



**Licking Memorial
Health Systems**
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Newark, OH 43055

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*Please take a few minutes to
read this month's report on patient
care quality. You'll soon discover why
Licking Memorial Hospital is
measurably different for your health!*

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**Licking Memorial
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**Cancer
Care**

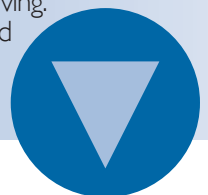
measurably different for your health!



HEALTH TIPS

More than a decade ago, the National Cancer Institute launched the Eat 5 A Day for Good Health program to move Americans closer to a cancer-fighting diet. Today the evidence is even stronger that a diet high in fruits and vegetables can help prevent cancer over a lifetime. Following are ways to help you get your 5 A Day:

- Don't forget your morning juice. Just 6 ounces of 100 percent fruit juice or low-sodium vegetable juice counts as a serving.
- Enjoy a single serving of prepackaged unsweetened applesauce or just five or six baby carrots.
- When you need a quick lunch, order a pita sandwich or wrap loaded with vegetables.



...a community report on patient care quality.

Cancer Care: How do we compare?

At Licking Memorial Hospital, 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.

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 2001	LMH 2002	LMH 2003	National ⁽¹⁾
Specificity	95%	95%	98%	greater than 90%
Sensitivity	100%	98%	97%	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 diagnosis – called the positive predictive value. This helps monitor the accuracy of the radiology interpretations.

	LMH 2001	LMH 2002	LMH 2003	National Recommended Range ⁽¹⁾
Positive Predictive Value	33%	38%	28%	25-40%

3 LMH follows a rigorous five-step safety procedure to prevent chemotherapy medication errors. LMH administers approximately 4500 doses of chemotherapy each year.

	LMH 2002	LMH 2003	LMH 1/04-6/04	LMH Goal
#of chemotherapy medication errors	0	0	0	0

4 For a community cancer care program to be approved by the American College of Surgeons Commission on Cancer, the hospital must hold multidisciplinary, patient-oriented treatment planning conferences at least monthly. The goal of this requirement is to increase the number of cases that are reviewed while patient care can still be influenced.

	LMH 2002	LMH 2003	LMH 1/04-6/04	Standard
#of meetings monthly	3	3	4	1
% of cases reviewed while patient care can still be influenced	94%	93%	99%	greater than 51%

5 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.

% of cancer patient follow-up			
LMH 2002	LMH 2003	LMH 1/04-6/04	Standard
93%	92%	86%	greater than 90%

6 Another requirement for cancer care program accreditation is that a hospital have a minimum percentage of its newly diagnosed and/or treated cancer patients entered in clinical trials.

% of newly diagnosed and/or treated patients in clinical trials			
LMH 2001	LMH 2002	LMH 2003	Standard
3.9%	4.0%	6.3%	greater than 2%

Data Footnotes:
(1) Quality Determinates of Mammography, Clinical Practice Guide #13, AHCPR Publication No. 95-0632.

Pleased with **Quality** of **Cancer Care** through **LMHS**

A PATIENT'S STORY

Sheila Hoey never expected that she would be affected personally by cancer, "I had no family history of breast cancer and had always been faithful about doing breast self-exams, and had no physical sign of problems," Sheila said. But in June 2000, she discovered a lump in her breast.

Sheila made an appointment with her family practitioner, Carl Waggoner, M.D., of Licking Memorial Family Practice – Doctors Park, Building 5, to have the lump examined. Sheila had a mammogram and ultrasound conducted at Licking Memorial Hospital (LMH). Both had inconclusive test results. However, the lump needed to be removed. The weeks that followed included a whirlwind of visits with oncologists, general surgeons, radiologists and more.

Sheila had a lumpectomy and 13 lymph nodes removed, and malignancies were found. Next, she was scheduled for chemotherapy. Jacqueline Jones, M.D.,

of Licking Memorial Oncology and Hematology, offered a research-based protocol chemotherapy program to Sheila for her cancer treatment. Sheila participated and followed the strict guidelines of the program. Following the chemotherapy, she was treated with radiation. Today she is cancer free and living life to the fullest.

"My treatment here has been wonderful," Sheila said of Licking Memorial Health Systems. "It's like one big family; everyone shows concern and takes excellent care of you." Dr. Jones was instrumental in her recovery. Sheila explained, "It was very soothing that Dr. Jones was available night or day for any questions or concerns that I had. She makes you feel like you are a good friend, not a patient."

Dr. Jones credits Sheila with having the determination to live her life as close to normal as possible, despite her illness. "She continued to work and keep active with daily activities, which is a huge motivator for



Sheila Hoey is happy that she was able to find high quality cancer care right here in Licking County, thanks to Licking Memorial Health Systems.

Sheila (above, right) is pictured with Jacqueline Jones, M.D., whom Sheila said has treated her like "a good friend, not a patient."

patients in treatment of this disease," Dr. Jones said. "I loved that she actively participated in her care and helped determine the best course of treatment for herself."

