



NORTHSIDE HOSPITAL

2010 Cancer Care Annual Report



NCI COMMUNITY
CANCER CENTERS
PROGRAM





THE NATIONAL CANCER INSTITUTE (NCI)
SELECTED NORTHSIDE HOSPITAL TO JOIN THE
NCI COMMUNITY CANCER CENTERS PROGRAM
(NCCCP), an exclusive group of 30 community cancer centers.
In 2010, Northside was the only hospital in Atlanta and in the
Southeastern United States chosen for this prestigious honor.
NCI's recognition of Northside is a testament to the outstanding
dedication and strength of the Cancer Care Program, which has
been leading the way in the prevention, diagnosis and treatment
of women's, prostate and hematologic malignancies
for more than a decade.



2010 marked a paramount year for Northside Hospital's Cancer Care Program. In just one year, Northside achieved what takes many institutions years to accomplish: receiving the highest seal of approval for community cancer programs – NCCCP – by the National Cancer Institute (NCI); obtaining multiple distinguished accreditations; and thriving in new expansion opportunities, enabling us to now offer full cancer care services throughout the Northside service area.

We are proud that our steadfast commitment to being a regional and national leader continues to redefine cancer care.

2010 HIGHLIGHTS

- Selected to participate in the National Cancer Institute's Community Cancer Centers Program (NCCCP)
- Completed expansion and remodeling of 36-bed inpatient Blood and Marrow Transplant Unit
- Received accreditation with Commendation from the Commission on Cancer (CoC)
- Achieved outstanding comparative survival rates for transplant patients
- Achieved new accreditation for Breast Care Program through the National Accreditation Program for Breast Centers (NAPBC)
- Completed remodeling and expansion of inpatient medical and GYN oncology units at NSH-Atlanta
- Achieved designation as Breast Imaging Center of Excellence from the American College of Radiology
- Opened new 16-bed inpatient oncology unit and outpatient infusion center at NSH-Forsyth
- Expanded Radiation Oncology Services to NSH-Forsyth and NSH-Cherokee campuses
- Initiated planning for new GI Cancer Program

Thank you.

We recognize these endeavors hinge on the dedication and collaboration of individuals on the Cancer Committee and the entire Northside Cancer Care Program. Together, Northside harnesses the top talent, resources and knowledge to fight cancer, which is evident by the tireless groundwork to achieve the NCCCP appointment. As we reflect on the monumental accomplishments of 2010, we will continue to find ways to provide our patients with excellent cancer care.



Colleen Austin, M.D.
Chair, Northside Hospital
Cancer Committee



Patti Owen, MN, RN
Director, Oncology
Services

2010 INTEGRATION AND EXPANSION



- Holly Springs Imaging Center
- Radiation Cancer Center



CANTON



I-575

GA 400

I-75

ATLANTA



- BMT Unit • BMT Lab
- Medical Oncology Unit
- GYN Oncology Unit





CUMMING



- ◆ Infusion Center
- ◆ Inpatient Oncology Unit
- ◆ Radiation Cancer Center

ALPHARETTA



- ◆ Radiation Cancer Center

I-85

I-285

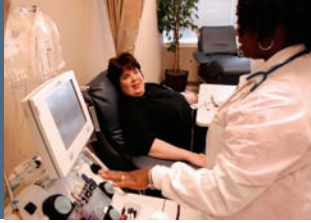


As a regional leader in cancer care, Northside Hospital continues to expand its facilities to serve the growing communities in and around Atlanta.

In 2010, Northside expanded its network of comprehensive cancer services, bringing expertise and compassionate care to locations in Alpharetta, Canton and Cumming.



Blood and Marrow Transplant Program



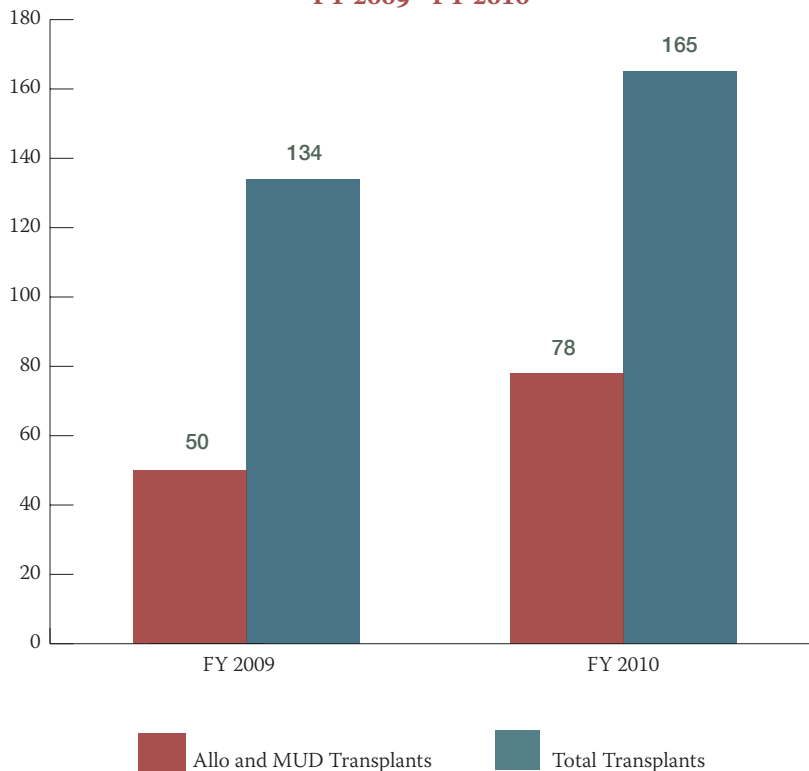
THE BLOOD AND MARROW TRANSPLANT (BMT) PROGRAM AT NORTHSIDE HOSPITAL

continues to thrive as one of the largest clinical transplant programs in the United States. The BMT Program's high level of expertise in blood and marrow transplant therapy and strong portfolio of clinical research played an integral role in Northside's 2010 award from the National Cancer Institute's Community Cancer Centers Program (NCCCP).

CONTINUED GROWTH

With 165 transplants performed during FY 2010, Northside's BMT program ranks among the top 10% in the nation in total transplants. The volume of total transplant procedures increased in 2010 by 23%, including a 56% increase in allogeneic and matched unrelated donor (MUD) transplants.

