

HOUSTON METHODIST WEST HOSPITAL CANCER COMMITTEE MEMBERS 2015

The Houston Methodist West Hospital Cancer Committee is comprised of primary and specialty care physicians as well as hospital staff members involved in the care of cancer patients. This multidisciplinary committee meets regularly to review and evaluate the quality and direction of the overall cancer program and makes recommendation for improvements.

Kathleen Shadle, MD

Cancer Committee Chair Conference Coordinator Radiation Oncology

Rachel J. Ellsworth, MD Cancer Liaison Physician Colon/Rectal Surgeon

Kim Collins Director, Cancer Center, Imaging & Breast Care Center

Sherry Nelson Quality Improvement Coordinator Director, Quality Improvement

Chidi Ozumba, CTR Certified Tumor Registrar Cancer Registry Coordinator

Jose Sepulveda Psychosocial Services Coordinator Social Services/Case Management

Deborah Smith, RN, OCN Oncology Nurse Radiation Oncology

Vicki Brownewell, RN Vice President Chief Nursing Officer

Peyton Elliott Vice President Operations Business Practice Officer Warren A. Ellsworth IV, MD Surgeon Plastic & Reconstructive Surgery

Amy Edwards Director, Program Services CanCare

Erica Esprit Oncology Nurse Navigator

Phat Le, MD Medical Oncology & Hematology

Joshua Kilgore, MD Gynecological Oncology

David W. Light IV, MD Medical Director Diagnostic Radiology

Denise McCall, RN Director, Infusion Center, Emergency Department

Rajul R. Mehta, MD Breast Radiology Breast Care Center

Thu Ngo, MD Pathology Medical Director Laboratory Services

Romeo Parada Research Coordinator Clinical Trials Melody Peeples Director Laboratory & Respiratory

Beth Phelps Manager Breast Care Center

Jo Pollack, MD General Surgery

Carleen Pope Community Outreach Coordinator Oncology Program Coordinator Cancer Center

Sheena Robertson Account Representative American Cancer Society

Correna Terrell, MD Medical Director Breast Care Center

Alma Villanueva Director, Case Management/Social Services

Alichia White Supervisor Cancer Center

Chef Agbara Director, Pharmacy

Craig Bradley Director, Spiritual Care

COMMITTEE CHAIR REPORT



Dr. Kathleen Shadle

Cancer Committee Chair Radiation Oncologist

I am happy to present the 2015 Houston Methodist West Hospital Cancer Committee annual report, which reflects our accomplishments and all we do for our community. Each year, we continue to advance our cancer program by building on those accomplishments.

Houston Methodist West is currently working toward receiving accreditation from the American College of Surgeons (ACS). We are confident in achieving this goal due to our comprehensive, multidisciplinary approach to cancer patient care.

Our tumor conferences present prospective cancer cases to physicians from several specialties each month. Their input at these conferences has a positive impact on patient care.

Each year, we set goals as an oncology committee to ensure that our patients experience continued improvements in care and outcomes at our hospital. In 2015, these included implementing the lung cancer screening program and installation of the PET scanner.

Through our community needs assessment, incidence of cancer and groups affected were identified, as well as barriers to health care. Our community needs assessment identified breast cancer as one of its top cancer sites within our service area. Also noted was that many women from low socioeconomic background did not receive appropriate breast screenings because of limited finances. To address these issues, Houston Methodist West implemented a number of community outreach events, including partnering with a local nonprofit to educate the community on the importance of the early detection of breast cancer; and through the efforts of our nurse navigator, we provided free mammograms to the underserved women in our community.

Involvement in our community is strong. We again participated in the American Cancer Society's, Relay for Life. We attended several community events and provided education about the most frequent cancer diagnoses in our area. Through the efforts of our nurse navigator, one of our patients received a grant that provided her with financial assistance while in treatment.

I feel our oncology program has had another excellent year. I am proud to be a part of this program. Speaking on behalf of the oncology committee, we look forward to continuing to make improvements in the future, and keeping Houston Methodist West Hospital an excellent oncology program.

CANCER LIAISON PHYSICIAN REPORT



Dr. Rachel J. Ellsworth

Cancer Liaison Physician Colon and Rectal Surgery

The role of the cancer liaison physician (CLP) is to evaluate, interpret and report the performance of our cancer program. I am currently in the second year of my role as CLP, as we prepare for our initial accreditation as a Commission on Cancer (CoC) Comprehensive Community Cancer Program.

Throughout my term, our program has adhered to Standard 4.3, with quarterly reports on our activity. One of the major responsibilities of the CLP is to analyze cancer care provided at Houston Methodist West to ensure that cancer patients receive high quality coordinated care. Soon, our data will be submitted to the National Cancer Database (NCDB), and our performance will be analyzed for compliance with accountability and guality improvement measures. More specifically, NCDB is a nationwide database containing 34 million records from CoC-accredited cancer registries, and collaborates with major oncology organizations to develop and implement national standards and guality measures. Each program receives annual performance updates generated through quality reporting tools: Hospital comparison benchmark reports, NCDB survival reports, cancer program practice profile reports (CP3R), rapid quality reporting system (RQRS) and cancer quality improvement program (CQIP). These quality metric standards assess care and identify areas in need of improvement, and compare our performance with other

CoC-accredited programs. It is important for cancer programs to implement modern trends in oncology care as defined in National Comprehensive Cancer Network (NCCN) evidence-based national guidelines.

