

Where the Extraordinary Happens Every Day

ANNUAL REPORT

2012



The Northside Hospital Cancer Institute is recognized nationally as a leader in cancer diagnosis, treatment and research.

Northside is the only hospital in

Metro Atlanta chosen to be a

Community Cancer Center by the

National Cancer Institute. Northside's

Cancer Institute offers the best of both worlds: clinical excellence on par with academic-based programs along with the personalized and attentive care associated with a community hospital.



2012 HIGHLIGHTS

he Northside Hospital Cancer Institute (NHCI) experienced exceptional growth in patient volumes, physician engagement, and patient care services in 2012. With strategic guidance and leadership by the members of the Cancer Committee, the NHCI is committed to improving quality of care, expanding research efforts, and enhancing patients' access to care.

The Multidisciplinary Cancer Committee is responsible for planning, initiating, promoting and assessing all cancer related activities. Each year, the Northside Hospital Cancer Committee establishes programmatic and clinical goals, performs quality studies, and compares treatment outcomes to national benchmarks.

It is our pleasure to share with you the highlights from 2012.

2012 Highlights:

- Awarded continued membership in the National Cancer Institute Community Cancer Centers
 Program by surpassing rigorous NCI requirements
- Achieved nation's best post-transplant survival rates for the third consecutive year
- Expanded cancer patient navigation and support services
- Implemented a patient-focused Palliative Care Program
- More than doubled outreach and services to underserved patient populations
- Added new multidisciplinary cancer conferences and disease site teams
- Implemented a CT lung cancer screening program
- Increased clinical trial accruals by 35% in the past year
- · Established the Northside Hospital Melanoma Program

Once again, cancer care at Northside Hospital continued to make monumental strides. On behalf of our physicians, staff and volunteers, we are pleased to present the 2012 Northside Hospital Cancer Institute Annual Report. Without their dedication and continued support, these accomplishments truly would not have been possible.

Colleen Austin, MD

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Chair, Northside Hospital

Patti Owen, MSN, RN

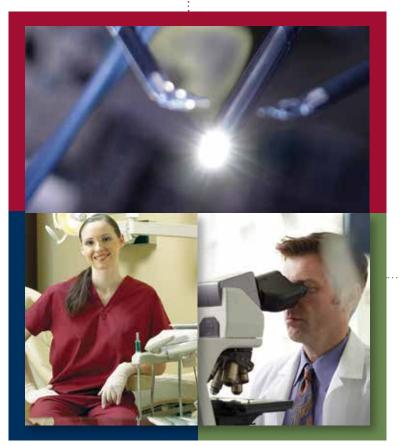
Director, Oncology Services



NCCCP GOALS:

The Northside Hospital Cancer Institute is proud to be a member of the NCI Community Cancer Centers Program (NCCCP), an elite group of individually selected community cancer centers that offers expanded research and state-of-the-art cancer care. Out of the 30 hospitals in the program last year, Northside was one of 21 hospitals selected in 2012 to continue membership in the national network of NCI Community Cancer Programs. The NCCCP has three primary goals: to 1) improve quality of care, 2) expand research, and 3) enhance access to care.

Improve Quality Of Care



Enhance Access To Care

Expand Research

GOAL #1: Improve Quality of Care

Improve quality throughout the cancer continuum with a multidisciplinary approach.

- Added multidisciplinary disease site teams for melanoma, neuro-oncology, GYN and lung cancers
- Drastically increased cancer patient cases presented at conferences, including those for lung cancer and new conferences for abdominal/liver and colorectal cancers
- . Significantly expanded oncology patient navigation for GYN, Lung and GI/GU patients
- Developed and implemented an Oncology Palliative Care Team
- Enhanced survivorship programs through Cancer Support Community
- Completed numerous quality studies and projects

GOAL #2: Expand Research

Provide patients with the latest scientific advancements through expanded access to clinical trials.

- Increased clinical trial accruals by 35% from fiscal year 2011
- Diversified our portfolio of clinical trials offered through Gynecologic Oncology Group (GOG) and Radiation Therapy Oncology Group (RTOG)
- Expanded collaborative research relationships, including work with University of Alabama-Birmingham Cancer Care Network
- Added more than 200 samples to our biorepository, established based on the application of rigorous NCI standards

GOAL #3: Enhance Access to Care

Enhance access to care for the communities we serve.

