AURORA CANCER CARE NEVVS & VIEVVS

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Message from the Vice President, Aurora Cancer Care



James Weese, MD, FACS Vice President, Aurora Cancer Care

During my many years as a practicing surgical oncologist, patients often asked "Is there life after Cancer?" My answer was always a resounding "YES!" All patients regardless of diagnosis or stage can schedule an appointment for a "Survivorship Care Plan (SCP). Every patient who is treated for cancer with curative intent should receive an SCP. If your Medical Oncologist, Surgeon or Radiation Oncologist doesn't bring this up

with you be sure to ask them or their Advanced Practice Clinician (APC, Nurse Practitioner or Physician's Assistant) to make sure you get both a written plan and have a meeting with them outlining important information you should know.

The SCP should contain important information for you. This includes the type of cancer you had diagnosed, how it was diagnosed, what treatment was done (type of surgery and/or interventional radiology procedure, chemotherapy, hormonal therapy, immunotherapy, and/ or radiation therapy). You will receive the written plan at a meeting, usually with an APC, who will review this information and will also review what you need to be aware of in the future. This would include potential longterm risks or side effects. The APC will also go over a plan for future testing including blood tests and other studies that are recommended to keep you in the best shape and look for any evidence that the tumor may be coming back. They will tell you about the type of tests that will be ordered and the schedule that you should follow to make sure they are done on time. They will also discuss how long you should be followed with at least yearly visits to your physician. They will also talk with patients about

improving their overall wellness and may review diet, exercise and use of supplements. During the discussion if it seems helpful they may make referrals to a dietician or one of our excellent cancer rehab specialists. A copy of this report will also be sent to your primary care provider so they will be aware of this important information.



In addition to this detailed
Survivorship Care Plan our goal is for
you to return to a highly functional
and productive life.

If patients undergo cancer treatment for a disease that is likely to be cured it is very important to follow this plan carefully. It should give the patient the assurance that they are still being followed by their Cancer Care Team. Should the tumor return, it will also give the patient the best chance to have it detected early when it may still be treated with a curative intent.

In addition to this detailed Survivorship Care Plan our goal is for you to return to a highly functional and productive life. There are many Cancer Care Team programs to help you get back to normal. As an example, Team Phoenix will work with cancer patients to incorporate regular exercise in the survivorship years by initially training for a triathlon followed by a year round walk/run program. Participation in the triathlon training program and race are fully supervised by clinicians and led by professional triathlon coaches to assure the safety and success of every athlete. Through these group training programs cancer survivors are reconditioned; building strength, stamina and camaraderie with the goal of establishing lifelong fitness habits and friendships. Over 250 patients

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Did you know?

Annual Legacy of Excellence

he second annual Legacy of Excellence will support key health care initiatives at Aurora St. Luke's Medical Center that make it the world-class facility chosen by people all over the world.

The Legacy of Excellence will be held on Friday, May 3, 2019 from 6:00 p.m. to 11:00 p.m. at the Pavilion at Discovery World in Downtown Milwaukee. Tickets to the event are \$175 each or \$2,000 for a reserved table of 10.

Please reach out to Amanda Damm at 414-649-7122 or amanda.damm@aurora.org for more information.



Aurora Cancer Care Focuses on Tobacco-Free Initiatives in Milwaukee Communities

By Jennifer Jarvey Balistreri, MS, Community Impact Coordinator Senior, Aurora Cancer Care



Jennifer Jarvey Balistreri, MS Community Impact Coordinator Senior, Aurora Cancer Care

Aurora Cancer Care (ACC) Community Outreach has been collaborating with community-based organizations to promote smoke-free lifestyles throughout Milwaukee. This approach includes focusing on outreach and education regarding cancer risks associated with: Cigarette smoke, second-hand smoke, tobacco chew, e-cigarette products, flavored tobacco products, racial minority targeted tobacco marketing, and toxic waste associated with tobacco products. This effort has had various action steps within our communities throughout 2018 and 2019.

ACC is dedicated to join forces in efforts that promote health and wellness in diverse communities. In December 2018, ACC was honored with a 2018 Advocates of the Year award from the City

of Milwaukee Tobacco-Free Alliance to show appreciation for our tobacco-free efforts within the LGBTQ+ population. This award was in response to our onsite PrideFest cancer education engagement within the PrideFest Health and Wellness area, and our letter of support for Milwaukee PrideFest to decline big tobacco sponsorship dollars.