The cancer program at Houston Methodist West has experienced continued growth over the last five years. The number of cancer cases entered in the registry database grew from 577 cases in 2011 to 942 cases in 2015. The incidence of analytic cases top sites seen at our facility in 2015 was compared to state and US estimated numbers of new cases in *Cancer Facts & Figures 2015*, American Cancer Society, pgs. 4-7. This revealed the incidence of breast cancer seen at Houston Methodist West well exceeds that in the comparison statistics. A full analysis of 2015 analytic colon cases and our adherence to the NCCN guidelines was presented at the fourth quarter cancer committee meeting in November.

It has been a pleasure to serve as the cancer liaison physician and I look forward to our facility earning its accreditation.

CANCER PROGRAM GOALS

Each year, the cancer committee develops, implements and evaluates clinical and programmatic cancer program goals.

	Goals	Specific What are the desired results?	Measurable How can you measure progress?	4th Quarter
Clinical Goal	Implement the Lung Cancer Program using the revised guidelines	Implement by November	Implementation within target date	Met
Program Goals	Installation of a PET Scanner within one year	To provide PET services in-house five days a week	Installation and start date within target date Dec. 1	Met
P	Installation of tomosynthesis	To provide 3-D imaging capabilities to service line	Installation and start date within target date	Met

CANCER TUMOR BOARD CONFERENCES 2015

Houston Methodist West hosts three monthly cancer conferences. At each conference, a multidisciplinary team of experts and support staff (including radiologists, pathologists, general surgeons, thoracic surgeons, medical oncologists, radiation oncologists and other specialists) collaboratively discuss the stage of disease, the different treatment options mandated by NCCN guidelines and, when applicable, available clinical trials.

Throughout 2015, a combined total of 73 cases were presented at breast, general and thoracic cancer conferences.

Tumor Board Conference	Prospective Cases	Total Cases
Breast tumor board	17	17
General tumor board	39	39
Thoracic tumor board	17	17
Total cases presented	73	73

CANCER PROGRAM NEW ADDITIONS



Dr. Phat Le Medical Oncologist and Hematologist

Dr. Phat Le, a board-certified medical oncologist and hematologist, joined Houston Methodist West and the cancer committee in August 2015. He received his medical degree from The University of Texas Southwestern Medical School at Dallas, where he also completed a residency in internal medicine and a fellowship as chief fellow in hematology and oncology.



Erica Esprit Oncology Nurse Navigator

Erica Esprit, BA, RN, CHW joined Houston Methodist West Hospital in 2011. She holds a bachelor's degree in social work and has been a registered nurse for more than 10 years. She has spent her career serving patients and empowering diverse populations through nursing, case management and advocacy, and as a certified community health worker. This makes Erica ideally suited to guide patients at Houston Methodist Cancer Center at West through the often complex cancer care process.

COMMUNITY OUTREACH: PREVENTION & SCREENING

Cancer-related community outreach is a vital part of the comprehensive cancer program at Houston Methodist West. Aimed at increasing survival rates and decreasing morbidity, the cancer outreach programs are designed to provide the community with the most recent national cancer screening guidelines, and offer the most innovative technological screening equipment to detect cancer at early stages. Strategic planning for 2015 focused on educating the community on the importance of breast, colon and lung screenings – helping us to increase preventive care by removing barriers, like fear and anxiety.

The following is a summary of our cancer-related community outreach activities for 2015:

MARCH

- · Colorectal cancer awareness community seminar presented by Dr. Rachel Ellsworth
- Distribution of at-home colorectal screening kits to the community

JUNE

National Cancer Survivors Day celebration

SEPTEMBER

- Participation in St. Elizabeth Ann Seton nursing ministry health fair
- Prostate cancer awareness presentation to members of Glazier Senior Center by Dr. David Mobley

OCTOBER

- Partnered with Christ Clinic to educate uninsured/underserved population about breast care health
- · Hosted an art therapy event, "Portrait of Healing" for cancer survivors and caregivers
- Participated in the Willowfork Ladies Auxiliary "Pretty in Pink" luncheon and received a monetary
 donation to benefit breast cancer patients treated at Houston Methodist West Hospital
- Participated in BP Corporation "Spike it Pink" volleyball tournament and provided cancer-related educational information to attendees
- Provided 10 breast cancer screenings for uninsured/underserved women

NOVEMBER

- Participated in the 11th annual Breast Health Coalition and provided participants with cancer-relatededucational materials
- · Lung cancer awareness community seminar presented by Dr. Phat Le

BREAST HEALTH

On October 21, Erica Esprit, nurse navigator, partnered with a local nonprofit to educate uninsured and underserved women. The event was held to provide early detection of breast cancer and to link these women to needed mammograms and other health resources as part of the Houston Methodist West breast cancer awareness campaign.

HOUSTON METHODIST WEST CELEBRATES NATIONAL CANCER SURVIVORS DAY



National Cancer Survivors Day[®] is an annual celebration of life held in hundreds of communities nationwide, and around the world. It is a celebration for those who have survived, an inspiration for those recently diagnosed and a gathering of support for families and caregivers.

COMMUNITY OUTREACH HIGHLIGHTS



Our first "Portrait of Healing" was implemented in October 2015. Cancer patients had an opportunity to express their cancer journey through painting.





OVARCOME

In 2015, a Houston Methodist Cancer Center at West patient was awarded the OvarCare grant—financial support program for ovarian cancer patients in active treatment.

Ovarcome Non-Profit Inc. is a USA based, IRS 501(c)3 Tax-Exempt ovarian cancer foundation that provides treatment support and options to underprivileged women suffering from ovarian cancer.



