



**PARKVIEW  
CANCER  
2020-2021**

ANNUAL REPORT

# Changing the way cancer patients experience healthcare: Improving the journey at PCI

Over the past couple of years, the Parkview Cancer Institute has worked extremely hard to recruit new positions, develop new programs and continue to expand regional access for cancer patients — all in an effort to improve the cancer journey.

And, we've done it despite the headwinds of the COVID-19 pandemic, which created never-before-seen challenges for all patients and caregivers. For our team, having patients who are immunosuppressed coming into the PCI building meant we had to figure out how to ensure they could receive their ongoing chemotherapy while also protecting them from potential exposures. It was a true balancing act, but one we were able to handle well. We became quite adept at incorporating novel ways of communication, such as telemedicine

and other non-contact methods, and looking at the ever-changing healthcare environment to create an amalgam of guidelines on how to reduce the risk to our patients.

It took an array of talented leaders and staff members to navigate the cancer journey for our patients and successfully mitigate their fears. Our frontline workers were taking risks to themselves and their families during the pandemic. And yet, they continued to offer services and adapted on the fly to ensure patients could receive care when and where they needed to. This culture of adaptability speaks to the commitment everyone at PCI has to fighting cancer throughout the region and helping facilitate the best possible outcomes for our patients, even in the midst of a pandemic.

As we move forward, Parkview Cancer Institute is more dedicated than ever to creating value along a seamless patient journey. Whether they're being screened for a cancer, are having a preventative procedure, have an active cancer, or are a cancer survivor, every patient should feel a part of the PCI family. And that requires looking at the entirety of the care they receive, not from our lens, but from theirs.

To improve this journey, we're excited to focus on some aspects of cancer care that may be often overlooked, even at leading institutions in the country. Because the ability to detect cancer early will allow us to reduce cost and improve outcomes for patients, we're putting a strong emphasis on early detection and prevention. By



Our family caring for yours.

focusing on screenings, high-risk programs, and knowledge about patient risks and the steps that can be taken, we hope to increase utilization of mammograms, pap smears, colonoscopies and other methods to reduce the incidence of late-stage cancer and/or prevent cancer altogether.

We're also working to better understand the holistic patient journey so we can provide the best patient experience in the country. Our concierge service is working through a patient experience council to better understand the places in which we interact with patients and their families, and the opportunities to improve those interactions. With the development of our survivorship program, we are able to focus on the care of patients following their cancer treatments — giving them a place to call home where they are supported both physically and emotionally through surveillance and after-cancer care.

Since opening our doors in 2018, the Parkview Cancer Institute has been able to establish a nationally recognized regional destination for cancer care. And now, we are ready to tackle the next stage — expanding our footprint through exceptional patient experience, value-based care, and innovation and research in cancer care. We are hoping to change the way patients

experience healthcare and the way healthcare is delivered through novel technology, such as telemedicine for expeditious and convenient communication, and satellite care clinics that will allow patients throughout our region to get the majority of their care closer to home.

We are also continually recruiting physician experts, creating new cancer care subspecialized programs and delivering a variety of new diagnostic staging and treatment technologies for improved care experiences and better outcomes. Through these steps, we are paving the path for the Parkview Cancer Institute to become a nationally recognized expert that is setting the bar for cancer care for many years to come.

**As we move forward, Parkview Cancer Institute is more dedicated than ever to creating value along a seamless patient journey.**



Neil Sharma, MD, President  
Parkview Cancer Institute



## Creating stability during uncertainty: PCI's response to COVID-19

The COVID-19 pandemic impacted every American's life in one way or another. For cancer patients, as well as those caring for them, that impact was profound. While much was uncertain, the oncology team at Parkview Cancer Institute (PCI) knew one thing for sure: COVID could not be allowed to stop or delay a patient's cancer care. And that meant they needed to act quickly — meeting daily or weekly to discuss protocols

and processes that needed adjusted to ensure patients could still safely receive their cancer treatments.

With cancer patients being so susceptible to illness, it was especially important to create a safe place for patients to get care. In addition to ensuring co-workers were always wearing appropriate PPE and taking steps to create a sterile environment, extra

safety measures were put into place. A fever clinic in the lobby of PCI allowed patients to be triaged quickly and safely — helping caregivers determine whether a patient had a fever because of chemotherapy or whether it was COVID-related. In that case, patients were admitted to the COVID floor of the institute, where the inpatient oncology team could safely administer chemotherapy and ensure there was no delay in care.

Although much of a patient's cancer care cannot be done virtually, the PCI team saw an opportunity to use virtual care to provide benefits to patients, especially those going through palliative treatment. By allowing patients to access social workers, dietitians and other caregivers from the comfort of home, they were given the freedom and peace-of-mind of being able to receive care in a way that was both safe and convenient.

But perhaps the biggest adjustment of all during the pandemic was one that nobody realized would be so taxing: a lack of visitors. Because most patients were no longer able to bring a loved one with them to their cancer treatment, they had no one to push their wheelchair down the hallway, help them use the restroom, get them a drink of water or provide emotional support during their six- or eight-hour infusion. It was up to the PCI team to fill that void — and they did it with grace and compassion.

Social workers visited patients who were feeling overwhelmed, team members created box lunches for sustenance, and co-workers went above and beyond to make their patients feel supported — even personally coordinating outside gatherings in which friends and family members could rally around their loved one as they celebrated the success of their final cancer treatment.

They also realized it was more important than ever to educate their patients and the community on measures they could take to stay healthy. PCI co-workers provided patients with information and best practices to stay safe when they were NOT in the hospital, as well as educated them on the safety of the COVID-19 vaccine and how they could encourage their loved ones to get vaccinated in order to protect others.

With a large percentage of the population not receiving regular cancer screenings pre-pandemic, plus many people cancelling screenings during COVID, PCI remains vigilant at educating and spreading the word on the importance of getting screened. As people become more comfortable going back into a hospital environment, team members hope to see an increased number of people getting screened so they have a chance at catching certain cancers earlier.

Although times have been challenging, PCI co-workers have never let the stress or uncertainty affect the amount of compassion they pour into their patients. They have been able to adapt, pivot and create a safe, stable environment in which patients can continue to get the treatment and support they depend on.

**I can't say enough good things about our entire team. Everyone stepped up and made it work.**



**Megan Smith**, Chief Operating Officer and Senior Vice President  
Parkview Cancer Institute

# Cancer program quality

## National Accreditation Program for Breast Centers

The Parkview Cancer Institute has been accredited by the National Accreditation Program for Breast Centers (NAPBC), a program administered by the American College of Surgeons, demonstrating its commitment to high quality care and outcomes for patients with diseases of the breast. Accreditation by the NAPBC is given to those centers that have voluntarily committed to providing the highest level of quality breast care and completed a rigorous evaluation process and review of their performance.

As a NAPBC-accredited center, PCI is committed to maintaining levels of excellence in the delivery of comprehensive, multidisciplinary patient-centered care for individuals with breast disease. Breast cancer patients receiving care at Parkview Cancer Institute have access to information on clinical trials and new treatments, genetic counseling, patient-centered services — including psychosocial support — and a survivorship care plan focused on improving quality of life for cancer survivors. By achieving this accreditation, PCI has demonstrated a firm commitment to offer every significant advantage in the battle against breast disease.



## Commission on Cancer

The Commission on Cancer's (CoC) Rapid Cancer Reporting System (RCRS) provides information to accredited cancer programs on their quality and accountability metrics as compared to national benchmarks. The CoC's Quality Integration Committee partners with internal and external specialized experts in the process of developing these quality measures.

