University of Maryland Shore Regional Health

Cancer Program Annual Report

2019

Outstanding Cancer Care

Close to Home

Providing outstanding cancer care and support services throughout the region.

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Mary DeShields, MD, *Chair*
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Medical Oncology

Roberta Lilly, MD
Medical Director,
Clark Comprehensive Breast Center

John Mastandrea, MD
Radiation Oncologist

Katherine Straub, MD
Radiologist

Marcia Wills, MD
Pathologist

Katie Alder
Coordinator,
Lung Cancer Screening

Christine Allen, RD, CSO, LDN
Nutritionist

Whitney Anders, CPHT
Clinical Research Assistant

Mandy Bounds, MSN, BSN, CCRN
Director,
Performance Improvement
UM Shore Regional Health

Jenifer Deitterick, PharmD
Oncology Pharmacist

Lauren Douglass, RT (R) (T)
Technical Coordinator

Diana Evans, CTR
Cancer Registrar

Kira Eyring (ACS)
Representative,
American Cancer Society

Robin Ford, MS, RN, OCN
Nurse Navigator,
Clark Comprehensive Breast Center

Robert Frank
Senior Vice President, Operations
UM Shore Regional Health

Brittany Krautheim, CNM, WHNP-BC
Nurse Practitioner,
Clark Comprehensive Breast Center

Chanelle Lake, BSN, RN, OCN
Coordinator, Outpatient Chemotherapy

Patty Plaskon, PhD, LCSW-C, OSW-C, APHSW-C
Coordinator, Oncology Social Work

Erin Scheele, MA, CCC-SLP
Rehabilitation Therapist

Jeanie Scott, CTR
Manager, Oncology Services

Margot Spies, BSN, RN, OCN
Nurse Navigator, Oncology

Maddie Steffens, RN
Coordinator, Palliative Care

Christina Weisenborn, BSN, RN, OCN, CCRC
Coordinator, Clinical Trials

Melissa Wood, RN
Radiation Oncology Nurse

AD-HOC MEMBERS:

Dr. Nelson Goldberg
Plastic Surgeon

Maria Craver, RT
Technical Coordinator

Jennifer Pierson, MOT, CLT, LANA
Lymphedema Specialist

Members of the Cancer Committee shown are, left to right, Jeanie Scott, Erin Scheele, John Mastandrea, MD, Christine Allen, Whitney Anders, Maria Craver, Lauren Douglass, Chanelle Lake, Katie Dadds, Mandy Bounds, Monik Conway, Margot Spies, Patty Plaskon, Brittany Krautheim, Nina Weisenborn, Robin Ford and Jeni Deitterick.

A MESSAGE FROM MARY DESHIELDS, MD

On behalf of all team members in the Cancer Program at University of Maryland Shore Regional Health, I am pleased to share with you this report regarding the treatment, care and many support services we have provided to more than 1,000 patients and their loved ones in the past year.

The Cancer Program's expert, dedicated team includes oncologists, surgeons, radiologists, nurse practitioners, nurses, social workers, support staff and volunteers. Together, the team provides state of the art care and support to help ensure the best possible outcomes for patients making the journey of cancer diagnosis, treatment and recovery.

In our Requard Radiation Oncology Center, the Varian TrueBeam linear accelerator (LINAC), afforded more than 300 patients precise treatment with reduced time required. More than 1,000 chemotherapy treatments were provided in our Lenny Satchell Chemotherapy Suite.

We added to our support services this year, including two new programs that are provided with the help community partners. The LiveSTRONG program, offered in partnership with YMCA of the Chesapeake, helps patients in treatment and/or recovery from cancer regain their physical stamina and personal confidence. Improving Your LOL (Look and Outlook), offered in partnership with Walgreens Beauty Consultants, provides guidance on hair and makeup for patients dealing with cancer side effects. These new programs complement the array of existing support services that benefit hundreds of patients and their loved ones each year.

Early detection is an important focus of the Cancer Program. Offered in cooperation with UM Shore Medical Group providers and various community partners and volunteers, an array of screenings for prostate, breast and skin cancer served more than 300 individuals around the five-county region this year. Our Lung Cancer Screening Program, offered in Chestertown and Easton, provided over 200 low-dose computed tomography (LDCT) screenings to men and women between the ages of 55 and 77. This screening, which diagnoses lung cancer at its earliest and most treatable stage, is open to residents of all five counties who meet the eligibility criteria. Finally, our Wellness for Women program provided breast cancer screenings to 144 women, including many uninsured or underinsured, as well outreach education throughout the five counties served by UM Shore Regional Health.

The support our Cancer Program enjoys from the UM Memorial Hospital Foundation and its affiliated Auxiliary enables us to build on our services and keep pace with evolving life-saving diagnostic and treatment technologies. For more than 170 hours a month, 20-plus Auxiliary volunteers assist and encourage both patients and staff in both the Cancer Center and the Clark Comprehensive Breast Center, assisting and encouraging patients and staff. Foundation events and appeals inspire community awareness and generous support from individuals, civic groups, corporations and foundations.