Throughout 2019, ACC will continue to advocate for tobacco-free wellness efforts, smoke-free spaces, and provide resources for cancer screening associated with tobacco products in our future outreach strategies.

Aurora Cancer Care's Nine Lung Cancer Screening Programs Earn Lung Cancer Alliance Certification for Use of Low-Dose CT for Early Detection of Lung Cancer

By Marija Bjegovich-Weidman, RN, BSN, MSN, CCAP, Manager Lung CT Screening Program, Aurora Cancer Care

ow-dose CT screening for lung cancer has shown to be the best proven method to detect lung cancer at an early stage in patients at high risk to develop lung cancer. Screening Centers of Excellence commit to provide clear information on the risks and benefits of CT screening, and to follow best practice standards outlined by professional bodies for screening



quality, radiation dose and diagnostic procedures.

Aurora Health Care hospitals earning the Screening Center of Excellence certification are: Aurora St. Luke's Medical Center, Aurora Medical Center Kenosha, Aurora Lakeland Medical Center, Aurora Medical Center Summit, Aurora Medical Center Grafton, Aurora Medical Center Oshkosh, Aurora Medical Center Manitowoc County, Aurora BayCare Medical Center and Aurora Sheboygan Memorial Medical Center.

"We are pleased that each of Aurora's low-dose CT screening programs earned this elite certification," said Dr. James Weese, vice president of Aurora Cancer Care program. "Aurora is dedicated to helping patients live well, and this screening is the best way to find lung cancer at a treatable stage."



LDCT Screening Performed at Aurora Health Care

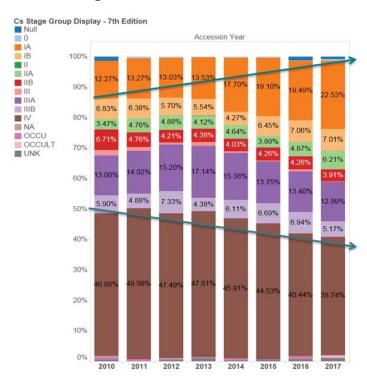
2016 1,849 screenings

2017 4,701 screenings 154% increase
 2018 7,154 screenings 52.5% increase

Aurora Cancer Care saw a 9% increase in Stages 0, I, IIA, and a 7.2% decrease in Stage IV lung cancer at time of diagnosis from 2014-2017 since implementing the lowdose CT lung screening program.

Cancer Detection Rates

Our cancer detection rates were 1.3% in 2016, 1.8% in 2017 and 1.3% for January-June 2018, which is in line with national averages.



Aurora Cancer Care saw a 9% increase in Stages O, I, IIA, and a 7.2% decrease in Stage IV lung cancer at time of diagnosis from 2014-2017 since implementing the low-dose CT lung screening program.

This program has led to many lives saved, and we are committed to continuing to screen for lung cancer in the way that offers our patients the best results. Earning the certification is a multi-disciplinary effort, including offering appropriate support, advocating for policy change and enhancing research surrounding lung cancer and lung cancer screening.

For more information feel free to also contact Marija Bjegovich-Weidman, Manager of the Lung Cancer Screening Program at marija.bjegovich-weidman@aurora.org.



Updates in NCORP

By Neha Glandt, Research Program Administrator, Aurora Research Institute

Expanding the Aurora NCORP

The Aurora Research Institute is in its fifth year as a National Cancer Institute's (NCI) Community Oncology Research Program (NCORP) grant recipient. We are one of 34 community sites nationally. Thomas Saphner, MD, FACP, and Michael Thompson, MD, PhD, FASCO, are the Aurora NCORP co-principal investigators.

Since the start of the grant in August 2014, the Aurora NCORP has dramatically increased the number of patients

participating in oncology trials at Aurora. Year four, which ended July 31, 2018, was a record-breaking year that exceeded the accrual goal set by the NCI. More than 330 patients participated in NCI trials, compared to just 84 patients enrolled during the year prior to the start of the grant.

Currently, the Aurora NCORP offers a wide variety of NCI-sponsored oncology trials throughout eastern Wisconsin. The newly merged Advocate Aurora Health will bring with it an expansion of the program to 10 Illinois-based Advocate Health locations, including two pediatric sites. The process of adding the sites to the Aurora NCORP will take several months.

At the end of August 2018, the Aurora NCORP applied for an additional six-year grant award. If awarded, it will extend the program to 2025. We will be notified if we are recipients of the new grant award in July 2019.

