



## Licking Memorial Health Systems

1320 West Main Street  
Newark, OH 43055

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

You'll soon discover why Licking Memorial Hospital is measurably different ... for your health!

Visit us at [www.LMHealth.org](http://www.LMHealth.org)

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**THOMSON REUTERS**  
TOP HOSPITALS

NATIONAL  
1998, 1999, 2000,  
2001, 2002, 2003,  
2005, 2006,  
2007, 2008



# Quality Report Card

## Licking Memorial Health Systems

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### Health Tips – Tips for Getting a Mammogram

Here are some useful tips based on the American Cancer Society's recommendations to receive a quality mammogram:

- If it is not posted in a place you can see it, ask to see the FDA certificate that is issued to all facilities that offer mammograms.
- Use a facility that specializes in mammograms and performs many daily. (Licking Memorial Health Systems averages 75 per day.)
- If you are satisfied with the facility, go there on a regular basis so that your mammograms can be compared from year to year.
- If you are using a facility for the first time, bring a list of the places and dates of prior mammograms and breast procedures.
- If you have had mammograms at another facility, try to bring the records with you to the new facility for comparison.
- On the day of the exam, do not use deodorant or anti-perspirant.
- You may find it easier to wear a skirt or pants so that you will need to undress only from the waist up.
- If you are still having periods, schedule your mammogram when your breasts are not tender or swollen. Try to avoid the week just before your period.
- Always describe any breast symptoms or problems you are having to the technologist who is doing the mammogram. Describe any related medical history such as surgeries, hormone use, and any family history of breast cancer.
- Tell your radiology technologist if you are breast-feeding or if you think you might be pregnant.
- Call your doctor if you do not hear results within 10 days. Do not assume that your mammogram was normal.

# Cancer Care – How do we compare?

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

Check out  
our Quality  
Report Cards online  
at [www.LMHealth.org](http://www.LMHealth.org).

- 1** If you have a mammogram, you want to be confident that it is interpreted accurately. Specificity is a measure of the accuracy of mammography interpretation related to normal (negative) results. Sensitivity is a measure of the accuracy of mammography interpretation related to abnormal (positive) results.

	LMH 2006	LMH 2007	LMH 2008	Goal <sup>(1)</sup>
Specificity	98%	99%	99%	greater than 90%
Sensitivity	92%	96%	96%	greater than 85%

- 2** Sometimes a radiologist will recommend a biopsy after a mammogram is read. To be accredited for mammography, health care organizations are required to look at the number of cases recommended for biopsy that result in cancer diagnoses – called the positive predictive value. This helps monitor the accuracy of the radiology interpretations.

	LMH 2006	LMH 2007	LMH 2008	Goal <sup>(1)</sup>
Positive predictive value	30%	39%	28%	25% to 40%

- 3** LMH follows a rigorous five-step safety procedure to prevent chemotherapy medication errors. LMH administers approximately 4,200 doses of chemotherapy each year.

	LMH 2006	LMH 2007	LMH 2008	Goal
Number of chemotherapy medication errors	0	0	0	0

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

	LMH 2006	LMH 2007	LMH 2008	Goal
Cancer patients with follow-up	95%	94%	93%	greater than 90%

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

	LMH 2006	LMH 2007	LMH 2008	Goal
Newly diagnosed and/or treated patients in clinical trials	2.9%	2.6%	3.1%	greater than 2%

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

	LMHP 2006	LMHP 2007	LMHP 2008	National Average <sup>(2)</sup>
LMHP patients who received screening tests for:				
Breast cancer	79%	85%	84%	76%
Cervical cancer	76%	85%	85%	83%
Colorectal cancer	57%	61%	64%	42% <sup>(3)</sup>
Prostate cancer	74%	76%	77%	55%

**Data footnotes:** (1) Quality Determinates of Mammography, *Clinical Practice Guide #13, AHCPR Publication No. 95-0632*. (2) Centers for Disease Control and Prevention (CDC). Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2008. (3) The Behavioral Risk Factor Surveillance System (BRFSS) national average for adults aged 50 and over who have had a sigmoidoscopy or colonoscopy is 62.1 percent, while the average for those who have had an occult blood stool test is 20.9 percent. We compare ourselves to the average of the two national statistics, which is 42 percent.