I am grateful to be part of this team and so proud of their commitment to the ongoing advancement of the care we provide. On behalf of the Cancer Committee, I thank you for your continued support of the Cancer Program at UM Shore Regional Health.

Respectfully submitted,

MARY DESHIELDS, MD
UM Shore Regional Health
Cancer Committee Chair

"The Cancer Center team provides state of the art care and support to help ensure the best possible outcomes for patients making the journey of cancer diagnosis, treatment and recovery."

ACCREDITATIONS AND RECOGNITION

The Cancer Program at University of Maryland Shore Regional Health is accredited by **The Commission on Cancer of the American College of Surgeons**. This esteemed national distinction is awarded to cancer treatment facilities that deliver quality patient care with a focus on prevention; early diagnosis; pre-treatment evaluation; optimal treatment; rehabilitation; observation for recurrent disease; survivorship and support services; and end-of-life care. Accreditation also considers a cancer program's ongoing participation in cancer research, the extent of research and education offered in the community, and the types of quality improvement activities that address patient care.

The Clark Comprehensive Breast Center is accredited by the **National Accreditation Program for Breast Centers (NAPBC)**, a program administered by the American College of Surgeons. This prestigious accreditation signifies that the Center demonstrates compliance with NABPC standards for proficiency in the areas of center leadership, clinical management, research, community outreach, professional education and quality improvement.

The Lung Cancer Screening Program is recognized as a Lung Cancer Screening Center of Excellence by the **Lung Cancer Alliance**.

OVERVIEW OF SERVICES

Services provided by the Cancer Program include:

- Diagnostic imaging and laboratory testing in Cambridge, Centreville, Chestertown, Denton, Easton and Queenstown
- Surgical services at UM Shore Medical Centers at Chestertown, Dorchester and Easton
- Radiation therapy provided at the Requard Radiation Oncology Center in Easton, which offers the Varian TrueBeam linear accelerator, an image-guided radiation therapy (IGRT) known for its advanced speed and accuracy in treating cancers of the lung, breast, prostate, and head and neck
- Outpatient chemotherapy at the Lenny Satchell Chemotherapy Suite at the Cancer Center in Easton and at the Infusion Clinic at UM Shore Medical Center at Chestertown
- Breast health services offered at the Clark Comprehensive Breast Center in Easton and the Eleanor and Ethel Leh Women's Center in Chestertown
- Clinical trials to develop prevention and treatment protocols for many forms of cancer
- Oncology rehabilitation services, including lymphedema therapy, speech pathology and physical and occupational therapies for fatigue and other symptoms
- Genetic counseling available to patients via telemedicine, provided in partnership with a certified genetic counselor
- Screenings and awareness programs and events including support groups, workshops, TIPPS, and more
- Wellness for Women: Breast Cancer Prevention Program conducted by the Cancer Program's community outreach worker whose goal is to identify and educate women at risk for breast cancer so they can receive diagnosis and treatment at an early stage when the disease is curable. Through this program, uninsured, and under-insured women ages 20 to 39 and over 64 receive free mammograms and the program also provides assistance with co-pays and high deductibles for those who are insured.

REGIONAL SCREENINGS AND ACCESS TO PREVENTIVE CARE

Providing access to screenings and preventive care is an important focus of the Cancer Program and its physician partners and community partners. Screenings accomplished in the past year are as follows:

Breast Cancer Screenings: Breast Cancer is the second-highest cause of death among women in Maryland, exceeded only by lung cancer, and breast cancer rates on Maryland's Eastern Shore are higher than state average. This year, the Cancer Program's Wellness for Women (WFW) program conducted 144 breast cancer screenings in Easton for eligible uninsured and under-insured women, many of Hispanic origin. WFW also conducted 52 outreach events in the five county region that shared prevention and screening information with more than 1600 people. The Cancer Program tallied 113 new breast cancer diagnoses this year.

Catalina Billings, Cancer Center outreach coordinator, is shown with Eastern Shore Wellness Solutions' Ashyrra Dotson, president and CEO, and Joyce Opher, executive director, at the Women's Breast Health Breakfast held in October 2019 at the Eastern Shore Hospital Center in Cambridge, Md.

Lung Cancer Screenings: Lung cancer is the number one cancer killer in the U.S. Through the Cancer Program's Lung Cancer Screening Program, eligible patients referred for screening by their primary care provider receive a low-dose computed tomography scan to find disease before the onset of symptoms, when it is most treatable. Screenings are offered in Chestertown as well as in Easton. As of November 1, 2019, 433 patients have been screened; of those, 24 received follow-up testing and two were referred for surgical consultations.

