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standard for
bace case.Ut oncology annual report



Special Feature | Paqui and Brian Kelly Comprehensive Breast Center

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A message from our Medical Director and Executive Director.

On the wake of the election, our country is reflective of the successes of our current leadership and hopeful and anxious for what is to come. At SJHS we are reflecting on the same sense of change with the retirement of SJHS CEO Al Gutierrez and the appointment of new CEO Chad Towner. We have accomplished much under the leadership of Mr. Gutierrez, with the designation of outstanding accommodation from the Commission on Cancer, expanding our heart and lung programs, upgrading and expanding the cancer services at our Plymouth Cancer Institute, and creating the \$5.5-million Paqui and Brian Kelly Comprehensive Breast Center. We are grateful for such supportive senior leadership and look forward to continued support with the changing of the guard. Advanced cancer care has always been our priority, and we look forward to the vision and strategy of our new leader.

Regards,





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Bilal Ansari, MD, Medical Director of Oncology, Saint Joseph Health System

Katina Wood

Katina Wood, Executive Director of Oncology Services, Saint Joseph Health System

Services & locations.

Saint Joseph Health System provides access to state-of-the-art cancer services and care for patients across Michiana.

Garcia Family Foundation Oncology Unit

Mishawaka Medical Center 5215 Holy Cross Pkwy. Mishawaka, IN 46545 574.335.5000 The Garcia Family Foundation Oncology Unit is specially designed to create a soothing environment for patients with cancer. Located on the sixth floor of the Mishawaka Medical Center, we provide care that helps our patients maintain the highest possible quality of life through their journey.

Our clinical team is specially trained to care for cancer patients. Our nurses attend Oncology Nursing Society chemotherapy/biotherapy provider courses in order to administer these medications to our patients. The unit also includes a large Hospice Room to accommodate patients with special needs or a longer length of stay.

Lymphedema Treatment Clinic

611 E. Douglas Rd., Ste. 140 Mishawaka, IN 46545 574.335.8500 The Lymphedema Treatment Clinic offers a comprehensive approach to help patients manage lymphedema. A treatment course is outlined and the patient is scheduled with a certified therapist at a location fitting their clinical needs, insurance coverage and driving distance.

Saint Joseph Medical Imaging Center

53940 Carmichael Dr. South Bend, IN 46635 574.335.8100 Saint Joseph Medical Imaging services are available at the Mishawaka Medical Center and a freestanding location on Carmichael Drive in South Bend. Our state-of-the-art equipment allows for best possible detection and diagnosis of a variety of conditions. We set the standard for care by investing in technology that substantially improves the quality of exams and screenings. Our expert staff of radiologists and technicians is dedicated to quality care and treating every patient with dignity, respect and compassion. All of our images are digitally acquired and graphically stored for future reference and quick access. The center is accredited by the American College of Radiology and the National Accreditation Program for Breast Centers.



Paqui and Brian Kelly Comprehensive Breast Center

611 E. Douglas Rd., Ste. 123 Mishawaka, IN 46545 574.335.6216

1915 Lake Ave. Plymouth, IN 46563 574.948.4000

53940 Carmichael Dr. South Bend, IN 46635 574.335.8100 The Paqui and Brian Kelly Comprehensive Breast Center (CBC) offers a unique and convenient experience for Michiana women. The Paqui and Brian Kelly CBC is committed to the importance of early detection and promotion of breast health with state-of-the-art technology and a highly-trained staff. All the resources and technology our staff needs to effectively and efficiently care for patients are in one convenient location. The Paqui and Brian Kelly CBC is accredited by the National Accreditation Program for Breast Centers.

Michiana Hematology Oncology Advanced Centers for Cancer Care

5340 Holy Cross Pkwy. Mishawaka, IN 46545 574.237.1328 Most services and care that an oncology patient may need can be found at Michiana Hematology Oncology Advanced Centers for Cancer Care, a joint venture located directly across from Mishawaka Medical Center. This state-ofthe-art, freestanding facility was designed by highly skilled experts in cancer care who asked for input from real patients to ensure it was designed as a welcoming place. Technologically advanced and completely integrated, this cancer center treats the whole person, mind, body and spirit.

Plymouth Cancer Institute

1915 Lake Ave. Plymouth, IN 46563 574.948.4000 The Plymouth Cancer Institute is a replica of the cancer services provided in Mishawaka with the same treating physicians and standards. The Plymouth Cancer Institute offers patients who live in Marshall County and surrounding communities access to the latest treatments close to home. Our medical oncologists, radiation oncologists and specially trained staff provide expert cancer care in a soothing and healing environment.

Reflecting on what we've achieved and never losing sight of what needs to be done. Building on the strength of our partnerships and caring for the smallest and most vulnerable. It's hard work, but it's good work, and it's why we're here. Living our mission. Acting on our faith. Providing healthcare inspired by faith.

Saint Joseph Health System and partners bring world-class oncology treatment to area.

In the past decade, cancer care has taken on new meaning with a focus on everything from prevention and screening through survivorship or end-of-life care.

With a community as rich in resources as Michiana, SJHS takes a multi-disciplinary approach to cancer care by partnering with regional experts to care for its patients.

Steps: Prevention. Screening. Diagnosis. Treatment. Survivorship. End-of-Life Care.

Prevention

SJHS partners with the Foundation of SJHS, Community Outreach Services, *Secret Sisters Society*[®], Kelly Cares Foundation, American Cancer Society, Ounce of Prevention, RiverBend Cancer Services and national governing bodies to help raise awareness about cancer prevention. The goal is for everyone to make healthier choices and be compliant with cancer screening guidelines given by their primary care physician.

Screening

SJHS patients seen by a primary care physician should be scheduled for routine cancer screenings outlined by national governing bodies. Guidelines are based on factors such as age, race, ethnicity, risk and environment.

SJHS offers genetic screening, testing and counseling to help identify someone's predetermined risk of having cancer during their lifetime. Genetic results may change the age range, frequency of screening or the treatment course if/when diagnosed.

Diagnosis

SJHS uses the latest technologies to diagnose cancer. We have specially trained physicians to interpret the results and coordinate a treatment plan based on pathology of tumor diagnosis.

We partner with The Medical Foundation for blood and pathology testing. We partner with X-Ray Consultants, Inc. for medical imaging services (CT, MRI, ultrasound, PET, MBI, tomosynthesis, stereotactic biopsy, colorectal exam, etc.).

Treatment of cancer happens in many different ways.

Surgery — SJHS Oncology uses a combination of hospital-employed and private-practice surgeons including Allied Physicians, General Vascular Surgery, the Centre PC, Michiana Hematology Oncology, North Central Neurosurgery of South Bend, South Bend Clinic and Marshall County Surgery Associates.