**BLOOD AND MARROW TRANSPLANT VOLUMES
FY 2009 - FY 2010**

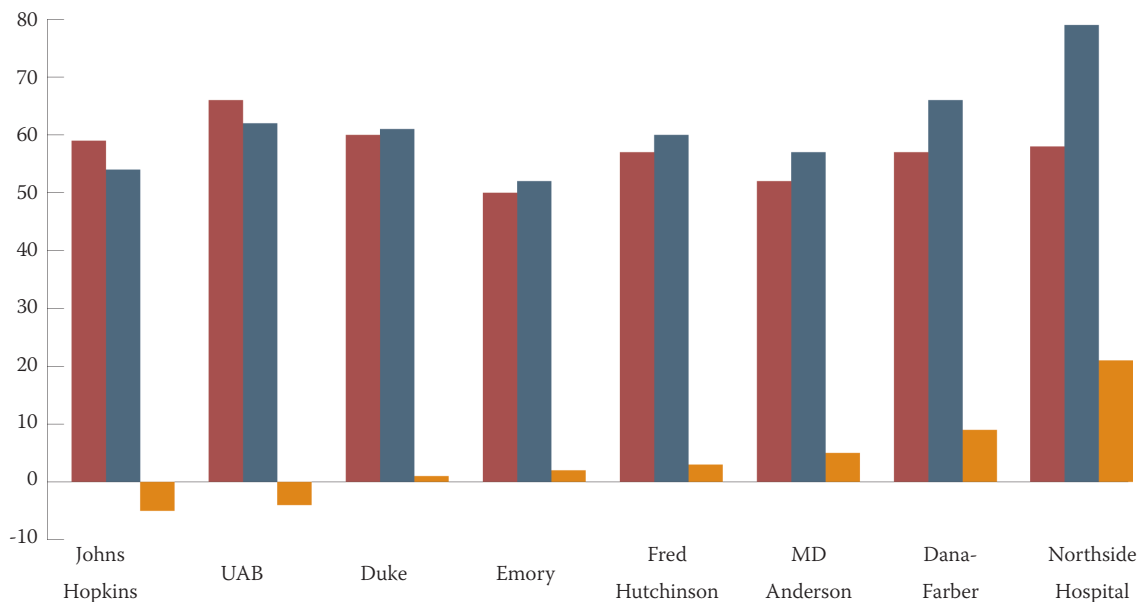


OUTSTANDING SURVIVAL OUTCOMES

The quality of Northside’s blood and marrow transplant services surpasses that of many of the country’s most prestigious, academically-oriented programs. Recent outcome data released by the National Marrow Donor Program (NMDP) indicate that Northside’s BMT Program has:

- The second best survival following matched unrelated donor allogeneic transplantation for any program in the country
- By far the best survival of any program in the southeastern United States,
- The greatest positive variance from the predicted survival for any BMT program in the nation

**ONE-YEAR POST-TRANSPLANT SURVIVAL
TRANSPLANT CENTERS IN THE NMDP**



Expected %	59	66	60	50	57	52	57	58
Actual %	54	62	61	52	60	57	66	79
Variance %	-5	-4	1	2	3	5	9	21

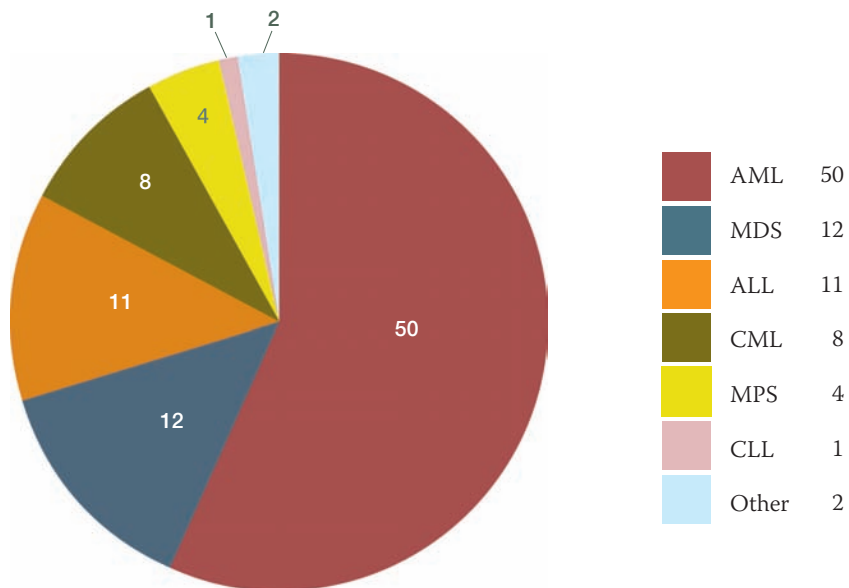
* Published outcome data from www.marrow.org. This data is based only on unrelated transplants performed from January 2003 to December 2007. It also includes one-year post-transplant follow-up through December 2008.

Leukemia Program



THE LEUKEMIA PROGRAM AT NORTHSIDE HOSPITAL PROVIDES COMPREHENSIVE STATE-OF-THE-ART SERVICES with a highly-skilled multidisciplinary team of practitioners, nursing staff, coordinators and health psychologists. During 2009, Northside provided care for 88 total analytic cases with the most frequently treated cases including: acute myelocytic leukemia (AML), myelodysplastic syndromes (MDS) and acute lymphocytic leukemia (ALL).

ANALYTIC LEUKEMIA CASES - 2009
TOTAL CASES: 88



2010 Accomplishments:

- Received full three-year accreditation from the Foundation of Accreditation for Cellular Therapy (FACT) with no clinical deficiencies
- Completed expansion and remodeling of a 36-bed inpatient BMT/Leukemia Unit with HEPA filtration for every patient room to maximize infection prevention
- Opened state-of-the-art Hematopoietic Stem Cell Processing, Flow Cytometry and Molecular Diagnostic Laboratories
- Doubled the number of BMT clinical studies opened from FY 2009 to FY 2010
- Maintained “Center of Excellence” status with major insurance payers



Women's Oncology

FOR MORE THAN A DECADE, NORTHSIDE HAS BEEN ON THE FOREFRONT IN THE FIGHT AGAINST CANCER, LEADING THE SOUTHEAST IN WOMEN'S HEALTHCARE.

More cases of gynecologic and breast cancer are diagnosed and treated at Northside than at any other hospital in Georgia. Northside leads the way in groundbreaking procedures for better outcomes and less invasive treatments.

BREAST CARE PROGRAM

The Breast Care Program at Northside Hospital is the largest among community hospitals in the Southeast. In 2010, the program achieved remarkable accomplishments: significant growth in patient volume; two national accreditations for clinical quality; and continued expansion of facilities and services to all Northside communities.