Prostate Screenings: Each September, the Cancer Program offers free Prostate Screenings in Kent and Talbot counties. These screenings are made possible by support from the Kent County Health Department, Mt. Olive AME, Citizens Against Tobacco Smoke (CATS TEAM), the Talbot County NAACP, the Chesapeake Multicultural Resource Center, Talbot Senior Center at Brookletts Place, providers with University of Maryland Shore Medical Group – Urology, and partial funding from the Maryland Department of Health and Mental Hygiene Cigarette Restitution Funds. In 2019, a total of 57 men were screened at events in Easton, Md., and Worton, Md.

Skin Cancer Screenings: According to the Skin Cancer Foundation (skincancerfoundation.org), in the past decade ten years, the number of new melanoma cases diagnosed annually has increased by 53 percent and more than 91,000 cases are diagnosed annually in the U.S. Melanoma accounts for less than one percent of skin cancer cases, but also for the vast majority of skin cancer deaths. Each spring, the Cancer Program partners with Dorchester, Kent and Talbot county health departments and area health care providers to offer free skin cancer screenings that are open to the public, and both uninsured and underinsured people are encouraged to participate. In 2019, 119 participants — from Caroline, Dorchester, Kent, Queen Anne's and Talbot Counties — were screened. These screenings resulted in 37 referrals for follow-up care and/or diagnostic testing, and two cases of melanoma were diagnosed.

Volunteers who assisted with the free prostate screenings in Easton enjoyed some treats in the break room at UM Shore Medical Group – Urology.

Free skin cancer screenings in Dorchester, Kent and Talbot counties attracted 119 participants in 2019.

Providers and nursing staff of Eastern Shore Dermatology (in white coats) joined forces with volunteers from the Cancer Center to provide skin cancer screenings in Easton.

SUPPORT AND SURVIVORSHIP

CANCER SUPPORT GROUPS AND SERVICES

The Cancer Center at UM Shore Regional Health has partnerships with Cancer Care, the American Cancer Society, the Chesapeake Multiple Myeloma Network (CMMN) and other organizations to offer classes, support groups and other resources for cancer patients and their caregivers. These include:

- **Survivorship Care Plan** – Presented to every patient on completion of his or her treatment.
- **CARES Cancer Patient Support Group** – 1st and 3rd Tuesdays of the month, 5-7 p.m., Cancer Center.
- **Breast Cancer Support Group** – 4th Tuesday of the month, 6:30 p.m., Christ Church, Cambridge, Md.
- **Cancer Support Group** – 4th Monday of the month, 6 p.m., UM Shore Medical Center at Chestertown, Education Center.
- **Cancer Caregiver's Coffee** – 1st Saturday of the month, 9-10:30 a.m., Cancer Center.
- **Women Supporting Women/ Breast Cancer Support Group** – 4th Tuesday of the month, 6:30 p.m., Christ Episcopal Church, Cambridge.
- **TIPPS Quality of Life** – Individual/family sessions offered by appointment with oncology social worker providing guidance on financial planning, employment/disability, personal goals and long range plans.
- **Improving Your Look and Outlook (LOL)** – Offered in partnership with Walgreen's beauty consultants, this program provides individualized consultation on maintaining a positive outlook and appearance during and after cancer treatment.
- **Financial Support** – Available for medication and other treatment-related expenses from a network of resources. Oncology social workers match patients with appropriate programs based upon their financial needs and eligibility.
- **The Pat Shortall Wig Room** – Provides wigs, hats and other accessories to patients undergoing chemotherapy and/or radiation.
- **The Women's Health Boutique** – Provides post-mastectomy garments, prosthetics and swimwear to accommodate the needs of pre- and post-surgery patients. Services provided by a Certified Prosthesis Specialist. Offered the 3rd Friday of the month, 11 a.m. - 4 p.m., Clark Comprehensive Breast Center.
- **American Cancer Society Road to Recovery** – A volunteer program that provides free transportation to scheduled medical appointments for cancer patients.
- **Survivors Offering Support (SOS)** – Pairs women who have breast cancer with volunteer mentors who are breast cancer survivors.
- **Thriving and Surviving** – A monthly newsletter published by the Cancer Program for patients and their family members and for community partners.
- **Educational Seminars** – Educational programs provided by the Cancer Program and community partners this year covered a various topics, including: Genetics and Breast Cancer.

National Cancer Survivors Day supports and honors survivors, whether they have been living with cancer for a day, a week, a month or years. The annual celebration organized by the UM SRH Cancer Program includes family members and health care professionals who helped them achieve their survivorship goals. This year's celebration was a festive luncheon at the Easton Firehouse, attended by more than 125 survivors and their guests.

The Cancer Center's "For Women Only" program, held on Thursday, April 25, featured an array of support services for women dealing with a cancer diagnosis, treatment and recovery. On hand for the occasion were representatives from Walgreens, Alternative Therapy MD, YMCA of the Chesapeake LiveSTRONG program, Shore Rehabilitation Services, The Women's Boutique, the Clark Comprehensive Breast Center, UM SRH Chemotherapy Clinic and Improving Your Look & Outlook.

