

# AURORA CANCER CARE NEWS & VIEWS

Aurora Cancer Care • Volume 15, No. 3 • 2021

## Message from the Vice President, Aurora Cancer Care



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

I often wonder where the last two years have gone. 2020 was a blur for us all—COVID, video visits, delays in screening, working remotely, social distancing, decreasing personal interactions—and we all thought 2021 would bring an end to the pandemic. 2021 brought successful vaccines which we envisioned as the “end of the pandemic” but, unfortunately, there were many

who refused vaccinations for multiple reasons, and the Delta and now Omicron variant appeared. Although there were breakthrough cases, those vaccinated generally avoided the worst effects of COVID and gave hope that we were reaching the end of the pandemic. Despite this, activity within Aurora Cancer Care has continued, although changed forever. Within AAH, over 12,000 of our team members continue to work remotely, patient care areas have returned to pre-COVID levels albeit with social distancing, and our excellent team members have continued to show the resilience that we always knew they had. Screening numbers have rebounded, but we anxiously follow to see whether the delays might result in a stage shift—patients presenting with more advanced disease.

Doom and gloom aside, ACC continues to grow at a significant pace. Our heme malignancy program, including Bone Marrow Transplant (autologous and allogeneic) and CAR-T therapy, has doubled in size with many successes in these areas. Although new cases decreased in 2020, 2021 has brought a rebound of greater than 20% of new

patients. This increase equates to nearly 10,000 new cancer patients treated at Aurora this year.

One great highlight is our continued 3-star rating from the Society of Thoracic Surgery (STS) for our thoracic surgery programs at Aurora St. Luke’s and Aurora Grafton Medical Centers. Built on the excellent thoracic surgery team led by Dr. Bill Tisol, these two programs achieved this distinction for performance of pulmonary lobectomies. Only nine programs in the country (including the two Aurora programs) achieved this highest level of quality from a total of 222 programs surveyed! On a sadder note, Natasa Stanic, our valued team member who handled all the data submitted to the STS, passed away on October 26. Marija Weidman, former Senior Director of the Cancer Service Line, delivered the eulogy on behalf of the Cancer Leadership Team. To quote Marija: *“She saw the value of fully living and enjoying life, in the now, that many of us could learn from.”* Our thoughts go out to Natasa’s husband, Michael, and daughter, Katarina.

“ We are grateful for the many patients who come to Aurora for their care, and to our outstanding team members who provide that care. ”

As we all know, despite these events, life moves on. We are grateful for the many patients who come to Aurora for their care, and to our outstanding team members who provide that care.

**Have a safe, happy, and healthy holiday season. ■**

## INSIDE THIS ISSUE

### Page 1

Message from the Vice President, Aurora Cancer Care

### Page 2

Addressing the Barrier of Transportation to Care Through Community Partnerships

### Page 3

GenomeWeb and Syapse Relationship

### Page 4

Society of Thoracic Surgery (STS) of the 3-star rating

### Page 5

2021 2nd Annual Cancer Navigation Summit

### Page 6

Art Therapy Provides Healing and Strength for Patients AND Caregivers

### Page 7

- Comfort in Uncertain Times
- New Provider

### Page 8

- 2021 CME Events
- Marija Bjegovich-Weidman Award recipients

# Addressing the Barrier of Transportation to Care Through Community Partnerships

By Brad Zimmerman MBA, MSW, APSW, OSW-C, Oncology Social Worker Lead, ACC; Jennifer Jarvey Balistreri, MS, Community Impact Coordinator Senior, ACC

Access to healthcare services during the pandemic has been a continued barrier for various communities throughout the nation, including our patients in Wisconsin and Illinois. At times, this barrier can be as simple, and as complicated, as transportation. With the reduction of rideshare availability in 2020 and 2021 due to social distancing, vaccination access and rates, volunteer gaps, as well as workforce availability, there was a need for support to help our patients with transportation to our healthcare institutions.