CONTINUED GROWTH

In 2009, Northside provided care for 1,243 newly diagnosed and/or treated cases of breast cancer. From 2008 to 2009, Northside's annual volume of analytic breast cancer cases climbed from 1,079 to 1,243, representing a 15% increase.

CLINICAL QUALITY

The National Accreditation Program for Breast Centers (NAPBC) awarded Northside's Breast Care Program a full three-year accreditation for demonstrating excellence in breast care. NAPBC's accreditation encompasses programs at both NSH-Atlanta and NSH-Forsyth.

In addition, Breast Care Centers at NSH-Atlanta and NSH-Forsyth received designations as Breast Imaging Centers of Excellence by the American College of Radiology (ACR), the highest level of accreditation attainable by a breast imaging center.

FACILITY & SERVICE EXPANSION

Northside's leading radiology and outpatient surgery services, both of which are ranked #1 by the NRC Consumer Choice Awards, continue to deliver excellent care to the burgeoning communities in Northside's service areas.

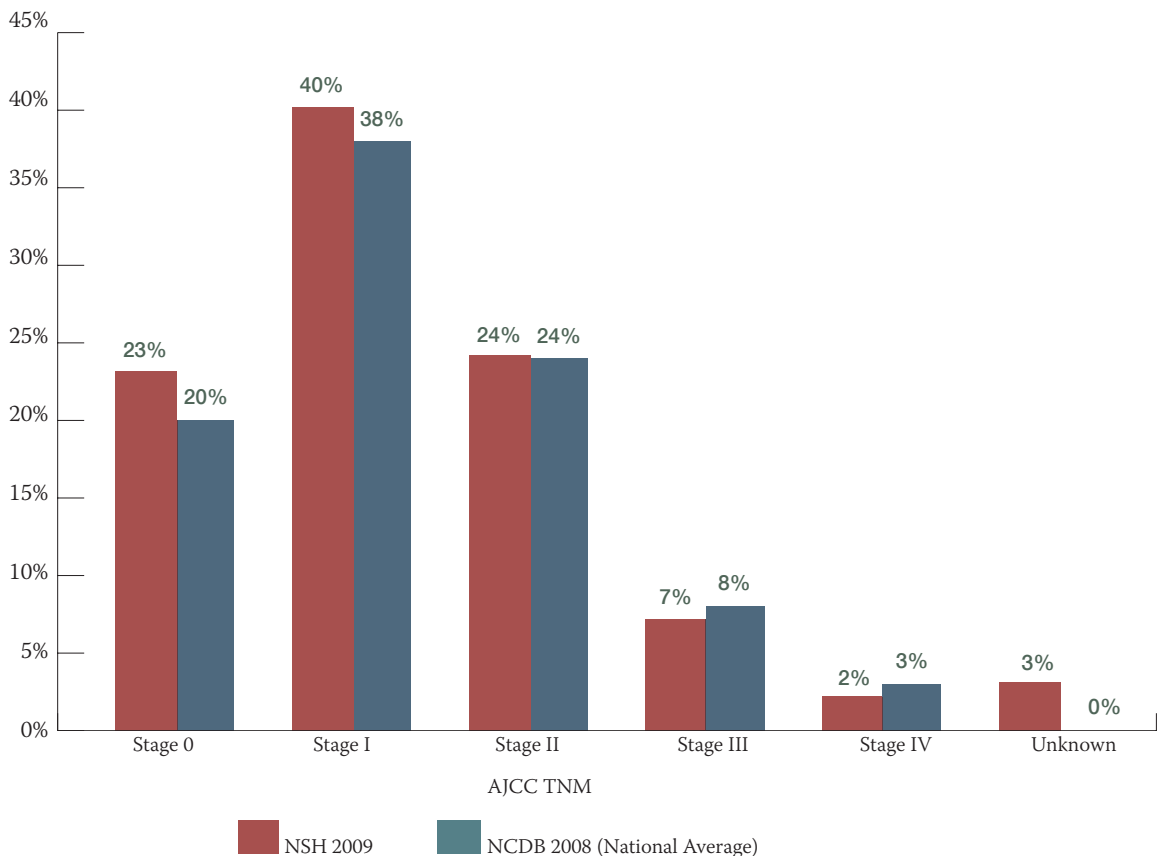
2010 Accomplishments:

- Opened the Holly Springs outpatient imaging center, bringing the Cherokee community access to comprehensive breast imaging services including a breast radiologist and breast MRI
- Installed a third mammography unit in the Forsyth Breast Care Center
- Completed construction of two breast surgery suites in the NSH-Atlanta Breast Care Center, increasing total capacity to four dedicated suites

STAGE AT DIAGNOSIS

Each year the NSH Cancer Committee reviews cancer patient survival rates and related measures of clinical quality for our most frequent cancer sites. In 2010, Northside diagnosed the majority of our breast cancer patients at the earliest stages of the disease (American Joint Commission on Cancer Stages 0 and I). Northside's proportion of early-stage cases continued to surpass national averages from the National Cancer Database (NCDB).