UM Shore Regional Health kicked off Breast Cancer Awareness Month in early October at the "pink ribbon tree lighting" which honors all those whose lives have been touched by breast cancer. The Cancer Center team offered a host of activities throughout the month — outreach events, a presentation on breast cancer genetics, and prizes and giveaways for patients in treatment for cancer.

Dedicated volunteers provide a wide array of support activities for Cancer Program and Clark Comprehensive Breast Center patients and staff. 2019 Cancer Program and Breast Center volunteers were Art Cecil, Diane Daffin, Myrna Daragh, Mark Greene, Liz Hannegan, Debbie Hayes, Richard Hill, Dobbie Hurst, Frances Mason, Gabrielle May, Merry McNeil, Midge Kroll, Frances Mason, Nancy Matthews, Krishan Patel, Elmer Parkerson, Krishan Patel, Brenda Prettyman, Mary Ann Ray, Ruth Renkenberger, Trish Reynolds, Diane Ries, Maggie Schabdach, Beverly Serio, Mike Scheidt, Noel Slattery, Lynda Von Spaeth, Mary Turkington, Nancy Williams, Bertha Wilson and Penny Womack.

For cancer patients who need transportation to or from treatment, volunteer drivers are available through the American Cancer Society's Road to Recovery Program. In 2019, 20 Road to Recovery volunteers made sure that cancer patients receive the treatments and care they needed.

*LIVE*STRONG: A PLACE TO FIND STRENGTH, STAMINA AND SUPPORT

Through a partnership between the Cancer Center at UM Shore Regional Health and YMCA of the Chesapeake, the LiveSTRONG program is helping cancer survivors get back to living their lives

LiveSTRONG is a no-cost, 12-week fitness program led by YMCA instructors who are trained in working with cancer survivors. It is offered at the Easton Family YMCA @ Washington, located on South Washington Street in Easton. Participants meet twice a week for 90-minute sessions that include up to 20 minutes of cardio, followed by work on strength training, balance and flexibility. Each group has six to 12 members and may include people still in cancer treatment as well as cancer survivors. LiveSTRONG instructors are trained by the YMCA in the special needs people face during and after cancer treatment.

"Cancer treatment can cause fatigue, muscle loss and difficult emotions," says Barbara Jarrell, YMCA LiveSTRONG instructor. "Getting survivors moving again helps them improve their strength and stamina, and they begin to feel more positive about the future."

Most participants join the YMCA when the LiveSTRONG program ends. "Once they go through the 12 weeks, they want to keep moving forward," Jarrell says.

In addition to exercise, a key component is the camaraderie that builds among the cancer survivors as they get to know each other. At the start of each session, they talk briefly about managing the challenges of continuing to work, managing doctors' appointments, or dealing with treatment side effects. "LivesSTRONG gives you something to work toward as well as a psychological support group," says Michael Fisher, MD, who participated in the program after treatment for two types of cancer. "For me, some of those relationships are ongoing today, well after I finished the program," says Dr. Fisher.

Margot Spies, oncology nurse navigator at the Cancer Center routinely refers patients to the LiveSTRONG program. She notes that powerful, targeted cancer treatments are helping people live longer. "For certain cancers there's evidence that being leaner and more active can help prevent the cancer from recurring, so LiveSTRONG is an important tool for survivorship," Spies says.

Michael Fisher, MD, LiveSTRONG participant is shown with Barbara Jarrell, instructor, at the YMCA on South Washington Street in Easton.

MAINTAINING FOLLOW-UP

Facilities accredited by the American College of Surgeons (ACoS) are required to maintain lifetime follow-up on all patients diagnosed with cancer. Accurate follow-up data enables the Cancer Program at University of Maryland Shore Regional Health to compare outcomes with regional, state and national statistics.

FOLLOW-UP RATE FOR ALL PATIENTS	2001	5 YR REFERRAL
Total patients in registry since reference date in Class of Case 10-14 and 20-22	**9178**	**2206**
Less foreign residents	0	0
Less patients over 100 years of age & without contact for more than 12 months	15	2
Subtotal	9163	2204
Less number expired	4459	469
Subtotal (number living)	4704	1735
Less number current (known to be alive in the last 15 months)	3789	1561
Patients lost to follow-up	915	174
Percentage of successful follow-up rate	**90%**	**92%**