The RCRS measures provide the Cancer Committee with the ability to evaluate the care provided at Parkview as compared to national best-practice standards, and to determine opportunities for improvement. These measures are meant to be used as an indicator of overall clinical practice and not for measurement of individual physician practice.

There are several types of measures approved by the CoC:

### Accountability

This type of measure has a high level of evidence that supports it, including numerous randomized control trials. These measures can be used for external reporting, payment incentive programs and selection of providers by consumers or health plans.

### Surveillance

This type of measure has limited evidence to support the measure, or it is used for informative purposes to an accredited program. It can be used to identify current trends in clinical care within the organization and help guide decision-making.

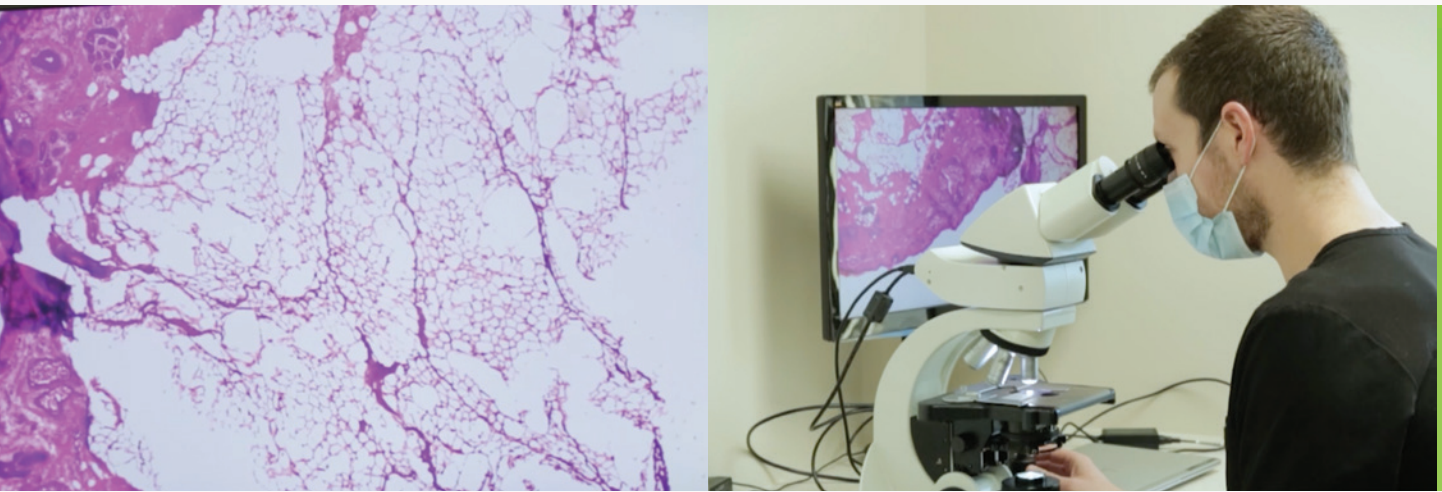
### Quality Improvement

This type of measure is supported by evidence from experimental studies, not randomized control trials. These measures are meant to be used for internal reports of performance within an organization.

In the chart below, we have included the most recent data (2021) from the Commission on Cancer for the Accountability and Quality Improvement measures where a national benchmark exists.

## Commission on Cancer Data from 2021

	Measure	CoC National Benchmark Rate	Parkview Performance Rate
Breast	Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer	95.16%	94.20%
Breast	Tamoxifen or third generation aromatase inhibitor is recommended or administered within 1 year (365 days) of diagnosis for women with AJCC T1cN0M0, or stage IB - III hormone receptor-positive breast cancer	100.00%	100.00%
Breast	Radiation therapy is recommended or administered following any mastectomy within 1 year (365 days) of diagnosis of breast cancer for women with ≥ 4 positive regional lymph nodes	85.71%	85.71%
Breast	Image or palpation-guided needle biopsy to the primary site is performed to establish diagnosis of breast cancer	96.44%	96.19%
Colon	At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer	100.00%	97.92%
Lung	Systemic chemotherapy is administered within 4 months preoperatively or day of surgery to 6 months postoperatively, or it is recommended for surgically resected cases with pathologic, lymph node-positive (pN1) and (pN2) NSCLC	100.00%	62.50%
Lung	Surgery is not the first course of treatment for cN2, M0 lung cases	100.00%	100.00%



## Treating skin cancer with Mohs: An innovative new service at PCI

For patients diagnosed with nonmelanoma skin cancer, there's good news for their recovery — Parkview Cancer Institute (PCI) now offers the most advanced, precise and effective treatment available. Mohs Micrographic Surgery is used to treat high-risk, aggressive nonmelanoma forms of skin cancer that are present on the head and neck. And, it offers the highest cure rates for these forms of cancer: a 99% cure rate for basal cell carcinoma (BCC) and a 97% cure rate for squamous cell carcinoma (SCC). As the two most common skin cancer types, this cure rate means Mohs has the ability to help millions of people quickly and effectively treat their cancer.

A less-invasive option to traditional surgery, Mohs allows a physician to remove skin cancer by taking a thin layer around the visible tumor. The physician can then check

this layer for any remaining cancer cells using a microscope and remove additional layers until no more cancer is found. Because it's less invasive and extremely precise, it allows the physician to preserve as much healthy nearby skin tissue as possible — which usually means fewer complications and less damage, especially in delicate areas such as the face and neck. Mohs is extremely effective at removing skin cancer that is likely to return, grow quickly or spread to other parts of the body.

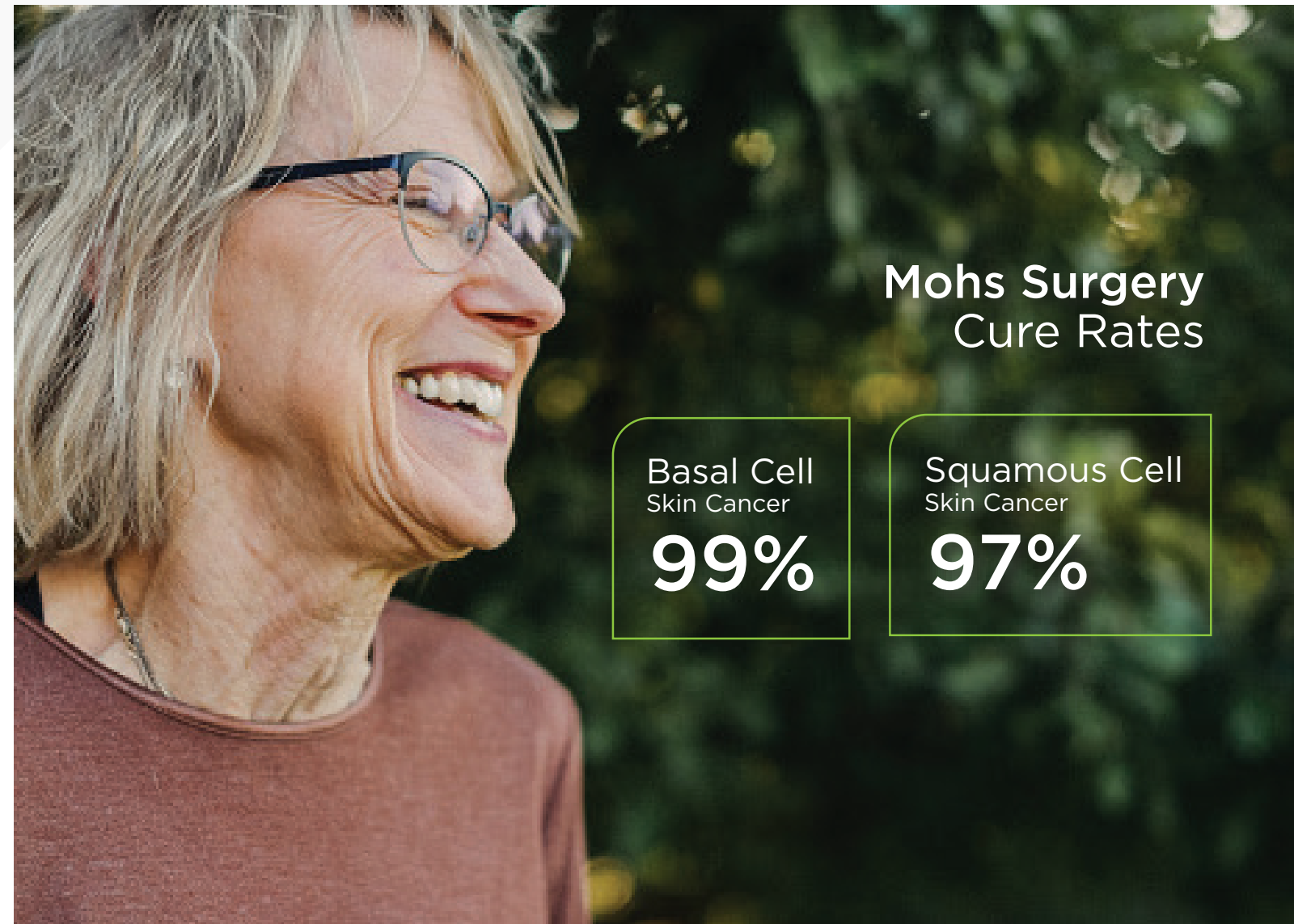
In most cases, a patient can expect a single-visit outpatient surgery with local anesthesia and lab work completed on-site. Robert Bednarek, MD, board-certified dermatologist at PCI, has special training using Mohs Surgery. He's able to remove cancerous tissue, read and analyze the pathology of the sample and perform the reconstructive