Sheila counts her blessings that she is a breast cancer survivor and that she had so many friends and family members to support her through her ordeal. She feels her care at Licking Memorial Health Systems was the best care she could have received. "I had friends ask why I didn't go to Columbus to receive treatment. But, why should I travel so far away from home when there is such an excellent facility here?"

Her friend, Bernie Neville, explained that the staff at

LMH worked with Sheila in scheduling her treatments, showed her kindness and compassion and were always pleasant to work with.

Sheila acknowledged that you never completely get over the concern that cancer may reappear, but you learn to not let it override your life. "Before the cancer, I worried if I would get cancer. Now I worry if it will come back," she said. "Now I look at how I can enrich my life as a result."

"The sun will come out tomorrow" is the theme that Sheila and her friend, Bernie, have adopted from this experience. They explain, "We live each day as though it will be our last."

American Cancer Society's Patient Navigator Program at Licking Memorial

The American Cancer Society's Patient Navigator Program at Licking Memorial Health Systems (LMHS) is a free service that helps cancer patients and their families "navigate" through the complex health care arena. Patient Navigator Katherine Schorr works out of the Cancer Resource Center at Licking Memorial Hospital. Schorr is one of 13 patient navigators in Ohio focusing on the special health care needs of individuals diagnosed with cancer.

Schorr clearly outlines and ensures access to all available services, provides information and works with a network of agencies to ease the burden for cancer patients and their families, and connects them to community resources.

During a typical workday, Schorr spends most of her time on the phone, seeking information and finding agencies, individuals or volunteers who might help meet social, financial, medical or emotional needs. For example, she can find funding sources for costs associated with cancer treatment, help patients locate wigs and research specific illnesses.

"Cancer patients are not alone," explained Schorr. "There are people and agencies that want to help. Patient navigators are here to make sure patients get connected with those resources."

Call Katherine Schorr at 740-348-1996 for more information about cancer care services offered through LMHS.

Early Detection is Key in Fight Against Cancer

THE NATION'S LEADING CANCER ORGANIZATIONS REPORT THAT AMERICANS' RISK OF GETTING AND DYING FROM CANCER CONTINUES TO DECLINE, AND SURVIVAL RATES FOR MANY CANCERS CONTINUE TO IMPROVE. MEDICAL EXPERTS ATTRIBUTE THE DECLINE IN CANCER DEATHS TO PROGRESS IN PREVENTION, EARLY DETECTION AND TREATMENT.

"Early cancer detection is essential to survival of the disease," said Patricia Banks-Chester, Patient Care Manager of Oncology at Licking Memorial Health Systems. "Statistics show that considerable gains have been made in reducing the mortality rate of cancer in recent years due to heightened awareness, increased screening frequency and aggressive, early treatment of the disease when it is diagnosed. These statistics are a reason for optimism, because they show that research is on the right track to reducing the burden of cancer in the United States."

According to the American Cancer Society (ACS), depending on a person's age and gender, their health check might include examining for cancers of the thyroid, oral cavity, skin, lymph nodes, testes, and ovaries, as well as for some non-malignant diseases.

Breast Cancer

Women should report any breast change promptly to their health care provider. Women at increased risk (including family history, genetic tendency, past breast cancer) should talk with their doctor about their screenings options. The ACS recommends the following for women:

- Regular breast self-exams (BSEs) beginning in their 20s.
- Yearly mammograms starting at age 40 and continuing for as long as a woman is in good health.
- Clinical breast exams (CBE) as part of a periodic health exam – about every three years for women in their 20s and 30s and every year for women 40 and older.

Colon and Rectal Cancer

Beginning at age 50, both men and women should be screened regularly for colon and rectal cancer. Talk to your physician about what screening method is best for you. Colorectal cancer screening should begin earlier for people with any of the following:

- a personal history of colorectal cancer or adenomatous polyps,
- a strong family history of colorectal cancer or polyps,
- a personal history of chronic inflammatory bowel disease, or
- a family history of a hereditary colorectal cancer syndrome

Cervical Cancer

Women should be screened regularly for cervical cancer by age 21 with a traditional Pap test annually or with a newer liquid-based Pap test every two years .

Women age 70 or older who have had three or more normal Pap tests in a row and no abnormal Pap test results in the last 10 years may choose to stop having cervical cancer screenings. Women with a history of cervical cancer, DES exposure before birth, HIV infection or a weakened immune system should continue to have screening as long as they are in good health. Women who have had a total hysterectomy may also choose to stop having cervical cancer screening, unless the surgery was done as a treatment for cervical cancer or precancer.

Endometrial (Uterine) Cancer

Women are strongly encouraged to report any unexpected bleeding or spotting to their doctor. Women with or at high risk for hereditary nonpolyposis colon cancer should be screened annually for endometrial cancer beginning at age 35.

Prostate Cancer

Both the prostate-specific antigen blood test and digital rectal examination should be offered annually, beginning at age 50, to men who have at least a 10-year life expectancy. Men at high risk (including African-American men and men with one or more immediate family members diagnosed at an early age) should begin testing by age 45.

Talk to your physician about what cancer screenings are right for you.