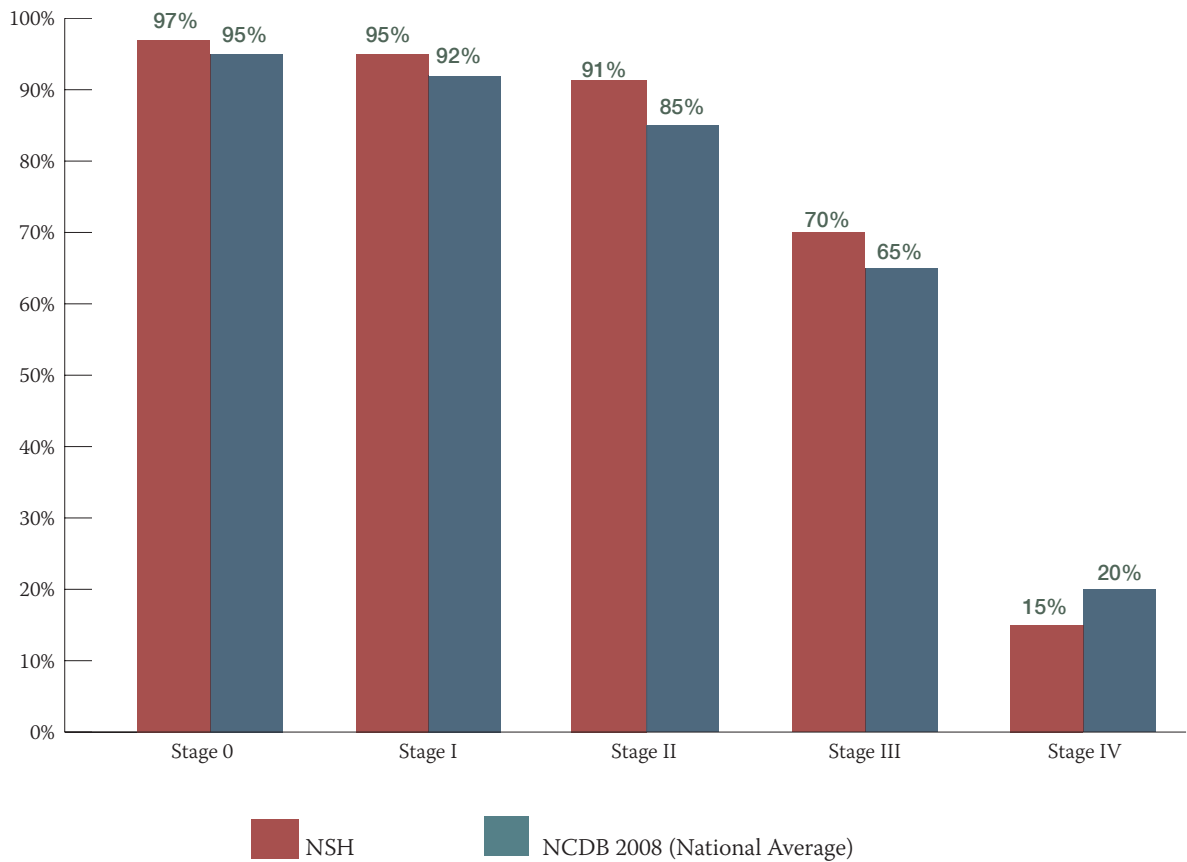
BREAST CANCER STAGE AT DIAGNOSIS - 2009



SURVIVAL RATES

Five-year survival rates provide key measures of quality in cancer care. When compared with national averages, Northside's breast cancer patient survival rates surpassed in all AJCC stages except Stage IV; of Stage IV patients, only 13 patients were diagnosed, yielding a sample size too small for meaningful comparison with national data.

**BREAST CANCER COMPARATIVE FIVE-YEAR OBSERVED SURVIVAL - 2003
NORTHSIDE HOSPITAL VS. NCDB**



GYN ONCOLOGY PROGRAM

GEORGIA'S LEADER IN CANCER CARE

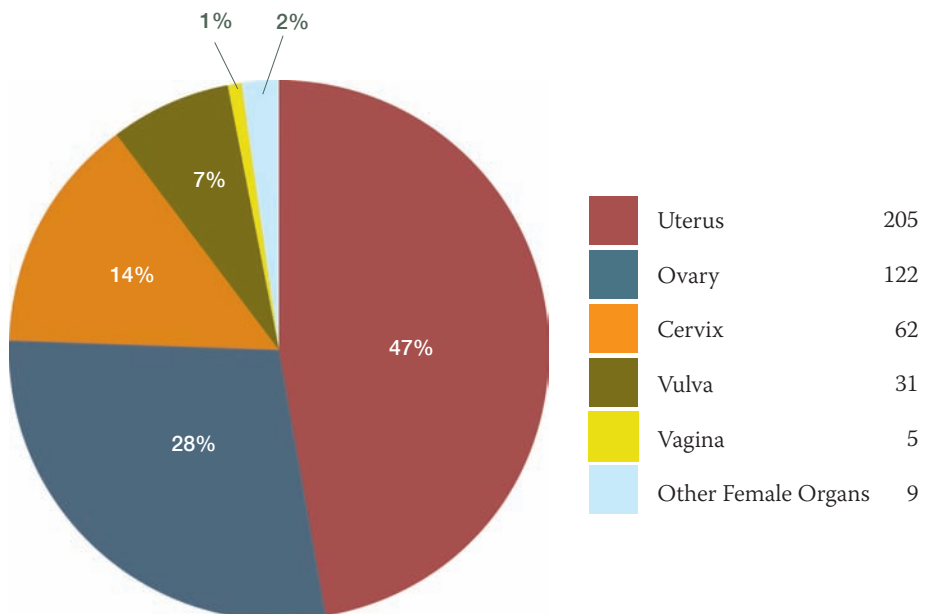
As a proven leader in cancer care, Northside Hospital diagnoses and treats more cervical, ovarian and endometrial cancer than any other hospital in Georgia. Northside remains dedicated to offering a patient-centered experience by accommodating the needs of women. Northside provides patients with the latest in technology, pioneering the way in minimally invasive techniques. In using robotic procedures, Northside ranks in the top 5% in the United States.

2010 Accomplishments:

- A complete renovation of a dedicated GYN Oncology 19-bed inpatient unit
- Addition of a Gynecologic Oncology Nurse Navigator
- Expansion of GYN oncology chemotherapy services offered at the NSH Infusion Center

The volume of gynecologic cancer cases at Northside increased by 27% in 2009 from 343 to 434 analytic cases with endometrial, ovarian and cervical cancers as the top GYN cancers treated.