Medical Oncology — SJHS partners with Michiana Hematology Oncology to provide outpatient infusion services at both Mishawaka and Plymouth Medical Centers.

SJHS offers inpatient chemotherapy for patients who require a hospital admission.

Radiation Oncology — SJHS partners with Michiana Hematology Oncology to provide outpatient radiation therapy services at both Mishawaka and Plymouth Medical Centers.

Research — SJHS is part of the Northern Indiana Cancer Research Consortium that offers national clinic trials to cancer patients. The NICRC is comprised of SJHS, MHO, Mike and Josie Harper Cancer Research Institute, Hoosier Cancer Research Network, IU, Mayo Clinic, NRG Oncology and the University of Notre Dame.

Inpatient — At any point a patient may need to be admitted to the hospital for cancer-related care. SJHS has a dedicated 34-bed Oncology inpatient unit that has credentialled oncology nursing staff trained to recognize and manage symptoms related to the disease and treatment reactions. Survivorship — SJHS partners with Michiana Hematology Oncology to create treatment summaries and survivorship outcomes for each patient. SJHS has a dedicated survivorship navigator who meets with each patient (free of charge) to guide him or her into community resources after his or her cancer treatment is finished.

SJHS partners with RiverBend Cancer Services to provide ongoing survivorship classes, educational events, exercise, wellness and psychosocial support.

SJHS partners with the YMCA to offer the Livestrong exercise program to patients after their treatments are finished.

SJHS offers the area's only STAR-certified oncology rehab program. The designation is designed to care specifically for the needs of someone diagnosed with cancer. The program is offered during treatment to strengthen an individual or after treatment to try to regain their initial physical baseline.

End-of-Life Care — SJHS offers a dedicated oncology social work and pain and palliative care team to address psychosocial support, distress, pain management and/or end-of-life care.

SJHS partners with local hospice houses to transition someone to their care during end-of-life transition. Hospice is always a personal choice and hospice location selection is to be determined by patient and family. Special Feature | Paqui and Brian Kelly CBC



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Paqui and Brian Kelly Comprehensive Breast Center sets new standards for breast health.

Completed in fall 2016, the new SJHS Paqui and Brian Kelly Comprehensive Breast Center (CBC) is a state-of-the-art breast center similar to those in larger cities such as Indianapolis, Chicago and elsewhere. A "comprehensive" breast center means that the center looks at all aspects of breast health — prevention, screening, diagnosis, risk assessment, navigation, cancer treatment and/or surgery, reconstruction and survivorship care — with the implementation of nationally recognized clinical standards including:

MammoPlus® risk assessment — Provided at no additional cost to the patient, MammoPlus® includes a screening mammogram PLUS a risk assessment to estimate the patient's chances of developing breast cancer in the future. This aids in identifying women who may benefit from increased surveillance and cancer risk reduction strategies.

RapidResults[™] process — Qualifying mammography patients have same-day access to all appropriate breast diagnostic services and biopsy, should they choose. Prompt evaluation of any breast concern is critical to early detection of breast cancer. So patients can rest assured an expert opinion will be quickly given about whether their area of suspicion is cancerous or benign.

NavigationPlus[™] services — All patients are navigated through their care beyond just their imaging. Whether additional imaging is needed, further risk assessment or guidance as they travel through treatment to survivorship, our team of nurse and survivorship navigators are committed to assisting patients to ensure they are wellinformed and comfortable with their plan of care and are connected to their community support resources. RiskPlus[™] program — This program offers an in-depth risk assessment and genetic counseling to women who are noted to be at increased risk on their MammoPlus[®] risk assessment. Physicians may also refer patients directly to the RiskPlus[™] program. A board-certified genetic counselor performs a detailed cancer risk evaluation and facilitates genetic testing when necessary to identify women who have an inherited predisposition for cancer. This allows the center to design a customized cancer prevention plan that offers the greatest level of cancer prevention, early cancer detection and better treatment outcomes.



PAQUI AND BRIAN KELLY COMPREHENSIVE BREAST CENTER The Paqui and Brian Kelly CBC offers the highest possible technology, including 3-D mammography at other SJHS sites. All mammography patients are offered 3-D mammography (tomosynthesis), the highest quality available. Although not all insurance plans cover it, SJHS and XRC radiologists provide 3-D mammography at no additional cost if insurance declines to pay. Molecular breast imaging (MBI) is available for many patients with dense breast tissue and other risk factors, making this the only center in the area with this technology. The Paqui and Brian Kelly CBC is setting the standard for breast health. The center at Mishawaka Medical Center is the first of its kind at SJHS. The Medical Imaging Center on Carmichael Drive, Plymouth Medical Center and the Mobile Medical Unit will soon follow by becoming part of the Paqui and Brian Kelly CBC.





Technology of Paqui and Brian Kelly Comprehensive Breast Center

The Paqui and Brian Kelly CBC offers advanced diagnostic and treatment technologies, including the latest minimally invasive techniques:

- Digital mammography
- 3-D mammography
- Molecular breast imaging (MBI)
- Ultrasonography
- Bone density
- Stereotactic breast biopsy
- Needle localization



3-D mammography

3-D mammography, also referred to as tomosynthesis, is an imaging procedure that uses low-energy X-rays to create a 3-D image of the breasts.

While conventional mammography takes pictures of the breast from two angles — up and down and left and right — 3-D mammography takes multiple pictures from different angles. Radiologists are able to evaluate the 3-D mammography images similar to how they look at CT Scans. 3-D mammography can improve imaging for patients with dense breast tissue and can also decrease recall rates for screening mammography.

Molecular breast imaging (MBI)

MBI is typically used in concert with a mammogram or an ultrasound to help give a more complete picture of what is going on in the breast. The painless test involves injecting tracer material into the body that collects in cancerous breast tissue. A specialized MBI scanner then scans the breast, looking for areas where the tracer material has collected. Especially when the patient's breast tissue is dense, the results of an MBI exam, combined with a mammogram, may overcome some limitations of mammography alone.

Brett Stephens, Director of Medical Imaging

During his entire 28-year career working with Saint Joseph Health System, Brett Stephens, MD, has dedicated himself to helping women in the Michiana community fight breast cancer. As a mammography radiologist, Dr. Stephens understands how important screening and early detection are to his patients' health and survival.

"It's rewarding to find breast cancer when it's curable," he said. "When you find a lump when it's small and when the survival rate is 95 percent, you can go home and feel good because you probably saved a few women's lives. Or when patients come in with a lump and they're scared, and you can tell them it's benign and there's nothing to be worried about."

