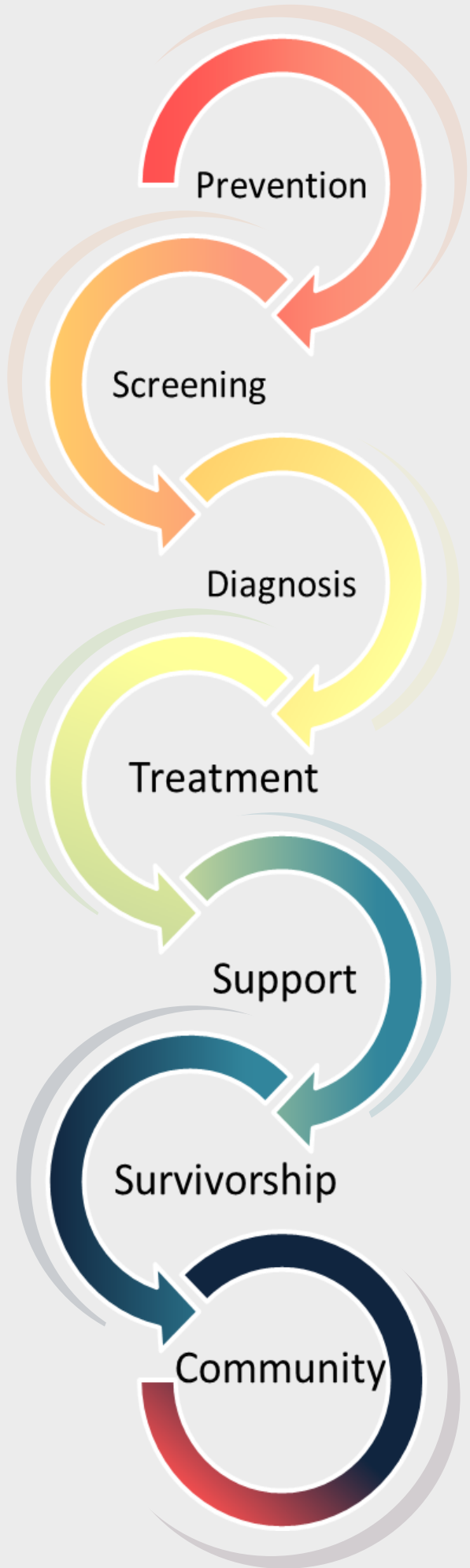


The Continuum of Cancer Care



2012
Annual Report



The Cancer Continuum

Cancer care takes place along a continuum, a spectrum that includes support and service for patients and survivors, their families, and the community at large. The pieces of the continuum are at times separate and at times closely linked, underscoring the importance of a comprehensive and multidisciplinary approach to providing all cancer related services.

Our Mission

Each and every day, the team at the Middlesex Hospital Cancer Center delivers individualized, comprehensive, compassionate care using the most advanced technologies and treatments delivered by highly trained, highly skilled clinicians. Our multidisciplinary approach addresses all aspects of the cancer care continuum, from prevention and screening, to treatment and support services, through survivorship and palliative care.

Our Report

Each section of this report details the programs, pathways and teams of caregivers that provide services related to each aspect of the continuum, including their achievements and programmatic growth during 2012.



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Middlesex Health System



MISSION

Middlesex Hospital exists to provide the safest, highest quality health care, and the best experience possible for our patients.



VISION

To be the clear first choice for medical care.



CORE VALUES

Pursue excellence.

Uphold honesty.

Cooperate and collaborate.

Support innovation.

Deliver compassionate care.

Accreditations

American College of Surgeons Commission on Cancer
Renewed 2012 - With Commendation

National Accreditation Program for Breast Centers (NAPBC)
Renewed May 2012 (2012 - 2015)

American College of Radiology (Department of Radiation Oncology)
2010 - 2013

American College of Radiology (Department of Radiology)

Breast Imaging Center of Excellence (Department of Radiology)
2011 - 2014

Magnet Recognition (Middlesex Hospital Nursing)
2010 - 2014

The Joint Commission (Middlesex Hospital)
2011 - 2014



Cancer Committee

The Cancer Committee, which meets monthly, is comprised of physicians, Hospital administrators and Cancer Center staff. The primary goal of this leadership group is to set and monitor the strategic goals of the cancer program while working to meet the standards for accreditation. Representatives to the Cancer Committee then work with the entire multidisciplinary team to reach the desired programmatic outcomes.

Members:

Andrea Malon, MD, Chair
Connie Branyan
Meghan Burgess
Lisa Cull
Harry Evert
Miklos Fogarasi, MD
Doreen Gagnon
Gary Havican
Sarah Jeffrey

Edward Myer, MD
Pat O'Brien
Mary Jeanne Pierce
Bertha Robbins
Nathan Walk, MD
Joseph Weissberg, MD
Robert Wolek, MD
William Zeidler, MD

Pathways and Programs

At the Middlesex Hospital Cancer Center, we understand the importance of coordination in successfully providing comprehensive care. Our **Nurse Navigator program** ensures that each of our patients receives the assistance he or she needs to understand and access all components of diagnosis, treatment, and survivorship. Each of our three navigators, all of whom have specialty training and oncology certification, manages **pathways** that have been built by our multidisciplinary working groups to address specific cancer sites, including breast, lung, and prostate. These pathways continually grow to include the most up-to-date recommendations and resources for care, allowing our teams of experts to deliver the best possible treatment, support and guidance.

Comprehensive Breast Center
(7)

Comprehensive Prostate & Urology Programs
(8)

Total Lung Care Center
(9)

Comprehensive Breast Center

The Middlesex Hospital Comprehensive Breast Center (CBC) is a virtual care program through which a multidisciplinary team of employees provides an extensive array of breast care services for both cancerous and noncancerous conditions. The departments and clinicians that collaborate through this center are committed to ensuring that all patients have access to the technologies and resources needed to meet their physical and psychosocial needs.

Accreditation & Leadership

The Middlesex Hospital Comprehensive Breast Center is coordinated by Meghan Burgess, APRN, and is directed by the Breast Program Leadership (BPL). BPL is a multidisciplinary committee that provides programmatic oversight and monitors compliance with the standards set forth by the National Accreditation Program for Breast Centers (NAPBC), through which the Center is fully accredited. The Breast Program Leadership group, which includes physicians, nurses, and other staff, meets on a monthly basis to discuss policies and procedures, communicate about clinical guidelines, and guide Quality Improvement initiatives.

Screening & Diagnostic Services

Middlesex Hospital is proud to have a Breast Imaging Center of Excellence within its accredited Department of Radiology. Our team of radiologists and radiologic technologists administers the complete range of breast care screening and diagnostic procedures, including CAD digital mammography, ultrasound, MRI and biopsies utilizing all imaging modalities.

Hereditary Risk Assessment & Genetic Counseling

The CBC's Hereditary Risk Assessment Program exists to help patients, both male and female, identify and understand their genetic risk for breast and ovarian cancers and employ appropriate strategies to manage that risk. Nurse Practitioner Meghan Burgess, who holds a certification in genetic counseling, meets with referred patients and, when appropriate, facilitates testing for mutations of the BRCA1 and BRCA2 genes, as well as Lynch Syndrome. In the event of a positive genetic test, the Nurse Practitioner provides customized recommendations for the most appropriate methods of ensuring that any developing malignancies are detected and treated at the earliest possible stage.

In 2012, the Nurse Practitioner collaborated with the Department of Radiology to develop and implement a screening tool that will help clinicians to determine which patients should be referred for Hereditary Risk Assessment.