Previously, various community-based organizations, such as the American Cancer Society (ACS), were able to support patients with rideshare programs like the Road to Recovery program. This program included volunteers who donated their time and vehicles to give cancer patients access to treatment and care. As the pandemic caused many concerns with the social environment, social interaction, and public health, volunteer-led programs suffered. In some non-profit settings, volunteer support had dropped by 60% to 75% during the pandemic in 2020, just as the need for more assistance heightened. There was a clear need for another approach to assist patients in transportation support. After a needs assessment was conducted and the value for transportation support was evaluated, our national partnership with ACS provided an opportunity to support rides once again. Through a grant partnership with ACS, Wisconsin and Illinois patients have been given an opportunity to obtain access to rides for care and treatment.

**Funds provided by the ACS Transportation grant are a great resource to support cancer care patients at Aurora in WI and Advocate in IL, providing them with another tool to access ride assistance when it is needed most.**

How does this partnership work? Aurora Cancer Care has a team of oncology social workers and cancer nurse navigators who help manage utilization of the ACS Transportation Assistance grant dollars. When cancer patients express a ride concern

at an oncology appointment, this team reaches out to the patients to evaluate their ride needs and determine the best way to ensure they are able to get to their appointments. If no alternative ride options exist, funds from the ACS Transportation grant can be used to cover the costs of a ride to and from their oncology appointment. This assistance ensures patients are able to attend their appointments and reduces the need for rescheduling time-sensitive care. Funds provided by the ACS Transportation grant are a great resource to support cancer care patients at Aurora in WI and Advocate in IL, providing them with another tool to access ride assistance when it is needed most. ■

# Integration of Real-World Evidence into Patient Care: A Collaboration between Syapse and Advocate Aurora's Oncology Precision Medicine Program

By Mary Walters, PharmD BCOP, Co-Director Oncology Precision Medicine Program, Oncology Pharmacy

On September 15, 2021 the Advocate Aurora Health Oncology Precision Medicine Program (OPMP) participated in a webinar series through GenomeWeb, an international, independent online precision oncology news organization. The presentation, entitled "Leveraging Real-World Evidence to Empower a Health System's Oncology Precision Medicine Program", highlighted OPMP's incorporation of real-world evidence into clinical practice via a collaboration with Syapse. Syapse, a real-world evidence company, integrates, processes, and analyzes patient data from health systems across the globe to deliver expanded outcome insights. AAH has been an active partner with Syapse since 2018.

The webinar highlighted four main OPMP real-world data patient care initiatives:

## 1. Integration into Molecular Tumor Board (MTB)

OPMP's MTB is a multidisciplinary team of experts assembled to address the challenges of applying precision medicine to patient care. This rapidly changing field creates challenges for the pathologist's interpretation and the medical oncologist's application with daily updates to diagnostic, prognostic, and therapeutic validity of molecular targets. The contextualization of specific patient cases further add complexity where evidence may be limited and do not readily fit into artificial intelligence algorithms. MTB unpacks that clinical nuance and shares insights from clinical experience to help assess the risk vs. benefit of targeted therapies for a particular patient case. Syapse then provides additional insights from their database of real-world outcomes for patients with similar characteristic and molecular targets. These insights can supplement MTB's expertise and enhance therapeutic recommendations.

## 2. Clinical Trial Pre-Screening Feasibility and Screening Eligibility

By having patient data for the health system organized into filterable, discrete fields, OPMP also leverages this partnership to determine the feasibility of opening targeted therapy clinical trials and screen for potential study participants. Instead of the inaccurate, time-consuming process of applying industry averages to the organization's patient population, OPMP can now rapidly and accurately assess patients within our



network prior to opening a trial based on clinical and molecular characteristics across internal and multiple reference lab tests. This workflow has been applied to recent feasibility evaluations for the TAPUR study prioritizing which arms to open first. OPMP's workflow for screening patients for trial eligibility is highlighted in the above figure.