Currently, the Aurora NCORP offers a wide variety of NCI-sponsored oncology trials throughout eastern Wisconsin. The newly merged Advocate Aurora Health will bring with it an expansion of the program to 10 Illinois-based Advocate Health locations.

including two pediatric sites.

"There is a lot to be excited about as we expand the Aurora NCORP's reach into Illinois and the possibility of extending the life of the program another six years," said Dr. Tom Saphner, Aurora NCORP co-principal investigator. "It will ensure that we can provide more patients with quality oncology research trials in more places for a longer time."

Recent NCORP trials

In November 2018, the Aurora NCORP joined an NCI-funded clinical trial studying an intervention to improve smoking cessation among patients screened for lung cancer. The trial, "Implementation of Smoking Cessation Within NCI NCORP Community Sites," was developed by Wake Forest University Health Sciences. It is available at Aurora St. Luke's Medical Center.

The Aurora NCORP is working with Aurora Cancer

Care's lung cancer screening program to identify potential clinical trial participants from patients who receive low-dose computed tomography scanning of the chest to screen for early lung cancer. If you or someone you know may be interested in participating in the trial, contact Laura Kleber, research coordinator, at (414) 778-4383 or laura.kleber@aurora.org.

Dr. Mike Thompson, Aurora NCORP co-principal investigator, is the principal investigator for a multiple myeloma NCORP trial. "Daratumumab, Bortezomib, and Dexamethasone With

or Without Venetoclax in Treating Patients With Relapsed or Refractory Multiple Myeloma" was developed in conjunction with ECOG-ACRIN Cancer Research Group.

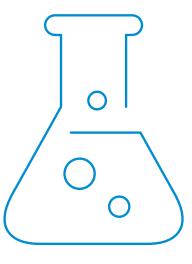
This will be Dr. Thompson's first time serving as the principal investigator for a national phase I/II trial, as well

as the first time an Aurora investigator has served as the national lead in an NCI trial. Dr. Thompson said that "serving as the principal investigator for this trial is scientifically rewarding and brings attention to the Aurora NCORP as the lead for a national study."

If you or someone you know is interested in participating in an

oncology clinical trial, speak with your cancer care provider, call us at (414) 302-2304 or send an email to ncorp@aurora.org. To learn more about the Aurora NCORP, visit aurora.org/ncorp.

The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.



Welcome New Cancer Care Providers



Steven Sperry, MD *Otolaryngology - Head & Neck Surgery*

Steven Sperry, MD, provides the best care and support possible for patients with head and neck diseases through education, care coordination and surgical procedures.

As a specialist in head & neck surgery, Dr. Sperry provides evaluation and management of cancers or tumors of the skin, sinuses, mouth, throat, voice

box, neck, salivary gland and thyroid gland.

He is skilled in head and neck oncologic surgery, regional rotational flaps and microvascular free flap tissue transfers for reconstruction in the head and neck. Additionally, Dr. Sperry has special interest in transoral robotic surgery (TORS), laser microsurgery, free flap reconstruction procedures including bone or soft-tissue, conservation laryngeal surgical procedures, salvage surgery following prior radiation and complex thyroid surgery.

Dr. Sperry earned his medical degree at Washington University in St. Louis in Missouri. He completed his residency in Otorhinolaryngology - Head & Neck Surgery at the University of Pennsylvania in Philadelphia and his Head & Neck Oncologic and Reconstructive Surgery Fellowship at the University of Iowa in Iowa City. He is board certified by the American Board of Otolaryngology.

In his free time, Dr. Sperry enjoys traveling, biking, hiking, outdoor activities, gardening and woodworking.



Steve Medlin, DO, FACP Hematology & Oncology

Steve Medlin, DO, FACP, delivers care based on a patient-centered model that relies on engaging the patient and family in every important aspect of treatment, including discussions of medical therapies and care locations. His holistic approach considers his patients' medical, social, economic, psychological and spiritual well-being. Dr. Medlin utilizes a multidisciplinary team of physicians, nurses, social

workers, cancer educators, insurance care managers and other specialists who work with patients to create a personalized care plan customized to their unique needs, personal goals and values. His treatments are backed by the latest discovery-driven medical concepts, research studies and clinical trials.

Dr. Medlin provides care to patients with hematologic malignancy such as acute and chronic leukemia, MDS, B-cell and T-cell lymphoma (including Mycosis Fungoides), multiple myeloma, amyloidosis, aplastic anemia and Castleman's disease. Treatment modalities include cellular therapy such as stem cell transplant as well as chemo-immunotherapy.