surgery to repair the wound, all in the same appointment. And, because Mohs allows Dr. Bednarek to see 100% of the surgical margins, vs. only 1% with traditional excision, he knows he is removing *all* of the cancerous cells. For patients, that means they can visit their provider with cancer and leave the very same day knowing they are now cancer free.

When you pair the nearly 100% cure rate of Mohs with the benefits of receiving regular skin checks from a dermatologist, patients have a higher chance than ever of identifying, treating and curing their skin cancer. And it's offered right here at Parkview Cancer Institute.

“The goal is to get rid of the skin cancer while saving as much healthy skin as possible.”

Robert Bednarek, MD  
Skin Care Team  
Parkview Cancer Institute



## Mohs Surgery Cure Rates

Basal Cell  
Skin Cancer  
**99%**

Squamous Cell  
Skin Cancer  
**97%**



## The area's only dedicated hematologists: A specialized team focused on blood conditions

Cancers found in the blood are unlike tumorous cancers in both the way the diagnosis begins as well as the treatment approach that is taken. Having a dedicated hematology team whose job it is to care for patients with these types of cancers is critical to ensuring their needs are being met. With this kind of expertise seen only at major academic centers, having this option available at Parkview Cancer Institute (PCI) is invaluable to fighting complex blood cancers right here in our region.

Because there are no standard screening methods for blood cancers, diseases like leukemia, lymphoma and myeloma, the three most common types of blood cancers, are often discovered during an annual check-up or visit to the emergency department. Typically, a standard blood test during one of these visits will provide, at the very least, a strong suspicion of an abnormality in the blood — and that's where a diagnosis usually begins. A patient will then be seen by a hematology team

member at PCI, where they will go through further testing to arrive at a definitive diagnosis.

Every patient's case is then presented at a weekly Tumor Board conference, where it is discussed in-person by an entire team of experts. This allows everyone, including hematologists, radiologists, pathologists, surgeons and other support staff, to create a collaborative treatment plan that is tailored to that specific patient. For those facing a complex blood cancer diagnosis, this team-based, subspecialized approach gives them the confidence of knowing that their providers have seen their type of cancer many times, not just once or twice a year like many general oncologists.

By getting multiple providers involved in the decision-making process from the very beginning, patients often feel as if

they don't need to get a second or third opinion — they've already gotten it. And, because patients are able to meet with their entire team all at once, they no longer need separate appointments with different specialists. This means the planning process is extremely expedited, and patients can begin care as quickly as possible.

In addition to blood cancers, the hematology care team at PCI is also uniquely equipped to care for other complex blood diseases like coagulation and platelet function disorders, thrombosis, anemia, hypercoagulable state, hemochromatosis and many others. This range of expertise means that whether a patient has a malignant or benign blood condition, they know the subspecialized care they need is readily available. And, they don't have to travel far to get it.

“Because we see so many cases of the same types of cancer, we're able to become experts at providing the best treatment.”



**Robert Manges, MD**  
Hematology Care Team  
Parkview Cancer Institute

### Non-cancerous Conditions

- Excessive bleeding
- Coagulation and platelet function disorders
- Arterial and venous thrombosis (blood clots)
- Hypercoagulable state
- Anemia and/or thrombocytopenia
- Abnormal white blood cell counts
- Bone marrow failure syndromes
- Hemochromatosis and iron overload

### Malignant Conditions

- Acute leukemia
- Hodgkin lymphoma
- Non-Hodgkin lymphoma
- Myelodysplastic syndrome
- Myeloproliferative neoplasms
- Multiple myeloma

## Treating the individual: The importance of subspecialized oncology

No two cancer patients or diagnoses are the same. And for patients at Parkview Cancer Institute (PCI), no two treatment plans are the same either — all thanks to a revolutionary, subspecialized approach to cancer care that's unlike anything in the region.

With cancer treatments and standards of care evolving at an incredible rate, the need to provide the most up-to-date and comprehensive care for cancer patients and their specific type of cancer has become more evident than ever. And that's where subspecialized oncology comes in. Instead of having a one-size-fits-all approach where cancers are treated similarly, PCI has an entire team of specialists who are experts in their specific field — allowing them to provide the best care for each patient.

From the minute a patient is given a cancer diagnosis, they are assigned a care team specific to their type of cancer and case. They may meet with a surgeon who has special training in their type of cancer, a medical oncologist who is specialized in the treatment of chemotherapy or targeted therapies to treat their cancer, and a radiation oncologist who, again, has special knowledge relevant to that type of cancer. Collectively, from initial diagnosis, the cancer-specific care team develops a plan on how/if each of these modalities can be used to treat the cancer, and then works together throughout the execution of the plan to ensure the best

outcome. And, with the entire team housed in one building, it makes coordination easy and convenient — giving the specialists opportunities to regularly communicate and discuss cases while allowing the patient to meet with their team at one appointment.

This comprehensive approach also helps ensure patients are getting everything they need to support their care journey. By looking at the whole person, the PCI team is able to focus on connecting patients and their families to the services that would benefit them the most. That may mean arranging transportation, offering support through food vouchers or gas cards, providing resources for wigs or at-home medical equipment, connecting them to dietitians and nutritionists, offering in-office counseling and providing nurse navigators to answer questions and ensure they are comfortable with their treatment.

By providing this kind of multidisciplinary, personalized approach, Parkview Cancer Institute is paving the way for cancer care right here in northeast Indiana. For patients to be able to have the specialized care they need without having to travel, PCI is not only helping them save time and money, but also relieving a layer of stress and anxiety that comes with having to be away from home for treatment. At a difficult time, the comfort of knowing they will be cared for by an expert team that has all the best resources and



partnerships in place to treat their cancer and get them on the path to better health is invaluable — and it's practically in their back yards.