## 3. New Molecular Therapies

OPMP can also use these screening capabilities to identify patients who may qualify for newly approved molecularly targeted therapies. This helps OPMP make recommendations for new therapies outside of MTB and provide targeted education to providers.

## 4. Collaborative Research

Finally, OPMP has integrated Syapse's real-world data into a variety of retrospective collaborative research efforts. Some examples include OPMP's work on:

- OPMP: "Abstract 2618: Staged analysis of standard of care tumor molecular testing among patients with metastatic colorectal cancer in the community health system setting"
- Safety: "Pneumonitis incidence in patients with non-small cell lung cancer treated with immunotherapy or chemotherapy in clinical trials and real-world data"
- Healthcare disparities: "Rapid real-world data analysis of patients with cancer, with and without COVID-19 across distinct health systems"

Real-world data is increasingly becoming an important component of evidence-based care planning. Through this partnership, OPMP has been able to offer a variety services for our patients leveraging this information and continues to explore future applications. ■

## References

- GenomeWeb. (2021, November 16). *GenomeWeb*. Retrieved from <https://www.genomeweb.com/>  
GenomeWeb. (2021, November 16). *GenomeWebinars*. Retrieved from GenomeWeb: <https://www.genomeweb.com/resources/webinars>  
Syapse, Inc. (2021, November 16). *Syapse: Home Page*. Retrieved from <https://syapse.com/>

# Aurora Health Care treats more lung cancer than any other health care system in Wisconsin – Highlights of the Top Rated 3 Star Performance Score for the Thoracic Cancer Surgery Program

By Dr. William Tisol, MD & Anne Weers, RN, MS, BSN, BS

**A**urora Health Care (AHC) treats 1 out of every 4 lung cancer patients in Wisconsin. Our multidisciplinary team brings together a group of dedicated lung cancer specialists to provide personalized care including thoracic surgeons who specialize in lung cancer surgery, pulmonologists, medical oncologists, radiation oncologists, cancer care coordinators, dietitians, cancer rehabilitation specialists, and cancer nurse navigators. Our comprehensive program offers cutting-edge techniques and screenings for patients throughout the state.

The majority of lung cancer surgery performed at Aurora Grafton, Aurora Summit, and Aurora St. Luke's Medical Centers are robotic-assisted procedures. This is a minimally invasive technique used when appropriate to provide the best possible outcome for each patient. Minimally invasive surgery has been shown to decrease length of stay as well as postoperative complication rates. Aurora Health Care can accommodate the many patients who desire a minimally invasive approach.

Aurora Health Care is proud to announce the recognition by the Society of Thoracic Surgery (STS) of the 3-star rating for both Grafton and St. Luke's Medical Centers for performance of

lobectomy cancer surgery as part of their Spring 2021 Harvest Report. As indicated below, they are one of a very select group of Thoracic Programs that fall into the 3-star rating. Of the 222 participating programs submitting data to the General Thoracic Surgery Database, only 9 qualified for 3-star status with 2 of those programs representing Aurora Health Care.

Aurora Health Care is proud to provide a highly qualified and effective treatment team for our lung cancer patients. Dr. William Tisol, in partnership with Dr. David Demos and Dr. Elizabeth Colwell, leads one of the busiest robotics assisted thoracic surgery practices in the world. Aurora Medical Centers Grafton and St. Lukes serve as a case observation center for the state-of-the-art intuitive Surgical da Vinci XI surgical system. Surgeons and their teams come from all over the country to observe robotic assisted thoracic surgery. We are very honored to receive this recognition for the outstanding care provided to our patients. ■

## STS Participant Performance - Lobectomy for Lung Cancer

|         | Overall | Absence of Mortality | Absence of Morbidity |
|---------|---------|----------------------|----------------------|
| 1 Star  | 4       | 0                    | 10                   |
| 2 Stars | 137     | 149                  | 128                  |
| 3 Stars | 9       | 1                    | 12                   |