Navigation & Treatment Services

Breast Nurse Navigator Pat O'Brien, RN, OCN, CBCN continues to provide comprehensive support to breast cancer patients receiving all or part of their treatment at the Middlesex Hospital Cancer Center. The role of the Nurse

Navigator varies from patient to patient, but regardless of circumstance, she is available to educate patients about their diagnosis and treatment options, connect them to supportive services and survivorship care, and help ensure timely access to needed tests and/or procedures. The Nurse Navigator works very closely not only with the Department of Radiology, but with all providers of our available treatment options, including radiation oncology, medical oncology, and surgical services.

Activities and Accomplishments

The Comprehensive Breast Center participates extensively in community outreach, as well as prevention and screening education, in part through grant-funded programs (pages 31 - 33).



Comprehensive Prostate & Urology Programs

Through the Comprehensive Prostate Program, which was founded in 2005, Nurse Navigator Dorothy Carvalho, RN, OCN offers patient support through four established disease site pathways: prostate, bladder, renal, and most recently, testicular. In addition to providing navigational services for patients undergoing treatment for cancers of these sites, Dorothy continues to grow the the programs through professional development, research, community outreach, and education.

Program Growth and Professional Development

In 2012, the Comprehensive Prostate Program was selected by the Association of Community Cancer Centers as one of ten programs across the country to take part in a pilot project on prostate cancer outcomes. The program was entitled, “Prostate Cancer Programs: Developing Tools and Measuring Effectiveness in the Community Setting.”

Also in 2012, Dorothy Carvalho and Dr. Edward Myer presented at the Association of Community Cancer Center’s annual oncology conference, speaking on the “Use of the EPIC-16 Tool in Developing an Erectile Dysfunction Treatment Plan.”

Additionally, Dorothy Carvalho was certified in urinary incontinence assessment and management.

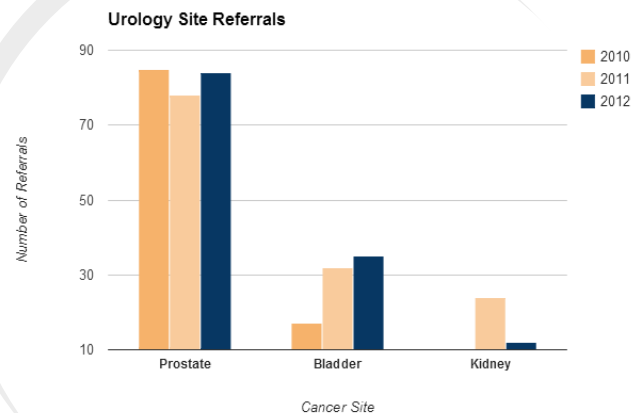
Research

In collaboration with the Cancer Center Quality Improvement Coordinator, Dorothy Carvalho and the physicians at Middlesex Urology completed a bladder cancer recurrence study entitled “Evaluating the Recurrence Free Survival of Bladder Cancer Patients Given Mitomycin-C Intraoperatively at time of TURBT vs. TURBT Alone.”

Community Outreach & Education

In addition to participating in a number of Cancer Center programs, the Comprehensive Prostate Center hosted several of its own events:

- **October 2011**
 - Know Your STATS, a prostate cancer screening event, was held in Westbrook.
- **April 2012**
 - The Annual Men’s Health Event provided an opportunity for indigent and uninsured men in Middletown to access screening and general health services (page 31).
- **September 2012**
 - Our first annual Prostate Cancer Survivors Event was held. The “Night of a Thousand Stars” gala, which featured dinner, dancing and educational speakers, was hosted at the beautiful Wadsworth Mansion in Middletown (page 32).



Total Lung Care Center

2012 saw marked growth of the Total Lung Care Center (TLCC), which exists to ensure comprehensive lung care through innovation and multidisciplinary collaboration. The working group that launched the TLCC, and continues to meet to manage the program, includes representatives from pulmonary medicine, medical oncology, thoracic surgery, radiation oncology, radiology, pathology, pulmonary rehabilitation, smoking cessation, the cancer registry, hospital marketing, and hospital administration. The Lung Nurse Navigator, Gean Brown, RN, OCN, is also a part of this team.

Screening and Surveillance Initiative

In addition to providing patients with Nurse Navigation, the TLCC has focused on screening and active surveillance of lung nodules, in order to detect lung cancers at the earliest possible stage. A formal lung screening program was launched, and the first low-dose CT scan for screening was performed on April 1, 2012. Between April and September of the same year, 14 screenings were performed; from these, there were 8 findings, two of which were Stage 1a and Stage 1b lung cancers.

All findings that result from these screening tests are tracked, and the appropriate follow-up recommendations are made.

Professional Achievement and Development

In 2012, Gean Brown continued to expand her own capabilities as Nurse Navigator while sharing her expertise and promoting policy change to increase awareness of and resources for lung cancer and related research.

- Recertified as an Oncology Certified Nurse and in Chemotherapy and Biotherapy Administration.
- Received a Professional Practice award for her work in navigation.
- Served as the President of the Central Connecticut Oncology Nursing Society.
- Collaborated with the American Cancer Society and the Connecticut Cancer Partnership to plan, and then facilitate, their first Navigation Conference.
- Attended the 5th Annual National Advocacy Conference: Call on Congress 2012, at which she met with Senator John Kerry and other legislators.
- The Total Lung Care Center received an Outstanding Achievement Award for its work in promoting and providing lung cancer screening, diagnosis, and treatment services.

Low Dose CT Scan Volumes

Low Dose CT
Scans
14

Suspicious Findings
8

Lung Cancers
Detected
2

Total Lung Care Center (cont.)

Education and Outreach

In addition to contributing to Cancer Center community outreach events, the Total Lung Care Center engaged extensively with local physicians and members of the community.

- Raymond Schoonmaker, MD, Total Lung Care Center Physician Champion, and Gean Brown visited Middlesex County primary care physicians to increase awareness about lung cancer risk factors and screening, as well as to encourage collaboration in order to better monitor and diagnose lung cancer.
- Raymond Schoonmaker, MD, Peter Pace, MD, Jonathan Blancaflor, MD and Todd Bishop, MD spoke at the Middlesex Hospital Vital Topics meeting for the Middlesex Hospital Primary Care staff.
- The TLCC hosted its 1st annual Shine a Light on Lung Cancer vigil in conjunction with national advocacy organization Lung Cancer Alliance (see pg. 31).
- Dr. Miklos Fogarasi (Medical Oncologist, Connecticut Oncology Group), Wendy Peterson, A.P.R.N. (Psychology), Doreen Gagnon, L.C.S.W. (Social Work) and one of our courageous lung cancer survivors facilitated a patient and caregiver luncheon, at which they discussed the impacts of lung cancer on families and strategies to cope and support one another through the challenges related to this diagnosis.

2012 Program Volumes

Lung QA Program

294 Cases

Lung Surveillance

385 Cases

Nurse Navigation

72 Cases

Diagnostic and Treatment Services

Diagnosis and treatment reside at the very core of cancer care, and the Middlesex Hospital Cancer Center has available the most cutting-edge technology that is utilized by highly-skilled physicians and nurses.

Radiation Oncology

(12)

Medical Oncology - COG

(13)

Inpatient Oncology - South 4

(14)

Surgical Alliance

(15)

Research & Clinical Trials

(16)

Radiation Oncology

2012 marked a very special occasion for the Middlesex Hospital Department of Radiation Oncology - its 10 year anniversary of residing within the Outpatient Center on Saybrook Road. In those 10 years, the Radiation Oncology team has administered 84,307 treatments and performed 311 Prostate Seed Implants.

Even after 10 years, the department continues to grow, striving to provide patients with access to the most cutting edge technologies delivered by the most highly skilled physicians and technicians. In the past year, the department began offering, and has since treated 6 cases with, Respiratory Gating, which coordinates the delivery of radiation with a patient's breathing to minimize damage to healthy tissue. This treatment procedure was enhanced with the CT/Simulator upgrade for amplitude-based scanning, providing increased accuracy for localization of tumor motion during respiration. The SRS Program continued as well, with 17 cases being treated in 2012.

