



Licking Memorial Health Systems

1320 West Main Street
Newark, Ohio 43055

Please take a few minutes to read this month's report on **Cancer Care**.

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Quality Report Card Licking Memorial Health Systems

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Health Tips – Recommended Cancer Screening Tests

The following screenings are recommended to detect cancers in their early stages when they are most treatable:

Breast cancer - Women are advised to begin having clinical breast exams every three years, beginning in their 20s. Beginning at the age of 40, women should have a clinical breast exam every year, along with annual mammograms. Those with a family history of breast cancer may be advised by their physicians to begin screening at an earlier age.

Cervical cancer - Women between 21 and 29 years should have a Pap test every three years. Between ages 30 and 65, Pap and HPV tests are recommended every 5 years.

Colorectal cancer

Beginning at age 50, both men and women should have a test to screen for polyps and colorectal cancer. Testing options include a colonoscopy every 10 years, a flexible sigmoidoscopy every five years, a double-contrast barium enema every five years, a CT colonography every five years, an annual fecal occult blood test, or an annual fecal immunochemical test to screen for colorectal cancer.

Some individuals should be screened for specific cancers more often because of their family medical history. Consult with your physician about the screening schedule that is best for you.

Cancer Care – How do we compare?

Check out
our Quality
Report Cards online
at www.LMHealth.org.

At Licking Memorial Health Systems (LMHS), we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare them to benchmark measures. Then, we publish them so you can draw your own conclusions regarding your healthcare choices.

1 Statistics are collected for all screening mammograms to assess the accuracy of the testing. Some parameters that are determined include the probability that any individual case of breast cancer will be identified by the mammogram and the probability of the mammogram correctly identifying patients who do not have cancer.

	LMH 2009	LMH 2010	LMH 2011	Goal
Percentage of cancers correctly identified by the mammogram	NA ⁽¹⁾	NA ⁽¹⁾	95.5%	78% ⁽²⁾
Percentage of patients without cancer correctly identified by the mammogram	NA ⁽¹⁾	NA ⁽¹⁾	99.7%	90% ⁽³⁾

2 So as not to miss cancers, mammography can suggest malignancy when in fact no cancer is present. If the mammogram is suggestive of cancer, the radiologist may recommend a biopsy and many biopsies subsequently are negative for cancer. Because of this, another parameter we measure is the percentage of cases for which biopsy is recommended that are positive for cancer.

	LMH 2009	LMH 2010	LMH 2011	Goal
Percentage of cases with radiologist recommended biopsy that actually had cancer	NA ⁽¹⁾	NA ⁽¹⁾	33%	24 to 40% ⁽⁴⁾

3 Screening mammograms are conducted to detect breast cancer before the patient has any noticeable symptoms. Breast cancer is most easily and most effectively treated when it is diagnosed in its early stages. Although the results from most screening mammograms are negative, meaning no cancer was detected, for patients who are found to have breast cancer, the screening mammogram may have been life-saving technology. Licking Memorial Hospital (LMH) tracks the number of screening mammograms that have positive interpretations, meaning that the tests detected cancer that may have remained unnoticed until it was more advanced.

	LMH 2009	LMH 2010	LMH 2011	Goal
Cancer detection rate with positive interpretations (per 1,000 screening mammograms)	3.0	4.2	3.0	2 to 10 ⁽⁴⁾

4 Chemotherapy drugs are toxic and could be dangerous if not prepared correctly. Therefore, LMH follows a rigorous five-step safety procedure to prevent chemotherapy errors.

	LMH 2009	LMH 2010	LMH 2011	Goal
Number of chemotherapy medication errors negatively impacting patients	0	0	0	0

5 When a person is either diagnosed with or treated for cancer, the person is entered into the Cancer Registry. It is then the responsibility of the accredited organization to follow up with the person for the rest of his/her life on an annual basis to encourage appropriate care. Cancer Registry staff may also contact the primary care physician to ensure the health of the patient.

	LMH 2009	LMH 2010	LMH 2011	Goal
Cancer patients with follow-up	92%	94%	94%	Goal greater than 90%

6 Clinical research ensures that patient care approaches the highest possible level of quality. There is no minimum requirement for how many patients are placed in cancer-related clinical trials in a community hospital cancer program; however, to provide maximum service, LMH offers access to national clinical trials to patients as a member of the Columbus Community Clinical Oncology Program.