### Aurora St. Luke's Medical Center

The Society of Thoracic Surgeons  
 Lobectomy for Lung Cancer Composite Quality Rating  
 Participant: 40100  
 STS Reporting Period Ending Dec 2020

| Domain                        | Rating | Participant |               | STS    |               |        |        |        |
|-------------------------------|--------|-------------|---------------|--------|---------------|--------|--------|--------|
|                               |        | Score       | 95% CI        | Score  | Min - Max     | 25th   | Median | 75th   |
| Overall                       | ★★★★   | 98.69%      | (97.88-99.13) | 97.88% | (94.54-99.29) | 97.44% | 97.99% | 98.44% |
| Absence of Mortality          | ★★★    | 98.87%      | (97.98-99.44) | 98.69% | (96.40-99.71) | 98.64% | 99.01% | 99.28% |
| Absence of Major Complication | ★★★★   | 95.43%      | (93.29-97.15) | 91.16% | (78.03-97.35) | 89.17% | 91.64% | 93.63% |

★ Worse than Expected. Participant's performance is significantly worse than expected for their specific case-mix.  
 ★★★ As Expected. Participant's performance is not statistically different than expected for their specific case-mix.  
 ★★★★★ Better than Expected. Participant's performance is significantly better than expected for their specific case-mix.

### Aurora Medical Center - Grafton

The Society of Thoracic Surgeons  
 Lobectomy for Lung Cancer Composite Quality Rating  
 Participant: 40322  
 STS Reporting Period Ending Dec 2020

| Domain                        | Rating | Participant |               | STS    |               |        |        |        |
|-------------------------------|--------|-------------|---------------|--------|---------------|--------|--------|--------|
|                               |        | Score       | 95% CI        | Score  | Min - Max     | 25th   | Median | 75th   |
| Overall                       | ★★★★   | 98.86%      | (98.09-99.41) | 97.88% | (94.54-99.29) | 97.44% | 97.99% | 98.44% |
| Absence of Mortality          | ★★★    | 99.15%      | (98.23-99.71) | 98.69% | (96.40-99.71) | 98.64% | 99.01% | 99.28% |
| Absence of Major Complication | ★★★★   | 95.39%      | (92.21-97.66) | 91.16% | (78.03-97.35) | 89.17% | 91.64% | 93.63% |

★ Worse than Expected. Participant's performance is significantly worse than expected for their specific case-mix.  
 ★★★ As Expected. Participant's performance is not statistically different than expected for their specific case-mix.  
 ★★★★★ Better than Expected. Participant's performance is significantly better than expected for their specific case-mix.

# 2021 2nd Annual Cancer Navigation Summit

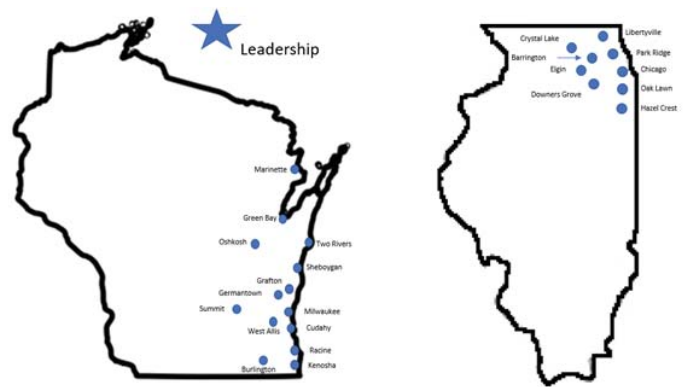
By Kendra Campbell, RN, BSN, OCN, Cancer Nurse Navigator Manager- AAH WI

On November 4th, 2021, cancer navigators from across Advocate Aurora Health gathered virtually for the second time as a large group since Advocate and Aurora merged. Each year, the Wisconsin team of cancer nurse navigators form a workgroup to plan the summit and host the virtual event. Both events have included introduction segments by the cancer service line leaders. This year, Amy Bock, Senior Director Aurora Cancer Care, shared a brief update about the planning for the cancer service line integration anticipated for 2022. Karen Gordon, VP Advocate Cancer Institute, shared a reflection story about resilience and brought awareness that not all tasks can be completed at once; things take time, and it is ok to ask for help. Amy and Karen both recognized the great work being done by the team and provided encouragement to continue doing their best.