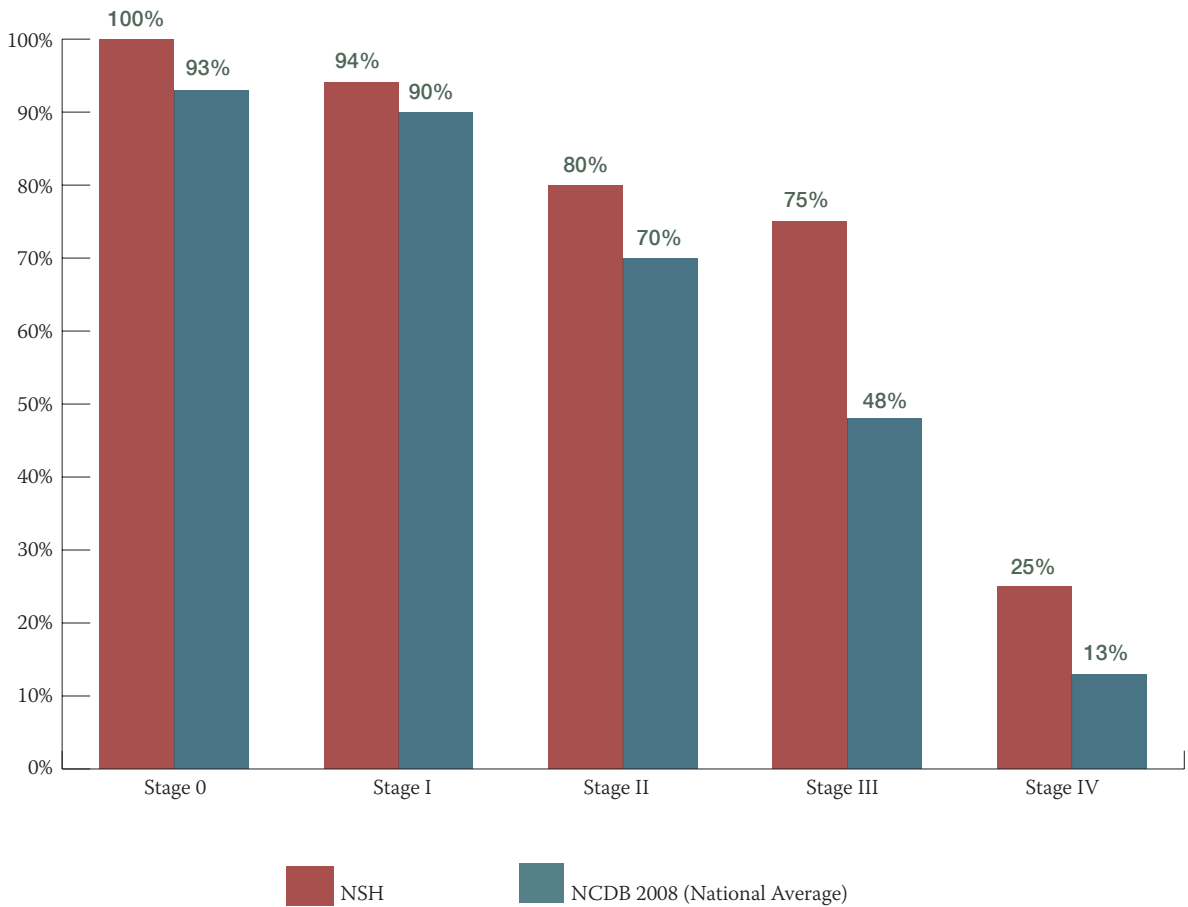
GYNECOLOGIC CANCER CASES - NSH ATLANTA & FORSYTH - 2009
TOTAL ANALYTIC CASES: 434



SURVIVAL RATES

Five-year survival rates for Northside's endometrial cancer patients conveyed that Northside's rates surpassed national averages in all AJCC stages.

**Endometrial Cancer Comparative Five-Year Observed Survival - 2003
Northside Hospital vs. NCDB**





LEADING THE WAY IN GROUNDBREAKING PROCEDURES, NORTHSIDE TREATS MORE PROSTATE CANCER PATIENTS THAN ANY OTHER HOSPITAL IN GEORGIA. In 2009, Northside Hospital diagnosed and/or treated 482 analytic cases of prostate cancer.

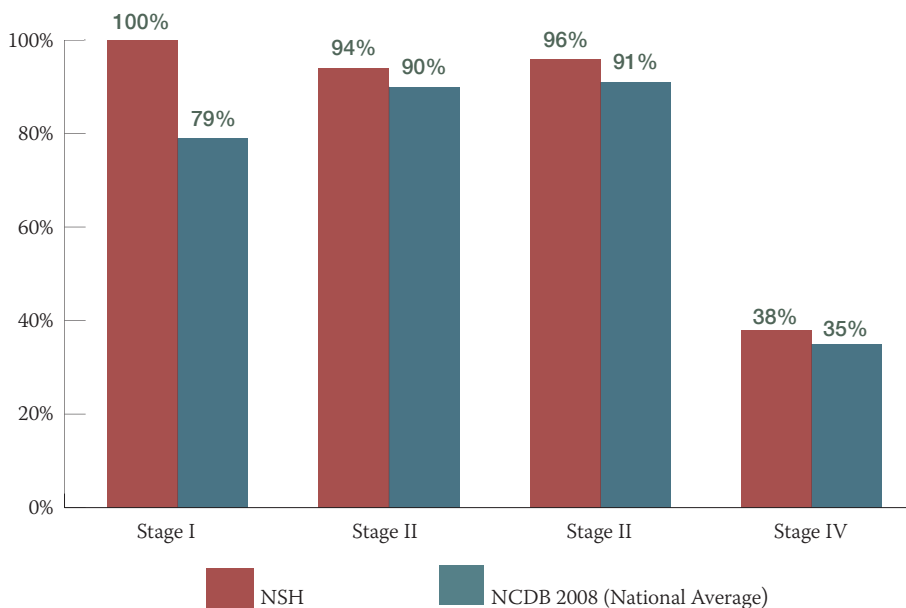
PROSTATE CANCER SCREENINGS

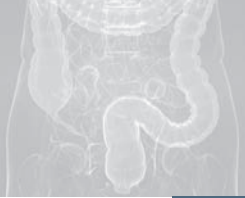
Northside’s steadfast commitment to cancer care and community outreach received national recognition in 2010 with an appointment as an NCI Community Cancer Center Program. Northside continued to support disparate and underserved populations by providing free prostate cancer screenings; 243 men participated, resulting in 20 abnormal findings requiring additional follow-up care. In addition, Northside’s Interpretation Services translated educational materials into Spanish to offer more patients educational resources.

SURVIVAL RATES

The NSH Cancer Committee’s review of comparative five-year survival rates of prostate cancer patients diagnosed in 2003 showed Northside surpassing national averages in all AJCC TNM stages.

**PROSTATE CANCER COMPARATIVE FIVE-YEAR OBSERVED SURVIVAL – 2003
NORTHSIDE HOSPITAL vs. NCDB**





Gastrointestinal Oncology Program



COLORECTAL CANCER RANKS AMONG THE TOP FIVE MOST FREQUENTLY DIAGNOSED CANCERS AT NORTHSIDE. In 2009, 195 new analytic cases of colorectal cancer were diagnosed.

During the past year, Northside convened an interdisciplinary team to develop plans for providing comprehensive services and support to patients with gastrointestinal (GI) cancers.