A patient receives grant from national nonprofit Ovarcome for a grocery and gas card.

HOUSTON METHODIST WEST PARTNERS WITH AMERICAN CANCER SOCIETY



Dr. Rachel Ellsworth, colorectal surgeon and cancer liasion physician for the Houston Methodist West Hospital Cancer Committee, presented to physicians and staff "Discussions on Colorectal Cancer and Screening Considerations." Houston Methodist West Hospital signed to support the National Colorectal Cancer Roundtable's "80% by 2018" initiative to increase the nation's colon cancer testing rate to 80% by the year 2018.

PATIENT SUPPORT SERVICES

Oncology Nurse Navigator

The oncology nurse navigator provides support and resources to break down barriers patients often face during cancer. An assessment is performed to help link patients to support resources (spiritual support, psychosocial support, dietary assessment and caregiver support) as they walk through their cancer journey.

Since the initiation of our Navigation Program, the program has instituted supportive services, such as access to wigs for women who have lost their hair due to treatment, as well as links to local and national nonprofits to assist the patients with their financial needs.

Our nurse navigator, Erica Esprit, plays a key role in linking patients to necessary resources and education. By doing so, they help to alleviate the burdens patients face as they navigate through their cancer journey. She has facilitated the application processes for patients to receive grant monies for gas, groceries, personal needs and mortgage payments-for up to three months while undergoing treatment. Erica has worked to coordinate transportation to and from treatment by making referrals to the American Cancer Society, the American Red Cross and Houston Methodist West Yellow Cab Collaboration Program. All of these coordinated services help to minimize stress for working families. The oncology nurse navigator is available to provide education and one-on-one support to newly diagnosed patients. At the conclusion of their treatment regimen, the patient meets with the oncology navigator to discuss future screenings, and what to expect as they continue their life after cancer.

CanCare

This network of trained volunteers includes cancer survivors, family members of cancer survivors and medical professionals who provide emotional support to others facing cancer. Cancer survivors, (of more than 75 different types of cancer) volunteer for CanCare to provide emotional support to those currently facing a battle with cancer. A patient is matched with a CanCare volunteer for one-on-one emotional support based on a variety of criteria. This includes cancer site, treatments, age and gender. Generally, support is provided by phone and sometimes through email. Volunteers who are matched with someone in the same geographical area are encouraged to make an effort to meet in person.

During 2015, three CanCare volunteers provided 131 hours of service while making 788 visits to Houston Methodist West patients and family members.

Look Good Feel Better®

Look Good Feel Better is a free, nonmedical, brand-neutral national public service program created to help individuals with cancer look good, improve their self-esteem and manage their treatment and recovery with greater confidence. Cancer can rob a woman of her energy, appetite and strength, but it doesn't have to take away her self-confidence. Houston Methodist West, in partnership with the American Cancer Society, hosts quarterly programs open to all women with cancer who are undergoing radiation, chemotherapy or other forms of treatment.

In 2015, the Look Good Feel Better program at Houston Methodist West served 10 patients.

Breast Cancer Support Group

The Breast Cancer Support Group offers encouragement and education to breast cancer patients and survivors. The support group meets the third Tuesday of each month in the Mesquite Conference Room from 6-7:30 p.m.

Personal Health Manager

Every patient receiving care from the cancer center receives a personal health manager kit, provided by the American Cancer Society. The kit is a tool designed to help patients organize and keep track of appointments, medications, test results, insurance bills, and various other logistical and practical details associated with cancer.

Psychosocial Screening

Patients are screened to assess their psychosocial needs in the beginning and as needed throughout their treatment. Appropriate support resources are identified and available to the patient and caregiver during this time. In 2015, forty-one psychosocial distress screenings were completed, reviewed by the oncology nurse and triaged as appropriate.

Survivorship Care Plan

In 2015, ten percent of our 24 eligible patients received a survivorship care plan. The plan contained the record of care received, important disease characteristics and a follow-up care plan incorporating available and recognized evidence-based standards of care. The National Research Council's 2005 report, from *Cancer Patient to Cancer Survivor: Lost in Transition,* recommends that patients with cancer who are completing their first course of treatment be "provided with a comprehensive care summary and follow-up plan that is clearly and effectively explained."

Dietary Screening

Diet is an important component in the treatment of cancer and each patient has different needs and experiences. In order to maintain a healthy weight and diet throughout treatment, all oncology patients are screened, and when appropriate, referred to our dietitians for a consultation.

American Cancer Society

The American Cancer Society is a nationwide voluntary health organization dedicated to eliminating cancer. Houston Methodist West Hospital partners with the local chapter of the American Cancer Society, which has provided an array of free support services to our newly diagnosed cancer patients including educational information, Look Good Feel Better resources, hospitality and transportation.

