BUILDING On STRENGTH
2013 ANNUAL REPORT

MULTIDISCIPLINARY CLINICAL TEAMS + PATIENT NAVIGATION
+ GENETIC COUNSELING + CLINICAL RESEARCH + CLINICAL
EDUCATION + INTEGRATIVE MEDICINE + PATIENT SUPPORT
AND EDUCATION + INNOVATIVE CLINICAL TRIALS CENTER
+ SURVIVOR CELEBRATIONS + COMMUNITY OUTREACH
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The theme of this year’s oncology annual report, “Building on Strength,” certainly captures the spirit of Baylor All Saints Medical Center at Fort Worth’s oncology program in 2013. In 2012, we reported a great deal of progress in putting the pieces together to bring the residents of Fort Worth and surrounding communities quality cancer diagnostic and treatment capabilities. This gave us a solid platform upon which we continued our march toward oncology excellence in 2013.

A highlight of the past year for Baylor Fort Worth oncology was receiving reaccreditation as a Community Hospital Comprehensive Cancer Program from the American College of Surgeons Commission on Cancer. This high distinction maintained our position as a strong, vital member of the Baylor Charles A. Sammons Cancer Center network.

Several other achievements confirmed the positive momentum that surrounded our cancer program in 2013:

- The genetics counseling program extended its hours of service to two days per week. This important community resource averaged 26 patients per month, slightly above the national average for similar programs. Expanding access contributed to increased awareness and use of the genetic testing and counseling services.

- Physician interest in multidisciplinary cancer conferences continued to grow and mature. The breast cancer conference was held every Wednesday and attendance by surgical oncologists, medical oncologists, radiation oncologists, pathologists, radiologists, support services staff, nurse navigators and more remained high. The gynecological oncology cancer conference built momentum and gained support from the same variety of practitioners as it met monthly to review cases. Attendees agreed that the conferences provided an opportunity for lively discussion of complex cases that resulted in unique educational opportunities and the appropriate treatment plan for patients.

- The Baylor Fort Worth oncology program continued to recruit outstanding physicians to the team. Two plastic surgeons that perform DIEP Flap reconstruction on mastectomy patients joined the medical staff. Another critical addition to the Baylor Fort Worth oncology team was a medical director for Supportive and Palliative Care.

In December 2013 our palliative care program earned the Joint Commission Advanced Certification, signifying that the hospital’s team had developed a process to support coordination of care and communication among all care settings and providers. The team worked with a multi-disciplinary group of health care professionals to support palliative care. We are committed to supporting the palliative care program because research shows that it improves the quality of life of patients and family members, as well as the physical and emotional symptoms of cancer and its treatment.

Planning was completed for the expansion and strengthening of the Baylor Fort Worth gynecologic oncology surgery program in 2014 with the acquisition of the daVinci® robotic surgery system. This technology will enable surgeons to operate with enhanced vision, precision, dexterity and control.

We continued our efforts in 2013 to look beyond the walls of the hospital for resources that could help us extend our oncology program and services to more segments of the communities we serve. These included the Adolescent and Young Adult Cancer Association, the American Cancer Society and implementation of the low dose CT lung cancer screening program. You will read more about each of these in this report.

As you can see, our vision for cancer care for Fort Worth and beyond is focused on providing excellent, compassionate, patient-focused care that enables patients to stay in the community and pursue their recovery in familiar surroundings supported by family and friends. Our cancer program is strong and we are building to make it even stronger in 2014.

Sincerely,

David G. Klein, MD
President
Baylor All Saints Medical Center at Fort Worth
Physician Members
Kathleen Sirlin, MD, chairman, Radiation Oncology, coordinator of cancer conferences
Brian Carlisle, MD, Pathology
Preasanth Ganesa, MD, Medical Oncology, coordinator of quality, Cancer Registry Data, Commission on Cancer liaison
Martin Piat, MD, Radiology
Kelly Kunkel, MD, Plastic Surgery
John Stiburti, MD, Surgery
Jesse Smith, MD, PACS, Head and Neck Surgery

Non-physician Members
Becky Hardie, RN,C-OB, MS HCAD, NEA-BC, Administrator, Andrews Women’s Hospital at Baylor All Saints & Joan Katz Breast Center at Baylor All Saints
Sharon Cheng, director, Rehabilitation and Wellness Services
Stacey Guillen, MBA, oncology program coordinator, Marketing/Cancer Administration
Ascanio Peguero, MD, MDIV, BCC, Pastoral Care
Leslie Phillips, director, Hospital Quality Improvement, coordinator of Quality Improvement
Melody Maughan, oncology social worker
Laura Scilliano, RN, CTR, manager, coordinator QI Cancer Registry
Sheree Bennett, RN, breast health nurse navigator
Lisa Kirby, RN, gynecological cancer nurse navigator
Ashley Mullins, RD, LD, CNSC, Nutritional Services
Lori Hodge, RN, MSN, OCN, nurse manager, Oncology
Kim Montgomery, palliative care coordinator
Ginger Butterworth, research coordinator
Blana Moss, RN, head and neck nurse navigator
Carolyn Garby, MS, CGC, genetics coordinator
Donna Rankin, regional director, American Cancer Society
Taryn Pemberton, MBA, MHSM, system director of oncology marketing
Angela Fraticelli, LMSW, MHA, director of Outpatient Clinical Services
Nancy Lunt, pharmacy manager
Haley Spears, child life specialist
Dear Friends and Colleagues,