Dr. Medlin earned his medical degree at Des Moines University in Iowa and completed his residency in Internal Medicine at Marshfield Clinic in Wisconsin. He went on to complete a fellowship in Hematology at the University of Wisconsin in Madison and a fellowship in Oncology at the University of Missouri in Columbia. He is triple boarded in Internal Medicine, Hematology and Oncology by the American Board of Internal Medicine. He is an Inspector for the Foundation of Accreditation of Cellular Therapy (FACT).

In his free time, Dr. Medlin enjoys running, biking, hiking and watching his children in their various activities including soccer, volleyball, running, acting and singing.



Joshua Elson, MD, MPH Radiation Oncology

As a radiation oncologist, **Joshua Elson, MD, MPH,** firmly believes in treating the whole person. This involves getting to know patients and their families on a more personal level. Many times cancer diagnoses and treatments can be very daunting. Dr. Elson always takes the time to ensure patients fully understand their diagnosis, treatment plan, and the path that lies ahead.

Dr. Elson earned his medical degree at Ben-Gurion University of the Negev, Faculty of Health Sciences in Beer-Sheva, Israel. He completed his residency in Radiation Oncology at the University of Cincinnati in Ohio and his Master of Public Health (MPH) in Epidemiology and International Health from the University of Michigan in Ann Arbor.

In his free time, Dr. Elson enjoys spending time with family and has many interests – art history, classic car restoration, skiing, scuba diving, cooking, yoga and worldwide travel.

Aurora Health Care Recognized for Highest Category of Quality by Society of Thoracic Surgeons

By Natasha Stanic, HIM, MPH, CTR, STS Thoracic Data Analyst, Aurora Cancer Care

Aurora Health Care has earned a distinguished 3-star rating from The Society of Thoracic Surgeons (STS) for esophageal cancer resection outcomes at Aurora St. Luke's Medical Center and lung cancer resection outcomes at Aurora Medical Center Grafton.

As part of our commitment to providing the highestquality care, Aurora Cancer Care participates in the STS Public Reporting initiative, and voluntarily reports our surgical outcomes to the public through the STS National Database.



Aurora Health Care's, William Tisol, MD, leads one of the busiest robotic assisted thoracic surgery practices in the world, using the technology for close to 100% of our lung cancer patients requiring surgical lobectomies.

Providers that participate in STS reporting tend to have better patient outcomes than those providers who do not participate. Aurora Health Care has, year after year, provided our patients with better outcomes than the benchmarks set by the STS.

There are 345 health systems across the United States that participate in the STS National Database. Of those



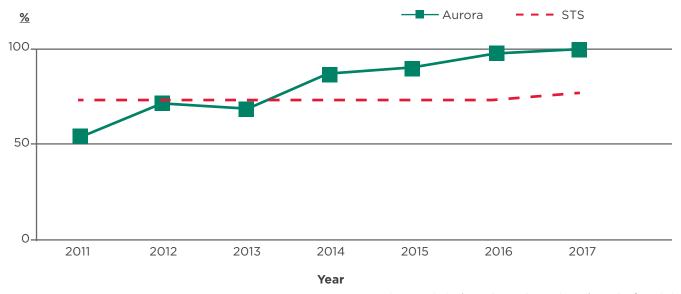
Aurora St. Luke's Medical Center is among the top 2.9% in the nation to be recognized for excellence in esophageal cancer resection outcomes. And Aurora Medical Center Grafton is among the top 5.8% in the nation recognized for excellence in lung cancer resection outcomes.

participants, few accomplish a 3-star rating. Aurora St. Luke's Medical Center is among the top 2.9% in the nation to be recognized for excellence in esophageal cancer resection outcomes. And Aurora Medical Center Grafton is among the top 5.8% in the nation recognized for excellence in lung cancer resection outcomes.

These 3-star ratings place Aurora Health Care among the elite for general thoracic surgery in the United States. This attracts surgeons from around the country to Aurora Medical Center Grafton, where Dr. Tisol provides training and education on best practice models for robotic procedures and patient care.

Aurora Health Care is proud to receive the 3-star recognition for providing patients with a highly qualified and effective treatment team with our state-of-the-art Intuitive Surgical da Vinci XI® surgical system for our lung cancer and esophageal cancer patients.

Video-Assisted (VATS) Lobectomies - 2011-2017



Call Us First!