HOUSTON METHODIST WEST CANCER CENTER RADIATION ONCOLOGY SERVICES 2015

200 Consultations

154 New Treatment Starts

795 Weekly Clinic Visits

514 Posttreatment Follow-ups

14.7 Average Daily External Beam

Treatment Procedures

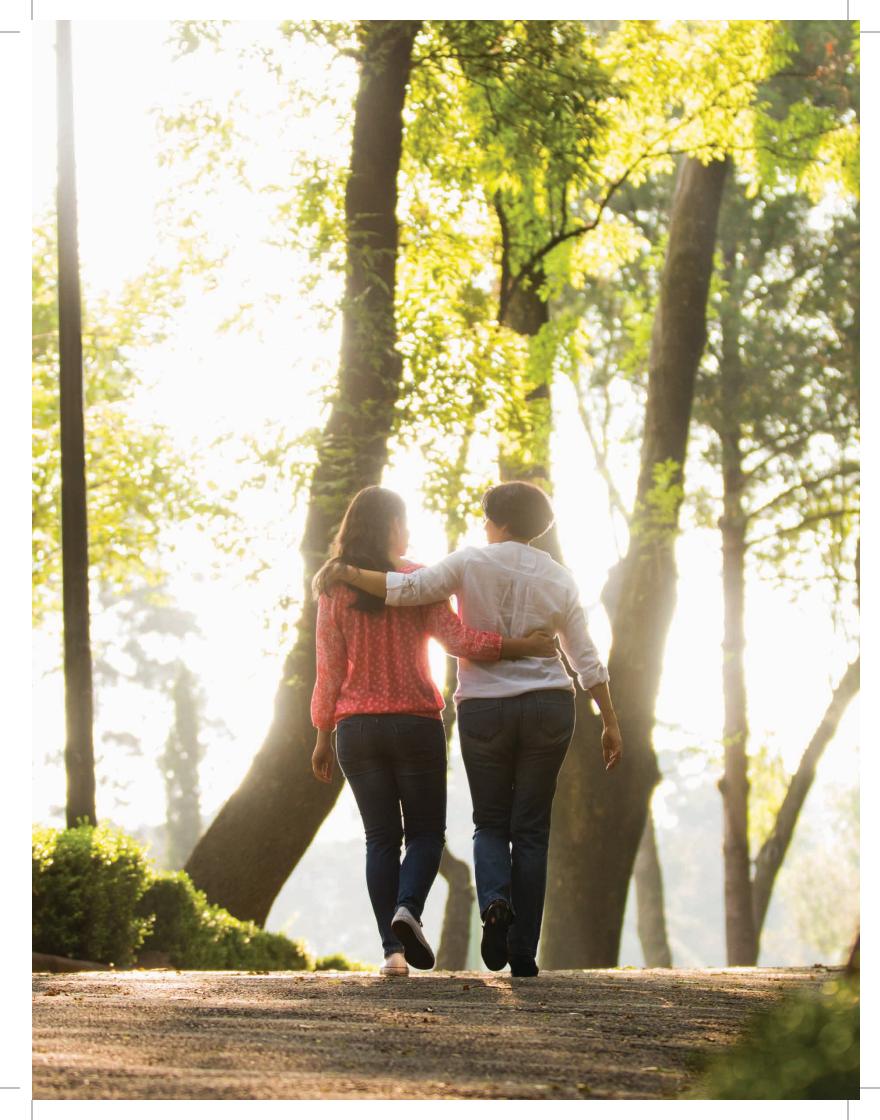
1,398 Intensity Modulated

Radiation Therapy (IMRT)

4 Stereotactic Body Radiotherapy

> 2,300 Conventional Treatments





2015 CANCER REGISTRY REVIEW

IN 2015, WE HAD **942 CASES**

ABSTRACTED: 533 ANALYTIC 409 NON-ANALYTIC.

00s – Non-Analytic (as of 2006 cases)

Patients are diagnosed only at Houston Methodist West. Treatment received elsewhere.

10s – Analytic

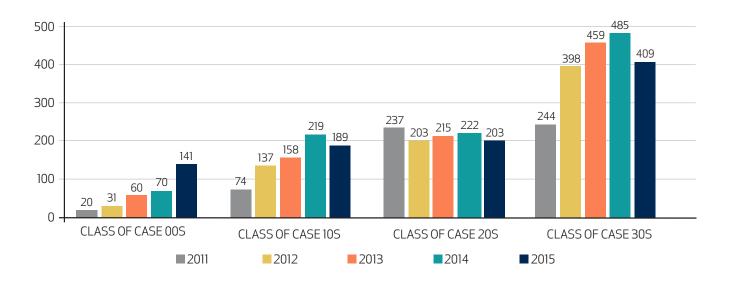
Patients are diagnosed and first course of treatment given at HMWH or the patient's treatment was planned at HMWH.

20s – Analytic

Patients are diagnosed at another facility; however, the first course of treatment is given at HMWH.

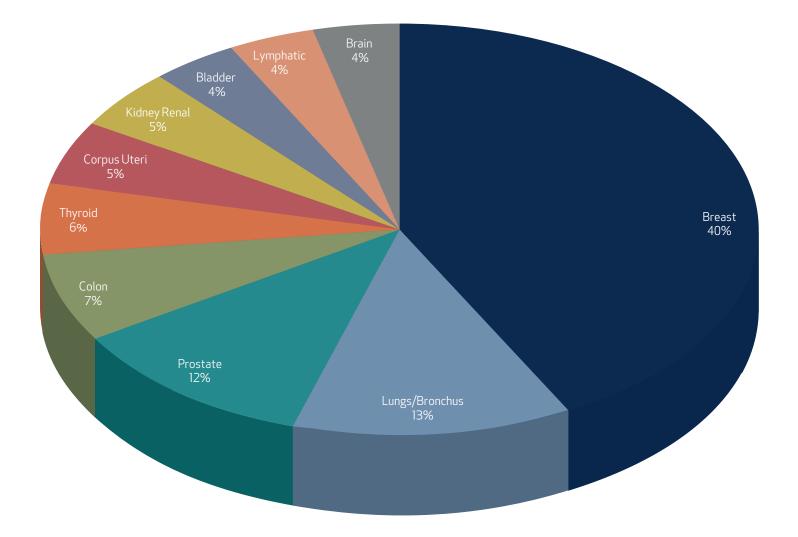
30s – Non-analytic

Patients are diagnosed and/or treated elsewhere. Presented at HMWH for other reason, courses of treatment or palliative care.