- Developed a colorectal cancer screening program
- Implemented a program to provide CT screenings for lung cancer
- Doubled the number of participants served through community outreach efforts
- Expanded partnerships with community clinics and charity organizations
- · Increased patient access through disparities patient navigation

SPECIALTY PROGRAMS

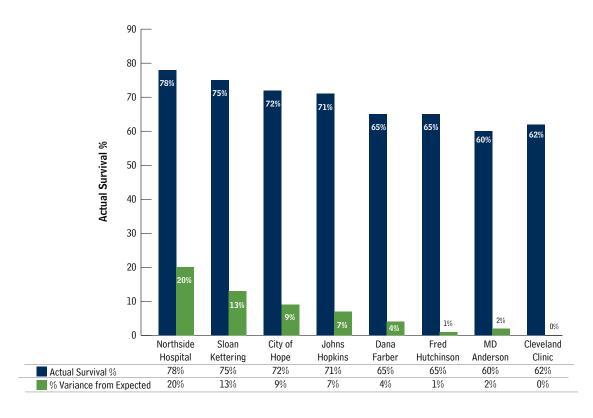
BLOOD AND MARROW TRANSPLANT/LEUKEMIA PROGRAMS

The Blood and Marrow Transplant Program at Northside Hospital continued to exceed standards of excellence, remaining on the top tier of transplant programs in the nation. Performing 184 transplants in 2012, the program is nationally recognized for outstanding survival outcomes and clinical research on par with the nation's top academic cancer centers.

Outstanding Survival Rates for Transplant Patients

Based upon data published by the National Marrow Donor Program (NMDP), the BMT Program at Northside Hospital achieved the nation's best post-transplant survival rates for the third year in a row. Northside demonstrated a 78% one-year survival rate and the highest positive variance above predicted rates.

One-Year Survival For Allogeneic Transplants



Actual Survival % % Variance from Expected

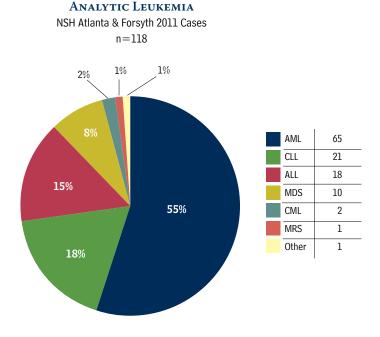
Published outcome data from www.marrow.org. This analysis is based on transplants performed from Jan 1, 2007 through Dec 31, 2009 using unrelated donors and transplants performed from Jan 1, 2008 through Dec 31, 2009 using related donors. It only includes patients who underwent their first allogeneic transplant within these respective time periods and who had at least a 100-day follow-up.

2012 Accomplishments:

- Surpassed clinical trial enrollment goals with the BMT Clinical Trials Network
- Expanded access for patients in need of allogeneic transplant with multiple clinical trials using partially mismatched related donors
- Completed reaccreditation survey through the Foundation for Accreditation of Cellular Therapy (FACT)
- Received gifts from McKesson and the Stovall Hope Foundation to expand patient and family lodging resources, including the addition of two new fully furnished apartments
- Achieved commendations from auditing agencies for external data reporting for programmatic and research data collection

Leukemia Program

As a community hospital program, the Leukemia Program at Northside Hospital has distinguished itself as one of the best providers of state-of-the-art comprehensive leukemia care for the complex needs of patients with many types of hematologic malignancies including acute myelocytic leukemia (AML), acute lymphocytic leukemia (ALL), chronic lymphocytic leukemia (CLL), and myelodysplastic syndromes (MDS). In 2011, the program provided care for 118 new leukemia patients.