Treatment capacity also expanded with the installation of Velocity, a multi-modality, deformable image fusion software that provides a means of fusing different imaging modalities, such as CT and PET, allowing for improved delineation of tumor volumes. This device also performs dose reconstruction; it estimates doses for patients who have received prior radiation and for whom overlapping dose is critical.

Additionally, a second physicist was hired to assist in the management of the aforementioned technological growth of the department.

Professional Development and Education

Dr. Joseph Weissberg, Chair of the Department of Radiation Oncology, continues to be active in the Cancer Center's multidisciplinary initiatives. He regularly participates in weekly Cancer Case Conferences, contributing to the prospective review of cases that afford our patients optimum care. He is also a part of the teams that have designed and implemented the sub-specialty programs and centers for breast, GYN, and urologic cancers.

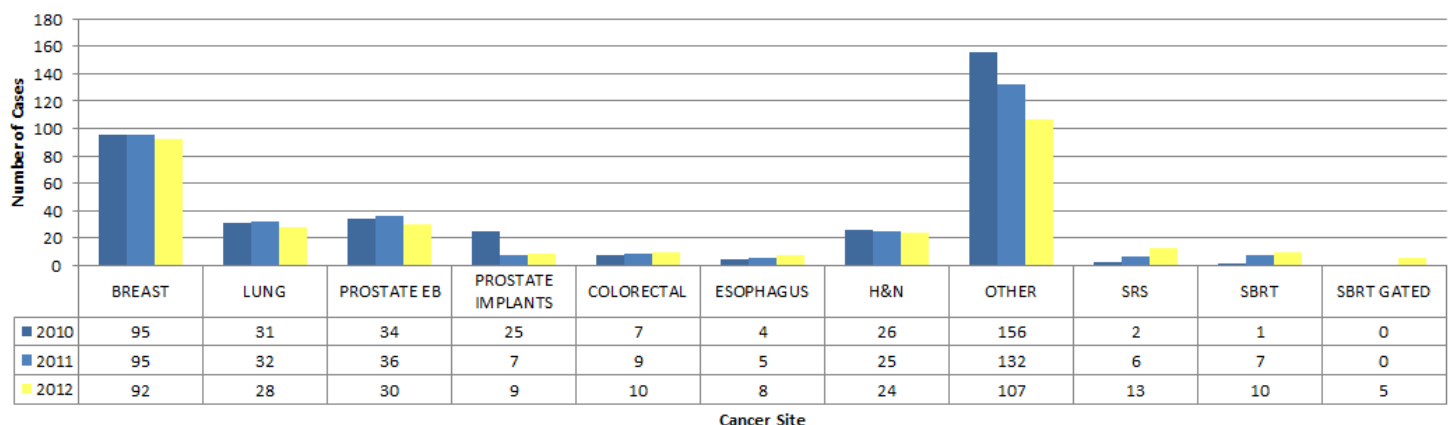
Dr. Weissberg also presented at both the Lung SBRT Annual Membership Meeting and the "Night of a Thousand Stars" prostate event (page 32).

The Radiation Oncology team prepared and published an abstract and presented the related poster to the Radiological Society of North America on the subject of treating conjunctival lymphoma with an ocular shield.

Outreach and Patient Support

Radiation Oncology facilitated transportation for shoreline-area patients in need of a ride to their treatments, all at no cost to the patients or their families. In 2012, 222 days of transportation were provided for a total of 520 patients.

Radiation Oncology Volumes by Cancer Site (2010 - 2012)



Medical Oncology (COG)

In a world of continually evolving cancer care, Connecticut Oncology Group (COG) consistently provides the most effective, comprehensive treatment with compassion and personalized attention.

A practice of five highly trained Hematology/Oncology physicians, two board-certified Advance Practice Registered Nurses and a team of chemotherapy-certified nurses, COG administered more than 5,600 treatments in 2012. While a portion of these were delivered at the practice's Centerbrook office, which provides convenient access to care for patients in the shoreline area, the majority were given at the main office, which is located in the heart of the Middlesex Hospital Cancer Center. This location allows patients to readily access additional diagnostic, treatment and support services offered by the Cancer Center. The practice also includes an on-site pharmacy, where a pharmacy technician works with patients to secure financial assistance for medications when necessary.

Each year, COG grows its capacity to meet increasingly complex patient needs. In 2012, it attained the first phase of meaningful use for electronic medical records, as mandated by the government. In addition, through collaboration with the Cancer Center clinical trials staff, COG continued to participate in both cooperative group and industry studies, which are offered to eligible patients as a treatment option. This allows for cancer patients to get the best care possible while contributing to the research on more effective treatments and increased quality of life.

For the third straight year, COG staff physicians were selected as *Connecticut Magazine* "Top Docs," and these caregivers contribute consistently to community outreach efforts, such as Survivor's Day, the Shine a Light on Lung Cancer vigil, and the Colon and Nutrition Event (pgs. 31 & 32).

Medical Oncologists

Michael Farrell, M.D., Ph.D.

Miklos Fogarasi, M.D.

Susanna Hong, M.D.

Mark Kimmel, M.D.

Robert Levy, M.D.

Nurse Practitioners

Megan Homes, A.P.R.N.

Kimberly Ryan, A.P.R.N.

Inpatient Oncology (South 4)

Despite the larger movement towards outpatient oncology care, Middlesex Hospital has continued to maintain a high quality inpatient oncology program. In 2012, South 4, the inpatient oncology unit, focused especially on improving patient satisfaction scores as reflected on the Press Ganey and HCAHPS surveys, professional development, and process improvement.

Press Ganey and HCAHPS

In 2012, the South 4 Unit Based Practice Council placed particular emphasis on noise reduction in the inpatient oncology unit. These efforts are ongoing and results will be monitored to ensure that the most effective strategies are being used to meet this goal.

Patient Safety and Satisfaction

Patient safety and comfort remains a priority for South 4 staff; the team participated in a hospital-wide Safety Culture Survey, among other activities. In addition, South 4 has maintained a stable nursing staff, which allows returning patients and their families to benefit from the strong bonds and trusting relationships they develop with caregivers. However, the department was able to increase its per diem staff pool, which ensures that the nursing staff is operating at full capacity at all times.

Professional Development

The oncology nursing staff on South 4 is committed to growing their knowledge and skill base in order to best serve patients and their families. A number of the staff are certified in oncology nursing, geriatric nursing, and medical/surgical nursing. Additionally, multiple staff members have completed the Nurses Improving the Care for Hospitalized Elders (NICHE) training, while nurses and Patient Care Technicians successfully finished various training modules on geriatric-focused care.

The South 4 team also invests considerably in nursing students, hosting individuals from multiple local academic institutions, as well as taking on one nurse resident each year. The nurse resident is provided with additional support as he or she enters the nursing workplace and is then given special education in Chemotherapy/Biotherapy through the Oncology Nursing Society. The resident is then expected to complete hands-on training on site.

South 4 nursing is represented on multiple hospital committees, including medication safety, fall prevention, restraint utilization and infection control.

Process Improvement

In 2012, South 4 implemented a streamlined chemotherapy administration process, which further improves the nursing staff's ability to focus on error prevention.

These changes were made in collaboration with physicians, the Pharmacy, and the Quality Department.

Surgical Alliance

The Middlesex Hospital Surgical Alliance, a partnership of highly-specialized oncologic surgeons, was developed to provide Middlesex County residents with a high-quality, multidisciplinary option for thoracic and gynecologic surgical services close to home.