2015 TOP 10 TUMOR SITES INCLUDES ANALYTIC AND NON-ANALYTIC CASES

Breast	171	Prostate	52	Thyroid	28	Kidney/Renal	20	Lymphatic	18
Lung/Bronchus	55	Colon	30	Corpus Uteri	24	Bladder	18	Brain	18



HOU	STON M	ETHODI	ST WEST	HOSPI	TAL All	2015 –8	SITES ALI	CLASS	OF CAS	E			
PRIMARY SITE	TOTAL	CL/	SS	SI	EX			ALL AJCC STAGE GROUP					
		Α	N/A	М	F	0	1	П	Ш	IV	UNK	N/A	
ALL SITES	942	533	409	345	597	68	187	119	108	183	177	100	
ORAL CAVITY	25	11	14	18	7	0	1	0	4	11	7	2	
LIP	0	0	0	0	0	0	0	0	0	0	0	0	
TONGUE	11	6	5	8	3	0	1	0	2	7	1	0	
OROPHARYNX	5	1	4	3	2	0	0	0	1	1	3	0	
HYPOPHARYNX	0	0	0	0	0	0	0	0	0	0	0	0	
OTHER	9	4	5	7	2	0	0	0	1	3	3	2	
DIGESTIVE SYSTEM	155	65	90	79	76	3	24	12	26	40	45	5	
ESOPHAGUS	9	5	4	6	3	0	2	0	2	0	5	0	
STOMACH	15	7	8	6	9	0	3	1	1	5	5	0	
COLON	52	29	23	22	30	1	9	5	13	15	9	0	
RECTUM	25	8	17	17	8	1	2	2	5	8	7	0	
ANUS/ANAL CANAL	6	3	3	5	1	1	2	0	1	1	1	0	
LIVER	17	6	11	7	10	0	1	1	3	2	6	4	
PANCREAS	20	3	17	11	9	0	4	0	0	6	10	0	
OTHER	11	4	7	5	6	0	1	3	1	3	2	1	
RESPIRATORY SYSTEM	110	57	53	56	54	1	14	6	13	58	18	0	
NASAL/SINUS	0	0	0	0	0	0	0	0	0	0	0	0	
LARYNX	7	3	4	5	2	1	1	1	0	3	1	0	
LUNG/BRONCHUS	101	53	48	49	52	0	13	5	13	53	17	0	
OTHER	2	1	1	2	0	0	0	0	0	2	0	0	
BLOOD & BONE MARROW	54	16	38	24	30	0	0	0	1	1	1	51	
LEUKEMIA	23	9	14	14	9	0	0	0	1	1	1	20	
MULTIPLE MYELOMA	16	5	11	6	10	0	0	0	0	0	0	16	
OTHER	15	2	13	4	11	0	0	0	0	0	0	15	
BONE	1	0	1	1	0	0	0	0	0	0	1	0	
CONNECT/SOFT TISSUE	9	5	4	6	3	0	2	0	2	1	1	3	
SKIN	10	7	3	8	2	0	5	1	0	2	2	0	
MELANOMA	8	6	2	7	1	0	4	1	0	1	2	0	
OTHER	2	1	1	1	1	0	1	0	0	1	0	0	

Number of cases excluded: 0

This report includes cancer in-situ cervix cases, squamous and basal cell skin cases, and intraepithelial neoplasia cases.