	LMH 2009	LMH 2010	LMH 2011	Goal
Newly diagnosed and/or treated patients in clinical trials	3.7%	5.6%	3.8%	greater than 2%

7 In an effort to prevent and promote early detection and treatment of cancer, the physician offices of Licking Memorial Health Professionals (LMHP) measure and track results of cancer screening tests for breast cancer, cervical cancer and colorectal cancer for all active patients. Active patient population is defined as patients seen within the last three years.

	LMHP 2009	LMHP 2010	LMHP 2011	National Average ⁽⁵⁾
LMHP patients who received screening tests for:				
Breast cancer	85%	85%	84%	65%
Cervical cancer	85%	85%	83%	73%
Colorectal cancer	64%	64%	64%	52%

Data footnotes: (1) While LMH has been tracking this information for many years, data collection guidelines changed in 2011. As a result, data collected prior to 2011 cannot be used for comparison purposes. (2) Kolb TM, Lichy J, Newhouse JH. Comparison of the performance of screening mammography, physical examination, and breast US and evaluation of factors that influence them: an analysis of 27,825 patient evaluations. *Radiology*. 225(1):165-75, 2002. Oestreicher N, Lehman CD, Seger DJ, Buist DS, White E. The incremental contribution of clinical breast examination to invasive cancer detection in a mammography screening program. *AJR Am J Roentgenol*. 184(2):428-32, 2005. (3) Bassett LW, Hendrick RE, Bassford TL, et al. Quality determinants of mammography: Clinical practice guidelines, No. 13. Agency for Health Care Policy and Research, Public Health Services, US Department of Human Services, 1994. (4) D’Orsi CJ, Bassett LW, Berg WA, et al, BI-RADS: Mammography, 4th Edition in: D’Orsi CJ, Mendelson EB, Ikeda DM, et al: Breast Imaging Reporting and Data System: ACR BI-RADS – Breast Imaging Atlas, Reston, VA, American College of Radiology, 2003. (5) Percentages are compiled by averaging Commercial, Medicare and Medicaid data as reported in “The State of Health Care Quality 2011,” National Committee for Quality Assurance.

Patient Story – Barbara Garman

Barbara Garman and her family are not strangers to cancer. Her grandmother passed away from brain cancer, her nephew was diagnosed with cancer at the age of 3 and has been in remission for four years, and her grandfather also battled cancer. However, in September 2011, the primary concern on Barbara’s mind was hosting her husband Bill’s birthday party. That weekend, she came down with what she thought was the stomach flu, and by Monday when she still had not recovered, she scheduled an appointment with her family physician. Suspecting that it was her appendix, he referred her to the Licking Memorial Hospital (LMH) Emergency Department, where she was scheduled for an appendectomy. Barbara was nervous, but she felt at ease in the hands of her surgeon, Howard L. Reeves, D.O.

The routine procedure went smoothly, and Barbara returned to LMH for her follow-up appointment in early October feeling much better.

At that appointment, Dr. Reeves informed her that he had noticed some potential abnormalities when he removed her appendix, and decided to order some additional laboratory work. The results were devastating for Barbara. At the age of 38, she was diagnosed with stage 3 appendiceal cancer. “I remember being in shock,” Barbara said. “Dr. Reeves informed me that there was only a one in 1,000 chance that my appendix would be cancerous, and it was.”

Dr. Reeves referred Barbara to a specialist in Columbus. The cancer had spread to other areas of her body, so over the next few weeks, she underwent numerous surgeries to remove part of her bowel and some lymph nodes. She also had a complete hysterectomy. In mid-December, Barbara had her



The Garman family – Bill, Barbara, and their daughters, Katelynn and Cristen, are thankful for the compassion that the staff, nurses and physicians of the LMH Hematology/Oncology Department demonstrated when providing care.

initial chemotherapy treatment in Columbus, but she was struggling with fatigue and nausea and quickly realized that the long drive would be difficult to make in her condition. As a lifelong Newark resident, she had heard great things about the Hematology/Oncology Department at the Hospital and decided to transfer her care to LMH in January.

“At that time, my grandfather was having his chemotherapy treatment at LMH. I saw how wonderful the staff was, and I knew that I would be in good hands,” Barbara said. “Transferring to Licking Memorial to receive my care was the best decision I ever made.”