Recognizing that patients and families are unique individuals who have lives outside of their treatment is what drives the PCI team to give them the best care they can. It's a dedication to integrating treatment into their lives, not having it overtake their lives. And that's what specialized oncology is all about.

**“It's not just about medical care — it's about supportive care to make the cancer journey a little bit easier.”**

**Ellen Szwed, MD**  
Breast Care Team  
Parkview Cancer Institute

# Patient Care Model



## A team of cancer specialists, just for you.

At Parkview, we have specialized teams for every type of major cancer we treat — from breast to lung to lower GI.

\* One of ten specialized cancer teams available at Parkview.

## Tumor site team metrics

Parkview Cancer Institute (PCI) has developed tumor site team metrics to help monitor and decrease the amount of time patients have to wait prior to the development of their treatment plan and give them, as well as their other providers, a clear definition of their specific cancer and how clinically severe the cancer is. We also aim to ensure that every patient is connected and has access to the navigation program and supportive services offered by Parkview Cancer Institute.

The speed and transparency that PCI offers differentiates us from other community hospitals — and even academic centers. The metrics were designed to set the highest standards and expectations to ensure that PCI upholds and enhances the expectations of providing a personalized patient journey, quality and safety, and growth.

### The metrics in this area include:

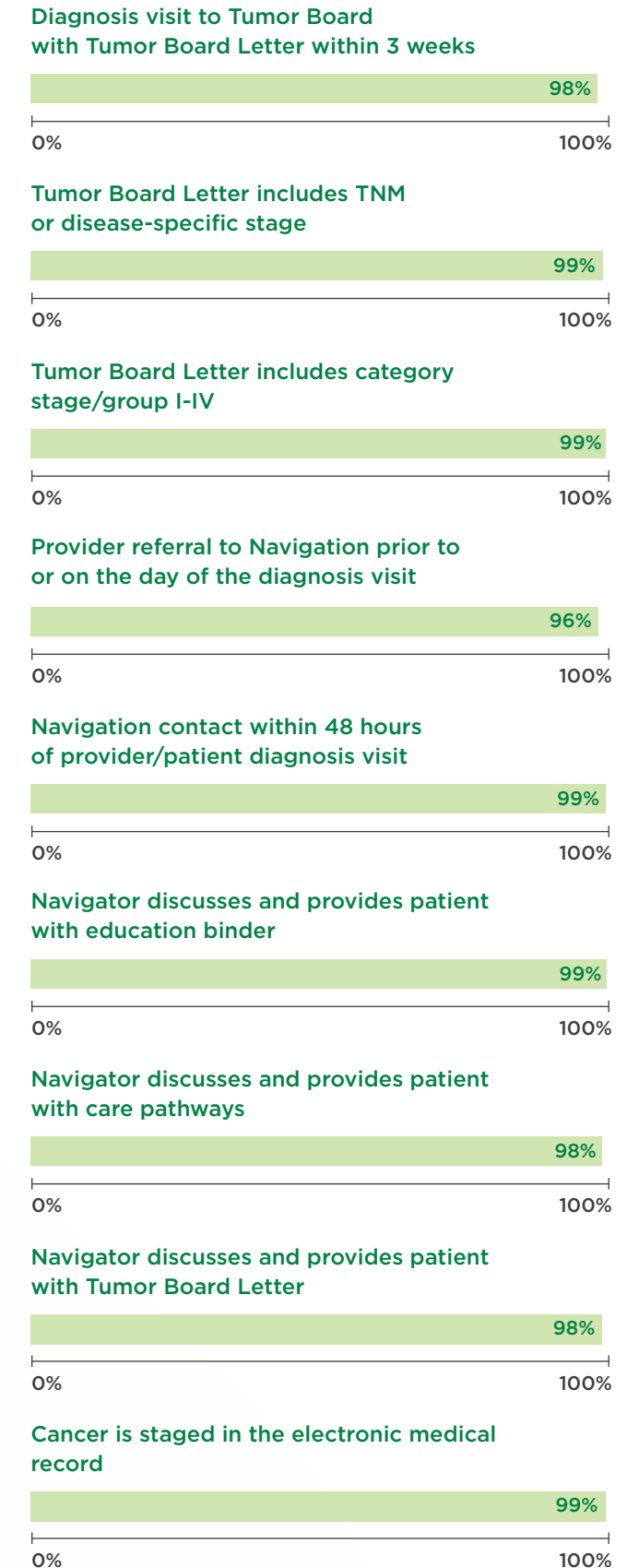
- The time between a patient receiving a cancer diagnosis at an office visit and the completion of a multidisciplinary review of the case at site-specific Tumor Board.
- The Tumor Board Letter including TNM or disease-specific stage.
- The Tumor Board Letter including category stage (Stage I-IV).
- Provider placing referral to Navigation on or before the day of the cancer diagnosis office visit.

PCI asked the tumor site teams to work toward a goal to update the clinical, post treatment and pathological cancer stages into the EMR as patients move through their cancer journey. This will facilitate improved downstream analytics and allow us to better implement interventions, track quality and clinical outcomes, and recruit to research studies in the future.

Our commitment to quality is reflected in upholding the expectations of the metrics.

Neil Sharma, MD, President  
Parkview Cancer Institute

## 2021 PCI tumor site team metrics





## Cancer care teams: Truly patient-centered care

The care teams at Parkview Cancer Institute are made up of multidisciplinary cancer specialists who focus exclusively on a particular type of cancer — making them experts at providing comprehensive, collaborative care for each individual patient.

Many cancer  
experts,  
one shared  
goal.



### Benign & Malignant Hematology Care Team

Consisting of the area's only dedicated hematologists, the Hematology Care Team provides expertise in the treatment of complex blood diseases including malignant conditions, like leukemia, lymphoma and myeloma, as well as benign conditions, like platelet function disorders, anemia, thrombosis and more.

### Breast Care Team

With breast surgeons, breast-specific medical oncologists, nurse practitioners, nurse navigators and holistic care providers, the Breast Care Team leads the battle against breast cancer — providing the latest in cancer-fighting expertise, technology and clinical research trials for every type of breast cancer.

### Gastrointestinal (GI) Care Team

Our expert GI Care Team focuses on cancers that affect the digestive system, like the stomach and small intestine. With unmatched GI cancer expertise and advanced minimally invasive surgical options not offered at other cancer centers, this care team is uniquely equipped to care for aggressive GI cancers.

### Genitourinary Care Team

The Genitourinary Care Team is dedicated to treating prostate, bladder, kidney, testicular and other urologic cancers — utilizing the most innovative treatments like advanced surgical and radiation techniques, chemotherapy and precision medicine to care for complex urologic conditions.

### Gynecologic Care Team

Led by board-certified gynecologic oncology specialists, this care team is focused exclusively on battling gynecologic cancers. From diagnosis and treatment to genetic counseling, nutrition and beyond, the Gynecologic Care Team provides expert care for cervical, endometrial, ovarian, uterine, vaginal and other similar cancers.

### Head & Neck Care Team

Cancers that develop in the throat, larynx, nose, sinuses and oral cavity are complex and require a specialized team dedicated to treating these cancers. The Head & Neck Care Team is trained to provide expert oncology treatment as well as palliative care, nutrition education and supportive services to help with the unique side effects of treatment.