2012 Accomplishments:

- Recognized as a Center of Excellence for Myelodysplasia by the Myelodysplastic Syndrome Foundation
- Maximized accrual to pivotal clinical research trials treating acute leukemia
- Developed comprehensive education process for new acute leukemia patients
- Enhanced weekly leukemia conferences to improve the multidisciplinary approach to care

WOMEN'S ONCOLOGY

Breast Care Program

Northside leads the Southeast in breast cancer care, focusing strongly on clinical quality and individualized patient support. In 2011, Northside reached a new record in patient volume, providing care for 1,280 newly diagnosed and/or treated breast cancer patients. In 2012, improvements continued in clinical quality, patient support, and research.

2012 Accomplishments:

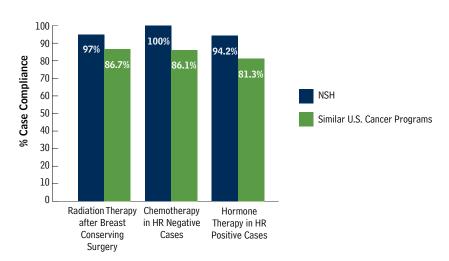
- Achieved high rates of compliance in several nationally-endorsed quality indicators
- Increased cases reviewed in multidisciplinary conferences by 63%
- Piloted a cancer patient treatment summary and survivorship care plan
- Assessed patient benefit by combining the American College of Surgeons' (ACoS) Rapid Quality Reporting System (RQRS) with patient navigation
- Participated in a national American Cancer Society study to understand patients' symptoms and side effects from breast cancer treatment

Breast Cancer Quality Measures

Each year, the Northside Hospital Breast Care Program reviews compliance with several quality measures required by the Commission on Cancer (CoC) and the National Accreditation Program for Breast Centers (NAPBC). A comparative review of three important measures demonstrated that Northside's performance surpassed that of similar breast cancer programs in the U.S.

BREAST CANCER QUALITY MEASURES

2010 Comparative Review



Combining RQRS and Patient Navigation to Improve Care for Breast Cancer Patients

In 2012, Northside completed a pilot study with Emory University's Winship Cancer Institute to determine if combining the alert reports from the ACoS' RQRS system with real time interventions provided by breast cancer patient navigators improved patient care. With this approach, nurse navigators promoted real-time adherence to the RQRS quality measures and helped many patients avoid delays in receiving prescribed care.

GYN Oncology Program

Northside Hospital treats more cases of gynecologic cancer than any other hospital in Georgia. In 2012, the GYN Oncology Program increased patient volumes and focus on clinical research and quality.

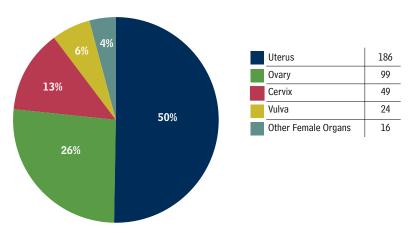
2012 Accomplishments:

- Accrued more patients to Gynecologic Oncology Group (GOG) clinical trials than any other hospital in Georgia
- Increased patient cases discussed in multidisciplinary conferences by 37%
- Completed a favorable evaluation of NCCN guideline compliance for endometrial cancer cases
- Demonstrated high rates of compliance with College of American Pathology (CAP) protocols for ovarian cancer pathology reporting
- Participated in the Women's Health Initiative in Rome, GA to provide cervical cancer screenings to underserved women

In 2011, Northside diagnosed and/or treated 374 new analytic cases of gynecologic cancer, increasing 10% from the previous year. The most frequent GYN cancer site was endometrial (50% of cases), followed by ovarian and cervical cases.

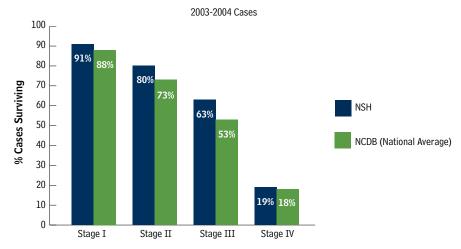
GYNECOLOGIC CANCER CASES

NSH Atlanta & Forsyth, 2011 Analytic, n=374



A Cancer Committee review of comparative five-year observed survival rates for endometrial cancer showed that Northside's rates surpassed national averages from the National Cancer Database (NCDB) in every AJCC (American Joint Commission on Cancer) stage of the disease.

