



Public Reporting of Outcomes
CANCERCARE CENTER

Minot, North Dakota

2015

TRINITY HEALTH STATISTICS – 2015

There are 11,034 cancer primaries in the Trinity Health cancer registry from 1990 (assessment year) through 2015. This number represents cancer primaries diagnosed and/or treated at Trinity Health.

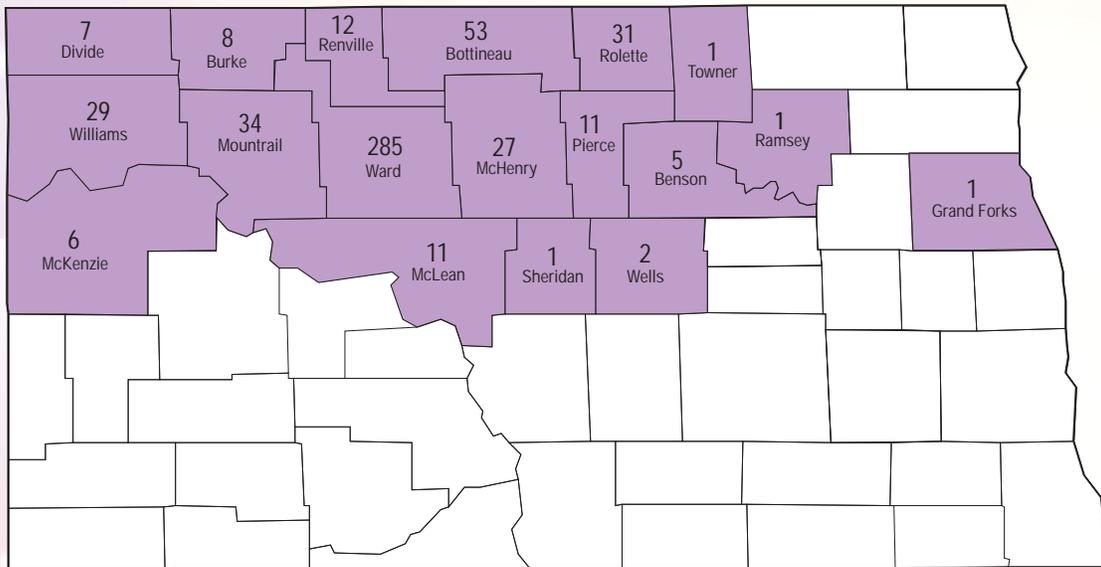
In 2015, the number of those cases was 531.

The following map shows the geographic distribution.

North Dakota - 525

Out-of-State - 6

Total - 531



According to *Cancer Facts & Figures 2015*, from the American Cancer Society, about 78% of all cancers are diagnosed in persons 55 and older.