The planning workgroups put together fun and interactive team building activities, creating opportunities for each team member to introduce themselves, their role, and to share something personal. Team building activities have helped demonstrate the vastness of sites and navigator roles/specialties present within AAH. The team looks forward to future opportunities to collaborate and network.

The cancer navigators were surveyed earlier in the year about their interests for topics of discussion. Based on this survey, the planning workgroup secured three guest speakers. Presenting first was Peter Heiberger, M.S. DABR lead medical physicist and radiation safety officer for five north region cancer centers. Peter discussed “The Uncommon Sense of Medical Physics” and brought awareness to the new program he is starting at Aurora BayCare Medical Center in Green Bay. He has developed teaching sessions for multiple types of radiation treatment protocols and for patients receiving these types of radiation treatments. After the patient consults with the radiation oncologist, Peter consults with the patients and provides a personal, more detailed patient education session to help the patient and their loved ones learn more about the radiation process, their radiation treatment plan of care, and what to expect at their radiation treatment appointments. Peter has had great feedback since starting this program. He has found improved patient awareness and understanding of radiation treatment and the patient’s personal treatment plan, while also reducing anxiety for these patients regarding their radiation treatment course. He expressed interest in expanding the program to additional sites after educating more physicists about his program.

The second guest speaker was Rev. Kevin Massey, BCC System VP, Mission and Spiritual Care. Rev. Kevin shared practical techniques for bolstering our own personal resilience for coping with the challenging days we are in; to not just survive these challenges but thrive through them. He reminded the team that resilience can be a mix of near burnout and thriving. Rev. Kevin emphasized that “it’s ok



## CANCER NAVIGATORS

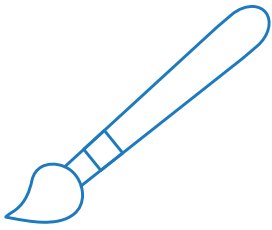
to not be ok” right now and revisited Jim Skogsbergh’s words of “calm over chaos, faith over fear”. He informed the team about the “five things” technique that can be done anywhere, at any time to help with anxiety. He also focused part of his presentation on gratitude, asking the group to take a moment and recognize something they are grateful for and then provided an opportunity for individuals to share their comments. Rev. Kevin also presented the AAH Wellbeing offerings, highlighting the wellbeing program for Advocate Aurora nurses, and he encouraged utilization of these resources.

The third speaker was Mary Walters, PharmD, BCOP Clinical Oncology Pharmacist, Co-Director Oncology Precision Medicine (OPM) Program. Mary presented the topic of molecular/precision medicine and provided an overview of the Oncology Precision Medicine Program. Mary provided education on genomic profiling results and how these results are used to formulate patients’ care plans. She brought us “back to our high school biology days” with a review of DNA to RNA to protein and chromosome rearrangements and mutations. Her case reviews were helpful to review genomic profiling results and learn how patients would likely respond to medications based on their results. She discussed the OPM program and how it can be utilized as a resource to assist with ordering, interpreting, and applying genomic profiling results. Mary also reviewed the structure and function of the OPM program, metrics demonstrating the increase in test ordering over the past few years, and the goal to expand the program.