PRIMARY SITE TOTAL CLASS SEX ALL AJCC STAGE GROUP I A N/A M F 0 1 II III III IV UNK N/A BREAST 289 1/0 119 1 289 42 67 66 23 28 61 2 FEMALE GENITAL 65 44 21 0 65 7 21 5 13 14 5 0 CORPUS UTERI 29 24 5 0 12 1 4 1 2 3 1 0 OVARY 16 7 9 0 16 1 3 0 5 2 0 VUIVA 7 4 3 0 7 5 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	НС	HOUSTON METHODIST WEST HOSPITAL All 2015 –SITES ALL CLASS OF CASE												
BREAST 289 170 119 1 288 42 67 66 23 28 61 2 FEMALE GENITAL CERVIX UTERI 12 8 4 0 165 7 21 5 113 14 5 0 CCRVIX UTERI 12 8 4 0 12 14 4 1 23 1 0 CCRVUS UTERI 29 24 5 0 29 0 13 3 6 5 2 0 OVARY 16 7 9 0 16 1 3 0 5 5 2 0 VUNA 7 4 3 0 7 5 0 1 0	PRIMARY SITE	TOTAL	CL	ASS	SEX			ALL AJCC STAGE GROUP						
FEMALE GENITAL 65 44 21 0 65 7 21 5 13 14 5 0 CERVIX UTERI 12 8 4 0 12 1 4 1 2 3 1 0 CORPUS UTERI 29 24 5 0 12 1 4 1 2 3 1 0 OMARY 16 7 9 0 16 1 3 0 5 5 2 0 VULVA 7 4 3 0 7 5 0 1 0 1 0 OTHER 1 1 0 0 16 23 9 9 15 0 PROSTATE 67 45 22 67 0 0 16 13 1 14 0 0 0 0 0 0 0 0 0 0 0			Α	N/A	М	F	0	I	П	Ш	IV	UNK	N/A	
CERVIX UTERI 12 B 4 0 12 1 4 1 2 3 1 0 CORPUS UTERI 29 24 5 0 29 0 13 3 6 5 2 0 OVARY 16 7 9 0 16 1 3 0 5 5 2 0 VULA 7 4 3 0 7 5 0 1 0 1 0 0 0 VULA 7 4 3 0 7 5 0 1 0	BREAST	289	170	119	1	288	42	67	66	23	28	61	2	
CERVIX UTERI 12 B 4 0 12 1 4 1 2 3 1 0 CORPUS UTERI 29 24 5 0 29 0 13 3 6 5 2 0 OVARY 16 7 9 0 16 1 3 0 5 5 2 0 VULA 7 4 3 0 7 5 0 1 0 1 0 0 0 VULA 7 4 3 0 7 5 0 1 0							_		_	10				
CORPUS UTERI 29 24 5 0 29 0 13 3 6 5 2 0 OVARY 16 7 9 0 16 1 3 0 5 5 2 0 VULVA 7 4 3 0 7 5 0 1 0 1 0 </td <td></td> <td></td> <td></td> <td></td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>					-									
OVARY 16 7 9 0 16 1 3 0 5 5 2 0 VULVA 7 4 3 0 7 5 0 1 0 1 0 <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>														
VULVA 7 4 3 0 7 5 0 1 0 1 0 0 OTHER 1 1 0 0 1 0 1 0 1 0 1 0 1 0 0 0 1 0 0 0 1 0 0 1 0 0 1 0 0 0 1 0														
OTHER 1 1 0 0 1 0 1 0 1 0 0 1 0 0 0 1 0 0 0 1 0 0 0 1 0 <td>-</td> <td></td> <td></td> <td>-</td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td>-</td> <td></td> <td></td> <td></td>	-			-	-					-				
MALE GENITAL 72 49 23 72 0 0 16 23 9 9 15 0 PROSTATE 67 45 22 67 0 0 12 23 9 9 15 0 TESTIS 4 4 0 4 0 0 11 0		_												
PROSTATE 67 45 22 67 0 0 12 23 9 9 14 0 TESTS 4 4 0 1 1 0 0 4 0 0 4 0 14 10 10 11 <th11< th=""> 11 <th11< th=""> <th11< td=""><td>OTHER</td><td> 1</td><td>1</td><td>0</td><td>0</td><td> 1</td><td>0</td><td> 1</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></th11<></th11<></th11<>	OTHER	1	1	0	0	1	0	1	0	0	0	0	0	
PROSTATE 67 45 22 67 0 0 12 23 9 9 14 0 TESTIS 4 4 0 4 0 0 4 0	MALE GENITAL	72	49	23	72	0	0	16	23	9	9	15	0	
TESTIS 4 4 4 0 4 0 0 4 0 1 0 URINARY SYSTEM 55 38 17 37 18 15 16 1 2 11 10 0 BLADDER 26 18 8 21 5 14 2 1 0 2 7 0 KIDNEY/RENAL 29 20 9 16 13 1 14 0 2 9 3 0 OTHER 0 1 1	PROSTATE		-									-		
URINARY SYSTEM 55 38 17 37 18 15 16 1 2 11 10 0 BLADDER 26 18 8 21 5 14 2 1 0 2 7 0 KIDNEY/RENAL 29 20 9 16 13 1 14 0 2 9 3 0 OTHER 0				0			0			0		0	0	
BLADDER 26 18 8 21 5 14 2 1 0 2 7 0 KIDNEY/RENAL 29 20 9 16 13 1 14 0 2 9 3 0 OTHER 0 1 1 1 1 </td <td>OTHER</td> <td>1</td> <td>0</td> <td>1</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>1</td> <td>0</td>	OTHER	1	0	1	1	0	0	0	0	0	0	1	0	
BLADDER 26 18 8 21 5 14 2 1 0 2 7 0 KIDNEY/RENAL 29 20 9 16 13 1 14 0 2 9 3 0 OTHER 0 1 1 1 1 </td <td></td> <td>11</td>													11	
KIDNEY/RENAL 29 20 9 16 13 1 14 0 2 9 3 0 OTHER 0	URINARY SYSTEM	55	38	17	37	18	15	16	1	2	11	10	0	
OTHER 0 <td>BLADDER</td> <td>26</td> <td>18</td> <td>8</td> <td>21</td> <td>5</td> <td>14</td> <td>2</td> <td>1</td> <td>0</td> <td>2</td> <td>7</td> <td>0</td>	BLADDER	26	18	8	21	5	14	2	1	0	2	7	0	