CANCER REGISTRY STATISTICS

	MALE	TOTAL	FEMALE	
HEAD & NECK				**HEAD & NECK**
Lip	0	1	1	Lip
Tongue	6	6	0	Tongue
Tonsil	3	3	0	Tonsil
Salivary Glands	1	1	0	Salivary Glands
Pharynx (Oro, Hypo, Naso)	4	5	1	Pharynx (Oro, Hypo, Naso)
Subtotal	**14**	**16**	**2**	**Subtotal**
DIGESTIVE SYSTEM				**DIGESTIVE SYSTEM**
Esophagus	14	17	3	Esophagus
Stomach	4	6	2	Stomach
Small Intestine	1	2	1	Small Intestine
Colon	25	62	37	Colon
Rectum	12	22	10	Rectum
Rectosigmoid Junction	4	4	0	Rectosigmoid Junction
Anus, Anal Canal & Anorectum	1	5	4	Anus, Anal Canal & Anorectum
Liver & Bile Ducts	3	7	4	Liver & Bile Ducts
Gallbladder	0	1	1	Gallbladder
Other Biliary	1	1	0	Other Biliary
Pancreas	8	17	9	Pancreas
Peritoneum, Omentum & Mesentery	0	1	1	Peritoneum, Omentum & Mesentery
Subtotal	**73**	**145**	**72**	**Subtotal**
RESPIRATORY SYSTEM				**RESPIRATORY SYSTEM**
Larynx	6	**9**	3	Larynx
Lung & Bronchus	44	**87**	43	Lung & Bronchus
Trachea, Mediastinum & Other Respiratory	1	**1**	0	Trachea, Mediastinum & Other Respiratory
Soft Tissue	5	**7**	2	Soft Tissue
Nose, Nasal Cavity & Middle Ear	2	**2**	0	Nose, Nasal Cavity & Middle Ear
Subtotal	**58**	**106**	**48**	**Subtotal**
ENDOCRINE SYSTEM				**ENDOCRINE SYSTEM**
Thyroid Gland	2	10	8	Thyroid Gland
Other Endocrine	2	8	6	Other Endocrine
Subtotal	**4**	**18**	**14**	**Subtotal**
CENTRAL NERVOUS SYSTEM				**CENTRAL NERVOUS SYSTEM**
Brain	4	6	2	Brain
Cranial Nerves	3	7	4	Cranial Nerves
Subtotal	**7**	**13**	**6**	**Subtotal**
URINARY SYSTEM				**URINARY SYSTEM**
Bladder	63	73	110	Bladder
Kidney & Renal Pelvis	14	19	5	Kidney & Renal Pelvis
Ureter	0	1	1	Ureter
Subtotal	**77**	**93**	**16**	**Subtotal**
SKIN				**SKIN**
Melanoma	28	47	19	Melanoma
Other Skin	2	2	0	Other Skin
Subtotal	**30**	**49**	**19**	**Subtotal**
BREAST				**BREAST**
Breast	4	113	109	Breast
Subtotal	**4**	**113**	**109**	**Subtotal**
MALE GENITAL SYSTEM				**FEMALE GENITAL SYSTEM**
Prostate	155		7	Cervix Uteri
Testis	4		21	Corpus & Uterus
Penis	0		3	Ovary
			4	Vulva
Subtotal	**159**	**194**	**35**	**Subtotal**
OTHER SITES				**OTHER SITES**
Mesothelioma	1	1	0	Mesothelioma
Lymphoma	7	21	14	Lymphoma
Myeloma	5	8	3	Myeloma
Leukemia	8	12	4	Leukemia
Unknown Primary	10	23	13	Unknown Primary
Subtotal	**31**	**65**	**34**	**Subtotal**
GRAND TOTAL	457	**812**	355	**GRAND TOTAL**

RESEARCH STUDY: ADVANCE DIRECTIVES – THE CANCER CENTER AT UM SHORE REGIONAL HEALTH

PROBLEM

Ambulatory cancer patients are a vital population to engage in advance care planning and advance directive (AD) completion, as they are well enough to consider and plan for their future care (McDonald, du Manoir, Kevork, Le, & Zimmerman, 2017). Additionally, patients who complete ADs are more likely to receive care related to their preferences and are associated with fewer hospital admission and deaths. The improved care processes with patients who have ADs are associated with a better quality of life at the end of life. The UM Shore Regional Health Cancer Center team partners daily with ambulatory cancer patients in their care. As a result, the opportunity exists to support ambulatory cancer patients in the completion of end-of-life care planning. The purpose of this study is to answer the questions: Of the patients receiving care and treatment at the Cancer Center, what is the proportion of patients with an AD prior to care and treatment at the Cancer Center, and what is the proportion of patients with an AD after care and treatment begins?

METHODOLOGY AND RESULTS

The medical record review for this study included a review of the Shore Regional Cancer Registry. For purposes of this quality improvement study, inclusion criteria included any patient of any cancer stage receiving care and treatment at the Cancer Center. Exclusion criteria included duplicative patient records (the same patient had a visit at another date during the time period) or if the patient received Procrit injections only. Per data analysis of the Shore Regional Cancer Registry, 516 patients met inclusion criteria and received care and treatment at the Cancer Center between January 1, 2019 and March 30, 2019. Of the 516 records analyzed, 28.9% (n=149) were receiving treatment from the chemo service line, 70.0% (n=361) were receiving treatment from the radiation service line, and 1.1% (n=6) were receiving treatment from both the chemo and radiation service lines.