Dr. Stephens, radiologist at X-Ray Consultants, Inc., is Director of Medical Imaging for the Paqui and Brian Kelly Comprehensive Breast Center (CBC). The center includes locations at Mishawaka Medical Center, the Medical Imaging Center at Carmichael Drive and Plymouth Medical Center. In his role, he manages breast imaging for SJHS, including ensuring facilities have the most modern equipment, overseeing outreach efforts such as the Mobile Medical Unit and developing clinical pathways.

Originally from Highland, Indiana, Dr. Stephens earned his undergraduate degree from Wabash College before earning his medical degree from the Indiana University School of Medicine. He then performed a diagnostic radiology residency with Methodist Hospital of Indiana, where he also served as chief resident for a year.

Dr. Stephens came to work in Michiana because he wanted to be near his parents in Highland. "I also knew that this was a good hospital and knew it had many radiologists who had trained at IU like I did," he said. Dr. Stephens became interested in mammography during his last year of residency and served as the main mammography radiologist at SJHS for about 10 years. He has been directing mammography services at SJHS for more than 20 years, and in that time he has overseen many important advances in care. He was one of the first radiologists in Northern Indiana to perform stereotactic breast biopsy and helped launch ultrasound core biopsy services and incorporate breast MRI and MBI services at SJHS. He has also served on the system's Radiation Safety Committee.

With the 2016 renovation of the Paqui and Brian Kelly CBC, Dr. Stephens said SJHS offers a level of service unique to the region.

"It is the only facility in the region to offer MBI to improve diagnosis in women with dense breast tissue," he said. "It also offers Rapid Results[™], which provides same-day biopsy. This makes diagnosis quicker and reduces anxiety. We have all of the state-of-the-art technology that one would want in a breast center."

In addition to the most advanced technology, the center offers patients the convenience of comprehensive care close to home. "It has everything from breast MRI to MBI, genetic counselors, clinical research, nurse and survivorship navigators. In the past all these services were available, but not comprehensively."

His goal is to make sure the Paqui and Brian Kelly CBC sets the standard for breast health in the region. "It has the best equipment, the best staff and the best nurses. When I retire, I want to leave knowing I did my best and that it's a top-notch program."

"It's rewarding to find breast cancer when it's curable... Or when patients come in with a lump and they're scared, and you can tell them it's benign and there's nothing to be worried about."

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Dr. Brion Shin, Medical Director of Radiation Oncology at the Plymouth Cancer Institute

Brion Shin, MD, believes that spending time with his patients is crucial to their recovery. As Medical Director of Radiation Oncology at the Plymouth Cancer Institute at Saint Joseph Health System Plymouth Medical Center, he concentrates on thoroughly explaining each patient's diagnosis, reviewing treatment strategies and even easing their fears.

Taking that time with patients is why Dr. Shin became a radiation oncologist. When rotating through different specialty clinics in medical school, he noticed that he got to spend the most time with his patients in radiation oncology.

"Cancer is a scary diagnosis, and anything I can do or time I can spend explaining what's going on is a benefit to the patient," he said. "I think being able to give them that extra time is very beneficial. We talk more about what's going on and why we're doing what we're doing, more time explaining the strategy behind the treatment."

Dr. Shin said he also benefits from that extra time. "That human connection is rewarding for me. After meeting with patients regularly, often daily, for weeks you almost become like friends. It's rewarding to see a good response and see patients do well."

Born in Chicago, Dr. Shin grew up in Florida but returned to the Midwest to earn his undergraduate degree from Andrews University. He earned his medical degree from Loma Linda University School of Medicine. He served an internship in internal medicine at the University of Arizona, then did his residency in radiation oncology and served as chief resident at Loma Linda University Medical Center. He is board-certified in radiation oncology.

Dr. Shin said he returned to the Midwest to join Michiana Hematology Oncology because of family in the area and because he liked the area from his time in college at Andrews. He became Medical Director of Radiation Oncology at the Plymouth Cancer Institute in January 2016. Dr. Shin sees the institute providing patients in Marshall County advanced cancer care without them having to travel hours to a major metropolitan area. Patients can find whatever oncology care they need, whether surgery, radiation or chemotherapy, in one location so that their care is delivered seamlessly and efficiently.

"Getting care every day for five to six weeks and having to travel three hours to get it would be very difficult for many," Dr. Shin said. "So we want patients to be able to focus on getting good treatment rather than on the hassles and costs of traveling, which can take a huge emotional toll. If we can ease that burden, that makes a huge difference."

SJHS has helped ease that burden by partnering with Michiana Hematology Oncology to deliver radiation therapy at the Plymouth Cancer Institute, including the region's first and only linear accelerator with "rapid arc" technology and respiratory gaiting. Rapid arc IMRT (Intensity Modulated Radiation Therapy), along with 3-D conformal radiation therapy, help deliver radiation more precisely to better target the tumor and minimize exposure to surrounding healthy tissue. The linear accelerator also utilizes IGRT (Image Guided Radiation Therapy) that uses X-ray images to more precisely target the beam. In fall of 2016, the Plymouth Cancer Institute added SBRT (Stereotactic Body Radiation Therapy), which uses multiple, coordinated beams to deliver higher doses with fewer treatments to improve cure rates.

"We've got all the technological tools available to deliver superior cancer care," Dr. Shin said. "And with SBRT, we have all the pieces in place to deliver any type of radiation therapy available."

Special Feature | Paqui and Brian Kelly CBC

"Cancer is a scary diagnosis, and anything I can do or time I can spend explaining what's going on is a benefit to the patient."

SJHS introduces region's only survivorship navigator

About 82 percent of cancer survivors feel a sense of loss, anxiety or depression after completing their treatment. "We recognized that we needed to do more," said Katina Wood, Executive Director of Oncology. "So we huddled and decided the best way to care for our patients was to implement a survivorship navigator to meet one-on-one with each patient near the end of their treatment and walk them through the host of community resources available."

In April 2016, SJHS hired Laura Ginter as the region's only survivorship navigator. Laura is well known throughout the community for her experience working with cancer patients, most recently with partner RiverBend Cancer Services.

Laura helps patients as they transition after treatment. After months of chemotherapy and radiation, "graduation day" is a day of celebration. It's a day filled with pride, accomplishment and a round of hugs for all of the relationships established throughout the cancer journey.