In the mid 2000s, the Cancer Center team recognized that a number of patients were leaving the Middlesex Health System and seeking services at other institutions, in large part due to a lack of access to surgical specialists. Recognizing the gap in services leading to this outmigration, the Cancer Center established a partnership with **Dr. John Federico**, a thoracic surgeon, as well as general surgeons at Middlesex Hospital.

Since that initial collaboration in 2010, the Surgical Alliance has added a team of gynecologic oncology surgeons:

- **Dr. Jonathan Cosin**
- **Dr. Molly Brewer**
- **Dr. Angela Kueck**

Bringing these physicians on board has allowed the Cancer Center to grow its GYN Oncology program. A leadership working group was established in 2012, and this multidisciplinary team will work to develop pathways for the program. As a part of this process, the Cancer Center has established the goal of creating a GYN Nurse Navigator position.

The number of referrals to the Surgical Alliance has trended positively in 2012, and additional growth is anticipated in 2013.

In 2012, Surgical Alliance also welcomed a new medical and administrative assistant, Lucia Malangone. In addition to providing support to the surgeons on-site, Lucia ensures prompt consultations and follow-ups.

FY 2012 Volumes: Visits to Surgical Alliance

October 2011	21
November 2011	23
December 2011	27
January 2012	12
February 2012	18
March 2012	16
April 2012	11
May 2012	20
June 2012	52
July 2012	30
August 2012	32
September 2012	30

Research & Clinical Trials

For more than two decades, the Middlesex Hospital Cancer Center has provided patients with access to cutting-edge clinical research in a setting close to home. The trials made available to patients focus on cancer prevention, treatment, side-effect management and quality of life.

Available Studies

In 2012, the program continued to offer a wide variety of research studies, in part through continued affiliation with the Dana Farber Cancer Institute. Through this relationship, patients of the Middlesex Hospital Cancer Center can access cooperative group oncology clinical trials sponsored by the National Cancer Institute. MHCC patients are also able to access studies offered by the Cancer & Leukemia Group B (CALGB), the Eastern Cooperative Oncology Group (ECOG), SWOG, the International Breast Cancer Study Group (IBCSG), the North Central Cancer Treatment Group (NCCTG), NCIC Clinical Trials Group (NCIC-CTG), and the Radiation Therapy Oncology Group (RTOG), among others. Susanna Hong, MD, Connecticut Oncology Group, is the local Principal Investigator for all cooperative group studies opened at our Cancer Center.

MHCC also makes available to patients clinical trials sponsored by pharmaceutical companies. Dr. Robert Levy, also of Connecticut Oncology Group, serves as the local Principal Investigator for these trials.

Clinical Research at Middlesex

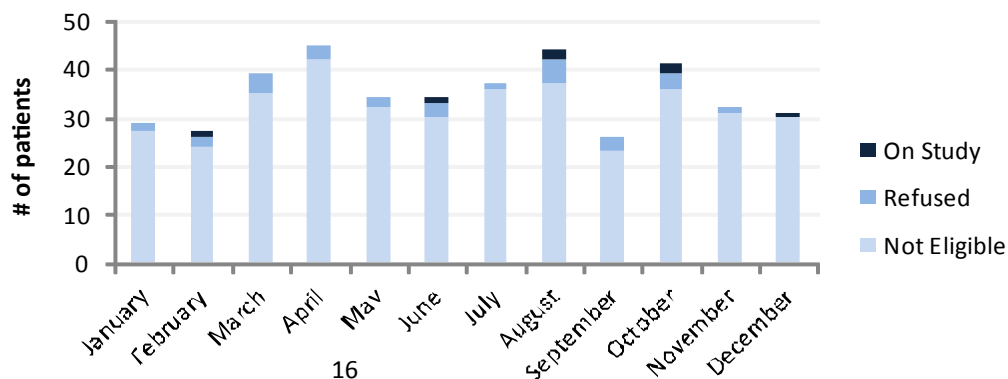
The Clinical Trials team at the Middlesex Hospital Cancer Center is comprised of a research nurse, a research coordinator, and a regulatory specialist, all of whom are certified as research professionals. This team screens all new oncology patients to determine if they are eligible to participate in any of the available studies. Of the 412 patients screened for eligibility, 9 were enrolled in a clinical trial.

Throughout the year, the MHCC had open clinical trials for breast, colorectal, liver, lung, and prostate cancers, as well as multiple myeloma. The Clinical Trials Office partnered with Middlesex Gastroenterology Associates to enroll 12 patients into a Colorectal Cancer (CRC) study that evaluated a new blood test for CRC early detection. Additionally, the Clinical Trials Office opened an observational study to follow patients with HER2-positive metastatic breast cancer.

Program Goals

In 2013, the MHCC Clinical Trials Office plans to activate additional studies for other cancer sites/diagnoses, with the ultimate goal of increasing patient participation. The research team will also continue in its efforts to increase awareness of the available clinical trials among both patients and affiliated physicians.

2012 Clinical Trials Screening and Accruals



Patient Support Services

Successful cancer treatment is predicated on a focus on the whole person, as an experience with cancer impacts not only organ systems but the entire body, mind and spirit. The Middlesex Hospital Cancer Center recognizes this and seeks to help each patient achieve the highest possible state of physical, emotional and spiritual well-being during and after treatment.

Distress Management & Social Work

(18)

Nutrition Services

(20)

Center for Survivorship & Integrative Medicine

Part I

(21)

Part II

(22)

Department of Rehabilitation & Physical Therapy

(23)

Patient Resource Library

(25)

Distress Management & Social Work

The Middlesex Hospital Cancer Center offers comprehensive psychosocial services to cancer patients and their families to provide support for the emotional, spiritual, financial and other burdens that often accompany a cancer diagnosis and the subsequent treatment. These services are provided through the Distress Management Pathway, which is coordinated by the Cancer Center's Oncology Social Worker, **Doreen Gagnon, licensed clinical social worker (LCSW)**. The Distress Management team also includes **Wendy Peterson, psychiatric APRN**, and **hospital chaplain, Dennis McCann**.

Oncology Social Work

The Oncology Social Worker received a total of **268 referrals** in 2012, from Connecticut Oncology Group, Middlesex Hospital Radiation Oncology and the Nurse Navigators. The goal of each social work intervention varies based on patient need, and services provided range from supportive counseling and Cognitive Behavioral Therapy (CBT) to assistance with insurance paperwork and financial needs.

Supportive counseling and CBT are primarily delivered to assist patients and/or their family members in coping with the distress associated with a cancer diagnosis and related or subsequent treatment. When appropriate, the oncology social worker also makes referrals to Behavioral Health or Pastoral Services.

Additional interventions are based on the need for referrals to **community resources**, such as the CT Home Care Program for Elders, the CHOICES program through the Area Agencies on Aging, co-pay assistance programs, prescription assistance programs, home health service agencies, legal assistance, credit counseling services, energy assistance programs and community support groups. **Transportation services** referred to include the American Cancer Society, Middletown Area Transit, St. Luke's Volunteers, Nine Town Transit, Logisticare, Coordinated Transportation Services and Executive 2000 Taxi Service. **Work and housing concerns** are addressed in a number of ways, including assistance with disability and FMLA applications, as well as locating low-income housing, homeless shelters, and transitional housing for patients.

Assistance with financial matters is given to those applying for programs such as Medicaid, HUSKY, Middlesex Hospital Financial Assistance, federal SSDI and SSI benefits, and state SAGA cash and food stamps. The social worker also files applications with national and local non-profit organizations, which provide invaluable financial support to patients in need due to outstanding medical bills, rent/mortgage payments, food, and utilities. These groups include CancerCare, the Leukemia & Lymphoma Society, the CT Sports Foundation (\$8,649 in 2012), the Joe Andruzzi Foundation (\$5,371), Take a Swing Against Cancer (\$1,350), and the Clinton Rotary Cancer Relief Fund.