### High-Risk Clinic Care Team

At the High-Risk Clinic, our care team specializes in offering education and surveillance for those who are at a higher-than-average risk of developing cancer. The specialized team, which includes physicians, genetic counselors, dietitians and more, offers risk reduction strategies as well as screening plans designed to catch cancers early.

### Integrative & Palliative Care Team

The region's only palliative oncologists are a part of our Integrative & Palliative Care Team. These unique experts work with a patient's care team to ensure a comprehensive and supportive approach to the treatment plan — providing care that is focused on quality of life, including symptom control and improved physical and mental health.

### Lung Care Team

Because lung cancer is one of the most common cancers found in men and women, it's important that the Lung Care Team at PCI includes lung cancer specialists across many service areas who focus exclusively on thoracic cancers and treat them every day. This level of dedicated expertise is unmatched in the region.

### Orthopedic Care Team

PCI is home to the area's only team of experts dedicated to the treatment of patients with sarcoma and musculoskeletal tumors. These rare and aggressive cancers that arise in muscle, fat, nerves and bones are treated by our Orthopedic Care Team utilizing contemporary techniques and advanced technologies.

### Skin Care Team

The Skin Care Team is made up of experts in the evaluation and treatment of skin cancers and precancerous lesions including lymphoma, melanoma, carcinoma and more. From minimally invasive treatment options like Mohs Micrographic Surgery to aggressive cancer-fighting therapies, our team aims to make skin cancer treatment as effective and comfortable as possible.

### Survivorship Clinic Care Team

The care team at PCI's Survivorship Clinic includes experts who offer surveillance, support and education to patients following cancer treatment. The specialty clinic is staffed by physicians and other providers who help manage side effects, provide education on risk reduction for recurrence, develop individual wellness plans and more.

# Beyond oncology: A holistic approach to cancer care

Parkview Cancer Institute understands that a cancer diagnosis is life changing. That's why we are there for our patients beyond treatment, helping guide them through the mental, emotional and physical challenges incurred before, during and long after active cancer treatment. And, we are committed to helping our patients navigate all aspects of their well-being, not just clinical care. From prevention services to diagnosis, treatment and survivorship, we offer a wide range of care not seen outside of larger institutions — all right here in a single location, with our patients at the center.

## High Risk and Cancer Risk Reduction Clinic

At Parkview Cancer Institute, we believe complete cancer care extends beyond fighting cancer and begins in cancer prevention. Our specialized high-risk clinic offers education and surveillance for those who are at a higher-than-average risk of developing cancer. The High Risk and Cancer Risk Reduction Program is comprised of a dedicated, multidisciplinary team focused solely on those with an increased cancer risk. From risk-reduction strategies to screening and surveillance plans designed to catch cancers early, this specialized team helps patients make informed health and well-being decisions in order to help them in the future. At the High Risk and Cancer Risk Reduction Clinic, patients are able to complete cancer risk assessments and receive genetic counseling and testing when appropriate. Our team also helps coordinate and communicate with each patient's primary care provider while developing personalized screening plans. Our unique approach to complete cancer care allows us to provide personalized attention for those with higher risk of developing cancer — with the goal of preventing cancer if possible and catching it early, when it is more easily treated, if it does develop.

## Palliative Oncology

The Integrative and Palliative Care Team at the Parkview Cancer Institute is a specialized medical care team for people living with cancer. We realize that comfort care plays a large role in cancer care due to both the physical and emotional effects of cancer, which is why we have the only palliative oncologists in the region. Parkview Cancer Institute is committed to holistically treating the needs of our patients while also treating their specific disease. The Integrative and Palliative Care Team's focus is improving the quality of life for our patients through providing relief from symptoms, pain and the stress of cancer. Our experts in palliative care help foster discussions about treatment choices, including cancer treatment and management of symptoms, and also help our patients with guidance

and support for difficult or complex medical decisions. By assisting with discussions concerning goals of care and advance directives, we are able to prevent or ease discomfort and offer compassionate support for our patients and their families.

## Nurse Navigators

Every patient at the Parkview Cancer Institute is assigned a patient navigator. These registered nurses are specially trained in holistic care and support services and act as the primary point of contact for the patient. A patient navigator's sole focus is helping each patient navigate their cancer care journey. Our patient navigators are one of the first people to connect with a patient and their family following diagnosis. They help patients understand their diagnosis and treatment options and support them during what can be an overwhelming and emotional time. Our patient navigators are there to assist our patients with anything they might need, from coordinating care appointments to arranging transportation to helping with insurance questions and more.

## Financial Navigators

A cancer diagnosis touches all aspects of a patient's life, including their finances. At PCI, we offer financial navigators who help break down the financial barriers to care for patients who need it. They help with medical bills and make personalized recommendations that may help to reduce medical expenses. By listening to our patients as they explain their current insurance coverage status and the financial concerns they are experiencing, our team of financial navigators is able to help develop a plan to relieve the financial burden of cancer treatment.

## Social Workers

We understand that living with a cancer diagnosis can be overwhelming and distressing for our patients. We want to ensure that their thoughts and feelings

are acknowledged and supported. At Parkview Cancer Institute, we have social workers who are available to counsel and support our patients and loved ones from diagnosis through treatment and into survivorship. Our social workers help patients in a variety of ways including reducing stress through various relaxation skills and exercises, managing day-to-day living concerns and communicating patient needs to treatment providers and family members. Our social workers can also help make referrals for long-term counseling for patients and their families, if requested.

## Chaplaincy

The chaplains at Parkview are an important part of the healthcare team. They are dedicated to helping patients and their families cope with the spiritual and emotional challenges that often accompany illness, recovery or grief. Available 24/7, our chaplains provide spiritual support, assistance with spiritual requests and counseling on advance directives to our patients.

## Specialized Pharmacy

To make cancer treatment as seamless and convenient as possible, Parkview Cancer Institute has a specialized pharmacy where our patients can receive their necessary medication. Our pharmacists work in collaboration with the patient's care team to monitor each patient's treatment and lab results and can adjust dosages when necessary. By offering this at Parkview Cancer Institute, we help to minimize some of the stress our patients go through during treatment.

## Onsite Diagnostics

We know that early diagnosis of cancer is the best way to ensure long-term survivorship. That's why Parkview has invested in diagnostic testing technology that delivers results faster, so patients can get the treatment they need earlier than ever before. We offer onsite state-of-the-art diagnostic procedures at the Parkview Cancer Institute including endoscopy; diagnostic imaging, including magnetic resonance imaging, CT scans, PET and ultrasound; nuclear medicine scans/applications; biopsy/fine needle aspiration; and mammography and advanced breast biopsy instrumentation. Having all of these diagnostic services onsite allows us to make the process much more seamless for our patients.

## Concierge Team

The Parkview Cancer Institute prides itself on creating an atmosphere of hope and support for everyone who enters the building — and our concierge team members help create that environment. Members of the PCI concierge team greet patients and families in the lobby every time they enter the building. They personify the culture of PCI and set the tone for each patient visit.

By welcoming patients as they enter and personally escorting those who are new to the building or unsure of where to go, the concierge team can help put patients and their families at ease.

## Nutrition Counseling

Because nutrition plays an important role in the fight against cancer, we make a special effort to provide resources for good nutrition to people receiving treatment from cancer. At the Parkview Cancer Institute, specialized oncology registered dietitians are part of every patient's care team to assess their personal nutritional needs. With nutritional counseling, our dietitians develop detailed dietary plans to support each patient's medical treatment.

## The Wig Boutique

Parkview Cancer Institute is home to The Wig Boutique, a warm and welcoming place where patients can find products and services to enhance their self-image and well-being, including a selection of wigs, hats and scarves for those who have lost their hair during cancer treatment. This specialty shop, located within Parkview Cancer Institute, is made possible thanks to donations made to the Parkview Foundation and is staffed by community volunteers.