2010 Accomplishments:

- Clinical Quality
 - Established a process for ongoing monitoring of quality measures in colorectal cancer
 - Identified GI Oncology as part of the NCCCP structure with a plan to establish a GI Multidisciplinary Care (MDC) disease site team in FY 2011
- Obtained Endoscopic Ultrasound (EUS) and ablation equipment for the Northside Atlanta GI Lab to support the diagnosis and treatment of esophageal cancer
- Added a GI Nurse Navigator staff position to guide patients through the complex cancer process
- Established a support group for patients with colorectal cancer through The Cancer Support Community (formerly The Wellness Community)



Continuum of Care



Education and Prevention

Screening

Diagnosis

THE STRENGTH OF NORTHSIDE’S CONTINUUM OF CARE MODEL – ADDRESSING CANCER PATIENT NEEDS AT EVERY PHASE OF THEIR JOURNEY – MADE NORTHSIDE HOSPITAL AN EXCEPTIONAL CANDIDATE FOR THE NATIONAL CANCER INSTITUTE’S COMMUNITY CANCER PROGRAM (NCCCP).

The National Cancer Institute (NCI) established the NCCCP program in recognition of the essential role that community hospitals play in the health of the American public; 85 percent of cancer patients are initially diagnosed, and receive at least their first course of treatment at community hospitals. Many patients choose community hospitals, enabling them to stay closer to home, work and family.

The breadth of Northside’s accomplishments varied along the continuum in 2010, bringing record achievement and progress to an already strong program. We will highlight two phases of care: research and support & survivorship.

RESEARCH

A commitment to research has always anchored Northside’s Cancer Care Program. Our dedication to integrating the merits of research for better patient care will be further strengthened by NCCCP, which seeks to provide more cancer patients with access to the latest clinical research and treatment options.

Northside Hospital has been a long standing member in the Atlanta Regional Community Clinical Oncology Program (CCOP), an NCI-designated cancer research program. In addition, Northside’s BMT Program conducts academically-oriented research, collaborating with Johns Hopkins and other NCI-designated programs.

2010 Accomplishments:

- Doubled the number of BMT/Leukemia studies opened
- Executed an agreement with Emory University, an NCI-designated center, to access radiation therapy clinical trials

- Implemented process to pre-screen breast cancer patients for CCOP trial eligibility
- Increased physician education about the availability of clinical trials
- Collaborated with NCI and other NCCCP hospitals to identify best practices for increasing patient accrual
- Initiated membership with the Georgia Center for Oncology Research and Education (Georgia CORE)

SUPPORT AND SURVIVORSHIP

Throughout the last 25 years, extensive research has depicted how positive effects of support groups offer coping methods for cancer patients, improve quality of life, and increase survival. Northside Hospital was one of the first hospitals in the country to understand the importance of emotional, spiritual and social support in cancer care. We extended our program to incorporate important partnerships such as The Cancer Support Community (formerly The Wellness Community), a professionally-led network of social and emotional cancer support. Additional initiatives included establishing the Oncology Nurse Navigator role to guide patients through their cancer journey and the Network of Hope, a cancer survivor volunteer program. Pastoral care, social services and nutritional services also provide integrated care for cancer patients.

As an NCI Community Cancer Center Program (NCCCP), Northside will be able to expand its support and survivorship program, providing more opportunities to reach different populations.

2010 Accomplishments:

- Expanded Oncology Nurse Navigator staff to support additional cancer types such as lung, GYN and GI, while targeting disparities in our population
- Added a financial specialist to assist patients with financial needs
- Increased Cancer Support Community services
 - Addition of colorectal support group
 - More than 4,000 patient visits for various support groups, classes, and other activities



Quality

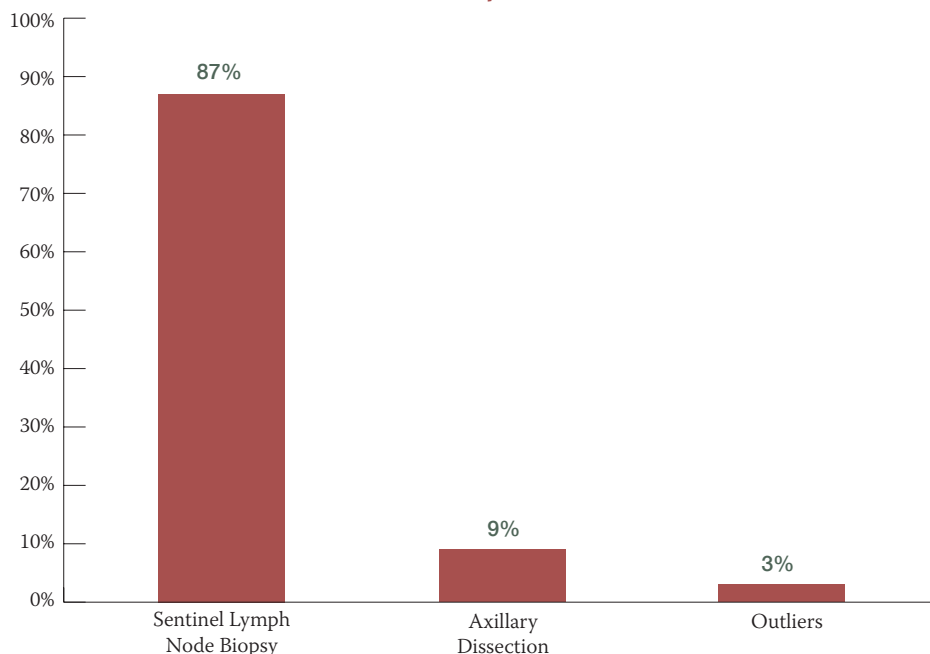


THE NSH CANCER CARE PROGRAM HAS CONSISTENTLY PLACED A STRONG FOCUS ON THE QUALITY OF CARE FOR PATIENTS. Each year the NSH Cancer Committee reviews numerous quality measures to ensure that care is coordinated in an interdisciplinary manner and follows nationally recognized cancer care guidelines such as those from the National Comprehensive Cancer Network (NCCN).

SENTINEL LYMPH NODE BIOPSY

The NSH Cancer Committee reviewed early stage breast cancer cases from 2008 to determine the method used for initial sampling of breast lymph nodes. Sentinel lymph node biopsy (SLNB) is the least invasive method and should be utilized unless contraindicated. The results showed that of 646 patients studied with AJCC Stage I and II disease, 565 (87%) received SLNB; 59 patients (9%) received axillary dissection initially; and the remaining 3% (22 patients) either did not receive lymph node sampling or records were unavailable for review. All cases receiving axillary dissection or no lymph node sampling were reviewed in detail and clinical management was deemed appropriate.