Data analysis included a review of the percentages of AD completions, as documented in the medical record. Of the 516 records, 18.8% (n=97) patients had ADs documented in the medical record. Of the 149 chemo service line records, 23.5% (n=35) had ADs documented in the medical record. Of the 361 radiation service line records, 17.2% (n=62) had ADs documented in the medical record. Of the 6 chemo/radiation service line records, 0.0% (n=0) had ADs documented in the medical record. (See Appendix A).

Data analysis included a review of the percentage of ADs completed before treatment began at the Cancer Center, and the percentage of ADs completed after treatment started at the Cancer Center. Of the 516 patients records reviewed, 3.9% (n=20) completed an AD pre-treatment at the Cancer Center, and 14.9% (n=77) completed an AD after treatment began with the Cancer Center. Of the 149 patients in the chemo service line records reviewed, 3.4% (n=5) were completed pre-treatment at the Cancer Center, and 20.1% (n=30) were completed after treatment began with the Cancer Center. Of the 361 patients in the radiation service line records reviewed, 4.2% (n=15) were completed pre-treatment at the Cancer Center, and 13.0% (n=47) were completed after treatment began with the Cancer Center. (See Appendix B).

Data analysis included a review of the percentage of patients that did not have an Advance Directive but had a Maryland Medical Orders for Life-Sustaining Treatment (MOLST) documented in the medical record. Of the 516 records, 20.9% (n=108) patients had a MOLST form documented without any AD documented in the medical record. Of the 149 chemo service line records, 20.8% (n=31) had a MOLST form documented without any AD documented in the medical record. Of the 361 radiation service line records, 21.1% (n=76) had a MOLST form documented without any AD documented in the medical record. Of the 6 chemo/radiation service line records, 16.7% (n=1) had a MOLST form documented without any AD documented in the medical record. (See Appendix C).

COMPARISON OF RESULTS WITH NATIONAL BENCHMARKS

The 3-month medical record review at the Cancer Center demonstrates AD completion proportions similar to other studies of outpatients with cancer at any stage. Prior studies demonstrate a proportion of AD completion between 18-31% (Hubert, 2013; McDonald et al., 2017; Pfirstinger et al., 2014; van Oorschot, Schuler, Simon & Flentje, 2012). For the defined timeframe in this study, 18.8% of any stage cancer patients had a completed AD in the medical record; of this total, 23.5% of chemo patients and 17.2% of radiation patients had a completed AD in the medical record.

ACTION PLAN: EVALUATION OF THE DATA

The Cancer Center team evaluated the data. The results of the medical record review demonstrate consistent proportions of AD completions as other studies (Hubert, 2013; McDonald et al., 2017; Pfirstinger et al., 2014; van Oorschot et al., 2012). The team identified that Cancer Center staff members are working to improve AD completion, as evident by the pre-treatment and post-treatment AD statistics. (See Appendix B). As a result of the evaluation, the team identified two strategies to improve the proportion of AD completed and documented in the medical record. First, to improve pre-treatment AD completion among all patients with cancer at any stage, the Cancer Center team will collaborate with the UM Shore Regional Health Population Health team to identify further opportunities to increase AD completion before cancer treatment. Second, the Cancer Center team will implement a quality improvement pilot to improve the completions of health care agents and AD completions in the population.