BRAIN & CNS 19 15 4 8 11 0 0 0 0 0 0 0 19 BRAIN (BENIGN) 2 1 1 1 1 0 0 0 0 0 0 0 2 BRAIN (MALIGNANT) 3 3 0 3 0 14 ENDOCRINE 29 27 2 8 21 0 17 1 5 1 1 0 0 0 0 0 0 1 1 0 0 0 0 0 1 1 1 0 0	KIDNEY/RENAL	29	20	9	16	13	1	14	0	2	9	3	0	
BRAIN (BENIGN) 2 1 1 1 1 0 0 0 0 0 0 0 2 BRAIN (MALIGNANT) 3 3 0 3 0 0 0 0 0 0 0 0 0 0 0 0 0 3 3 0 3 0 0 0 0 0 0 0 0 3 3 3 0 3 0 0 0 0 0 0 0 0 3 3 3 3 3 3 3 4 10 0 0 0 0 0 14 14 14 14 14 14 14 14 14 14 14 14 16 17 1 15 1	OTHER	0	0	0	0	0	0	0	0	0	0	0	0	
BRAIN (BENIGN) 2 1 1 1 1 0 0 0 0 0 0 0 2 BRAIN (MALIGNANT) 3 3 0 3 0 0 0 0 0 0 0 0 0 0 0 0 0 3 3 0 3 0 0 0 0 0 0 0 0 3 3 3 0 3 0 0 0 0 0 0 0 0 3 3 3 3 3 3 3 4 10 0 0 0 0 0 14 14 14 14 14 14 14 14 14 14 14 14 16 17 1 15 1				,					,		,	, ,		
BRAIN (MALIGNANT) 3 3 0 3 0 14 ENDOCRINE 29 27 2 8 21 0 17 1 5 1 2 3 THYROID 25 25 0 7 18 0 17 1 5 1 1 0 OTHER 4 2 2 1 3 0 0 0 0 0 1 3 LYMPHATIC SYSTEM 31 17 14 19 12 0 4 4 9 7 7 0 HODGKIN'S DISEASE 6 3 3 3 3 0 0 1 2 2 <td>BRAIN & CNS</td> <td>19</td> <td>15</td> <td>4</td> <td>8</td> <td>11</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>19</td>	BRAIN & CNS	19	15	4	8	11	0	0	0	0	0	0	19	
OTHER 14 11 3 4 10 0 0 0 0 0 0 14 ENDOCRINE 29 27 2 8 21 0 17 1 5 1 2 3 THYROID 25 25 0 7 18 0 17 1 5 1 1 0 OTHER 4 2 2 1 3 0 0 0 0 1 3 LYMPHATIC SYSTEM 31 17 14 19 12 0 4 4 9 7 7 0 HODGKIN'S DISEASE 6 3 3 3 3 0 0 1 2 2 1 0 NON-HODGKIN'S 25 14 11 16 9 0 4 3 7 5 6 0	BRAIN (BENIGN)	2	1	1	1	1	0	0	0	0	0	0	2	
ENDOCRINE 29 27 2 8 21 0 17 1 5 1 2 3 THYROID 25 25 0 7 18 0 17 1 5 1 2 3 OTHER 4 2 2 1 3 0 17 1 5 1 1 0 OTHER 4 2 2 1 3 0 0 0 0 0 1 3 LYMPHATIC SYSTEM 31 17 14 19 12 0 4 4 9 7 7 0 HODGKIN'S DISEASE 6 3 3 3 3 0 0 1 2 2 1 0 NON-HODGKIN'S 25 14 11 16 9 0 4 3 7 5 6 0 UNKNOWN PRIMARY 15 9 6 8 7 0 0 0 0 0 0 15 <td>BRAIN (MALIGNANT)</td> <td>3</td> <td>3</td> <td>0</td> <td>3</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>3</td>	BRAIN (MALIGNANT)	3	3	0	3	0	0	0	0	0	0	0	3	
THYROID 25 25 0 7 18 0 17 1 5 1 1 0 OTHER 4 2 2 1 3 0 0 0 0 0 1 3 LYMPHATIC SYSTEM 31 17 14 19 12 0 4 4 9 7 7 0 HODGKIN'S DISEASE 6 3 3 3 3 0 0 1 2 2 1 0 NON-HODGKIN'S 25 14 11 16 9 0 4 3 7 5 6 0 UNKNOWN PRIMARY 15 9 6 8 7 0 0 0 0 0 15	OTHER	14	11	3	4	10	0	0	0	0	0	0	14	
THYROID 25 25 0 7 18 0 17 1 5 1 1 0 OTHER 4 2 2 1 3 0 0 0 0 0 1 3 LYMPHATIC SYSTEM 31 17 14 19 12 0 4 4 9 7 7 0 HODGKIN'S DISEASE 6 3 3 3 3 0 0 1 2 2 1 0 NON-HODGKIN'S 25 14 11 16 9 0 4 3 7 5 6 0 UNKNOWN PRIMARY 15 9 6 8 7 0 0 0 0 0 15						1					1	1		
OTHER 4 2 2 1 3 0 0 0 0 1 3 LYMPHATIC SYSTEM 31 17 14 19 12 0 4 4 9 7 7 0 HODGKIN'S DISEASE 6 3 3 3 3 0 0 1 2 2 1 0 NON-HODGKIN'S 25 14 11 16 9 0 4 3 7 5 6 0 UNKNOWN PRIMARY 15 9 6 8 7 0 0 0 0 0 15					8		0		1	5	1	2	3	
LYMPHATIC SYSTEM 31 17 14 19 12 0 4 4 9 7 7 0 HODGKIN'S DISEASE 6 3 3 3 3 0 0 1 2 2 1 0 NON-HODGKIN'S 25 14 11 16 9 0 4 3 7 5 6 0 UNKNOWN PRIMARY 15 9 6 8 7 0 0 0 0 0 15		25			7				1		1	1		
HODGKIN'S DISEASE 6 3 3 3 3 0 0 1 2 2 1 0 NON-HODGKIN'S 25 14 11 16 9 0 4 3 7 5 6 0 UNKNOWN PRIMARY 15 9 6 8 7 0 0 0 0 0 15	OTHER	4	2	2	1	3	0	0	0	0	0	1	3	
HODGKIN'S DISEASE 6 3 3 3 3 0 0 1 2 2 1 0 NON-HODGKIN'S 25 14 11 16 9 0 4 3 7 5 6 0 UNKNOWN PRIMARY 15 9 6 8 7 0 0 0 0 0 15	IVMDHATIC SYSTEM	21	1.7	1.4	1.0	1.0	0	4	A	0	7	7	0	
NON-HODGKIN'S 25 14 11 16 9 0 4 3 7 5 6 0 UNKNOWN PRIMARY 15 9 6 8 7 0 0 0 0 0 15														
UNKNOWN PRIMARY 15 9 6 8 7 0 0 0 0 0 15		_												
	non nobannos	20	14		10	3		+	5	1	5	0	0	
	UNKNOWN PRIMARY	15	9	6	8	7	0	0	0	0	0	0	15	
	L			1	I	1	I	1	1	I	1	1	<u> </u>	
OTHER/ILL-DEFINED 3 3 0 0 3 0 0 0 1 0 2 0	OTHER/ILL-DEFINED	3	3	0	0	3	0	0	0	1	0	2	0	