"Survivorship navigation can ease the transition from cancer patient to cancer survivor," Laura said. "I am able to provide them strategies and resources to return them to their best selves. Together we create a personal blueprint for moving forward." Laura fits the navigator role well. "As a breast cancer survivor, Laura knows personally and professionally how to help patients transition from treatment into survivorship," Katina said. "She understands once touched by cancer, your life is never the same. She is a great addition to our team. Our patients are lucky to have her."



Laura Ginter, ONC Survivorship Navigation



New Mobile Medical Unit needed to expand care

Since 2006, the Mobile Medical Unit (MMU), operated by Saint Joseph Health System Outreach Services, has delivered vital care to women in need in our community. A new unit is now needed to reach more women and deliver a higher level of care through more advanced technology.

The unit, equipped with an exam room, intake area and mammography room, has provided more than 6,000 mammograms to women in Elkhart, Marshall and St. Joseph counties. This year, the newly renovated Paqui and Brian Kelly Comprehensive Breast Center began offering mammography aboard the MMU.

SJHS is a leader in women's breast health and is committed to providing services to the poor and underserved. SJHS has been able to consistently provide mammograms on the MMU to uninsured women for 10 years through the help of various grant awards and donations. The Indiana Breast Cancer Awareness Trust and Kelly Cares Foundation are strong partners in funding mammograms on the MMU for at-risk women under 40 and women over 40 who have nowhere else to turn for service. In 2015, the unit performed 1,513 screening mammograms, of which 259 were referred for diagnostic mammograms — a 66 percent increase from the year before. In 2010, the MMU upgraded from analog to digital mammography. It is now time to bring the next phase of mammography services for all women. A new unit will feature advanced 3-D tomosynthesis mammography technology.

Approximately \$1 million is needed for a new MMU. The Foundation of SJHS has begun fundraising and has secured nearly \$700,000 in grant awards and event proceeds. The new MMU is slated to start serving the community in early 2017. To support this initiative, please contact The Foundation of SJHS at thefoundation@sjrmc.com.

Saint Joseph Health System

Joins the 80 percent by 2018 fight against colorectal cancer initiative.

Colon cancer is the third-leading cause of cancer death in men and women in the U.S., and the secondleading cause for both sexes combined. Last year there were 95,270 new cases of colon cancer and 39,220 new cases of rectal cancer in the U.S. Overall, the lifetime risk of developing colorectal cancer is about 1 in 21 (4.7 percent) for men and 1 in 23 (4.4 percent) for women. But screening can help reduce this risk. Colorectal cancer incidence and mortality rates have dropped by over 30 percent in the U.S. among adults 50 and older in the last 15 years, mostly due to screening. The percentage of the population up-to-date with recommended colorectal cancer screening increased from 56 percent in 2002 to 65 percent in 2012. But there is still major room for improvement.

SJHS is proud to join the fight against colorectal cancer by joining the 80 percent by 2018 initiative. This National Colorectal Cancer Roundtable consists of hundreds of organizations — including medical professional societies, academic centers, survivor groups, government agencies, cancer coalitions, cancer centers, payers and many others — working to have 80 percent of adults aged 50 and older regularly screened for colorectal cancer by 2018. If this goal is reached nationally, 277,000 cases and 203,000 colorectal cancer deaths would be prevented by 2030. SJHS is running a six-month pilot program at Our Lady of the Rosary to increase screening rates. Currently, SJHS has achieved 30 percent. If improvement is shown during the six-month period, SJHS will look to extend this program to the Saint Joseph Physician Network.

Our local partner, The Medical Foundation, had donated 200 testing kits and waived processing fees for the pilot. Our Lady of the Rosary will offer this kit to patients due for screening. Patients who choose this option will be given the kit. If patients have not returned the kit within a couple weeks, staff will follow up with a phone call. Patients testing positive will be referred to a physician for follow-up care.

Currently, SJHS is the only local medical provider joining this initiative.

Proper screenings can prevent the majority of colorectal cancer occurrences and deaths. Screenings are recommended at age 50 and older for those at average risk and before age 50 for those with a family history of the disease or a history of medical conditions such as adenomatous polyps, chronic inflammatory bowel disease or diabetes.

Risk factors for colorectal cancer include:

- A parent, sibling or child who has had colorectal cancer.
- A history of colorectal cancer
- Physical inactivity.
- Using tobacco products and consuming alcohol

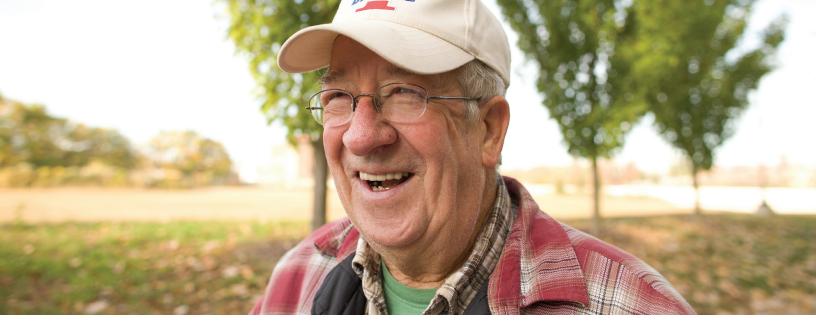
Saint Joseph Health System and Michiana Hematology Oncology.

Discussions provide specialized patient care.

Saint Joseph Health System's cancer program has partnered with Michiana Hematology Oncology Advance Center for Cancer Care (MHO) to provide an essential platform to discuss patient's treatment in a multidisciplinary setting. The Cancer Forums are held at MHO and host weekly Lung and Breast conferences; monthly Head and Neck, Lymphoma, Genomic, Urology and Gastrointestinal conferences; bi-monthly Neurosurgical conferences; and quarterly Hematologic clinics. All conferences begin at 6:30 am and typically last for one hour, presenting four to eight prospective cases. The Cancer Registry coordinates all activities.

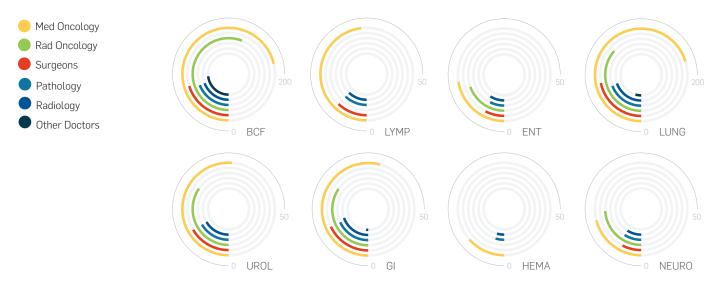
Each conference has a site-specific physician moderator — along with a multidisciplinary group including medical oncologists, radiologists, surgeons, radiation oncologists, pathologists, primary care physicians, genetic counselors, research staff, oncology nurses and other specialists — to discuss the diagnosis and management of patients with malignancies including AJCC TNM staging, clinical trial eligibility and potential referral to genetic counseling. Each year, an attempt is made to cover a wide variety of anatomic sites and to discuss both the common cancer types as well as unusual malignancies. The clinical history is presented by the responsible physician or physicians, after which the relevant imaging findings are demonstrated by the radiologist. This is followed by a presentation of the morphologic findings by the pathologist. Following this, there is an open discussion of the patient's diagnostic evaluation and management, and recommendations are solicited from the members of the audience regarding any additional suggestions they may have pertaining to the patient's care.

