discuss the inpatient care of patients currently under the medical oncology consult service at the hospital. The purpose of the process is to determine the best approach to treating these patients.

### 2019 Patient Care Quality Improvements

#### Lab Turn Around Time:

Implementation of the Quality Improvement at the conclusion of the pilot testing phase of the project data was collected for analysis and reviewed by the analytics team. Changes to the process for the collection, delivery and results reporting of laboratory specimens were implemented at all SCL Health care sites.

#### Online Mammography Scheduling:

St. Mary's implemented an online mammography scheduling program at the end of 2018. This program was designed to improve the accessibility of care and increase the volume of appropriate mammograms being scheduled. Since its inception, the volume of scheduled appointments through this program has been small. It is our goal to increase the volume of mammograms scheduled through this program.





## 2019 Activities, Patient Care Improvements, Community Connections & Resources *(continued)*

### Community Connections

#### A K Hair Studios

Local, certified stylist who provided high quality wigs for our cancer patients.

#### American Cancer Society

Collaborated and referred patients to Rides to Recovery, Patient Lodging Programs and the TLC Wig Program.

#### Cleaning for a Reason

Free professional housecleaning to improve the lives of women 18 and over who are undergoing cancer treatment.

#### Colorado Quitline™

The Colorado Quitline™ is a FREE online service available to Colorado residents 15 years of age and over and provides members special tools, a support team of coaches, research-based information, and a community of others trying to become tobacco free.

#### Five 60 Salon

The generous staff provided various services for cancer patients at no charge.

#### Mesa County Community Transformation Group

The CTG is a community-wide collaboration of several organizations who work together to address the needs of an identified under-resourced community where education and early detection could lead to better outcomes.

#### Good Wishes

Provided one free “It’s A Wrap®” or “Good Wishes Scarf” to women experiencing thinning or loss of hair from illness or treatment.

#### Grand Junction Parks and Recreation

Partnered with Lincoln Park Pool staff to provide sunscreen, lip balm and sunglasses to patrons of local pools, as well as skin cancer prevention and early detection education.

#### Kids Aid Backpack Program

Participated in the second annual Summer Meals Kickoff event, which promotes the Lunch Lizard Program – a summer meal program for youth ages 18 and younger. Provided sunscreen, lip balm and sunglasses along with educational materials on sun safety, specifically for youth.

#### Knitted Knockers

Knitted Knockers are special handmade breast prosthesis for women who have undergone mastectomies or other procedures to the breast. A local group of knitters provided free Knitted Knockers to our breast cancer patients.

#### Marillac Clinic

Cancer Centers of Colorado collaborated with the Marillac Clinic, a local Federally Qualified Health Center (FQHC), and provides them with resources for oral cancer screening.

#### Montrose & GJ Wood Turners

Local area Wood Turners, in conjunction with local artists and Advanced Art middle school students, created wig stands for our cancer patients. The unique stands offer patients a personalized, dedicated space to place their wig, as well as pins/jewelry.

#### Rose Hill Hospitality House

For patients who live outside of Mesa County, free lodging is available on a first-come, first serve basis.

*To learn more about SCL Health Cancer Centers of Colorado at St. Mary's Medical Center, visit [sclhealth.org/services/cancer](https://sclhealth.org/services/cancer) or call 970-298-7500.*

## 2019 Activities, Patient Care Improvements, Community Connections & Resources *(continued)*

### Support Services

#### Dedicated Cancer Support Resources

- Cancer Resource Center
- Clinical Trials
- Complementary Therapy, i.e., Massage, Yoga, Therapeutic Touch, and Art Classes
- Emotional and Spiritual Support
- Genetic Counseling
- Hospice and Palliative Care Services
- Medication Assistance
- Nutritional Services
- Rehabilitation Services
- Social Work Support
- Survivorship Groups and Programs



**Cancer Centers of Colorado  
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