Number of cases excluded: 0

This report includes cancer in-situ cervix cases, squamous and basal cell skin cases, and intraepithelial neoplasia cases.

QUALITY STUDY/QUALITY IMPROVEMENTS

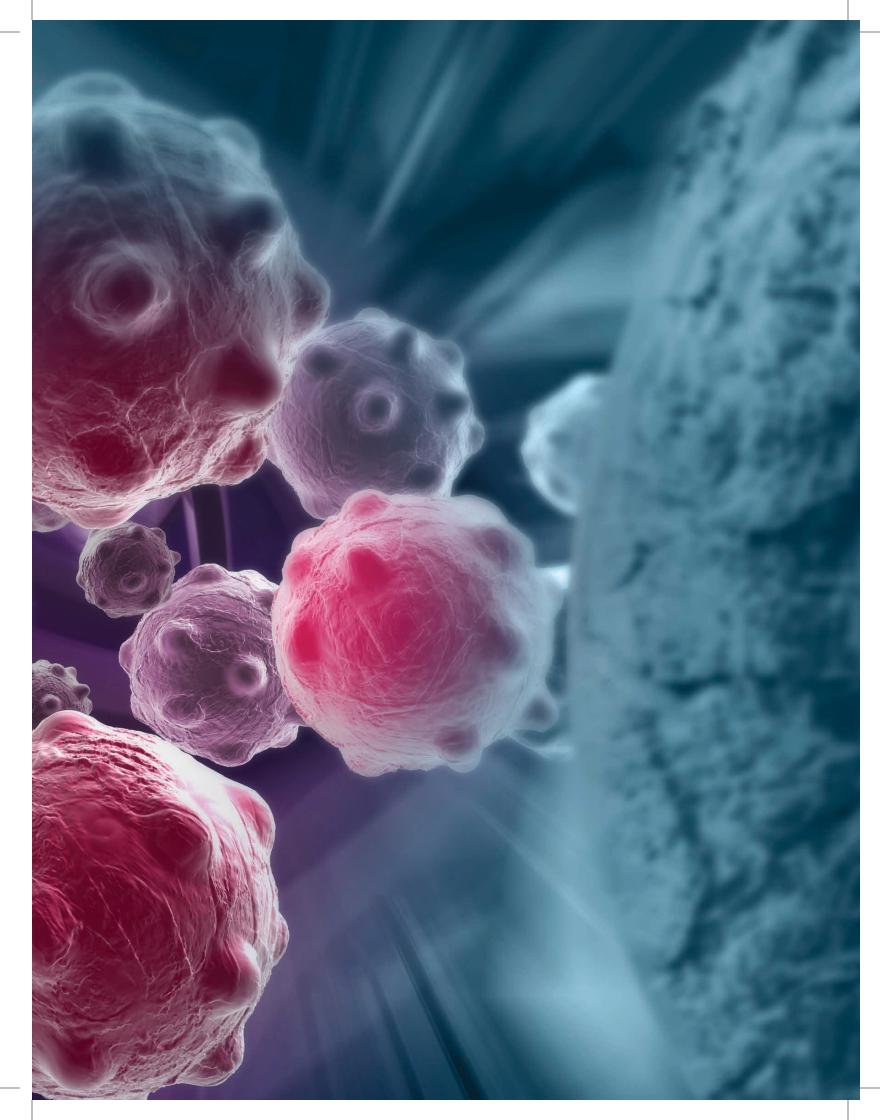
Quality Study/Quality Improvement — to provide all cancer patients with a comprehensive summary of cancer services to support them through their journey; and realizing that there are different entry points in which a cancer patient can receive services from Houston Methodist West. The cancer program team developed a comprehensive cancer services brochure that details all services that Houston Methodist West offers its cancer patients. This brochure has been made available at all entry points, assuring that every cancer patient knows the services and resources available within our hospital.

Successful delivery of inpatient chemotherapy administration - Planning and processes has been created to increase the number of trained nurses to safely administer inpatient chemotherapy. During the study, as patients were admitted and requiring inpatient chemotherapy, the infusion nurses worked with medical-surgical nurses to ensure preparations were completed, and mentored them through several patients. This allowed for the successful delivery of inpatient chemotherapy administration and successful competency of trained medical-surgical nurses for chemotherapy. This is now an independent function that medical-surgical nursing is able to provide. Plans have been made to identify a group of nurses to complete chemotherapy administration education thus providing more training.

HOUSTON METHODIST WEST HOSPITAL

CANCER SERVICES





houstonmethodist.org/west