Cancer Conferences are well attended and provide an important forum for arriving at decisions regarding patient diagnosis and treatment in a multidisciplinary setting. They also serve as a source of education for the medical staff and other members of the hospital team.

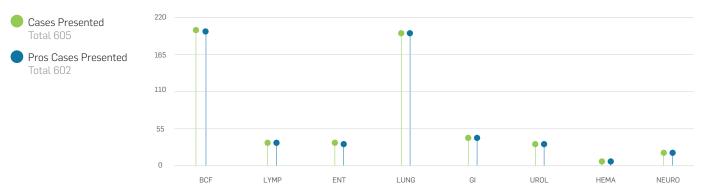


2015 Cancer Conference activities

Saint Joseph Health System Multidisciplinary Attendance



Saint Joseph Health System Case Presentation



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Genomic Tumor Board explores genetic basis of malignancies

The approach to cancer treatment is rapidly becoming more personalized due to the exciting advances in the field of tumor genomics. The ability to identify the unique genetic changes in an individual's cancer offers the promise of individualized treatments tailored to target the specific genetic changes driving a person's cancer. However, successful navigation from the complex genomic results to an effective, individualized treatment requires collaboration between multidisciplinary experts in the areas of clinical oncology, genetics, basic science and bioinformatics. To bridge the gap between these disciplines in Michiana, the Genomic Tumor Board was created as a joint venture with Saint Joseph Health System, Michiana Hematology Oncology, the University of Notre Dame Department of Biological Science and the Mike and Josie Harper Cancer Research Institute. This collaborated Genomic Tumor Board is the only one in the region.

In its inaugural year, the Genomic Tumor Board has hosted lectures by clinicians and researchers at the forefront of scientific discoveries. One lecturer, Lucy Godley, MD, PhD, from the University of Chicago Medical Center, has played a prominent role in understanding the genetic basis of hematologic malignancies. Genetic predisposition to hematological malignancies has long been underappreciated. However, Dr. Godley's research is bringing novel insights and awareness to hereditary hematological malignancy, which will in turn aid in unraveling the complex genetic basis for these diseases.

SJHS is excited to be a part of this collaborative endeavor, which will allow us to continue to provide optimal care to our patients during a time of rapid advancement in oncologic care.

Alick's Home Medical Oncology Education Series

SJHS held the first Alick's Home Medical Education Series event Sept. 8, 2016. The education series is an annual gift of the Alick family to help educate the community about integrative medicine for oncology. Jeannine Alick kicked off the event with her vision to help our community understand how the combination of Eastern and Western medicine can help manage symptoms related to cancer.

Guest speakers included Jackie Koekkoek, Doctor of Oriental Medicine, and Kristi Hanson, Licensed Massage Therapist from the Mercy Health Wege Institute for Mind, Body and Spirit at Mercy Health, Grand Rapids, Michigan. The institute was the vision of the late Pete Wege, entrepreneur and philanthropist who wanted integrative medicine offered locally for his friends and family suffering from cancer. The Mercy Health Wege Institute for Mind, Body and Spirit has been in operation for nearly 15 years.

Dr. Koekkoek discussed how the institute clinicians partner with the oncologist and surgeons to help prevent and manage cancer symptoms such as pain, lymphedema, nausea, vomiting, stress, anxiety and depression. Dr. Koekkoek shared patient success stories, clinical trial outcomes and future endeavors by the National Institutes of Health's National Center for Complimentary and Integrative Health. Hanson discussed how massage therapy, kinesiotaping and essential oils help relieve stress, anxiety and fatigue for patients and caregivers.

The education session ended with a live acupuncture demonstration and discussion regarding the opportunity of bringing similar services to Michiana.

Michiana Hematology Oncology appoints new Clinical Operations Officer.

Saint Joseph Health System provides access to state-of-the-art cancer services and care for patients across Michiana.



Jennifer Ewing Clinical Operations Officer (COO), Michiana Hematology Oncology Advanced Centers for Cancer Care Michiana Hematology Oncology, PC

Advanced Centers for Cancer Care*

Jennifer Ewing, RN, MSN, NP-C, AOCNP, is the Clinical Operations Officer (COO) for Michiana Hematology Oncology Advanced Centers for Cancer Care. Jen is responsible for the day-to-day management of the company's clinical operations, which include 15 physician practices in six locations throughout the region.

Jen is an Advanced Oncology Certified Nurse Practitioner (one of only 600 in the U.S.) with 20 years of experience in oncology care, 10 of which were spent as a chemotherapy infusion nurse.

A long-time Michiana resident, Ewing has a Bachelor of Science degree in nursing from Saint Mary's College and a Master of Science degree in nursing from Ball State University. She is active in the community, serving on the Board of Directors for the Center for Hospice Care. She is also an Associate Editor for the Clinical Journal of Oncology Nursing.

Cancer Registry.

Saint Joseph Health System's cancer program is accredited by the American College of Surgeons Commission on Cancer (CoC). The CoC sets program standards and triennially reviews facility compliance of those participating in their Accreditation Program. Our program is committed to quality care and improvements in cancer care under the guidance of the multidisciplinary Cancer Committee that directs and monitors the program activity.

The Cancer Registry plays an essential role in the Comprehensive Community Cancer Program by collecting information on cancer incidence, types of cancers, stage of disease, treatment and outcomes, while adhering to all Indiana statutes and patient information guidelines, as well as federal HIPAA laws. The Cancer Registry has a beginning reference date of Jan. 1, 2005, and continues to report more than 900 new diagnoses of malignancies each year. An additional average of 250 cases representing patients with cancer recurrences or disease progression was collected, increasing our caseload to more than 1,150 cases collected in 2015. In 2015, there were 15 percent fewer men with a new cancer diagnosis at Saint Joseph Health System, however 15 percent more women with a new cancer diagnosis compared to the national incidences was reported. 75 percent of patients with a new diagnosis ranged in age from 50-79; 98.3 percent were reported non-Spanish origin and 92 percent were white, with only 7 percent of the patient population being African-American. 30 percent of the patients who sought treatment at SJHS initially did not have insurance at diagnosis. SJHS Health Insurance Services (HIS) was established to ensure access to healthcare

services by reducing barriers for consumers. HIS has put together a team of highly skilled, multi-cultural, licensed professionals to assist those in need.