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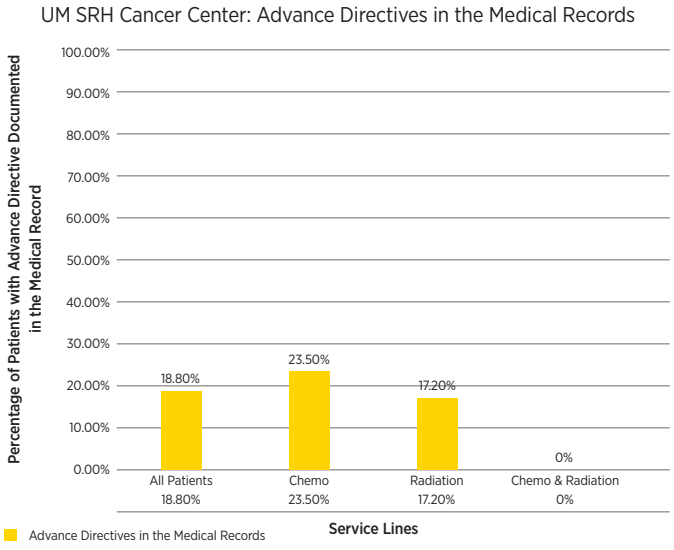
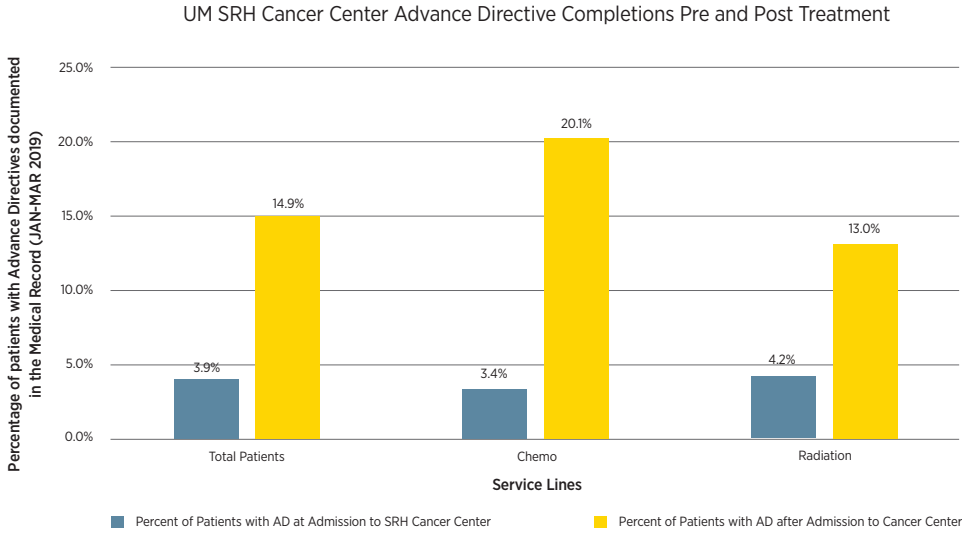
APPENDIX A

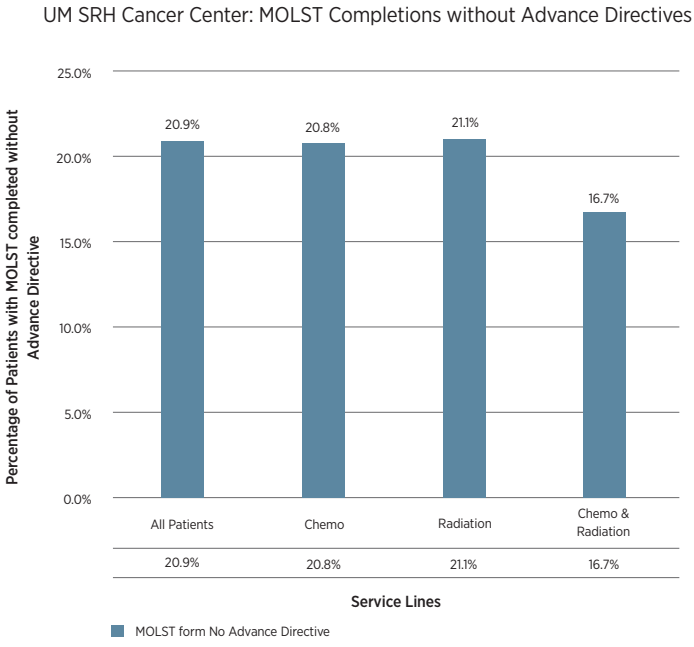


Jan-March 2019 SRH Cancer Center	Advance Directives in the Medical Records	Total Sample
All Patients	97	516
Chemo	35	149
Radiation	62	361
Chemo & Radiation	0	6

APPENDIX B



APPENDIX C



Study authored by Mandy Bounds, MSN, BSN, CCRN with assistance from Patty Plaskon, PhD, LCSW-C, OSW-C, APHSW-C and Jeanie Scott, CTR

UM MEMORIAL HOSPITAL FOUNDATION DONOR SUPPORT ENHANCES CANCER CARE PROGRAMS

2019 SPORTING CLAYS CLASSIC RAISES $77,227 FOR CLARK COMPREHENSIVE BREAST CENTER

The 5th annual Sporting Clays Classic raised $77,227 to benefit the breast imaging and biopsy equipment and program needs of the Clark Comprehensive Breast Center. The funds raised were dedicated the purchase of an MRI Breast Coil, which is used to fully image breast patients and perform MRI-guided breast biopsy.

Offered by UM Memorial Hospital Foundation at The Point at Pintail in Queenstown on June 9, 2019, the Sporting Clays Classic attracted 226 registered shooters who enjoyed morning competition, lunch, prizes, raffles and a silent auction of items donated by local businesses and community members.

Key sponsors of the event included Auxiliary of the Memorial Hospital at Easton, Paul and Joanne Prager, Preston Automotive Group, Jack and Susan Stoltz, Whiting-Turner Contracting Co., Doug James Real Estate Services, Attraction Magazine, The Point at Pintail, APG Chesapeake, Willow Construction, Bullock Construction, Inc., CBIZ MHM, LLC and BSC Group, LLC, Chaney Enterprises, Gillis Gilkerson, Roberta Lilly, MD, Nancy Morton, R. Scott and Courtney Clark Pastrick, Shore Radiology, Shore United Bank and Tidewater Anesthesia Associates, PA.