ENDOMETRIAL CANCER COMPARATIVE FIVE-YEAR OBSERVED SURVIVAL



SPECIALTY PROGRAMS

GI CANCER PROGRAM

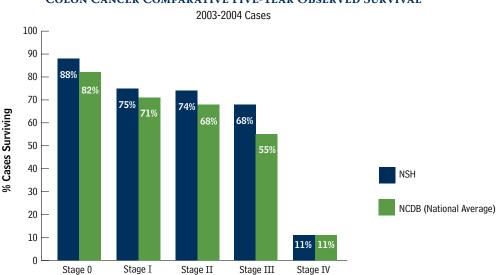
In 2011, Northside Hospital diagnosed and/or treated 175 cases of colorectal cancer and 112 cases of cancer from other areas of the digestive system, such as the stomach, liver and pancreas. During the past year, services continued to significantly expand in order to support Northside Hospital's GI cancer patient population.

2012 Accomplishments:

- Implemented a multidisciplinary conference specific to liver/abdominal cancers
- Implemented two multidisciplinary conferences for GI malignancies: colorectal and liver/ abdominal cancers
- Began offering yttrium-90 (Y-90) embolization to enable a minimally invasive, targeted approach for the treatment of liver cancers
- Added nurse navigation services specific for GI cancer patients
- Developed a colorectal cancer screening program and provided 168 free colonoscopies

Survival Rates in Colon Cancer

A review of comparative five-year observed survival rates for colon cancer showed that Northside Hospital's rates equaled or surpassed national averages in every stage of disease.



COLON CANCER COMPARATIVE FIVE-YEAR OBSERVED SURVIVAL

MELANOMA PROGRAM

Melanoma is the most serious form of skin cancer, and prevention and early detection are critical. When caught early, melanoma is almost always curable. This year, Northside took a number of steps to develop a comprehensive melanoma program that provides state-of-the-art multidisciplinary patient care with a focus on clinical research and individualized patient support.

As an NCI Community Cancer Center, our melanoma specialists use the most innovative, leading-edge and scientifically-supported options for treating melanoma, including thorough and accurate skin screening and evaluation, surgical resection to remove cancerous tissue, including lymphoscintigraphy (lymphatic mapping) and sentinel lymph node biopsy, and comprehensive state-of-the-art plastic and reconstructive surgery.

2012 Accomplishments:

- Implemented nurse navigator program to support melanoma patients
- Provided skin cancer screenings to each hospital campus
- Developed new patient intake, care coordination, and documentation processes

LUNG CANCER PROGRAM

Lung cancer remains among the top five most frequently treated types of cancer at Northside. During 2011, 241 new analytic cases of lung cancer were diagnosed and/or treated. Over the past year, a multidisciplinary team was formed to focus on improving the quality of care and services for this patient population. The hard work and commitment of the team has resulted in many excellent improvements.

2012 Accomplishments:

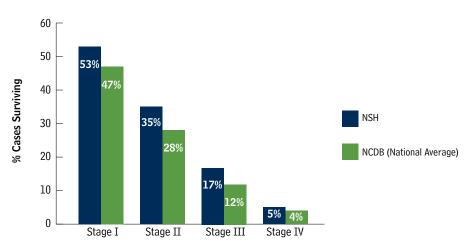
- Implemented a CT lung cancer screening program
- Realized a five-fold increase in the number of patient cases discussed during lung cancer conferences (171 cases reviewed in FY 2012)
- Developed a dedicated team of radiologists to provide CT-guided lung biopsies
- Installed a state-of-the-art Olympus Endobronchial Ultrasound system (EBUS) to improve minimally-invasive diagnosis and staging of lung cancers
- Established a dedicated bronchoscopy team to support EBUS procedures
- Increased number of lung cancer patients receiving navigation support
- Developed a workgroup to improve the smoking cessation program

Survival Rates

The NSH Cancer Committee reviewed comparative five-year observed survival rates for non-small cell lung cancer, and found that Northside's rates surpassed national averages in every stage.

Non-Small Cell Lung Cancer Comparative Five-Year Observed Survival





CONTINUUM OF CARE

The Northside Hospital Cancer Institute maintains the continuum of care model as a guiding foundation for the design and improvement of comprehensive cancer care. Each year improvements are made all along this continuum. Highlights from 2012 will include the phases of Education & Prevention, Screening, Diagnosis, and Support & Survivorship.