## Cancer Support Group

Although every cancer patient's journey is unique, many cancer patients face a similar set of challenges — and talking with others going through the same thing can be helpful. The Cancer Support Group at Parkview Cancer Institute was developed to provide a space for patients and family members to discuss their journeys, feelings and concerns in a supportive atmosphere. The Cancer Support Group is led by PCI support team members and is open to anyone whose life has been touched by cancer, including current and former patients and those caring for someone with a cancer diagnosis.

## Survivorship Clinic

The cancer journey does not end when a patient's cancer is cured. Cancer survivors face a lifelong impact well after treatment is completed, including risk of other cancers and health issues. PCI realizes the importance of providing survivor-specific care for our patients. At the Survivorship Clinic we ensure that even after treatment is over, our patients have the resources they need for the journey ahead. This specialty clinic is part of a patient's continuum of care at PCI and is staffed by physicians and advanced practice providers who are specialized in treating those who have completed cancer treatment.

## Putting prevention at the forefront: Early detection at PCI's High-Risk Clinic

Most people are aware that early detection of cancer is key to being able to effectively treat the disease. But, besides getting regular cancer screenings, what else can be done to identify and ultimately reduce the risk of getting certain types of cancers? This is the focus for the High Risk and Cancer Risk Reduction Program, where the goal is to identify patients in our community who are at higher-than-average risk of developing cancer.

Many types of cancer, including breast, ovarian and colon, are genetically related.

That means that people with a family history of those types of cancers are much more likely to also be diagnosed. But, that also means that through simple testing, the High-Risk Clinic team, which consists of physicians, nurse practitioners and certified genetic counselors, can identify a person's risk of developing cancer based on their genetic predisposition — and can then take the appropriate steps to reduce that risk or identify any cancer at its earliest stages.

Catching cancer early not only gives patients a better chance of being cured of

the cancer, but also of being cured in a way that is not otherwise debilitating, such as with disfiguring surgery or the stresses that come with radiation and chemotherapy. At PCI's High-Risk Clinic, being able to catch a cancer early enough that they can use minor intervention is the ultimate goal. Or, better yet, discovering pre-cancerous tissues and eliminating the risk *before* it becomes cancer.

Patients who are at high-risk are very seldom at high-risk for only one type of cancer. This often means the patient has to see three or four different specialists every year to have all of the screenings and assessments they need. Because this is mentally and physically taxing, it often leads to medical screening fatigue where people aren't attending all of their appointments or keeping track of their care plans. And that's one of the things PCI's High-Risk Clinic is working to combat.

Once a patient is identified as being high-risk, the clinic's team can get that patient on an enhanced screening plan that may include colonoscopies, mammograms, MRIs and other tests — all in one centralized location. The team keeps track of what the patient has completed and what they need so the patient doesn't have to worry about the details or coordinating their own care. And, if a cancer is identified during any of the screenings,

the team can then immediately get that patient transferred over to the appropriate cancer care team at Parkview Cancer Institute to help ensure they're receiving the best treatment plan possible.

So, who's most at-risk? PCI estimates that at least 4,000 - 5,000 people in the greater Fort Wayne area carry a predisposition to some type of cancer. It's also estimated that another 40,000 people have a family history of cancer that's significant enough to warrant being tested. And, for the thousands of people in our community who are struggling with obesity and insulin resistance, their risk for certain types of cancer is doubled — making them perfect candidates for risk-assessment as well as weight management intervention here at Parkview.

Having this type of offering readily available in our region is an incredible achievement. Clinics like the High-Risk Clinic are usually only found in very large university medical centers because community health systems do not often invest in this type of cutting-edge technology. It's a truly special opportunity that is making it easier and more convenient for everyone in our community to identify and ultimately mitigate their risk of cancer.

“Ultimately, preventing cancer is the goal. We're honored to be able to do that for our community.”



Charles Pattan, MD  
High-Risk Clinic Care Team  
Parkview Cancer Institute

## Going beyond the treatment: The cancer journey continues at PCI's Survivorship Clinic

From the moment a patient hears the word “cancer,” the entire process that follows can feel like a whirlwind. All of a sudden, they’re experiencing biopsies, scans, meetings with various specialists, surgery, chemo, radiation, hormone therapy — the list goes on. By the time a patient gets a scan that says they have no evidence of the disease left, they’re often still feeling overwhelmed and alone. For those patients, the Survivorship Clinic at Parkview Cancer Institute (PCI) has the care and support they need to navigate the next steps of their cancer journey.

A cancer diagnosis doesn’t just affect patients during treatment. It’s a life-defining event that continues to impact survivors long down the road. During cancer treatment, patients get a lot of support from their caregivers and loved ones. Once their treatments are done, however, that support may suddenly disappear, and some patients are left with physical, emotional or mental trauma of what they’ve been through as well as uncertainty about what’s ahead. That’s why it’s so important that the care team at the Survivorship Clinic is able to step in to offer the critical support patients need to move forward.

For them, it’s about addressing the needs of the *whole* person. In addition to assessing patients from a medical perspective for latent long-term side effects or preventive medicine options, the care team also focuses on psychosocial health to address issues like anxiety, depression, survivorship guilt and body image issues for patients who had disfiguring surgeries. For other patients, the focus may be on helping them reach their overall wellness goals by connecting them to resources to support better nutrition, physical activity, weight management or breaking substance abuse habits — whatever will get them on the path to healing the mind, body and spirit.



Our  
family  
caring for  
yours.

Parkview Cancer Institute’s Survivorship Clinic wasn’t designed to be a “quick fix” for patients following completion of their cancer treatment. Instead, it acts as a continuity clinic where patients can get established with care immediately following treatment and then follow-up with the team yearly to address new concerns or discuss updates and guidelines that may have changed. The team educates patients on how to reduce their risk of recurring cancer, creates screening plans for other possible cancers and stays up-to-date on medical history to keep track of possible genetic risks. It’s this long-term commitment to their patients that truly makes a difference in helping them feel confident that their team is focused on their health for the long-haul.

With over 17 million Americans classified as cancer survivors, and an increasing number of people surviving and living longer with cancer thanks to advancing medical treatments, the need for survivorship care specialists in communities across the U.S. is growing. However, places like the Survivorship Clinic are still not commonplace at many cancer centers. And that means most patients aren’t provided with a dedicated place to talk about themselves and how they’re coping, not just about their cancer diagnosis, which we know is a critical part of the healing process.

Thankfully, here at the Parkview Cancer Institute, cancer patients are offered care and support during the entire cancer journey. They have an oncology team that is going to focus on making sure their cancer is gone and, thanks to the Survivorship Clinic, they also have a dedicated team whose goal is to make sure they can pick up the pieces of themselves again and put them back together to complete the picture — one of hope for what’s to come in their cancer-free futures.

“Cancer patients are left with scars, both physical and mental. It’s our job to help them find the healing they need.”



**Joseph McCollom, DO**  
Director, Integrative and Palliative Oncology  
Parkview Cancer Institute

# 2019 total cancer cases Parkview Hospital

The table represents the total number of cancer cases diagnosed and/or treated at Parkview Hospital in 2019. The table is categorized by primary cancer site and stage (extent of disease at diagnosis). Sites bolded in green type are Parkview's top six sites for 2019.