"We greatly appreciate the continued support of our local community," says Roberta J. Lilly, MD, medical director, Clark Comprehensive Breast Center. "Diagnostic and treatment technologies in cancer care are continually evolving, and we are very grateful to the Foundation, the volunteers and participants in the Sporting Clays Classic for their help in ensuring that we have state-of-the-art equipment to provide the best possible care for our patients."

The 2019 Sporting Clays Committee: front row, Patty Plaskon, Amy Lowe, Norm Washburn and Bob Lynch; back row, Marty Johnson, Wayne Dyott, Scott Saxman, Nancy Morton, Graham Lee, Mike Weise, Jeanie Scott, Hugh Adkins and Mary Alice Vanhoy. Not shown: Reg Harrell, Gabby Piha, Jim Robertson and Steve Spurry.

COMMUNITY EVENTS SUPPORT CANCER PROGRAM

Two fall events benefited cancer programs and services. In September, the annual Lowe's Wharf Fundraiser, organized by Victor and Teresa Michael, raised $7,369 for UM Memorial Hospital Foundation's Peggy Rosato Cancer Fund. In November, the Robin's Nest Floral & Garden Center's Winter Design Showcase , sponsored by Ken and Emma Jean Morgan, which also raised funds for the Clark Comprehensive Breast Center.

Victor Micheal, Paul Zelinske, Dawn and Roger Ruby are shown at the Lowe's Wharf Fundraiser with the Margaritaville Bike, one of several silent auction items.

Janet Andrews, center, with Theresa French and J.T. Thompson, controller and general manager, respectively, of Koons Toyota of Easton, which provided $1500 to the Robin's Nest Winter Design Showcase in support of the Clark Comprehensive Breast Center.

ONCOLOGY TEAM MEMBERS HONORED AT 2019 COLORS OF CANCER GALA

Margot Spies, oncology nurse navigator at the Cancer Center at UM Shore Regional Health, and the Oncology Nurses on 2 East at UM Shore Medical Center at Easton were honored as Hometown Heroes at the 9th Annual Colors of Cancer Gala, held Saturday, April 27, 2019 at the Tred Avon Yacht Club in Oxford.

Spies received the Medical Professional Award. In addition to her service to cancer patients from diagnosis through treatment, Spies has been involved in many fundraising events benefiting cancer research, treatment and support for patients. A founding member of the Upper Shore Oncology Nursing Society, Spies was instrumental in the formation of the Patient in Need (PIN) Fund, which assists patients in paying for medications, transportation and other needs associated with treatment. She also established the CARES Program at the UM SRH Cancer Center to ensure that patients are screened and receive appropriate services and support available through the program.

Shown at the 2019 Colors of Cancer Gala are honoree Margot Spies, the Cancer Program's oncology nurse navigator and State Senator Addie Eckardt.

Patty Miller, right, won the Breast Cancer Awareness Month Quilt Raffle, held in October 2019, sponsored by the Clark Comprehensive Breast Center. Standing with Miller is Alice Dulin, who created and donated the quilt.

In October, the Alpha Kappa Alpha Sorority Inc., Kappa Theta Omega Chapter, donated 40 pink hats for patients the Clark Comprehensive Breast Cancer Center. The delivery coincided with the sorority's Breast Cancer Awareness Impact Day. Shown at the presentation are: standing, Deborah Wooden, Catalina Billings, Lisa Foster, Brittany Krautheim, Joanie Peters, Shalonda Gibbs and Wanda Molock; seated, Katrena Bailey, Jeanie Scott, Willie Woods and Jennifer Dashiell Reed.

Preston Auto's iFrog team members visited the Center in October to present their collected donation of $500 to the Foundation in support of breast cancer care. Shown from left are F. Graham Lee, vice president, UM SRH Philanthropy; Amy Lowe, development assistant, UM Memorial Hospital Foundation; Kyle McCracken, chief product officer for iFrog Digital Marketing; Dr. Roberta Lilly, and Brittany Krautheim, medical director and nurse practitioner, respectively, Clark Comprehensive Breast Center; Jeanie Scott, manager, Oncology Services, UM SRH; and iFrog Digital Marketing team members Dorian Mitchell, Jamie Marvel, Michael O'Connor, Travis Belt, Chelsea Lindner, Jaclyn Langwost, Sarah Natovitz, Morgan Dailidenas, Sarah Bulgaris, Erin Williamson, Teri Bildstein, Robb Falkenheimer, Audrey Wozny and John Perkinson.

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CONTACT US

Cancer Center at
UM Shore Regional Health
Requard Radiation Center
Lenny Satchell Chemotherapy Suite
509 Idlewild Avenue
Easton, MD 21601
410-820-6800

Clark Comprehensive Breast Center
at UM Shore Regional Health
10 Martin Court
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