By Michelle Grube, MS, AOCNS, RN-BC, Clinical Nurse Specialist, Aurora Cancer Care

goal of the Call Us First! campaign is to reduce preventable and unnecessary Emergency Department (ED) visits and hospitalizations of patients receiving chemotherapy in our cancer clinics. Chemotherapy treatment in the outpatient setting has become increasingly common and thus patients may experience



more side effects in the home rather than in the hospital. This trend increases the utilization of ED visits from cancer patients. Research and data suggest that many ED visits for symptom management can be prevented by alerting patients to call their cancer clinic for medical assistance.

The ED may not be the most optimal place to receive care for chemotherapy side effects because ED clinicians and staff may not have access to the care coordination protocols to best treat cancer patients. Additionally, wait times in the ED may be longer for a patient who may have low blood cell counts, for example, putting them at a higher risk for infection.

The Cancer Clinic staff is more knowledgeable and has the clinical expertise to effectively treat chemotherapy side effects. Centers for Medicare & Medicaid Services, (CMS) agrees. CMS is starting to track data and focus on cancer patients who are hospitalized or visit the ED following their chemotherapy treatment. The focus of this initiative, CMS OP-35 is to track patients receiving outpatient chemotherapy who are hospitalized or visit the ED within 30 days following their chemotherapy treatment for the

following symptoms: emesis (vomiting), nausea, diarrhea, pain, neutropenia (low white blood cell count), anemia (low red blood cell count), fever, dehydration, pneumonia, and sepsis(infection).

Education to patients is critical in preventing unnecessary ED visits. Patients need and want to be educated regarding their treatment plan, and the treatment-related side effects. We want to help them recognize early symptoms and side effects and to encourage prompt treatment, thus avoiding ED visits.

In the Aurora Cancer Clinics, the Call Us First! campaign provides a magnet to all patients during their initial teaching appointment, and as needed throughout their treatment, alerting them to the call us (the cancer clinic) first if they have issues with symptom management related to their therapy. The magnets are clinic specific and provide a list of symptoms that a patient should be aware of as well as the cancer clinic telephone number.

Nurses in the cancer clinics are well educated on symptom management and telephone protocols to use when a patient calls for assistance. Protocols in conjunction with physician collaboration assist in appropriately referring patients to the next level of care whether it is care at home with physician instructions, a visit to see a physician in the cancer clinic, or an ED visit when it is truly necessary.



Implementation of the Call Us First! campaign can prevent unnecessary ED visits by caring for patients by oncology experts in the cancer clinics, ensuring proper care and happier patients. Look for the "Call Us First!" button worn by the cancer clinic team members!

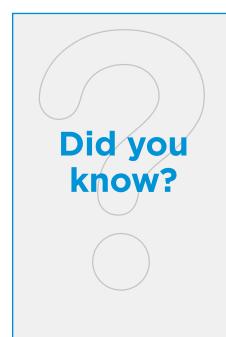
Message from the Vice President, cont.

have enjoyed the benefits of the Team Phoenix program helping us fulfill our mission of "Redefining Survivorship". Anyone with interest can reach the team leaders at teamphoenix@aurora.org or call 414-219-4687.

Survivors can also participate in clinical trials. The YOCAS trial is designed for patients who have completed cancer treatment within 5 years and have insomnia. The purpose of this study is to compare the effectiveness of yoga, survivorship health education, and cognitive behavioral therapy for treating sleep problems. If a survivor meets all the eligibility criteria they will be randomly assigned to one of these three groups. Anyone interested in this trial should contact Pam Rynes at 414-302-2311 or e-mail pam.rynes@aurora.org.

This represents a description of just 2 of the activities and over 175 clinical trials that are ongoing at our many sites in Eastern Wisconsin. Many of our clinical trials are available to Aurora Cancer Care patients. A number of our Aurora Cancer Care sites also host Survivorship events and activities for our patients and their families. Be sure you ask your Cancer Care team about specifics.

Remember should anyone ask whether there is life after cancer the answer should always be YES. Be sure to ask your physician or other member of your cancer care team about a Survivorship care plan and let them know you want to schedule a survivorship appointment. Review this carefully and follow it closely to see that you can leave cancer behind as your life moves forward.



Aurora Cancer Care's integrated oncology program was recognized by Becker's Hospital Review as one of "100 Hospitals and Health Systems with Great Oncology Programs."

Our program was highlighted for our more than 160 physicians, more than 150 cancer clinical trials available at any of our Aurora Cancer Clinics, and becoming the first center in Wisconsin to earn the National Pancreas Foundation's Pancreatic Cancer Center designation.



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