The data from the registry is submitted to the Indiana Cancer Data System as well as to the National Cancer Database in accordance with guidelines. Reliable data is essential in the evaluation of cancer prevention and treatment programs, as well as in monitoring quality care.

Our cancer patients receive lifetime surveillance to determine treatment outcomes to assess and improve the efficacy of treatments we administer. We currently follow 6,925 patients since our reference date for class of cases 10-14 and 20-22*. We have maintained a successful follow-up rate of 97.88 percent for all cases, and a 98.35 percent follow-up rate on cases diagnosed within the past five years. This activity provides information on cancer incidence, assists in directing the local and statewide cancer prevention and control activities, as well as guiding local community education, prevention and earlydetection programs.

Primary Site Table

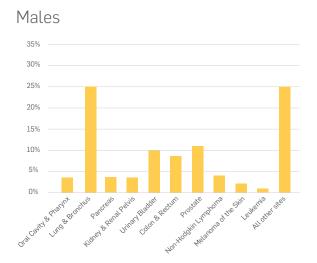
PRIMARY SITE	TOTAL	%	MALE	%	FEMALE	%
ORAL CAVITY & PHARYNX	20	2.2%	14	4.2%	6	1.0%
Tongue	5	0.5%	3	0.9%	2	0.3%
Salivary Glands	4	0.4%	1	0.3%	3	0.5%
Gum & Other Mouth	2	0.2%	1	0.3%	1	0.2%
Tonsil	6	0.6%	6	1.8%	0	0.0%
Oropharynx	1	0.1%	1	0.3%	0	0.0%
Other Oral Cavity & Pharynx	2	0.2%	2	0.6%	0	0.0%
DIGESTIVE SYSTEM	159	17.2%	72	21.5%	87	14.7%
Esophagus	8	0.9%	3	0.9%	5	0.8%
Stomach	18	1.9%	14	4.2%	4	0.7%
Colon Excluding Rectum	42	4.5%	14	4.2%	28	4.7%
Cecum	15	_	5	_	10	_
Appendix	5	_	0	_	5	_
Ascending Colon	8	_	4	_	4	_
Hepatic Flexure	1	_	0	_	1	_
Splenic Flexure	1	_	0	_	1	_
Descending Colon	1	_	0	_	1	_
Sigmoid Colon	8	_	3	_	5	_
Large Intestine, NOS	3	_	2	_	1	_
Rectum & Rectosigmoid	21	2.3%	14	4.2%	7	1.2%
Rectosigmoid Junction	5	_	2	_	3	_
Rectum	16	_	12	_	4	_
Anus, Anal Canal & Anorectum	5	0.5%	2	0.6%	3	0.5%
Liver & Intrahepatic Bile Duct	8	0.9%	6	1.8%	2	0.3%
Gallbladder	1	0.1%	0	0.0%	1	0.2%
Other Biliary	12	1.3%	3	0.9%	9	1.5%
Pancreas	30	3.2%	14	4.2%	16	2.7%
Peritoneum, Omentum & Mesentery	10	1.1%	0	0.0%	10	1.7%
Other Digestive Organs	4	0.4%	2	0.6%	2	0.3%
RESPIRATORY SYSTEM	165	17.8%	91	27.2%	74	12.5%
Larynx	7	0.8%	7	2.1%	0	0.0%
Lung & Bronchus	158	17.1%	84	25.1%	74	12.5%
SOFT TISSUE	4	0.4%	2	0.6%	2	0.3%
Soft Tissue (including Heart)	4	0.4%	2	0.6%	2	0.3%
SKIN EXCLUDING BASAL & SQUAMOUS	18	1.9 %	6	1.8%	12	2.0%
Melanoma — Skin	18	1.9%	6	1.8%	12	2.0%
BREAST	206	22.2%	2	0.6%	204	34.5%
Breast	206	22.2%	2	0.6%	204	34.5%

926

PRIMARY SITE	TOTAL	%	MALE	%	FEMALE	%
FEMALE GENITAL SYSTEM	117	12.6 %	0	0.0%	117	19.8
Cervix Uteri	11	1.2%	0	0.0%	11	1.9%
Corpus & Uterus, NOS	67	7.2%	0	0.0%	67	11.3
Corpus Uteri	66	_	0	_	66	_
Uterus, NOS	1	_	0	_	1	_
Ovary	25	2.7%	0	0.0%	25	4.29
Vagina	1	0.1%	0	0.0%	1	0.29
Vulva	10	1.1%	0	0.0%	10	1.79
Other Female Genital Organs	3	0.3%	0	0.0%	3	0.59
MALE GENITAL SYSTEM	40	4.3%	40	11.9 %	0	0.09
Prostate	37	4.0%	37	11.0%	0	0.09
Testis	3	0.3%	3	0.9%	0	0.09
URINARY SYSTEM	71	7.7%	50	14.9 %	21	3.69
Urinary Bladder	38	4.1%	32	9.6%	6	1.0
Kidney & Renal Pelvis	29	3.1%	15	4.5%	14	2.49
Ureter	4	0.4%	3	0.9%	1	0.2
BRAIN & OTHER NERVOUS SYSTEM	17	1.8 %	8	2.4 %	9	1.5
Brain	10	1.1%	7	2.1%	3	0.5
Cranial Nerves Other Nervous System	7	0.8%	1	0.3%	6	1.0
ENDOCRINE SYSTEM	26	2.8%	8	2.4%	18	3.0
Thyroid	20	2.2%	5	1.5%	15	2.59
Other Endocrine including Thymus	6	0.6%	3	0.9%	3	0.5
LYMPHOMA	29	3.1%	16	4.8 %	13	2.2
Hodgkin Lymphoma	1	0.1%	1	0.3%	0	0.0
Non-Hodgkin Lymphoma	28	3.0%	15	4.5%	13	2.2
NHL — Nodal	22	—	11	_	11	_
NHL — Extranodal	6	_	4	_	2	-
MYELOMA	17	1.8%	12	3.6%	5	0.8
Myeloma	17	1.8%	12	3.6%	5	0.8
LEUKEMIA	15	1.6%	5	1.5%	10	1.79
Lymphocytic Leukemia	3	0.3%	2	0.6%	1	0.2
Acute Lymphocytic Leukemia	1	—	0	_	1	_
Other Lymphocytic Leukemia	2	-	2	_	0	_
Myeloid & Monocytic Leukemia	11	1.2%	3	0.9%	8	1.4
Acute Myeloid Leukemia	8	_	2	_	6	_
Chronic Myeloid Leukemia	3	-	1	_	2	_
Other Leukemia	1	0.1%	0	0.0%	1	0.2
MESOTHELIOMA	2	0.2%	2	0.6%	0	0.0
Mesothelioma	2	0.2%	2	0.6%	0	0.0
MISCELLANEOUS	20	2.2%	7	2.1%	13	2.2
Miscellaneous	20	2.2%	7	2.1%	13	2.2
MALE 335	emale	591				