Anatomic Site	STAGE							Total	% Total	
	0	I	II	III	IV	NA	UNK			
<b>HEAD AND NECK</b>										
Lip	0	0	0	0	0	0	0	0	0	0.00
Tongue	1	8	5	7	6	0	0	27	0.86	
Salivary Gland	0	3	1	1	1	0	1	7	0.22	
Floor of Mouth	0	2	1	0	3	0	0	6	0.19	
Gum and Other Mouth	0	2	2	2	4	0	0	10	0.32	
Nasopharynx	0	0	0	0	0	0	0	0	0.00	
Tonsil	0	4	5	2	4	1	0	16	0.51	
Oropharynx	0	0	1	0	1	1	1	4	0.13	
Hypopharynx	0	1	1	0	1	0	1	4	0.13	
Other Oral Cavity and Pharynx	0	0	0	0	0	1	0	1	0.03	
<b>DIGESTIVE SYSTEM</b>										
Esophagus	1	8	1	10	25	7	0	52	1.65	
Stomach	3	12	6	6	10	0	1	38	1.21	
Small Intestine	0	4	0	5	2	0	1	12	0.38	
<b>Colon</b>	<b>10</b>	<b>33</b>	<b>46</b>	<b>51</b>	<b>34</b>	<b>2</b>	<b>11</b>	<b>187</b>	<b>5.95</b>	
Rectosigmoid Junction	0	1	0	2	4	0	0	7	0.22	
Rectum	3	13	6	25	15	2	6	70	2.23	
Anus, Anal Canal and Anorectum	4	2	4	4	0	0	1	15	0.48	
Liver	0	3	3	6	5	6	12	35	1.11	
Intrahepatic Bile Duct	0	3	0	2	2	0	2	9	0.29	
Gallbladder	0	0	0	1	2	0	0	3	0.10	
Other Biliary	0	5	2	4	1	1	0	13	0.41	
Pancreas	0	36	21	5	49	1	1	113	3.60	
Retroperitoneum	0	0	0	2	0	0	0	2	0.06	
Peritoneum, Omentum and Mesentery	0	0	0	4	2	0	0	6	0.19	
Other Digestive Organs	0	0	0	0	0	5	0	5	0.16	
<b>RESPIRATORY SYSTEM</b>										
Nose, Nasal Cavity and Middle Ear	0	0	1	0	0	0	0	1	0.03	
Larynx	0	4	3	3	11	1	3	25	0.80	
Lung, Bronchus - Small Cell	2	2	2	13	40	0	4	63	2.01	
<b>Lung, Bronchus - Non-Small Cell</b>	<b>1</b>	<b>127</b>	<b>29</b>	<b>60</b>	<b>119</b>	<b>16</b>	<b>5</b>	<b>357</b>	<b>11.36</b>	
Lung, Bronchus - Other Types	0	2	0	0	10	2	2	16	0.51	
Pleura	0	0	0	0	0	0	0	0	0.00	
Trachea, Mediastinum, Other Respir.	0	0	0	0	0	0	0	0	0.00	
<b>SARCOMA</b>										
Bone and Soft Tissue	0	4	2	6	1	7	0	20	0.63	
<b>SKIN EXCLUDING BASAL AND SQUAMOUS</b>										
<b>Melanoma - Skin</b>	<b>78</b>	<b>97</b>	<b>28</b>	<b>13</b>	<b>15</b>	<b>0</b>	<b>1</b>	<b>232</b>	<b>7.38</b>	
Other Rare Skin Types	0	0	1	0	1	1	0	3	0.10	
<b>BREAST</b>										
<b>Breast</b>	<b>87</b>	<b>293</b>	<b>62</b>	<b>25</b>	<b>38</b>	<b>10</b>	<b>3</b>	<b>518</b>	<b>16.49</b>	

Anatomic Site	STAGE							Total	% Total
	0	I	II	III	IV	NA	UNK		
<b>FEMALE GENITAL SYSTEM</b>									
Cervix	0	13	5	11	6	0	0	35	1.11
<b>Uterus</b>	<b>0</b>	<b>120</b>	<b>6</b>	<b>27</b>	<b>13</b>	<b>1</b>	<b>0</b>	<b>167</b>	<b>5.32</b>
Ovary	0	13	3	27	11	2	0	56	1.78
Vagina	0	0	1	0	0	0	0	1	0.03
Vulva	0	8	2	4	2	24	0	40	1.27
Other Female Genital Organs	0	1	3	12	7	0	1	24	0.76
<b>MALE GENITAL SYSTEM</b>									
<b>Prostate</b>	<b>0</b>	<b>29</b>	<b>145</b>	<b>68</b>	<b>26</b>	<b>0</b>	<b>1</b>	<b>269</b>	<b>8.56</b>
Testis	0	14	1	3	0	0	0	18	0.57
Penis	0	0	0	0	0	0	0	0	0.00
Other Male Genital Organs	0	0	0	0	0	0	0	0	0.00
<b>URINARY SYSTEM</b>									
Bladder	65	21	20	7	11	1	4	129	4.11
Kidney and Renal Pelvis	3	41	8	12	9	1	1	75	2.39
Ureter	1	0	0	0	0	0	0	1	0.03
Other Urinary Organs	0	0	0	0	0	0	0	0	0.00
<b>EYE AND ORBIT</b>									
Eye and Orbit	0	0	0	0	0	0	0	0	0.00
<b>BRAIN AND OTHER CNS</b>									
Brain	0	0	0	0	0	74	0	74	2.36
Other CNS	0	0	0	0	0	0	0	0	0.00
<b>ENDOCRINE SYSTEM</b>									
Thyroid	0	35	10	0	1	0	2	48	1.53
Other Endocrine, Thymus	0	3	2	1	0	17	0	23	0.73
<b>LYMPHOMA</b>									
Hodgkin - Nodal	0	1	2	1	7	0	2	13	0.41
Hodgkin - Extranodal	0	0	0	0	0	0	0	0	0.00
NHL - Nodal	0	20	11	24	38	0	18	111	3.53
NHL - Extranodal	0	4	0	0	7	7	1	19	0.60
<b>MYELOMA</b>									
Myeloma	0	0	0	0	0	26	0	26	0.83
<b>LEUKEMIA</b>									
Acute Lymphocytic Leukemia	0	0	0	0	0	3	1	4	0.13
Chronic Lymphocytic Leukemia	0	4	2	2	3	0	13	24	0.76
Other Lymphocytic Leukemia	0	0	0	0	0	1	0	1	0.03
Acute Myeloid Leukemia	0	0	0	0	0	23	0	23	0.73
Acute Monocytic Leukemia	0	0	0	0	0	0	0	0	0.00
Chronic Myeloid Leukemia	0	0	0	0	0	7	0	7	0.22
Acute Myeloid / Monocytic Leukemia	0	0	0	0	0	0	0	0	0.00
Other Acute Leukemia	0	0	0	0	0	0	0	0	0.00
Aleukemic, Subleukemic and NOS	0	0	0	0	1	2	0	3	0.10
<b>MESOTHELIOMA/KAPOSI SARCOMA</b>									
Mesothelioma	0	1	0	0	1	4	1	7	0.22
Kaposi Sarcoma	0	0	0	0	0	0	0	0	0.00
<b>MISCELLANEOUS</b>									
Miscellaneous	0	0	0	0	0	67	0	67	2.13
<b>TOTALS</b>									
<b>TOTALS</b>	<b>259</b>	<b>997</b>	<b>454</b>	<b>458</b>	<b>549</b>	<b>324</b>	<b>101</b>	<b>3,142</b>	<b>100.00</b>

# 2020 total cancer cases Parkview Hospital

The table represents the total number of cancer cases diagnosed and/or treated at Parkview Hospital in 2020. The table is categorized by primary cancer site and stage (extent of disease at diagnosis). Sites bolded in green type are Parkview's top six sites for 2020.