At LMH, Barbara was treated by Oncologist Aruna C. Gowda, M.D., and received biweekly chemotherapy treatments. Barbara admits that while she struggled with her sudden diagnosis, the exceptional treatment that she received from Dr. Gowda and the LMH staff helped her both physically and emotionally. “Everyone treated me more like family than a patient,” Barbara said. “Dr. Gowda took the time to see me before every treatment and really listened to what I was telling her. Everything happened so fast, so I was feeling sad and overwhelmed. Dr. Gowda recognized my depression and not only prescribed treatment, but also offered me continual encouragement and support each time we talked,” Barbara said.

Throughout this difficult time, Barbara knew she could depend on her close friends and family for help. Her mother, Jean Ennis, took her to each of her appointments, and all of her close friends and family helped care for her two young daughters, Katelynn, now 9, and Cristen, now 6. However, her greatest

burden was observing the disease's negative impact on her family, especially her daughters. "I was very nervous about the chemotherapy treatments. I did not know what to expect, and I did not want to be sick in front of my girls. When I expressed this to the staff, they were remarkable. They took extra time to walk me through the procedure and the side effects, and I was able to be more at ease knowing what to expect," she said.

Barbara has many stories to recount of the wonderful care that she received during the five months that she underwent chemotherapy, but one prime example occurred in late June during her last chemotherapy appointment. While she was excited to complete her treatment, she also felt bittersweet to be leaving the nurses and staff who had taken such good care of her. In particular, one of her regular nurses was on vacation that week, and she was disappointed that she would not have the opportunity to say goodbye. During her appointment, however, Barbara was surprised to receive a text message from that nurse expressing congratulations for her completed treatment and wishing her luck in her continued recovery.

"It is really something special that she cared enough to think about me during her vacation," Barbara said. "When I was first diagnosed with cancer, I was scared. I felt like I had taken life for granted, but the nurses, staff and physicians at the Hospital were so caring, I found renewed hope."

Barbara gratefully credits the excellent care that she received at LMH with her recovery. Several months after her treatment concluded, she is feeling much better and is focused on regaining her health. She and her family just returned from a week-long vacation to Marblehead, Ohio, where they spent time relaxing on the coast of Lake Erie and visiting the African Wildlife Safari in celebration of her recovery. Currently, Barbara is working to get back into her old routine of spending time with her family and cheering for The Ohio State University Buckeyes.

LMH Supports National Mammography Day with Free Mammogram Program

Licking Memorial Hospital (LMH), Licking Memorial Women's Health, the Licking County Health Department, and Tri-County Radiologists, Inc., will offer free mammograms to qualifying low-income women on Thursday, October 18, and Friday, October 19, to promote the importance of breast cancer screening awareness. The screenings are in recognition of National Mammography Day on Friday. Tests will be performed from 7:00 a.m. to 6:30 p.m., at the Women's Imaging Center at LMH, and Licking Memorial Women's Health, located at 15 Messimer Drive in Newark. The number of free mammograms will be limited to 150.

In order to be eligible to participate in this program, women must meet the following criteria:

- Must reside or work in Licking County
- Must be at least 40 years old
- Must not have insurance, or be eligible for Medicare or Medicaid
- Must have a physician's referral
- Should be low-income (determined by the patient's physician)
- Should have no symptoms of breast cancer
- Must not have received a free mammogram from LMH in the last 12 months



The Women's Imaging Center at LMH offers high-tech digital mammography for more precise diagnoses.

The free tests apply only to screening mammograms. The X-rays will be interpreted by Tri-County Radiologists, including Joseph Fondriest, M.D., Owen Lee, M.D., Sean Choice, M.D., Subbarao Cherukuri, M.D., Timothy Lifer, D.O., and Edward Del Grosso, M.D. If the results of the screening mammogram indicate that the patient needs further testing, the follow-up mammogram will not be covered under the free program. However, financial assistance programs are available if follow-up is required. Information regarding the Hospital Care Assurance Program can be obtained at the LMH Cashier's Office.

Any woman who is interested in receiving a free mammogram at LMH should contact her physician for more information and a referral. Patients may schedule their own appointments (after obtaining the physician's orders) by calling Central Scheduling at (740) 348-4722. Patients may also ask their physician's office to schedule the appointment for them.

LMH also partners with the Licking County Health Department to provide screening mammograms for residents who are under-insured or uninsured. These services are available year-round through the Screening and Survivor Support (SASS) Breast Cancer program. Information about SASS is available online at www.lickingcohealth.org, or by calling the Health Department at (740) 349-6535.