Overall, the event was a success. Nearly 80 participants joined virtually from across Wisconsin and Illinois for the duration of the three-hour event led by Kendra Campbell, manager of the cancer nurse navigator group in Wisconsin. The event concluded with Kendra offering a moment to self-reflect while listening to a song by Alicia Keys titled “Good Job”. The song’s message is very fitting for the hard-working cancer navigators, dedicated to supporting thousands of cancer patients day after day. This team, like many others, is very deserving of the reminder, “It’s a good job, you’re doing a good job, a good job, a good job, you’re doing a good job”. ■

# Art Therapy Provides Healing and Strength for Patients AND Caregivers

By Kelly Berg, BSN, RN, OCN



**S**he had me at *ice lantern*; I was intrigued and had to know more. As my patient described how she had created the candle-lit winter ice globe, I realized I had met a fellow art enthusiast. Ice globes were only the beginning. Over the next several years of cancer care - countless office

visits, chemotherapy infusions, and telephone calls - I would come to understand just how expansive Jan's art skills were. And the important role that art would play in her treatment.

Jan graduated with a BA in Art from Alverno College and worked as an art instructor for much of her life. In 2010, she retired from teaching children and transitioned to teaching adults. These days, Jan does not do as much teaching, but still enjoys creating. Jan has been a breast cancer survivor since 2005 and, a few months ago, she shared with me a photo of a sculpture she created during the COVID-19 pandemic, titled "The Real Body Snatcher: Metastatic Breast Cancer." The amount of detail was awe-inspiring and I asked Jan to write down a description for me: "The wall sculpture is a concept piece. Its base is a head and shoulder form from radiation. I added most of the little cards I got from every time I entered an Aurora facility. I attached a handmade necklace of snake vertebrae, words from a friend's Christmas card, little Christmas lights, wove in snips of ID and allergy bracelets, snips from chemo pill bags, a vomit bag filled with dried marigolds, sheep locks for hair. A fabric figure hangs upside down at the bottom. Eleven names of WI women who have died of metastatic breast cancer in the past three years are printed on it. I knew three; they were

**These days, Jan does not do as much teaching, but still enjoys creating. Jan has been a breast cancer survivor since 2005 and, a few months ago, she shared with me a photo of a sculpture she created during the COVID-19 pandemic, titled "The Real Body Snatcher: Metastatic Breast Cancer." The amount of detail was awe-inspiring and I asked Jan to write down a description for me: "The wall sculpture is a concept piece. Its base is a head and shoulder form from radiation. I added most of the little cards I got from every time I entered an Aurora facility.**



younger than me. What started as a personal art therapy project became a universal statement."

I recently sat down with Jan to discuss the role that art has played in her cancer journey, a journey she defines as "living *with* cancer, not dying from it." Shortly after receiving her diagnosis in 2005, she began attending Aurora's Art Therapy program and says it has been "a life saver." Jan feels that using art as therapy is for everyone, not just those with prior art experience; "It's not what your skills are, it's about the process and what you get out of your head. It's about sharing with others who are getting treatment for their cancer. It's about surprises, making friends, learning, and a safe place for all of that. What you make may be beautiful or not, but can have symbols, images expressing some feelings about this journey."

Art therapy has been an impactful and enriching component of Jan's journey, and she is adamant that she will continue to create for as long as she can. I am inspired by the role that art and creativity has played in Jan's treatments and in bolstering her sense of resilience in challenging times. As Jan's nurse and friend, I remain hopeful that she will continue to inspire us with her strength and her artwork well into the future. ■

# Comfort in Uncertain Times

By Adam Martin, Foundation Development Director

It started with a flu that wouldn't go away. With his condition not improving, Dan sought help. When the antibiotics didn't work and his flu symptoms remained, Dan had a feeling that he needed to be connected with a primary care physician for whatever was ailing him. After seeking care within other healthcare systems, Dan turned to his local Aurora clinic. The P.A. at the clinic assessed Dan and ordered blood tests...the result of those tests would alter Dan's life in sudden and unexpected ways.