Anatomic Site	STAGE							Total	% Total
	0	I	II	III	IV	NA	UNK		
<b>HEAD AND NECK</b>									
Lip	0	0	0	1	0	0	0	1	0.03
Tongue	0	10	7	4	5	0	0	26	0.84
Salivary Gland	0	3	0	0	3	0	0	6	0.19
Floor of Mouth	1	1	1	0	2	0	0	5	0.16
Gum and Other Mouth	0	0	0	0	1	0	0	1	0.03
Nasopharynx	0	1	1	1	2	0	0	5	0.16
Tonsil	0	7	3	4	0	0	0	14	0.45
Oropharynx	0	2	2	1	1	1	0	7	0.23
Hypopharynx	0	0	1	2	2	0	0	5	0.16
Other Oral Cavity and Pharynx	0	0	0	0	0	0	0	0	0.00
<b>DIGESTIVE SYSTEM</b>									
Esophagus	7	6	4	8	14	1	0	40	1.30
Stomach	1	12	3	4	3	0	1	24	0.78
Small Intestine	0	0	4	3	4	1	0	12	0.39
<b>Colon</b>	<b>5</b>	<b>31</b>	<b>37</b>	<b>27</b>	<b>26</b>	<b>1</b>	<b>7</b>	<b>134</b>	<b>4.35</b>
Rectosigmoid Junction	0	2	0	3	5	0	3	13	0.42
Rectum	3	15	6	28	15	0	4	71	2.30
Anus, Anal Canal and Anorectum	1	2	1	3	0	0	2	9	0.29
Liver	0	13	5	3	6	5	8	40	1.30
Intrahepatic Bile Duct	0	3	0	1	3	0	2	9	0.29
Gallbladder	0	1	1	2	1	0	1	6	0.19
Other Biliary	0	7	3	0	1	4	0	15	0.49
Pancreas	0	30	12	10	37	0	4	93	3.02
Retroperitoneum	0	0	0	1	0	1	1	3	0.10
Peritoneum, Omentum and Mesentery	0	0	0	3	0	0	0	3	0.10
Other Digestive Organs	0	0	0	0	0	1	0	1	0.03
<b>RESPIRATORY SYSTEM</b>									
Nose, Nasal Cavity and Middle Ear	0	0	1	0	0	0	0	1	0.03
Larynx	1	4	2	3	7	0	0	17	0.55
Lung, Bronchus - Small Cell	0	3	2	12	52	0	2	71	2.30
<b>Lung, Bronchus - Non-Small Cell</b>	<b>1</b>	<b>133</b>	<b>34</b>	<b>65</b>	<b>102</b>	<b>12</b>	<b>4</b>	<b>351</b>	<b>11.38</b>
Lung, Bronchus - Other Types	0	2	0	2	9	0	1	14	0.45
Pleura	0	0	0	0	0	0	0	0	0.00
Trachea, Mediastinum, Other Respir.	0	0	0	0	0	1	0	1	0.03
<b>SARCOMA</b>									
Bone and Soft Tissue	0	5	2	13	3	9	2	34	0.10
<b>SKIN EXCLUDING BASAL AND SQUAMOUS</b>									
<b>Melanoma - Skin</b>	<b>59</b>	<b>58</b>	<b>24</b>	<b>15</b>	<b>10</b>	<b>0</b>	<b>0</b>	<b>166</b>	<b>5.38</b>
Other Rare Skin Types	0	1	0	3	0	2	1	7	0.23
<b>BREAST</b>									
<b>Breast</b>	<b>81</b>	<b>306</b>	<b>59</b>	<b>33</b>	<b>38</b>	<b>10</b>	<b>5</b>	<b>532</b>	<b>17.25</b>

Anatomic Site	STAGE							Total	% Total
	0	I	II	III	IV	NA	UNK		
<b>FEMALE GENITAL SYSTEM</b>									
Cervix	0	25	6	5	13	0	0	49	1.59
<b>Uterus</b>	<b>0</b>	<b>116</b>	<b>3</b>	<b>26</b>	<b>19</b>	<b>1</b>	<b>1</b>	<b>166</b>	<b>5.38</b>
Ovary	0	12	2	14	11	2	1	42	1.36
Vagina	0	1	0	0	1	2	0	4	0.13
Vulva	0	17	2	9	0	24	0	52	1.69
Other Female Genital Organs	0	0	1	4	2	0	0	7	0.23
<b>MALE GENITAL SYSTEM</b>									
<b>Prostate</b>	<b>0</b>	<b>55</b>	<b>188</b>	<b>68</b>	<b>60</b>	<b>0</b>	<b>1</b>	<b>372</b>	<b>12.06</b>
Testis	0	7	2	4	0	0	0	13	0.42
Penis	1	0	1	0	0	0	0	2	0.06
Other Male Genital Organs	0	0	0	0	0	0	0	0	0.00
<b>URINARY SYSTEM</b>									
Bladder	56	30	14	7	6	1	0	114	3.70
Kidney and Renal Pelvis	2	42	7	19	22	0	0	92	2.98
Ureter	0	1	0	2	1	0	1	5	0.16
Other Urinary Organs	0	0	0	0	0	0	0	0	0.00
<b>EYE AND ORBIT</b>									
Eye and Orbit	0	0	0	0	0	0	0	0	0.00
<b>BRAIN AND OTHER CNS</b>									
Brain	0	0	0	0	0	61	0	61	1.98
Other CNS	0	0	0	0	0	0	0	0	0.00
<b>ENDOCRINE SYSTEM</b>									
Thyroid	0	25	6	0	1	0	4	36	1.17
Other Endocrine, Thymus	0	2	0	0	1	13	0	16	0.52
<b>LYMPHOMA</b>									
Hodgkin - Nodal	0	3	6	2	5	0	0	16	0.52
Hodgkin - Extranodal	0	0	0	0	0	0	0	0	0.00
NHL - Nodal	0	9	7	17	38	0	21	92	2.98
NHL - Extranodal	0	5	2	0	9	5	1	22	0.71
<b>MYELOMA</b>									
Myeloma	0	0	0	0	0	35	1	36	1.17
<b>LEUKEMIA</b>									
Acute Lymphocytic Leukemia	0	0	0	0	0	1	1	2	0.06
Chronic Lymphocytic Leukemia	0	1	2	1	5	0	21	30	0.97
Other Lymphocytic Leukemia	0	0	0	0	0	1	0	1	0.03
Acute Myeloid Leukemia	0	0	0	0	0	25	1	26	0.84
Acute Monocytic Leukemia	0	0	0	0	0	0	0	0	0.00
Chronic Myeloid Leukemia	0	0	0	0	0	7	1	8	0.26
Acute Myeloid / Monocytic Leukemia	0	0	0	0	0	0	0	0	0.00
Other Acute Leukemia	0	0	0	0	0	0	0	0	0.00
Aleukemic, Subleukemic and NOS	0	0	0	0	0	2	0	2	0.06
<b>MESOTHELIOMA/KAPOSI SARCOMA</b>									
Mesothelioma	0	0	0	0	2	3	0	5	0.16
Kaposi Sarcoma	0	0	0	0	0	0	0	0	0.00
<b>MISCELLANEOUS</b>									
Miscellaneous	0	0	0	0	0	75	1	76	2.46
<b>TOTALS</b>									
<b>TOTALS</b>	<b>219</b>	<b>1,009</b>	<b>464</b>	<b>433</b>	<b>548</b>	<b>307</b>	<b>104</b>	<b>3,084</b>	<b>100.00</b>



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