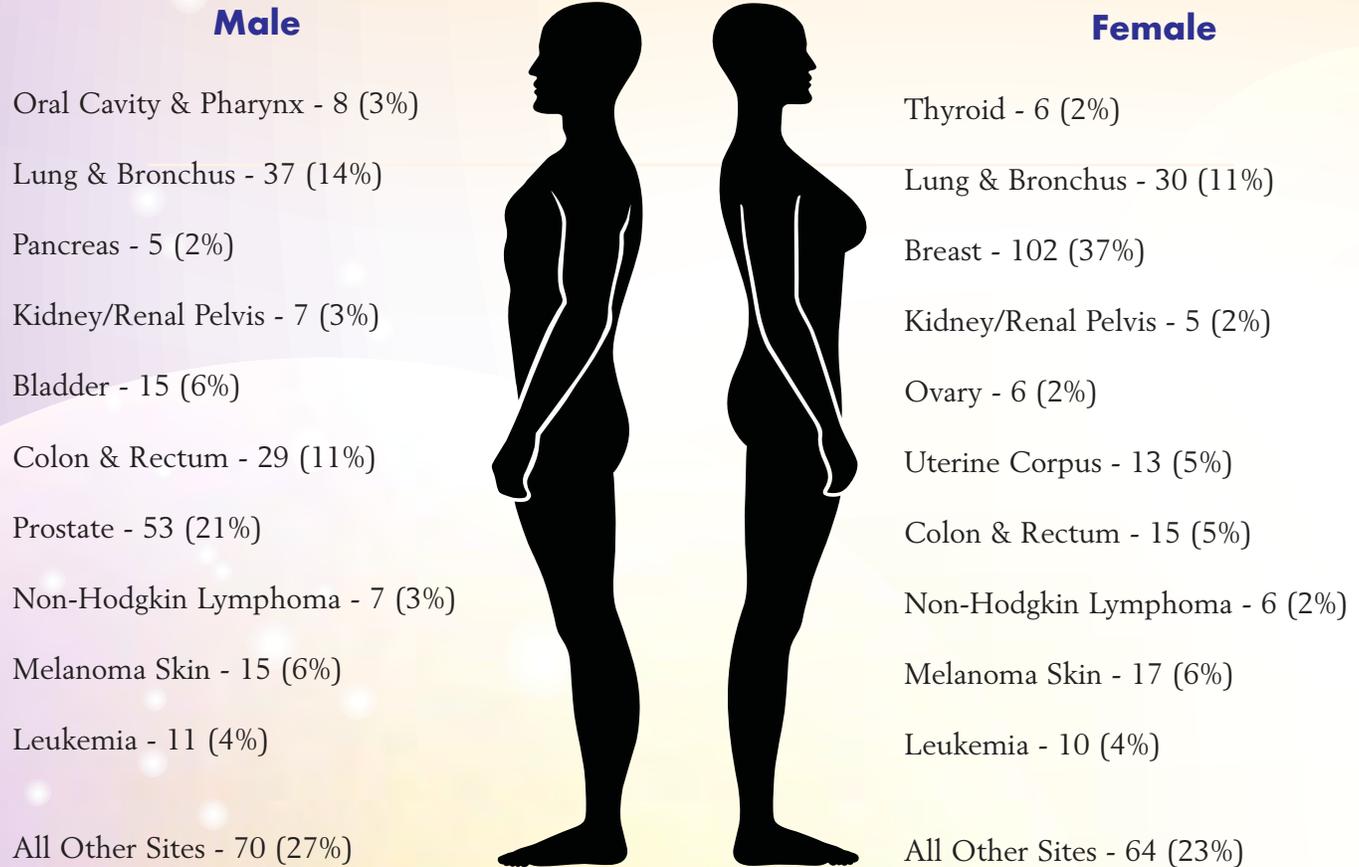
In 2015, approximately 86% of all cancers diagnosed at Trinity Health were in persons 50 and older.



Age Distribution	Male Total	Female Total
0-29	7	14
30-39	6	7
40-49	12	27
50-59	46	57
60-69	69	64
70-79	69	61
80-89	39	38
90+	6	4
Unknown	2	1
Total	256	273

LEADING SITES OF NEW CANCER CASES 2015 Trinity Health

These tables demonstrate that the 10 most common malignancies for 2015 at Trinity Health are consistent with those estimated by the American Cancer society as top sites nationwide for 2015. These 10 sites comprised approximately 75% of all malignancies seen at Trinity Health in 2015.



2015 Estimates — American Cancer Society

Estimated New Cases*

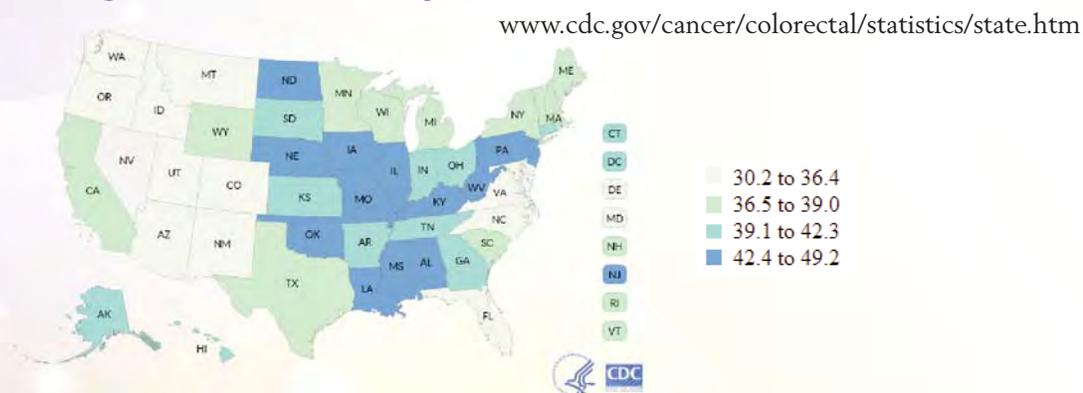
Male		Female	
Prostate		Breast	Melanoma of the Skin
220,800 (26%)	Kidney & Renal Pelvis	231,840 (29%)	31,200 (4%)
Lung & Bronchus	38,270 (5%)	Lung & Bronchus	Pancreas
115,610 (14%)	Oral Cavity & Pharynx	105,590 (13%)	24,290 (3%)
Colon & Rectum	32,670 (4%)	Colon & Rectum	Leukemia
69,090 (8%)	Leukemia	63,610 (8%)	23,370 (3%)
Urinary Bladder	30,900 (4%)	Uterine Corpus	Kidney & Renal Pelvis
56,320 (7%)	Liver & Intrahepatic Bile Duct	53,870 (7%)	23,290 (3%)
Melanoma of the Skin	25,510 (3%)	Thyroid	All Sites
42,670 (5%)	All Sites	47,230 (6%)	810,170 (100%)
Non-Hodgkin Lymphoma	848,200 (100%)	Non-Hodgkin Lymphoma	
39,850 (5%)		32,000 (4%)	

* Excludes basal and squamous cell skin cancers and in situ carcinoma except urinary bladder.