Education & Prevention, Screening

Tremendous growth occurred this past year in outreach activities aimed at educating the community in cancer prevention and providing free cancer screenings to underserved groups. The total number of people reached through a variety of community events more than doubled, climbing from 20,257 to 41,770, and the number of patients screened increased by 40% (from 932 to 1309). Additional accomplishments included the implementation of colorectal screening and CT lung screening programs, the development of a smoking cessation committee, and the establishment of new strategic partnerships within the local Hispanic community.

	FY 2011	FY 2012
Screenings	932	1,309
Education	2,184	2,326
Community Outreach	11,717	31,278
Support	5,424	6,857
Total Participants	20,257	41,770

Diagnosis

During the past year several improvements were made to support Northside's cancer diagnostic capabilities.

2012 Accomplishments:

- Developed a dedicated radiology team to support CT- guided lung biopsies
- Installed a state-of-the-art endobronchial ultrasound (EBUS) system to perform minimally invasive lung biopsy and staging procedures
- Improved the evaluation of lymph nodes in cervical and endometrial cancers
- Completed a favorable study of compliance with College of American Pathology guidelines in the reporting of ovarian cancers

Support & Survivorship

The Northside Hospital Cancer Institute realizes the importance of the survivorship phase and places a strong focus on providing individualized support to cancer patients from diagnosis through treatment and beyond. Over the past year, significant efforts were made to strengthen our patient navigation, survivorship, and palliative care services.



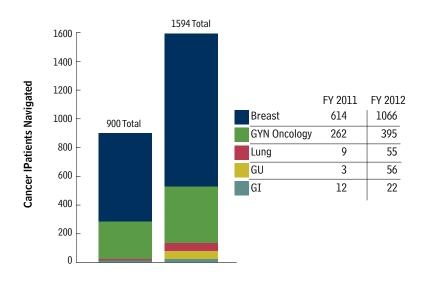


Patient Navigation

The number of NSH cancer patients receiving support from nurse navigators increased by 77% over the past year. While the largest increases in coverage occurred for breast and GYN cancer patients, navigation support was expanded to patients with lung, GI and GU cancers.

ONCOLOGY PATIENT NAVIGATION

FY 2011 - FY 2012



Survivorship

A treatment summary and survivorship care plan was developed for Northside's breast cancer patients. The tool was designed based on recommendations from the Institute of Medicine and National Research Council's 2005 report. Guidelines were incorporated from ASCO and NCCN to provide a summary of cancer treatment information as well as recommendations for follow-up care. Distribution of these summaries began with early stage breast cancer patients.

Palliative Care

In late 2011, Northside established an inpatient Oncology Palliative Care Program. The multidisciplinary team is led by a board-certified palliative care physician and includes a board-certified palliative care nurse practitioner, medical social worker and chaplain. Goals of the Palliative Care Program are: to prevent and relieve suffering, improve quality of life, manage symptoms of disease and/or treatment, and provide psychosocial and spiritual support for the patient and family. During the team's first complete year in operation, they provided consultation to over 100 patients and their families.

QUALITY

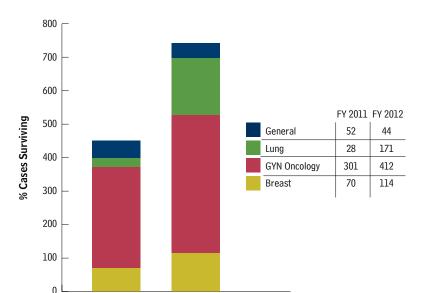
QUALITY

The Northside Hospital Cancer Institute continues to make great progress each year in improving the quality of patient care and clinical services. Accreditation by the Commission on Cancer and continued participation in the NCCCP have served as catalysts to promote improvements in many areas, including multidisciplinary care, NCCN guideline compliance, and disease-specific quality studies.

Multidisciplinary Cancer Conferences

Cancer conferences provide a multidisciplinary forum in which physicians and allied health providers discuss and recommend the best treatment for patients, based on the latest NCCN evidence-based guidelines. During the past year, the number of patient cases discussed increased by 64%, particularly in the areas of GYN, lung, and breast cancers.