Support Groups

The Oncology Social Worker continues to provide support to patients and their families through the facilitation of multiple monthly support groups, as well as an annual holiday bereavement group. The social worker collaborates with the Nurse Navigators to plan for and guide these groups.

1352
total
interventions

316
supportive
counseling
interventions

111
community
services
interventions

181
transportation
interventions

171
work/housing
interventions

573
financial/insurance
interventions

Distress Management & Social Work (continued)

Distress Management

Treatment and support for those experiencing cancer-related distress goes beyond assistance with practical concerns - it includes care for the mind and spirit, which can be burdened by feelings of powerlessness, anger, sadness, fear and anxiety in the face of a cancer diagnosis. Our psychiatric APRN and the hospital chaplain provide additional services to Middlesex Hospital Cancer Center patients so that the Distress Management program ensures comprehensive care for all needs. The APRN offers both individual and family therapy, as well as psychopharmacologic evaluation and treatment for those patients whose emotional distress is interfering with their ability to function in their daily lives. The hospital chaplain offers pastoral counseling for patients whose illness has impacted their spiritual beliefs or practices.

Program Growth & Development

Programmatic growth of the Distress Management Pathway continued in 2012; achievements included the finalization of a tracking program for social work referrals and interventions, as well as continued work on the implementation of distress screening for all oncology patients. The Oncology Social Worker is also in the process of developing a support package for caregivers of cancer patients.

The Distress Management Interdisciplinary Committee was developed to hold weekly “Case Rounds” to discuss and formulate treatment strategies and interventions for patients; this practice is now into its third year.

The Distress Management team also saw the addition of a new - and furry - member: 3-year-old Cockapoo Lily (pictured below with Doreen). Lily and the Oncology Social Worker completed therapy dog training and registered with Pet Partners, all steps in launching the Cancer Center’s dog therapy program. Lily “works” approximately two days per week, visiting patients and providing the support and compassion that only our canine friends can.

The Oncology Social Worker has continued her practice of serving as preceptor and mentor for a 2nd year Master of Social Work intern. In 2012, she was joined by a student from the UConn School of Social Work.

Community Outreach Activity

In addition to facilitating support groups, the Distress Management Team is active in Cancer Center community outreach activities for both to healthcare providers and community members. In 2012, the social worker and hospital chaplain co-facilitated a presentation to the Middlesex Hospital hospitalists to increase their awareness of caregivers’ unique needs and stressors. These two practitioners also began the planning process for a regional caregiver symposium, to be held in spring 2013.

The Distress Management team also participates in Cancer Center programs, such as Survivor’s Day and Prevention Day (pgs. 31 & 32).



Nutrition Services

As evidence continues to emerge that nutrition is essential in both preventing cancer and providing support during treatment and survivorship, the Middlesex Hospital Cancer Center remains committed to offering high-level oncology nutrition services to patients and educating our community about the importance of eating well.

Clinical Services & Program Development

In addition to providing counseling to patients and education and maintenance services to those requiring tube feeding, the certified **Cancer Center Oncology Dietitian, Jennifer Dahlgren, MS, RD**, evolved the capacity of the nutrition department. This included the implementation of protocols for ensuring supplement availability for the CT Oncology Group and the Department of Radiation Oncology, as well as process changes to ensure that the unique needs of esophageal and pancreatic cancer patients were being met separately from those of head and neck patients. Documentation and patient interview worksheets were updated, as well, to ensure that key clinical information was being collected during each patient interview. Additional documentation changes included a conversion to electronic systems, which allows for increased communication between care providers.

In order to meet the growing demand for nutrition-related services for patients, the Cancer Center welcomed a **per diem Registered Dietitian, Sarah Robertson, RD** to the clinical care team. With Sarah on board, there is a RD available to patients for 48 hours each week.

Professional Development

The Oncology Dietitian worked continuously to expand her own knowledge and skill sets, so as to increase her ability to meet patient needs. This included, most significantly, her earning of a Master's of Science in Human Nutrition at the University of New Haven in January 2012. She also attended the Oncology Nutrition Dietetic Practice Group Symposium in Dallas, Texas; this was an opportunity for both professional networking and continuing education in updated clinical practice standards that are being implemented in our medical and radiation oncology clinics.

Staff Education & Collaboration

Staff education was also a priority in 2012; the goal of this was to ensure that all clinical care providers were aware of the needs that can be met through nutritional intervention. Activities to provide this education included a "Lunch and Learn" for staff about the role of the oncology registered dietitian, as well as the facilitation of a webinar, "Living Well with Cancer: The Power of Nutrition," which was attended by MDs and other clinical caregivers. During National Nutrition Month, staff members were treated to a sampling of fresh-pressed vegetable juices.

The Oncology Dietitian also collaborated with the Patient Resource Librarian to increase access to certain resources through our Library and Knowledge Resources Department.

Community Education and Outreach

In addition to participation in the Cancer Center's large community outreach events, the dietitian hosted a Colon & Nutrition Event, an educational seminar that included informational displays, lecture, a question and answer session with clinicians, and, of course, a meal that modeled how to eat well for colon cancer prevention (pg. 31).

During National Nutrition month, information about eating well for prevention and treatment support was made available through displays in the Cancer Center atrium, and the Department of Nutrition's two student volunteers monitored the exhibit.

The dietitian contributed to the Cancer Center's Survivorship Series, presenting on "Defying Age Related Weight Gain." She also reached out to the community through *The Beacon* newsletter, sharing evidence-based information and recipes.



Integrative Medicine

Treatment of the whole person continues to be a priority at the Middlesex Hospital Cancer Center, and this is achieved in part through the offering of Integrative Medicine (IM), the union of traditional and holistic methodologies for treating the mind, body and spirit.

At MHCC, each of our cancer patients is offered three free Integrative Medicine sessions. This is made possible by the generous philanthropic support of our community, which also helps to subsidize additional IM sessions for those patients who cannot afford to pay out-of-pocket. However, the Integrative Medicine services are also open to the public, so that anyone in the Middlesex community can access the benefits of holistic therapies.

Available Modalities

In 2012, the Center for Survivorship and Integrative Medicine brought on board two new Reiki practitioners and also expanded to offer two new modalities: energy healing and holistic manual therapy. These two methods of delivering care complement the existing offerings:

- Acupuncture
- Massage (Gentle Therapeutic)
- Reflexology
- Reiki
- Sound Healing

In addition, massage, reflexology, Reiki and music therapy are now available each weekday to patients on most hospital units, including Hospice & Palliative Care and Inpatient Oncology.

Additional Activities

A number of classes are available through the Integrative Medicine program. New in 2012 was The Warrior Workout, a holistic exercise program that includes meditation, reflective journaling and physical exercise. This program is free to our patients, as well.

The Cancer Center also introduced Yoga for Pain and Insomnia, a gentle class that focuses on alleviation of these two symptoms.

Community Outreach

In June of 2012, the Center for Survivorship and Integrative Medicine launched Wellcare Days. One Sunday per month, our practitioners volunteer their time to offer free IM services to community members.

Our IM practitioners also participate in a number of Cancer Center events, such as Prevention Day, the Men's Health Event, and the Breast Health Event (pgs. 31 & 32).



Center for Survivorship & Integrative Medicine, Part II:

Survivorship



Survivorship is a critical phase of the cancer care continuum, as the transition out of active treatment can be complex and the need for support and guidance can endure after surgery, radiation and chemotherapy have been completed. With this in mind, the Middlesex Hospital Cancer Center has built a survivorship program that recognizes the importance of caring for the whole person as he or she transitions back to life beyond cancer.