# Patient Story – Becky Dunlap

Licking Valley students often did a double-take when they boarded bus #31 last winter. Sometimes, their driver, Becky Dunlap, would greet them at the door with jet black hair; other times, she sported bright red hair and a big smile. The younger elementary school students enjoyed their driver's playful sense of humor, but the older high school students understood that behind the comedy, Becky's wigs were disguising her chemotherapy-induced hair loss.



Strong support from Oncology nurse Theresa Davidson, L.P.N., (left) and Oncologist Kaye Linke, M.D., (right) helped to keep Becky Dunlap in high spirits as she received treatment for breast cancer throughout the spring and summer of 2009.

On December 22, 2008, Becky visited the new Women's Imaging Center at Licking Memorial Hospital (LMH) for her annual mammogram. The high-tech digital mammogram showed a suspicious area on her right breast, and Becky's physician, Elizabeth Koffler, M.D., insisted that 57-year-old Becky return for a repeat test on December 29. The second mammogram confirmed a very small mass, and Radiologist Joseph Fondriest, M.D., immediately performed an ultrasound-guided needle biopsy under a local anesthetic. "The lump was so small I could not feel it. If it had not been for the mammogram, I would not have found it," Becky said.

Becky was floored when she heard the diagnosis. "I learned that I had a very aggressive type of breast cancer," she said. "The diagnosis really took me for a loop, because we did not have a history of breast cancer in my family. Things began to happen very quickly at that point."

Becky consulted with Surgeon Larry Pasley, M.D., and Hematologist/Oncologist Kaye Linke, M.D., to discuss her options. "Dr. Pasley thought I was a good candidate for a lumpectomy. However, he was concerned about my emotional reaction if more extensive surgery would be necessary. He asked me how I would feel if I lost my breast. I knew they were going to do everything they could in the operating room, but that was still kind of a frightening thing – not knowing if I was going to have a lumpectomy or a full mastectomy. But you do what you have to do in order to survive," she said.

The surgical team was able to preserve the majority of Becky's right breast. They removed approximately one-third of the breast tissue and the neighboring lymph nodes. Becky stayed overnight at LMH for observation and then returned home to recuperate.

Several days later, Dr. Linke's oncology team assumed Becky's care. They implanted an infusion port on her chest to facilitate the chemotherapy treatments. Dr. Linke determined a customized mixture of anti-cancer agents to destroy any minute traces of cancerous cells that may have eluded surgical removal, and then the chemotherapy began. Dr. Linke explained that it was

important to begin treatment as soon as possible. "Fortunately, Becky's tumor was detected in its very early stages, and the surgery appeared to be quite successful. However, since this particular type of cancer is very aggressive, we wanted to treat it just as aggressively to be on the safe side. Becky is a fighter, and we wanted to give her every tool we have available to beat the disease." The initial chemotherapy sessions consisted of four treatments scheduled three weeks apart. The next stage of chemotherapy included 12

weekly sessions, to be followed by several weeks of radiation.

"Becky's story illustrates the importance of early breast cancer detection," Dr. Linke said. "Licking Memorial's digital mammography with computer-aided detection is able to find tumors before other standard types of mammograms, and often long before the patient can feel them. Because Becky's cancer was discovered early, she had more treatment options, along with a better prognosis."

Becky's strong "when the going gets tough" attitude kicked into full gear at home. She stayed active, even though she was fatigued on some days. "I have a pretty good family support system," she said. "My husband, David, was at the Hospital with me during the surgery, and my kids checked in on me. I was able to keep working. I'd miss one-half day for my chemotherapy and then all the next day, but that was mostly a precaution. My reflexes tended to be slow on the day after chemotherapy, and as a school bus driver, safety has to be the primary concern."

Even though Becky knew that hair loss would be a possible side effect of taking the potent chemotherapy drugs, she was not totally prepared for the change. She remembered, "At first, my hair started thinning a bit, but when I began the second round of chemotherapy, it was falling out quickly. That is when I decided to just go ahead and get my head shaved, and I ended up looking like my dad," she laughed.

Becky purchased three wigs, and treated her situation with amusement. She often switched wigs mid-day just to see the students' reactions. "The kids have been just wonderful," she said. "They have brought me scarves, bracelets and treats. The kids and their parents have been very understanding."

The American Cancer Society's patient navigator at LMH was able to steer Becky toward some resources for financial assistance and other information. A loving family environment at home also eased some of the difficult moments for Becky. "David had a hard time

adjusting to the cancer diagnosis at first, but he has been there for me. We have three grown children, Stephanie, Jim and Jon, and eight grandchildren. Some days just zap the energy out of me, but I do not want to give up anything. The kids help me pick beans in the garden because I tire easily in the sun. I have lots of things to do, but I just do them in stages. I have to keep moving!”