The tests discovered a rare blood disorder. Dan was sent to Aurora St. Luke's where his assigned physician, Dr. Robert Taylor, and the care team on ASLMC 12T would become part of life changing experiences for Dan and his family. Within days, Dan was diagnosed with Burkitt's Lymphoma, a rare and highly aggressive blood disorder. Chemo treatments began immediately. Dan remembers the whirlwind of emotions after suddenly being diagnosed with a very rare disorder and undergoing inpatient care for the first time in his life. Dan recalls, "When the P.A. called and told me I had a disease, and that I needed to check in to St. Luke's immediately, my first reaction was, 'No. I can't. I'm too busy.' The P.A. gently, but firmly, described the medical urgency of my situation. Going from normal life to being stuck in a hospital bed, surrounded with IV tubes and pumps, with chemo coursing through my veins, it was all a surreal experience."

From being given three weeks to live to now proclaiming, with a tear in his eye, that he is "cancer free", Dan credits his physicians and care team with finding the right treatments that saved his life. Dan tells it this way, "When I was on the 12th floor, my wife, who is a cardiac medical device clinical rep, was actually on the 8th floor doing some in-servicing. She spoke to one of the physicians about my situation. One of the doctors consoled her and said 'Your husband is in great hands. Dr. Taylor is one of the best. He lives and breathes this stuff. That's why we call him a lymphomaniac.' Well, they were right. Dr. Taylor created a treatment plan that was just as aggressive as the disease itself. And it worked." Dan describes the challenging times, "There were days my wife would visit, but I was too sick to talk. It was just a blur." Dan also tells this story of his medical care, "The least pleasant procedures were the intrathecal chemo treatments into the spine. The first time, being placed face down on a cold table with doctors and nurses buzzing

around, it was a stressful experience. But then a nurse held my hand. She began describing the treatment, step by step. It was such a comfort to me at that moment, I will never forget it. And I have no idea who that nurse was."

It's Dan's deep gratitude towards his doctors, nurses, and staff at St. Luke's for their knowledge, delivery of medical care, and heartfelt compassion that led him to give back. Dan's passion for helping others who face similar worry and uncertainty when newly diagnosed, inspired him to donate towards a new Care Basket program at ASLMC. His donation through the Aurora Health Care Foundation will provide newly diagnosed Aurora Cancer Care patients with comfort items to help them and their families adjust. Comfort items will include gift cards for restaurants, gas stations, hotels, and grocery stores. Dr. Stephen Medlin, Director, Bone Marrow Transplant & CAR-T Program, is helping to lead and implement the Care Basket program. Dr. Medlin remarks, "Cancer is a complex disease and truly takes a team of people to best meet the patient needs. This gift means so much to our patients as it gives them a tangible sign that there is a reason for hope and a future."

"For some indescribable reason, I was embedded with a strong sense of hope. I like to say hope is faith repurposed into the future, to see beyond the dark mountain in the path ahead. This hope imparted a sense of peacefulness in the midst of this dark time. Within a couple months of heavy chemo, while there were side effects, I started to feel better. I knew without a doubt I would recover. I want to give others the same sense of hope that I experienced. Hope to see beyond the darkness of the moment. Hope which imparts peace. The Care Basket program is one way to show that others, like me, have been there. There is reason for hope and reason for peace. There is a strong team with outstanding scientific knowledge and amazing compassion working to make the best possible outcomes happen."

Thank you to Dan for his generous spirit, and determination to take his experience with a devastating disease and turn it into positive actions that will offer comfort in uncertain times. You can support this initiative, or other causes you care about through the Aurora Health Care Foundation. If you are interested in giving or learning more about the AAH Foundation funds available, please contact [jennifer.benanti@aah.org](mailto:jennifer.benanti@aah.org) or [adam.martin@aah.org](mailto:adam.martin@aah.org) ■



## Welcome New Provider

**Christopher Sarkiss, MD**  
*Neurological Surgery*

**Practice Location:**  
Aurora Neuroscience Innovation  
2801 W. Kinnickinnic River Parkway, Ste. 680  
Milwaukee, WI 53215  
Office: 414-385-1922

# Congratulations to the 2021 Marija Bjegovich-Weidman Award recipients!

The Annual Marija Bjegovich-Weidman Excellence in Oncology Awards were created in 2017 by James L. Weese, MD to recognize outstanding team members. The awards, usually presented at the All Oncology Meeting, were presented in small group and virtual formats this year due to Covid.