Program Development & the Survivorship Visit

All cancer patients who received treatment at the Middlesex Hospital Cancer Center are eligible to take part in the Survivorship Program, which is coordinated by **Pat O'Brien, APRN**. Patients are able to schedule an initial visit with the nurse practitioner; at that appointment, patient concerns are discussed and a Survivorship Plan is developed. This Survivorship Plan, or comprehensive, individualized blueprint to support patients in their post-treatment journey, is an essential component of survivorship care. It includes a treatment summary that details all interventions delivered from diagnosis through the active phase of cancer care. In addition to thoroughly reviewing this plan with patients, the Survivorship Coordinator also discusses the importance of healthy living habits and prevention of new or recurrent malignancies.

The Survivorship Coordinator began seeing patients in August of 2012. While the initial focus was to provide services to breast cancer survivors, the program continues to grow and will expand to meet the needs of all patients, regardless of cancer site, in 2013.

The Survivorship Coordinator currently utilizes Journey Forward, a software program specifically designed to template and build survivorship plans.

Education

In 2012, provider education remained a priority for the Survivorship Coordinator. Activities included a presentation at Middlesex Hospital's Oncology Grand Rounds, conferencing with medical oncologists at their section meeting, and facilitating a Lunch and Learn seminar.

Community Outreach

The Cancer Center and Center for Survivorship celebrate the strength and courage of all patients, who are survivors even at the moment of diagnosis. In May, the Cancer Center hosted its annual Survivor's Day Celebration, a day of family fun and education. The Survivorship Coordinator was also instrumental in the planning and execution of Project Pink, an annual makeover and fashion show for breast cancer survivors (pg. 32).

The Survivorship Coordinator is also involved extensively in the planning and facilitation of the annual Prevention Day event (pg. 31).

Defining Survivorship

Survivorship is recognized by the Institute of Medicine as a distinct and critical phase of cancer care, delivered through focus on four essential elements:

- 1) prevention of new and recurrent cancer
- 2) surveillance for recurrence of secondary cancers and any medical or psychological late effects
- 3) intervention for any ongoing physical, psychological or spiritual symptom
- 4) coordination between specialty and primary care providers.

Department of Physical Rehabilitation

The Middlesex Hospital Department of Physical Rehabilitation is committed to providing exemplary care for cancer patients at all stages of the care continuum. This is realized through the **Center for Oncology Rehabilitation Excellence (CORE)**, which is *“dedicated to improving quality of life and survivorship of cancer patients through education, exercise, prevention, nutrition and evidence-based therapies across the continuum of care.”*

Formally launched in 2011, CORE was developed by a multidisciplinary team of nurse navigators, physicians, an APRN, and occupational and physical therapists representing the Middlesex Hospital Cancer Center, Connecticut Oncology Group, and the Department of Physical Rehabilitation. Since that time, the program has grown in its capacity through:

- (a) the ongoing development of pathways for specific cancer sites:
 - bowel and bladder program for patients with gynecologic and prostate cancers, and
- (b) initiation of education program for health care providers:
 - monthly Lunch and Learn sessions, with topics including peripheral neuropathy, lymphedema, pelvic floor rehabilitation and shoulder dysfunction.

Referrals to the program continued to increase in 2012, with Dr. Andrea Malon and Dr. Miklos Fogarasi (Connecticut Oncology Group) referring most often. However, the program saw twenty six (26) new referring providers from October 2011 - September 2012.

Lymphedema Program

Prevention and treatment of lymphedema has remained a priority, and 2012 saw a 51% increase in referrals from the previous year. The Department of Physical Rehabilitation submitted to become a National Lymphedema Network Certified Lymphedema Clinic and added another Certified Lymphedema Therapist (CLT), bringing the department total to five. These therapists are engaged in a number of continuing education initiatives, such as participation in quarterly meetings at Therapeia Lymphedema Center to review patients and discuss treatment options. One CLT attended the Certified Lymphedema Therapist Consortium at Mount Sinai Rehab, and the department hosted the Certified Lymphedema Therapist Consortium at the Middlesex Hospital Outpatient Center to introduce area providers to the facility.

Professional Development

The Department of Physical Rehabilitation continued its membership in the Oncology Section of the American Physical Therapy Association, which provides therapists with access to the latest developments in treatment, mentoring opportunities, and an online listserv that addresses clinical questions.

Department staff were active on Cancer Center committees (listed below), both as members and presenters; this participation allows for continued communication between departments, which facilitates more cohesive care for patients.

- Oncology Grand Rounds - “Oncology Rehabilitation and Cancer Survivorship”
- Hospitalists Meeting - “CORE” Program
- Monthly Breast Case Conference
- Cancer Program Committee
- Breast Program Leadership
- Total Lung Care Center
- Integrative Medicine Meeting

Multiple physical and occupational therapists shadowed oncology physicians and surgeons to increase their understanding of medical care for oncology patients and build physician awareness of the role of rehabilitation in cancer care.

Department of Physical Rehabilitation

Education and Community Outreach

In addition to participating in a number of Cancer Center events, such as Prevention Day, the Men's Health Event and the Colon & Nutrition Event (see pgs. 31 & 32), the Physical Rehabilitation staff engaged extensively in community education activities. A number of presentations were given at locations around Middlesex County, including the Valley Shore YMCA, Haddam Senior Center, the Saybrook at Haddam, and the Estuary Council of Seniors meeting. "Signs, Symptoms and Treatment of Lymphedema" was presented to the women of Breast Friends in Old Saybrook, as well.

The department also provided education through The Beacon, the Cancer Center quarterly newsletter, and Stat!, the hospital staff newsletter.

Therapy team members were also active in the community, participating in such events as the annual Art Bra fundraiser and Relay for Life.

2012 Statistics

Oncology

110 Patients

1,009 Total Visits

8% Increase in Referrals
from 2011

Pulmonary

9 Patients

400% Increase in Referrals
from 2011

Lymphedema

74 Patients

747 Total Visits

51% Increase in Referrals
from 2011

Patient Resource Library

The Middlesex Hospital Cancer Center's Patient Resource Library (PRL) is dedicated to providing cancer patients and their caregivers with up-to-date print and online information about cancer prevention, screening, diagnosis, treatment and survivorship.

Onsite Resources

Studies on the use of health information have shown that older individuals and those living with a chronic disease like cancer are more likely to use print materials. Thus, the Patient Resource Library, which is located within the Cancer Center, remained an essential point of service for our older patients, two thirds of whom were sixty years or older at diagnosis. However, there are several groups of younger patients that consistently use the onsite library: caregivers, parents who use books to explain their diagnosis to their children, family members of hospice patients and those interested in nutrition and Integrative Medicine modalities.

In 2012, with input from the Cancer Center staff and patients, the PRL was updated with more than 100 new items, including the latest editions of popular cancer resources and new books, magazines, and CDs. In addition, the PRL funded the purchase of the Natural Standard Database, an evidence-based Integrative Medicine database.

Online Resources

In addition to using print media, people of all ages are increasingly utilizing the Internet to locate health information. In 2012, the PRL webpage offered a point of access for reliable cancer-related resources while facilitating online contact with the librarian for knowledge management services.

A "reconstruction" of the Cancer Center website, including the Patient Resource Library page, is currently underway. The new site will include additional cross links to the PRL from other sections of the webpage, as well as an improvement in PRL order among lists of services.

Community Outreach

Beyond supporting larger Cancer Center events, the Patient Resource Librarian:

- celebrated Medical Librarians Month
- attended the Clinton Rotary Open House
- maintained membership in the Connecticut Library Association
- participated in the Cancer Center Health Expo at the Crowne Plaza
- wrote quarterly articles for *The Beacon* newsletter
- distributed children's books through the Light One Little Candle Foundation.

The Patient Resource Librarian also participated as a member of the Middlesex Hospital Patient Education Committee, the Cancer Center's Distress Management Committee, and the Cancer Center Program Committee.