Multidisciplinary Cancer Conference Cases Per Year Fy 2011- Fy 2012



Radiation Therapy for Mastectomy Patients

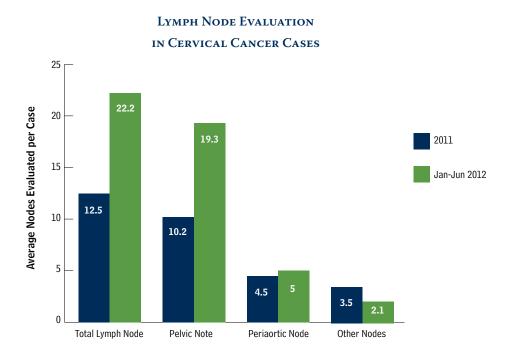
2011

A new quality indicator monitored by the National Accreditation Program for Breast Centers (NAPBC) notes that radiation therapy should be considered or administered within one year (365 days) of diagnosis for women undergoing mastectomy for breast cancer with four or more positive regional lymph nodes. The NSH Breast Care Committee reviewed 49 eligible cases from 2010 and found that 47 out of 49 patients (96%) received radiation within the required timeframe.

2012

Lymph Node Evaluation in Cervical Cancer Cases

Evaluation of lymph nodes in cervical cancer surgery is necessary for surgical-pathologic staging, and the results of this evaluation provide guidance for a patient's subsequent cancer therapy. Northside's GYN Oncology team recommended a change in the processing of cervical cancer case specimens to ensure submittal of all lymph node tissue for microscopic examination. This change resulted in a 78% increase in the average total number of lymph nodes evaluated per case.



NCCN Guideline Compliance in Endometrial Cancer

A review of 183 endometrial cancer cases from 2011 was completed to determine if diagnostic evaluation and first course of treatment were performed in compliance with current NCCN guidelines. Elements of review included completion of history and physical, endometrial biopsy, lab values, chest x-rays, pap smear, pathology/staging, and initial treatment. The majority of cases were found to be compliant with required elements of initial workup, and all patients received treatment; 95% received hysterectomy and bilateral salpingo-oopherectomy (BSO), and 5% received radical hysterectomy.

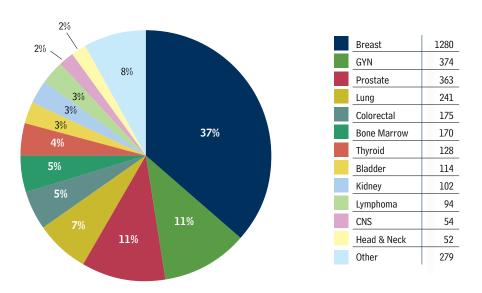
CANCER OCCURRENCES

CANCER OCCURRENCE

The NSH Cancer Institute continues to thrive as one of the largest community cancer programs in the Southeast. Northside experienced a 4% increase from 3,288 to 3,426 new analytic cancer cases in the past year. The chart below shows a distribution of new cases by tumor site.

TOTAL ANALYTIC CANCER CASES

NSH Atlanta & Forsyth, 2011 n=3426



Of the analytic cases diagnosed and/or treated in 2011, breast cancer comprised 37% of the total caseload. GYN, prostate, lung, colorectal and bone marrow cancers ranked as the additional top sites at Northside.

ONCOLOGY DATA CENTER

ONCOLOGY DATA CENTER

The Oncology Data Center is responsible for abstracting and maintaining treatment and follow-up information on cancer cases diagnosed and/or treated at Northside. The data collected has proven to be an invaluable resource for clinical quality monitoring and improvement studies. In addition, the Oncology Data Center is also responsible for the scheduling and coordination of Northside's increasing number of multidisciplinary cancer conferences.