Trinity Health Partners with the North Dakota Department of Health to Promote and Provide No-Cost Screening Colonoscopies to North Dakota Residents

Colorectal cancer, sometimes referred to as colon cancer, is the third most common cancer diagnosed in men and women in North Dakota and the US. In addition, colorectal cancer is the second leading cause of cancer death in cancers that affect both men and women. More than 40% of North Dakotans ages 50-75 have never been screened for colorectal cancer or are past due for screening and approximately 54% of North Dakotans diagnosed with colorectal cancer are diagnosed with metastatic disease.

Rates of Getting Colorectal Cancer by State



There are many factors that can increase an individual's risk for developing colorectal cancer. A few of these risk factors are:

- Age: >90% of cases are diagnosed at age 50 or greater
- Race
- Having a personal or family history of colorectal cancer diagnosis or polyps
- Inflammatory bowel disease
- Genetic factors such as Familial Adenomatous Polyposis or Lynch Syndrome
- Obesity or physical inactivity
- Smoking and/or heavy alcohol use
- Diet

The American Cancer Society recommends that men and women at average risk for colon cancer begin regular screening at age 50. Colorectal cancer, if detected early, can be treated effectively. According to ACS statistics, when colorectal cancer is found early before spread, the 5-year survival is 90%. Once colorectal cancer has spread to other parts of the body, survival drops significantly.

In 2014-2015, Trinity Health had the opportunity to partner with the North Dakota Department of Health in an initiative to promote colorectal screening in North Dakota. Funding for this initiative was provided through a grant put forth by the North Dakota legislative assembly. Trinity Health was ultimately awarded the opportunity to provide 50 no-cost screening colonoscopies to eligible individuals.

The eligibility for the no-cost colorectal screening initiative was as follows:

- North Dakota resident
- Age 50-64
- Reported household income at or below 200% of the federal poverty level
- Uninsured or underinsured
- Not been screened for colorectal cancer or is past due for screening
- No prior personal history of colon cancer or genetic colorectal polyp disorders

All the prospective participants of the initiative were assessed for ND Medicaid Expansion eligibility and/or provided with information regarding the Marketplace insurance program with referrals made to either as appropriate.

The approximate cost of a screening colonoscopy at Trinity Health for a self-pay patient is approximately \$3,000. Trinity Health provided a “true” no-cost screening program, meaning any and all services related to the patient receiving their colonoscopy was provided free of charge as long as they met the eligibility of the initiative.

The initiative for the Colorectal Screening Program ran from January 1, 2014, through June 30, 2015. Trinity Health received 47 patient inquiries during this time. All inquiring patients were assessed through the screening process. Seventeen patients met the eligibility requirements and were enrolled in the initiative with the other 30 being determined ineligible. Reasons for ineligibility included age, income, no-shows, medical reasons, or were referred to Medicaid expansion for coverage long-term.

All 17 patients who were enrolled in the initiative completed screening.

This initiative was very successful in bringing awareness to both regional and local areas. It also led to better relationships between Trinity Health and outside organizations. Some of the barriers to the initiative included a very lengthy enrollment process, obtaining primary care providers for these participants, and a wait time for scheduling a patient due the amount of necessary criteria that had to be completed prior to the colonoscopy screening.

More information regarding colorectal cancer can be found at the American Cancer Society website:

<http://www.cancer.org/index>

Trinity Health offers Head & Neck Screening Clinic

Head and neck cancer is a term used to collectively include cancers that affect the cells lining the mucosal surfaces inside the region of the head and neck. These cancers are further classified into the areas of the body they affect such as the oral cavity, pharynx, larynx, sinuses, and salivary glands. Two of the most common risk factors of developing a head and neck cancer are alcohol and tobacco use. The National Cancer Institute states at least 75% of head and neck cancers are caused by tobacco and alcohol use. Those that use both tobacco and alcohol are at a greater risk than those that use alcohol or tobacco alone.

Symptoms of head and neck cancer may include a sore or lump that does not heal, sore throat that does not go away with time, difficulty swallowing, or a change in the voice such as hoarseness.