Data & Tracking

The collection and evaluation of data are essential elements of the Middlesex Hospital Cancer Center's continual quest to improve the patient experience. The Tumor Registry team works together with physicians, nurses and administrative staff to use the information collected to optimize delivery of care.

Tumor Registry

(27)

2011 Site Table

(28)

Tumor Registry

The Middlesex Hospital Tumor Registry is responsible for the abstracting of all cancer cases that are diagnosed and/or treated at the Cancer Center. The data collected is then submitted quarterly to the State of Connecticut, which has the oldest population-based registry in the United States, and annually to the National Cancer Database (NCDB).

The Tumor Registry is staffed by a team of Certified Tumor Registrars, who also manage the submission of data to the Cancer Center's accrediting bodies and coordinate the use of information for studies of quality. The Tumor Registry is also required to collect follow-up information on all cancer patients seen at Middlesex Hospital, for both the Connecticut State Tumor Registry and the American College of Surgeons (ACoS). Follow-up rates since January 1, 1980, the ACoS reference date, exceed the requirements for all cases and for cases in the past five years, with the registry following up on 96% (target of 80%) and 97% (target of 90%) of cases, respectively.

Quality Measures

The Tumor Registry submits data to various quality benchmarking measures, including the Electronic Quality Improvement Packet (e-QUIP) and the Cancer Program Practice Profile Reports (CP³R), which is an important quality improvement measure for standard of care in breast and colon cancers. Data submitted is compared to other hospitals throughout the country, and Middlesex has continued to improve in the measures.

Data Summary

In 2011, a total of 869 cases were reported to the Tumor Registry. 756 of these were "analytic" cases, or those diagnosed and/or treated at Middlesex Hospital as a part of the patient's first course of treatment. The remaining 113 cases were considered "non-analytic," or referred to Middlesex for subsequent treatment after receiving the first course of therapy at another institution. The average age for patients was 66 years.

The top five sites seen at Middlesex continue to be breast, lung, prostate, colorectal, and bladder. There has been in a slight increase in the number of breast, lung, hematopoietic, testes/penis and unknown primary cases treated since 2010. Also noted, however, was a decrease in number of head and neck cancers seen, as well as a very small decline in number of prostate cases from 2010 to 2011.

In addition to the common sites, some unusual cases were seen. These included: (2) Merkel cell carcinomas of the skin, (1) thymoma, (3) glioblastomas, (1) meningioma, (1) astrocytoma, (1) hemangiosarcoma, (1) mixed Mullerian tumor, (1) dermatofibrosarcoma, (1) intracystic carcinoma, (1) epithelioid sarcoma, (1) pseudocystic carcinoma, (1) hairy cell leukemia, and (1) cutaneous T-cell lymphoma.

Cases that are diagnosed at Middlesex but treated elsewhere are categorized as "Class of Case 00." The number of Class of Case 00 cases continued to increase in 2011, in part because this class was redefined by the ACoS to exclude treatment given in a physician's office (if not owned by hospital). Upon further review, it was determined that many Class of Case 00 designations were required because patients with unusual sites/histologies were referred to other institutions. Additional patients choose to receive treatment elsewhere for personal reasons.

Please see the site table on the next page for a complete record of all cases seen at Middlesex in 2011.

Honoring Our Team

Mary Jeanne Pierce was honored as the 2012 Cancer Center Employee of the Year.

Mary Jeanne will retire in December 2012 after 36 years of dedicated service to the Cancer Center as the manager of the Tumor Registry. A Certified Tumor Registrar, Mary Jeanne was committed to ensuring that high-quality data was available for both internal process evaluation and submission to the State of Connecticut.

Mary Jeanne was a stalwart of the Cancer Center—her passion for her job and for the Cancer Center was unmatched, and Middlesex is grateful for her years of diligent service.

2011 Site Table

		Class of Case		Sex			Distribution of AJCC Stage at Dx						
PRIMARY SITE	CASES	A	N/A	M	F	Other	0	I	II	III	IV	NA	UNK
ALL SITES	869	756	113	411	458	0	87	230	162	102	126	48	1
ORAL CAVITY/PHARYNX	9	8	1	8	1	0	0	3	1	3	1	0	0
Tongue	1	1	0	1	0	0	0	0	0	1	0	0	0
Lip	1	1	0	1	0	0	0	1	0	0	0	0	0
Tonsil	5	4	1	5	0	0	0	1	1	2	0	0	0
Nasopharynx	1	1	0	0	1	0	0	1	0	0	0	0	0
Mouth, Other & NOS	1	1	0	1	0	0	0	0	0	0	1	0	0
DIGESTIVE SYSTEM	145	127	18	77	68	0	5	32	26	27	36	0	1
Esophagus	11	10	1	7	4	0	0	3	2	3	2	0	0
Stomach	8	8	0	6	2	0	0	1	0	1	5	0	1
Small Intestine	6	6	0	3	3	0	0	0	2	2	2	0	0
Colon	39	37	2	17	22	0	2	14	8	10	3	0	0
Rectum, Rectosigmoid, Anus	35	29	6	20	15	0	3	8	5	6	7	0	0
Liver	8	7	1	6	2	0	0	2	1	2	2	0	0
Gallbladder	3	1	2	1	2	0	0	0	0	0	1	0	0
Bile Ducts	5	4	1	2	3	0	0	1	1	1	1	0	0
Pancreas	29	25	4	15	14	0	0	3	7	2	13	0	0
Retroperitoneum	1	0	1	0	1	0	0	0	0	0	0	0	0
RESPIRATORY/	122	114	8	60	62	0	1	22	12	23	56	0	0
Nasal Cavity, Sinus, Ear	1	1	0	0	1	0	0	0	1	0	0	0	0
Larynx	8	7	1	7	1	0	0	3	2	1	1	0	0
Lung, Bronchus	113	106	7	53	60	0	1	19	9	22	55	0	0
Pleura	0	0	0	0	0	0	0	0	0	0	0	0	0
BLOOD & BONE MARROW	31	25	6	19	12	0	0	0	0	0	0	25	0
Leukemia	19	15	4	10	9	0	0	0	0	0	0	15	0
Multiple Myeloma	5	5	0	4	1	0	0	0	0	0	0	5	0
Other Hematopoietic	7	5	2	5	2	0	0	0	0	0	0	5	0
BONE	0	0	0	0	0	0	0	0	0	0	0	0	0
SOFT TISSUE	3	1	2	3	0	0	0	1	0	0	0	0	0
SKIN	41	24	17	27	14	0	4	11	6	1	1	1	0
Melanoma of Skin	38	21	17	25	13	0	4	10	5	1	1	0	0
Kaposi Sarcoma	0	0	0	0	0	0	0	0	0	0	0	0	0
Other Skin	3	3	0	2	1	0	0	1	1	0	0	1	0
BREAST	188	180	8	1	187	0	38	86	38	15	3	0	0
FEMALE GENITAL	56	48	8	0	56	0	0	27	9	8	4	0	0
Cervix uteri	8	6	2	0	8	0	0	2	1	2	1	0	0
Corpus uteri	30	29	1	0	30	0	0	23	3	1	2	0	0
Ovary	11	9	2	0	11	0	0	1	3	4	1	0	0
Vulva	5	2	3	0	5	0	0	1	1	0	0	0	0
Vagina	0	0	0	0	0	0	0	0	0	0	0	0	0
Peritoneum, Omentum, Mes-	2	2	0	0	2	0	0	0	1	1	0	0	0
Other Female Genital	0	0	0	0	0	0	0	0	0	0	0	0	0
MALE GENITAL	120	89	31	120	0	0	0	13	51	14	9	2	0
Prostate	106	75	31	106	0	0	0	5	49	12	9	0	0
Testis / Penis	12	12	0	12	0	0	0	8	2	2	0	0	0
Other Male Genital	2	2	0	2	0	0	0	0	0	0	0	2	0
URINARY	89	82	7	65	24	0	39	24	8	3	8	0	0
Bladder	61	58	3	43	18	0	36	13	6	0	3	0	0
Kidney & Renal Pelvis	23	19	4	18	5	0	0	10	2	3	4	0	0
Ureter	5	5	0	4	1	0	3	1	0	0	1	0	0
EYE	1	0	1	1	0	0	0	0	0	0	0	0	0
BRAIN/OTHER NERVOUS	6	5	1	3	3	0	0	0	0	0	0	5	0
ENDOCRINE-Thyroid/Other	11	10	1	2	9	0	0	6	2	1	1	0	0
LYMPHATIC SYSTEM*	30	28	2	16	14	0	0	5	9	7	7	0	0
Hodgkin's Disease	8	7	1	5	3	0	0	1	4	1	1	0	0
Non-Hodgkin's Lymphoma*	22	21	1	11	11	0	0	4	5	6	6	0	0
UNKNOWN or ILL-DEFINED	17	15	2	9	8	0	0	0	0	0	0	15	0
* includes 1 or more lymphoma cases coded to non-lymphatic site.							Note: CIN III & Ca In-situ are no longer reportable						
Abbreviations: A=Analytic N/A=Non-Analytic 0=Stage 0 I=Stage 1 II=Stage 2 III=Stage 3 IV=Stage 4 NA=Not applicable UNK=Unknown													