2012 Accomplishments:

- Abstracted 4,169 total cases
- Maintained abstracting of analytic cases at five months from first date of diagnosis with 95% timeliness
- Concurrently abstracted top sites: breast, prostate, endometrium, lung, and colorectal
- Attained patient follow-up rate of 97%
- Implemented Colorectal Tumor Board Conference
- Implemented Abdominal/GI Tumor Board Conference
- Collaborated with Survivorship on implementation of patient treatment summary for early stage breast cancer
- Supported expansion of Quality Oncology Practice Initiative (QOPI) to include GYN oncology practice
- Provided feedback to QOPI regarding development of ovarian questions for GYN oncology module
- Presented "Integration of Rapid Quality Reporting System (RQRS) and Patient Navigation" at the Georgia Tumor Registrars Association annual meeting
- Mentored CoC facilities on RQRS process and implementation

2012 Northside Hospital Cancer Committee

Physician Members

Wayne Ambroze, M.D. Colleen Austin, M.D. Tosha Balfour-Williams, M.D. Lynn Baxter, M.D. Benedict B. Benigno, M.D. Guilherme Cantuaria, M.D. Henry Cline, M.D. Peter d'Aubermont, M.D. Nishan Fernando, M.D. Pierson Gladney, M.D. David Gower, M.D. James Hamrick, M.D. Kent Holland, M.D. Jonathan Lee, M.D. J. Bancroft Lesesne, M.D. Chad Levitt, M.D. Bindu Lingam, M.D. Deborah Martin, M.D. Scott Miller, M.D. John E. Moore, M.D. Thomas Phillips, M.D. Arnold Rosen, M.D. Sahar Rosenbaum, M.D. Howard Silverboard, M.D.

Non-Physician Members

Josef Venable, M.D.

Hamilton Williams, M.D.

Vicki Atkinson E. Lisa Austin Vicki Barnett Tina Berry Carolyn Booker Stacey Brown Terri Brown Jacquelin Burt Susan Casella Joy Chang Sabrina Cherry

Specialty

Colon & Rectal Surgery Medical Oncology Radiation Oncology Radiology **GYN Oncology GYN Oncology** Radiation Oncology **MOHS Surgery** Medical Oncology Medical Oncology Neuro-oncology Medical Oncology **Blood and Marrow Transplant** Melanoma Oncology Medical Oncology Radiation Oncology Medical Oncology **General Surgery** Urology Thoracic Surgery Radiation Oncology General Surgery Radiation Oncology Pulmonology Pathology

Specialty

Radiation Oncology

Network of Hope Central Research Office Surgical Services **Oncology Services** Forsyth Patient Care **Blood and Marrow Transplant** Pathology Laboratory **Oncology Data Center Oncology Services** Acute Pain Service Community Outreach

Non-Physician Members Specialty

Diane Clancy Margaret Currens Deidre Dixon Sean Dresser Erin Elliott Lee Feldpausch Megan Freeman Kathie Fuller Kathleen Gamblin Aisha Ghafoor-Harris Jessica Harmon Melissa Harris Dale Israel Keisha Jennings Mildred Jones Leslie Kerns Lusi Martin Melissa Morrison

Rachel Newby Andrea Null Latania Oldham Patti Owen Selvi Palaniappan Niti Patel Marcia Phillips

Elizabeth Poirier

Adriann Rodriguez

Candice Roth Barbara Schipani Raj Singh Dawn Speckhart Terri Tayco Aaron Thomas

Martha Trout Renice Washington Nikeisha Whatley Astrid Wilkie-McKellar Ora D. Williams

Phyllis Youngblood Dace Zusmanis

Marketing & Public Relations

Oncology Services Radiology

Physicist and Radiation Safety **American Cancer Society** Rehabilitation Services

Pain Treatment Pharmacy

Wound and Ostomy Care **Patient Navigator Physical Therapy** Rehabilitation Services Case Management **Disparities Outreach Inpatient Oncology Oncology Data Center Blood and Marrow Transplant American Cancer Society**

Palliative Care

Cancer Support Community

Clinical Nutrition Research Operations Oncology Services

Hereditary Cancer Program Forsyth Oncology Services Radiation Oncology **Oncology Services Oncology Services**

Blood and Marrow Transplant Blood and Marrow Transplant

Radiation Oncology

Blood and Marrow Transplant

Inpatient Oncology Oncology Services

Kaiser

Oncology Services Behavioral Health Community Outreach QI Department

Oncology Quality and Support Pastoral Care Department