Becky already accomplished one thing she felt she needed to do as a mother. When she first learned she had cancer, she took her daughter, Stephanie, aside and reminded her that breast cancer tends to run in families. “I did not say

too much,” Becky recalled. “I just told her, ‘Do what you need to do.’ Within a month, she was in for a mammogram because she knew it was important to me.”

As Becky approached the end of her chemotherapy regimen, she reflected back on the whirlwind of events that began last December. Although the cancer diagnosis was an unexpected and distressing detour, she preferred to summarize that period of her life with humor, quipping, “I just tell people I gave up cancer for Lent.”

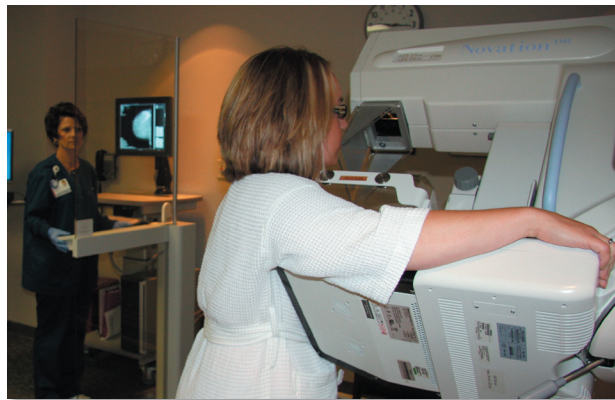
## Licking Memorial’s Digital Mammography Saves Lives

At some point, approximately one out of every eight American women will hear the chilling diagnosis, “You have breast cancer,” according to the American Cancer Society (ACS). Breast cancer is the second most common type of cancer for women, following skin cancer. The ACS reports that death rates resulting from breast cancer are declining, largely due to early detection. Licking Memorial Health Systems works diligently to educate women on the symptoms of breast cancer and the importance of early detection. When a malignant tumor is found in its early stages, the surgeon may be able to use a less invasive procedure, and the patient is more likely to have a good outcome.

“Breast cancer is so prevalent among American women, that it is almost certain every one of us will, at some point, know someone who is affected by the disease,” said Leslee Arthur, Director of Radiology Services at Licking Memorial Hospital (LMH). “We strongly urge women to follow the ACS’ recommendations to receive an annual screening mammogram, beginning at age 40. Usually, the entire mammogram takes only 20 minutes, and it can very likely save a woman’s life.”

Licking Memorial offers advanced digital mammography at two locations to make the procedure as accessible as possible. Leslee explained, “Women can choose to have their mammograms performed at the Licking Memorial Women’s Health office, located at 15 Messimer Drive, or the Women’s Imaging Center on the first floor of the Hospital. Both locations have a spa-like atmosphere with comfortable dressing rooms, a relaxing decor and plush, resort-type bath robes – details that were designed with a woman’s comfort in mind.”

LMH’s digital mammography allows for computer-aided detection (CAD), which is equivalent to a second



The Women’s Imaging Center at Licking Memorial Hospital offers state-of-the-art digital mammograms that use computer-assisted, full-field technology. These highly-accurate images are created in a relaxing, spa-like area that was designed for women’s comfort.

radiologist reading each mammogram and uses lower doses of radiation. “The sooner we detect a malignant tumor, the better the patient’s outcome will be,” Radiologist Joseph Fondriest, M.D., said. “This advanced technology can save lives.”

In recognition of National Mammography Day on Friday, October 16, LMHS and Tri-County Radiology, Inc. are offering 75 free screening mammograms to women who qualify under financial need guidelines. In order to receive a free mammogram at

LMH, a woman must be all of the following:

- Uninsured
- Low-income
- Referred by a physician
- Licking County resident
- Over the age of 50
- Without any symptoms of breast cancer
- Without any previous history of breast cancer
- Not a recipient of a free screening mammogram from LMH in 2008

The free tests apply only to screening mammograms. If the screening mammogram indicates the patient needs further testing, the follow-up testing will not be covered under the free program.

The free screening mammograms are available on Friday, October 16, at either the Women’s Imaging Center on the first floor of the Hospital, or at the Licking Memorial Women’s Health office, located at 15 Messimer Drive in Newark. To learn more about Licking Memorial’s free screening mammograms, women should contact their family physicians or gynecologists.