Lora Dow, RN, Manager of Oncology Services, received the Individual Excellence Award for her lead administrative role within the Malignant Hematology and Stem Cell Transplant Program.

The Interdisciplinary Team Collaboration Award was awarded to Carol Huibregtse, Laurie Dlouhy, Julie Simmons, Jody Wesolowski, Kaitlyn Schuelke, Sabrina Moffat, and Jennifer Aversano. The Wisconsin and Illinois LDCT Lung Cancer Screening team members have been working to outline best practices, leverage resources to create more efficient workflows, and standardize processes while meeting the growth of both the WI & IL programs. ■



Pictured left to right: Dr. Jim Weese, Amy Bock, Lora Dow, Dr. Steve Medlin



Top row: Karen Gordon, Sabrina Moffat, Jennifer Aversano; Middle row: Kaitlyn Schuelke, Jody Wesolowski, Laurie Dlouhy, Anne Weers; Bottom row: Dr. Jim Weese, Carol Huibregtse, Julie Simmons, Amy Bock

## AURORA CANCER CARE CONTRIBUTORS/ SYSTEM LEADERS

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

**Amy Bock, MBA, MSN, RN, OCN**  
Senior Director,  
Aurora Cancer Care

**Federico Sanchez, MD**  
Medical Director,  
Medical Oncology, South Division,  
Aurora Cancer Care

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

**Brad Zimmerman, MBA, MSW,  
APSW, OSW-C**  
Oncology Social Worker Lead,  
Aurora Cancer Care

**Mary Walters, PharmD BCOP**  
Co-Director Oncology  
Precision Medicine Program,  
Oncology Pharmacy

**William Tisol, MD**  
Chief Thoracic Surgery,  
Advocate Aurora Health Care

**Anne Weers, RN, MS, BSN, BS**  
Director Clinical Program Quality,  
Aurora Cancer Care

**Kendra Campbell, RN, BSN, OCN**  
Cancer Nurse Navigator Manager,  
Aurora Cancer Care

**Kelly Berg, BSN, RN, OCN**  
Registered Nurse,  
Aurora Cancer Care

**Adam Martin**  
Foundation Development Director,  
Advocate Aurora Health Care

**Abby Tran, MHA**  
Managing Editor  
News and Views  
Aurora Cancer Care  
abigail.tran@aah.org

**Jennifer Knauer**  
Assistant Editor  
News and Views  
Aurora Cancer Care  
jennifer.knauer@aah.org

## 2021 CME Events

### Oncology Precision Medicine

Date of Live Event: **March 6, 2021**

Directors: **James Weese, MD, FACS and Mike Thompson, MD, PhD, FASCO**

Link: <https://cme.advocateaurorahealth.org/content/oncology-precision-medicine-recorded-session#group-tabs-node-course-default1>

### Providing Cancer Care to the Underserved

Date of Live Event: **March 20, 2021**

Directors: **James Weese, MD, FACS and Federico Sanchez, MD**

Link: <https://cme.advocateaurorahealth.org/content/providing-cancer-care-underserved-recorded-session#overlay-context=homepage>

### Highlights of ASCO: A Review of the Latest Updates in Cancer

Date of Live Event: **July 17, 2021**

Directors: **Michael Mullane, MD**

Link: <https://cme.advocateaurorahealth.org/content/14th-annual-highlights-asco-recorded-session#group-tabs-node-course-default1>



We are  Advocate Aurora Health

[aurora.org/cancercare](http://aurora.org/cancercare)  @Aurora\_Cancer on Twitter