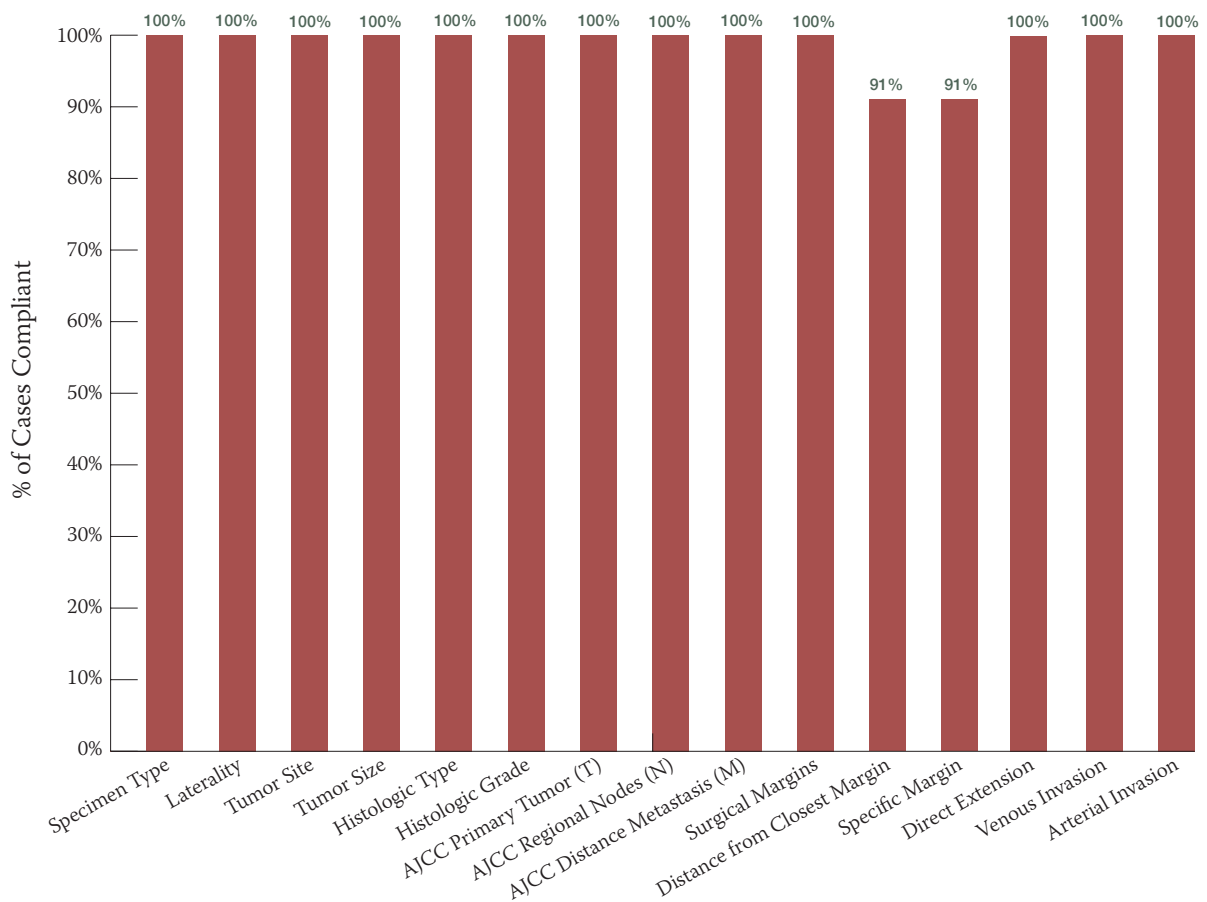
**SENTINEL LYMPH NODE BIOPSY RATE
BREAST CANCER CASES, 2008
N=646**



PATHOLOGY REPORTING IN LUNG CANCER

To determine rates of completion of the elements required by the College of American Pathology (CAP), the NSH Cancer Committee reviewed lung cancer pathology reports from 2009. The minimum completion rate for each element established by CAP is 90%. In the lung cases reviewed, 13/15 elements were completed 100% of the time. The remaining two report elements were completed 91% of the time. These are excellent results for lung cancer reporting.

CAP PROTOCOL COMPLIANCE IN LUNG CANCER REPORTS – 2009 TOTAL CASES: 33



The Northside Cancer Care Program participates in the Cancer Program Practice Profile Report (CP3R) quality initiative, which is coordinated by the Commission on Cancer. Each year the NSH Cancer Committee reviews and analyzes results for several key measures of quality in breast and colorectal cancer care. Northside continues to demonstrate high rates of compliance with each of these indicators.

Commission on Cancer Quality Measures Northside Hospital - Cases from 2008	
Quality Indicator	Compliance Rate
Radiation therapy follows breast conserving surgery for breast cancer within 365 days of diagnosis	96%
Chemotherapy for hormone receptor negative breast cancer, AJCC T1cN0M0, or Stage II or III, is considered/initiated within 120 days of diagnosis	94%
Hormonal therapy for hormone receptor positive breast cancer, AJCC T1cN0M0, or Stage II or III, is considered/initiated within 365 days of diagnosis	94%
Chemotherapy for AJCC Stage III colon cancer is considered/initiated within 120 days of diagnosis	97%
Radiation therapy follows surgical resection of AJCC T4N0M0 or Stage III rectal cancer within 180 days of diagnosis	92%
At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer	86%