Outreach and Community

Delivering cancer care goes beyond just treatment - at the Middlesex Hospital Cancer Center, it means working with our community to provide education and support prevention and early detection, as well as survivorship, efforts. It also means collaborating with other organizations to ensure the availability of comprehensive care that meets all of a patient's needs.

Community Outreach

(30)

Grant Programs

(32)

Community Outreach

At Middlesex Hospital, caring for the entire person also means caring for his or her community - our community. Each year, the Cancer Center team performs extensive outreach to provide education about cancer prevention and early detection, as well as to celebrate our courageous survivors. 2012 was no exception, with multiple outreach events adding to an already full calendar of Lunch and Learn presentations for staff, presence at four Middlesex Hospital Employee Wellness Fairs, delivery of informational sessions to patients on topics such as Coping with the Cost of Cancer Care, and staff participation in seven unique awareness walks/bike rides.

The outreach events fall into several categories, each with a unique purpose and designed for a specific population. Through them, the Cancer Center staff is able to build and maintain relationships with community agencies and individuals, which grows the environment of cohesion and collaboration that contributes to the vitality of the Middlesex community.

Health Education and Screening

Breast Health Event

An evening of education, screening and relaxation was provided for more than 40 guests, who engaged with Cancer Center team members about breast cancer screening and prevention, enjoyed hors d'oeuvres and Integrative Medicine sessions, and attended a panel discussion that included Meghan Burgess, APRN (Hereditary Risk Assessment and Comprehensive Breast Center Coordinator), Trish Hatin, RTR(M)(QM)(BD), Radiologist Diana Hull, MD, and Surgeon Peter Romeyn, MD.

Colon Health and Nutrition Lunch & Learn

An educational lunch-hour program focusing on risk factors, hereditary risk, and the importance of regular screening for colorectal cancer. Held in March, in recognition of Colorectal Cancer Awareness Month and National Nutrition Month.

Lung Cancer Vigil: Shine a Light on Lung Cancer

A gathering of more than 100 community members to honor and remember those battling and lost to lung cancer, as well as their loving caregivers. The evening included a presentation about thoracic care, survivor speakers, music and a tribute. Dr. Laurie Stenton Ambrose, President and CEO of the Lung Cancer Alliance, attended the vigil to present an award to the Total Lung Care Center team for its innovation and collaboration in launching the program.

Men's Health and Wellness Day

Through the generosity of local physicians, nurses, and volunteers, uninsured and underserved men from Middletown were able to access prostate cancer screenings, eye exams, blood pressure screening, information about smoking cessation and cancer prevention, massage and reflexology, and spiritual counseling at the First United Methodist Church. A hot meal was available, and all attendees received gift bags that included donated toiletries, socks, t-shirts and gift cards.

Middlesex Chamber of Commerce Health Fair

An educational event through which the Cancer Center staff shared information about all different cancer sites, as well as strategies for preventing cancer and recommendations for regular screening exams.

Old Saybrook Middle School Safety & Wellness Day

Cancer Center team members attended this annual event to share information about skin cancer prevention with middle school students.

Prevention Day

More than 150 people gathered at the Saybrook Point Inn to learn about wellness and cancer prevention through education, the enjoyment Integrative Medicine sessions, an introduction to the Warrior Workout program, a healthy meal, and "A Mind Body Approach to Wellness," an inspiring keynote address by Matthew Sanford.

Community Outreach (continued)

Recognition and Celebration

Survivor's Day

In a true celebration of life, hundreds of cancer survivors and their families gathered together with Cancer Center staff and physicians to enjoy a day of speakers, music, games, great food, magic and more. Humorist Loretta La Roche was the keynote speaker, and cancer survivors and oncologists shared stories and messages of hope and courage.

Project Pink

Project Pink , a make-over and fashion show event, was founded as a way to help breast cancer survivors feel as beautiful on the outside as they are on the inside. With clothing and accessories provided by the Red Door Boutique and new hairstyles and makeup courtesy of EG Salon, ten survivors displayed their new looks - and long standing courage - as stylist Debbie Wright described their fashion choices. Representatives of the Middlesex Hospital team were on hand to escort the ladies to the stage, as family and friends looked on.

Prostate Cancer Survivor's Event

This semi-formal event is a night of education and celebration for prostate cancer survivors, who were treated to a gourmet dinner and a talk on the evolution of prostate cancer treatment by Dr. Joesph Weissberg at the Wadsworth Mansion. Music, to which attendees danced the night away, was provided by Dr. Stephen Lipman, the "Singing Dentist" and his band.

Together, Facing Lung Cancer

A celebratory brunch and educational program for lung cancer patients and survivors, given by the Lung Nurse Navigator.



Top Left: The Total Lung Care Center team with Laurie Stenton Ambrose; **Top Right:** Survivors' Day; **Bottom:** Trying healthy smoothies at Prevention Day.

Grant Programs

Susan G. Komen Foundation

Thanks to a generous grant from the Susan G. Komen Connecticut Affiliate, the Middlesex Hospital Comprehensive Breast Center was able to provide both physician education and breast cancer screening programs.

Breast Care Management Program

The Breast Care Management Program was designed to support and enhance the knowledge level of physicians, nurses and other primary care and OB/GYN providers on the latest guidelines and standards for responding to patients' breast care needs. The program consists of a presentation, given by Dr. Andrea Malon, Cancer Center Medical Director, which covers the National Comprehensive Cancer Network's (NCCN) guidelines for breast symptom management, as well as the services offered by the Comprehensive Breast Center.

After the presentations, each medical practice receives a resource binder, which includes:

- a specially designed, white coat pocket-sized brochure of algorithms reflecting the NCCN guidelines and recommendations (inset),
- a computer software program containing the algorithms,
- Comprehensive Breast Center brochure,
- Hereditary Risk Assessment program brochure,
- Center for Survivorship and Integrative Medicine Brochure,
- CT Breast and Cervical Cancer Early Detection Program information, and
- the phone number for the Breast Care Hotline, a dedicated line for physicians to contact the Breast Nurse Navigator.

This program will be available through June 30, 2013.

Screening Mammography

This Komen Connecticut grant also allowed for the Middlesex Hospital Cancer Center to partner with the Connecticut Breast and Cervical Cancer Early Detection Program to provide 40 screening mammograms for women with limited access to health care. Several of these mammograms will be delivered at the fall 2013 Breast Health Event, and the remainder will be scheduled through outreach events.