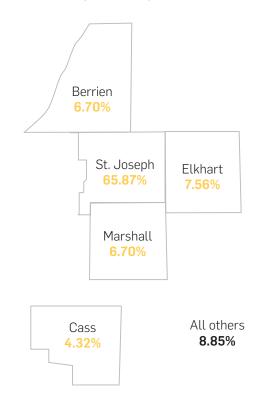
TOTAL
*Exclusions: Not Male and Not Female (0)

2015 Cancer Incidence Report by site and sex

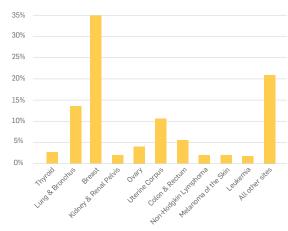


Cases by county

In 2015 there were a total of 926 cancer patients diagnosed at SJHS. The largest population of patients was from St. Joseph County, representing 65.87 percent of the cases treated and/or diagnosed at SJHS. We are continuing to expand our services to serve all cancer patients in this region and beyond.







COC Standard 4.6: Assessment and evaluation of treatment planning

Each year, a physician member of the Oncology Committee performs a study to assess whether patients in the program are evaluated and treated according to evidence-based national treatment guidelines. The study must determine that the diagnostic evaluation is adequate and the treatment plan is concordant with a recognized guideline.

Study source:

Review of a single treatment for a specific cancer site Diagnostic evaluation of Diffuse Large B-Cell Lymphoma NCCN guidelines version 4.2014

Study data:

(21) 2013 Cases diagnosed with diffused large B-cell lymphoma

Study assessment: Dr. Bilal Ansari reviewed all 21 cases for the following criteria: an FNA or core needle biopsy with immunohistochemistry, flow cytometry, PCR for IgH and TCR gene rearrangements and/or FISH for major translocations) for diagnosis. B symptoms, bone marrow biopsy (>1.6 cm) +/- aspirate; possible PET scan. Stage I-II: Nonbulky (<10cm) RCHOP x3 cycles+RT or RCHOPx6 cycles +/-RT. Bulky (>10cm) R CHOPx6 cycles +/- RT. Stage III-IV Clinical Trial or RCHOP after 2-4 cycles restage.

Case #	Stage	FNA or Core	IHC, Flow Cytometry, PCR for IgH and TCR, and/or FISH	PET/CT	BONE MARROW BX (>1.6 CM) +/- ASPIRATE	Chemotherapy	RT	Treatment concordant with NCCN guideline	TOTAL
1	1EA	Core	YES	PET/CT	YES	CHOP – R	YES	Yes	5
2	1EA	BX	YES	PET/CT	YES	None due to age	YES	Yes	4
3	1	CORE	YES	PET/CT	NO	YES	NO	Yes	2
4	IVB	CORE	YES	PET/CT	YES	YES	NO	Yes	6
5	IVA	BX	YES	US	YES	YES	YES	Yes	1
6	IVB	BX	YES	CT	NO	NO	NO	Yes	2
7	IVA	CORE	YES	CT	YES	YES	NO	Yes	4
8	IVA	CORE	YES	MRI	YES	YES	NO	Yes	8
9	IVA	BX	YES	CT	YES	YES	NO	Yes	18
10	IVA	BX	YES	PET/CT	YES	YES	NO	Yes	42
11	IIIB	CORE	YES	PET/CT	YES	YES	NO	Yes	5
12	IIIB	EXCISION	YES	CT	NO	NO	NO	Yes	8
13	IIIA	EXCISION	YES	PET/CT	YES	YES	NO	Yes	1
14	IVB	CORE	YES	PET/CT	YES	YES	NO	Yes	12
15	IIIA	EXCISION	YES	YES	YES	YES	NO	Yes	30
16	IIIA	CORE	YES	YES	YES	YES	NO	Yes	10
17	IIIA	CORE	YES	PET/CT	YES	YES	NO	Yes	4
18	IISB	FNA	YES	CT	YES	YES	NO	Yes	12
19	IIB	EXCISION	YES	PET/CT	YES	YES	NO	Yes	30
20	IIEA	BX	YES	PET/CT	YES	YES	YES	Yes	10
21	IVB	BX	YES	PET/CT	YES	YES	NO	Yes	4

Physician reviewer: Dr. Bilal Ansari. Date cases reviewed: December 2015. 21 of 21 cases reviewed received appropriate diagnostic evaluation and treatment according to current NCCN guidelines.

President's Brunch welcomed TV star & cancer survivor.

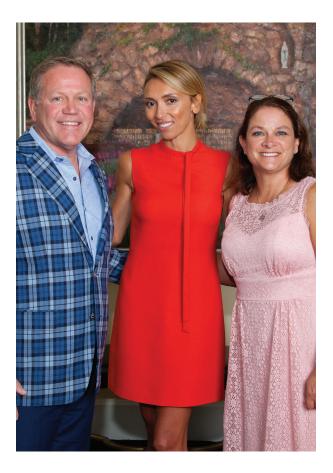


This year's President's Brunch, presented by the Kelly Cares Foundation, featured Giuliana Rancic, New York Times best-selling author, entertainment journalist, entrepreneur, fashion designer, beauty expert and breast cancer survivor. The April 24 event took place at the Morris Inn at Notre Dame.

In addition to being co-star of the E! Network's hugely popular show "Fashion Police," Rancic has been on the red carpet for every mega-event in the entertainment industry.

At the age of 36, Rancic learned she had breast cancer through a mammogram she had at her doctor's request before undergoing her third round of in vitro fertilization treatment. Following the diagnosis, she had a double lumpectomy and later decided to undergo a double mastectomy. In 2013, Rancic created "Fab-U-Wish," a program that grants fashion, beauty and celebrity-themed wishes to women battling breast cancer.