Trinity Health's cancer committee was approached by the Ear, Nose, and Throat (ENT) department in May of 2015 due to seeing a large amount of patients presenting to their department with advanced head and neck cancer. Dr. Mark Noel reported seeing a moderate amount of patients with a history of smoking and persistent throat pain. In an effort to help facilitate screening it was suggested to the committee to offer a head and neck screening clinic.

With support from the cancer committee, a head and neck screening clinic was put together at the Trinity CancerCare Center with collaboration between ENT and CancerCare physicians. Any necessary equipment needed to provide this screening clinic was taken to Trinity CancerCare in an effort to provide as thorough of an exam as possible. Any additional procedures found during the screening were to be scheduled as follow-up with ENT physicians.

Patients were scheduled in 15-minute time slots split between Dr. Mark Noel and Dr. Michael Grant of Radiation Oncology. These patients were given a questionnaire upon arrival asking them of past history in regard to alcohol and tobacco use as well as any past family history of cancer. These patients could also list any concerns they were having in regard to this screening.

Results from head and Neck Screening Clinic:

- Total number of patients screened 24
- Total number referred for routine follow-up 17
- Total number referred for further follow-up 5
- Total number referred for immediate consult 2

Patients were given a survey to complete following their exam. Based on results of this clinic in identifying individuals with further or immediate follow-up, Trinity Health will be providing another clinic in 2016 with a date to be determined.

For more information regarding head and neck cancer please visit the American Cancer Society website:

<http://www.cancer.org/>

Citing Measurement Information in Radiologist Readings

Opportunity for Improvement

- Stephen Makoni, MD, brought forth during Cancer Committee meeting February 25, 2015, regarding how to improve the usability of radiologist readings
- Supported by Cancer Committee and recommended quality study

Quality Study

- List compiled of CT & PET/CT scans ordered by oncology physicians from October through December 2014
- Total of 373 imaging exams ordered
- Random sampling – 15% of exams reviewed

Findings

- 17 readings did not contain measurement values
- 16 readings were determined not applicable and thrown out
- 23 readings contained measurement information
- Result – 57.5% of readings contained measurement information when applicable

Conclusion

- Results communicated to Cancer Committee
- Kenneth Keller, MD, Medical Director Radiology – provided education to radiologists in March 2015
- Follow-up quality study to be done for exams ordered April through June 2015

Quality Study

- List compiled of CT & PET/CT scans ordered by oncology physicians from April through June 2015
- Total of 448 imaging exams ordered
- Random sampling – 15% of exams again reviewed

Findings

- 3 readings did not contain measurement values
- 26 readings were determined not applicable and thrown out
- 39 readings contained measurement information
- Result – 92.9% of readings contained measurement information when applicable

Conclusion

- Marked improvement overall in the value and usability of reports, including measurement information
- Propose on-going monitoring by oncology physicians and repeat quality periodically

Trinity Health Foundation provides Increased Financial Support

Each day, physicians and caregivers at the Trinity CancerCare Center help patients and their families fight cancer. Continuous efforts are made to advance and improve on the high quality of care provided. In January 2015, Trinity CancerCare participated in a survey in conjunction with the North Dakota Department of Health related to barriers patients encounter when receiving oncology care. One of the barriers reported as a result of this was out-of-pocket expenses. This information was presented to the cancer committee and gained approval for potential increased financial support. Shane Jordan, Trinity CancerCare Center Director, approached the Trinity Health Foundation about the possibility of offering a no-cost compression garment for patients at risk for lymphedema as well as increasing the amount of financial assistance provided to patients when receiving oncology care.

Lymphedema is the swelling caused by the accumulation of lymph fluid and occurs when lymph vessels or lymph nodes are blocked or removed. Men and women who undergo cancer treatments that involve surgery and/or radiation that include the removal or damage of lymph nodes may be at risk for lymphedema. Compression garments can help keep the swelling down once the extremity is decongested.



The Trinity CancerCare Center, Trinity Health Foundation, Trinity's Physical Therapy department and KeyCare Medical have all played a part in helping patients with lymphedema through garments to help patients. Pictured are: Cody McManigal, Foundation assistant; Nicole Kutch and Aimee Clemens, physical therapy; Roxcy Reiter, manager of KeyCare Medical; and Shane Jordan, director of the Trinity CancerCare Center.

Trinity CancerCare center was able to attain approval from the Trinity Health Foundation on both of these items. The garments are supplied by KeyCare Medical, which offers them to the Trinity CancerCare Center at cost. Jordan estimates that, annually, 50 patients will benefit from this program.

In addition to the compression garments, patients are also now eligible for \$100 plus an additional gift card in the amount of \$100 to Walmart, Marketplace Foods, or Cash Wise.