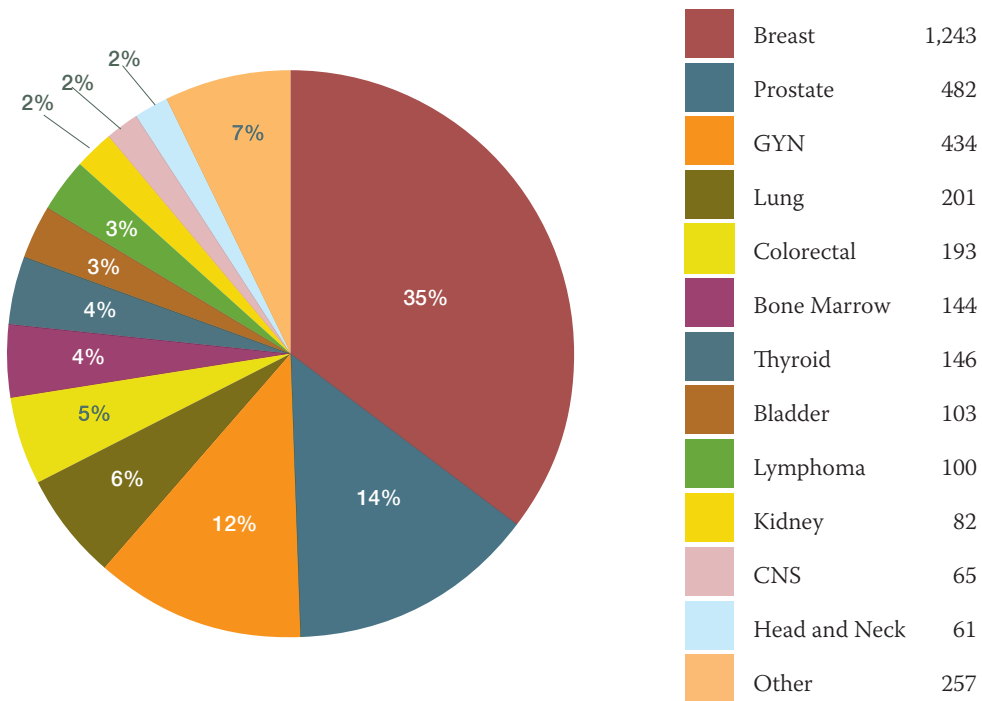


Cancer Occurrence



THE NSH CANCER CARE PROGRAM IS ONE OF THE LARGEST COMMUNITY HOSPITAL CANCER PROGRAMS IN THE SOUTHEAST. Northside experienced a 3% increase from 3,399 to 3,511 new analytic cancer cases in the past year. The distribution below reflects analytic cases by tumor site.

ANALYTIC CANCER CASES - NSH ATLANTA & FORSYTH - 2009



Breast cancer comprised more than one third (35%) of Northside’s total analytic caseload in 2009 and continued to be the hospital’s most frequent cancer site. The other most frequent cancer types included: prostate (14%), GYN (12%), lung (6%) and colorectal (5%).

ONCOLOGY DATA CENTER REPORT

The Oncology Data Center, or tumor registry, maintains an enormous database of information on all NSH cancer patients, including detailed diagnosis, treatment and follow-up information. The center serves an essential role in monitoring quality measures, completing quality studies, and coordinating interdisciplinary cancer conferences.

2010 Accomplishments:

- Transitioned registry into the new coding schemas: Collaborative Staging V2 Coding, 7th Edition AJCC TNM Staging, Hematopoietics Multiple Primaries
- Abstracted 4,433 total cases and maintained greater than 90% abstracting timeliness
- Followed 38,888 patients with a follow-up rate greater than 90%
- Offered 11 physician educational conferences including AJCC TNM Staging
- Hosted 5 NAACCR educational webinars for metro-Atlanta registrars
- Coordinated 122 cancer conferences, including 38 video conference meetings
- Contributed to successful ACoS & NAPBC Surveys

Moving forward, we approach 2011 with anticipation and enthusiasm. As an NCI Community Cancer Center (NCCCP), we will bring patients greater access to quality care and research opportunities. Our roots in providing cancer care to the communities surrounding Northside have always been strong. The indelible achievements of this past year, however, will cultivate and grow our program, enhancing the level of research and patient support services we offer as we continue to redefine cancer care.



2010 Northside Hospital Cancer Committee Members

<i>Physician Members</i>	<i>Specialty</i>	<i>Additional Members</i>	<i>Specialty</i>
Wayne Ambroze, M.D.	Colon & Rectal Surgery	Deidre Dixon	Radiology
Colleen Austin, M.D.	Medical Oncology	Rev. Laura Dorsey	Pastoral Care
Tosha Balfour-Williams, M.D.	Radiation Oncology	Sean Dresser	Medical Physicist & Radiation Safety
Lynn Baxter, M.D.	Radiology	Erin Elliott	ACS Patient Resource Navigator
Benedict B. Benigno, M.D.	GYN Oncology	Megan Freeman	Pharmacy
Henry Cline, M.D.	Radiation Oncology	Kathie Fuller	Wound and Ostomy Care
Peter d'Aubermont, M.D.	MOHS Surgery	Sherri Gaeta	Nutrition Services
Nishan Fernando, M.D.	Medical Oncology	Aisha Ghafoor-Harris	Physical Therapy
Kent Holland, M.D.	Blood and Marrow Transplant	Melissa Harris	Case Manager/Discharge Planner
J. Bancroft Lesesne, M.D.	Medical Oncology	Dale Israel	Disparities Outreach
Chad Levitt, M.D.	Radiation Oncology	Keisha Jennings	Inpatient Oncology
Deborah Martin, M.D.	General Surgery	Mildred Jones	Oncology Data Center
Tracy McElveen, M.D.	Radiation Oncology	Leslie Kerns	Blood and Marrow Transplant
Scott Miller, M.D.	Urology	Lisa LaFoy	Blood and Marrow Transplant
John E. Moore, M.D.	Thoracic Surgery	Shanna Y. Lee	American Cancer Society
Thomas Phillips, M.D.	Radiation Oncology	Karen Manion	Blood and Marrow Transplant
Sreekanth Reddy, M.D.	Medical Oncology	Rachel Newby	Cancer Support Community
Arnold Rosen, M.D.	General Surgery	Patti Owen	Oncology Services
Josef Venable, M.D.	Pathology	Selvi Palaniappan	Hereditary Cancer Program
W. Hamilton Williams, M.D.	Radiation Oncology	Niti Patel	Forsyth Oncology Services
		Marcia Phillips	Radiation Oncology
		Judith M. Robinson	Central Research Office
		Adriann Rodriguez	Oncology Support Services
		Barbara Schipani	Blood and Marrow Transplant
		Raj Singh	Radiation Oncology
		Dawn Speckhart	Blood and Marrow Transplant
		Stephanie Taormina	Rehabilitation Services
		Terri Tayco	Inpatient Oncology
		Aaron Thomas	Oncology Services
		Sabrina Tindal	Community Outreach
		Lynn Vann	Pharmacy
		Renice Washington	Women's Oncology
		Ora D. Williams	Quality Improvement
<i>Additional Members</i>	<i>Specialty</i>		
Vicki Atkinson	Network of Hope		
E. Lisa Austin	Central Research Office		
Lynne Bailey	Infusion Center		
Vicki Barnett	Surgical Services		
Tina Berry	Oncology Services		
Carolyn Booker	Forsyth Patient Care		
Stacey Brown	Blood and Marrow Transplant		
Terri Brown	Pathology Lab		
Jacquelin Burt	Oncology Data Center		
Susan Casella	Breast Health Coordinator		
Joy Chang	Acute Pain Service		
Diane Clancy	Marketing & Public Relations		
Margaret Currens	Oncology Support Services		

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