Proceeds from the 2016 President's Brunch will be used for the design and purchase of a new Mobile Medical Unit (MMU). Our original MMU has been in operation since 2006.



3516

New Wellness House helps agency turn a corner.

With more than a year under its belt, the Wellness House of RiverBend Cancer Services has lived up to expectations by providing even greater resources to our region's cancer survivors. The positive reaction from the community has resulted in increased programming and more people being served. More than 740 survivors, family members, caregivers and community members came to RiverBend in 2015 for assistance, education, wellness and support.



"While RiverBend has been in our community for 73 years, things have really changed since we moved into the Wellness House," said Kate Voelker, Executive Director. "Most notably, many more people are just stopping in to learn about our programs and services. They've heard about us or simply have been driving by and want to learn more."

Who comes to the Wellness House? Survivors in treatment who want to gain more control over their emotional and physical well-being during the treatment phase. Others who have finished treatment and want to rebuild their emotional and physical strength participate in fitness classes, support groups and education programs.

It's also quite common to see caregivers who want to network with other caregivers to learn how best to support their loved ones. "Anyone who is interested in the role that cancer plays in our community and how they can support their friends and loved ones is welcome," Voelker said.

The Wellness House features beautiful rooms for counseling, education and nutrition programs, a wig salon, even a fitness studio for yoga. Outdoor spaces give room for a community garden and fun for the children of our family group. Voelker said RiverBend's programs are going strong. In 2016 they've seen a 54 percent increase in individuals participating in programs such as nutrition and fitness classes, massage, Reiki, and yoga.

Logan Haney, RiverBend's new Wellness and Education Program Director, has created more art expression and nutrition programs as well as more fun and fellowship times for families. Haley Plett was also hired in 2015 as a client advocate.



Logan Haney Wellness and Education Program Director



Haley Plett Client Advocate



Providing rides and changing lives

Imagine you have an important place to be, somewhere so important it could mean the difference between life and death. Now imagine you have no way to get there.

Cancer survivors who need transportation to treatment and appointments face this troubling reality every day. When there are no family members, friends or a network of support, too often survivors don't have a choice — they skip life-saving appointments.

It's a fact that's simply unacceptable to RiverBend Cancer Services. "We've known about the problem, of course, but until recently we could only put a bandage on it by providing limited gas cards to our clients who needed help," said Kate Voelker, Executive Director of RiverBend.

So, with the help of grants from the Kelly Cares Foundation, Research Like a Champion, Mike and Josie Harper Cancer Research Institute and the Community Foundation of St. Joseph County, RiverBend kicked off a pilot transportation program in June 2015. In partnership with local hospitals and oncology practices, RiverBend developed a program that uses a variety of resources: gas cards, Transpo and Access bus tokens and privatepay rides.

"Because of these grants, we were able to provide 109 people round-trip rides to 1,270 treatment and doctor appointments," Voelker said. "We've even been able to get several people to specialized treatment options in and out of state. It's been life-changing for many, many people. Every day our clients and partners tell us how much they appreciate the program."

Because of its success, Voelker said the transportation program was awarded additional funding to continue the project through 2016.

SJHS and RiverBend Cancer Services partner to offer social work services to oncology patients

Cancer is a complex disease process that affects patients in a variety of ways. Patients experience psychological, social, financial and behavioral issues that can interfere with their treatment plan and adversely affect their outcome. To address the psychosocial issues experienced by patients with cancer SJHS and RiverBend Cancer Services partnered to provide social workers who meet the needs of our patients while inpatients at SJHS and as they continue through survivorship at RiverBend Cancer Services. "Screening patients for distress and psychosocial health needs is a critical first step to providing high-quality cancer care," said Katina Wood, Executive Director of Oncology. "Patients with cancer need to be referred for the appropriate provision of care, and high-quality psychosocial cancer care includes systematic follow-up and reevaluation. This partnership between SJHS and RiverBend allows us to work together to meet patients' immediate and ongoing needs."

2016-2017 Oncology Committee

Willard "Bill" Agnew, MS, ATC Community Outreach Coordinator

Bilal Ansari, MD Medical Director Committee Chair

Rachelle Anthony American Cancer Society Representative

Kayla Bella Cancer Conference Coordinator

Erica M. Borys, RD, CD Clinical Dietitian Supervisor

Marian A. Brown, BS, CTR Certified Tumor Registrar

Mary Butler, RT (R) (T) Manager, Radiation Oncology Services

Jen Ewing, RN, MSN, NP-C, AOCNP Practice Manager

Amobi Ezenekwe, MD Pathologist

Matthew Folstein, MD Surgeon

Stacy Garton, MSW, LCSW, OSW-C Psychosocial Services Coordinator

Melissa R. Gillette, PHD, LCGC Genetic Counselor Laura Ginter Survivorship Navigator

David P. Hofstra, CNMT, RT (N) Admin Director Radiology-Rehab Therapy

Roger G. Klauer, M.Div., MD Cancer Registry Quality Coordinator

Jill Lowry, MA, M.DIV Pastoral Care Representative

Truc Ly, MD, FACC Cardiothoracic Surgeon

Louis J. Pace, MSN, RN Palliative Care Specialist

Lisa Ribble – Fay, BS, PharmD, BCPS Clinical Pharmacy Coordinator

Mike Rotkis, MD Breast Center Medical Director, Cancer Liaison Physician

Camilla M. Shaw, RN Oncology Patient Navigator

Brion Shin, MD Radiation Oncologist

Terri S. Smith, RN Case Manager

Amelia L. Taggart, RN, OCN Oncology Nurse

Binh Tran, MD Radiation Oncologist Linda Tuthill, MD Diagnostic Radiologist

Kate Voelker Community Services Specialist

John Wachowiak, BSN Manager, Nursing, PACU, OTIC, OSP-OP, Endoscopy

Carol L. Walker, MSN, RNC-NIC Administrative Director, Medical/Surgical

Katina M. Wood, RT(T), MBA, MS Executive Director

Kim Woofter, RN Clinical Research Coordinator

Accreditations

American College of Radiology American College of Surgeons Commission on Cancer American Council on Graduate Medical Education American Registry of Radiologic Technology Association for Clinical Pastoral Education College of American Pathologists The Joint Commission National Accreditation Program for Breast Centers











At **Saint Joseph Health System** our values give us strength.

That character guides every decision we make — even when those decisions are complicated, costly, or hard.

We honor our mission to heal body, mind, and spirit by investing in technology, people and capabilities that allow us to set the standard for quality care. Because we answer to a higher calling.

This is healthcare, inspired by faith.

Our Mission

We, Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities



Elkhart Mishawaka Plymouth South Bend

sjmed.com