The cancer committee of Baylor All Saints Medical Center at Fort Worth is pleased to report another triumphant year for our patients and medical community. We continue to uphold the standards of a Community Hospital Comprehensive Cancer Program, with commendation by the American College of Surgeons Commission on Cancer by enhancing our patient-centered culture. I credit the physicians on our medical staff and our hospital staff whose dedication and expertise have enabled this culture to thrive, and I thank them for their ongoing commitment to meeting the unique needs of our cancer patients and their families.

On May 2013, we were re-accredited as a designated cancer program by the Commission on Cancer with commendations. After our initial accreditation in 2010, re-accreditation in 2013 is a testament of the hard work, dedication, and expertise of the cancer program at Baylor Fort Worth. In addition, the cancer committee has been diligently working to implement the phase-in standards for re-accreditation required by January 1, 2015. These standards include the addition of a psychosocial distress screening tool to assess family, emotional, spiritual/religious, and practical problems that patients may encounter during their cancer experience and a survivorship care plan that will be given to cancer patients upon completion of their treatment outlining their care and follow-up. The cancer committee, meeting bi-monthly, continues to monitor compliance with current standards. Goals established for 2013 were to earn the Advanced Certification for Palliative Care, encourage genetic testing, and increase community resources for oncology outreach.

As a diverse, multidisciplinary group of health care professionals, we are dedicated to providing quality, compassionate care for cancer patients, their families and our community. We have demonstrated our commitment to patient care by proving our quality throughout the year in numerous cancer-related activities and programs, including:

- The Joint Commission’s Advanced Certification for Palliative Care Programs was earned in December 2013. This certification recognized Baylor Fort Worth’s inpatient program for providing exceptional patient and family-centered care and optimizing the quality of life for patients with serious illness. Palliative care addresses a patient’s physical, emotional, social and spiritual needs and facilitates patient autonomy, access to information and choice.

- The Hereditary Cancer Risk Program at the Joan Katz Breast Center was expanded to provide genetic counseling and testing for individuals who have a strong personal and/or family history of breast, ovarian, colon, uterine, or other cancers. Over the last year the program has made significant advances in the delivery of patient care, research, and education. With the growth of the genetics medical field, the program has dedicated considerable attention to the education of patients, their family members, and health care providers regarding hereditary cancer syndromes. On March 2013, we hosted a healthcare professional education conference on the new changes of genetic counseling and discussed cases. In addition, the program has grown from one to two certified genetic counselors as part of the hospital’s commitment to providing quality, comprehensive care. In addition, the required by January 1, 2015. These standards include the addition of a psychosocial distress screening tool to assess family, emotional, spiritual/religious and practical problems that patients may encounter during their cancer experience and a survivorship care plan that will be given to cancer patients upon completion of their treatment outlining their care and follow-up. The cancer committee, meeting bi-monthly, continues to monitor compliance with current standards. Goals established for 2013 were to earn the Advanced Certification for Palliative Care, encourage genetic testing, and increase community resources for oncology outreach.

Community resources and collaborations to provide quality cancer care with the Fort Worth Adolescents and Young Adults (AYA) Oncology Coalition were increased. The Fort Worth AYA Oncology Coalition brings together AYAs, health professionals, and the community in a unified effort to support young people before, during, and after cancer. We’re committed to providing all AYAs with cancer in our community quality, comprehensive and age appropriate care via access to health services, education, support and resources. We will support health care professionals, and create awareness in the community on the unique needs of AYAs. The Baylor Fort Worth cancer program is eager to lay the groundwork for an AYA program that will bring together the top experts in both adult and pediatric oncology to develop appropriate treatment plans for our patients. For more information: http://fortworthaya.org/
The CT Low-Dose Lung Screening Program was implemented in July 2013. People who are at high risk for lung cancer can take advantage of a new lung cancer screening program now offered on the campus of Baylor Fort Worth. According to the American Cancer Society, lung cancer is the leading cause of cancer death—more than breast, prostate, colon and pancreatic cancers combined. A study conducted by the National Cancer Institute proved that screening people at high risk for lung cancer with low-dose CT scans reduced mortality by 20%. The study estimates that early detection and treatment of lung cancer could save more than 70,000 lives a year. Baylor Fort Worth’s lung cancer screening program offers those at high risk for lung cancer the opportunity to screen and diagnose the disease before symptoms develop through use of a low-dose computed tomography (CT) scan. For more information on the CT Low-dose Lung Screening Program, call 817.922.2222.

I would like to extend a special thank you for all those who have worked diligently to develop this annual report and all the dedicated staff who served on our cancer committee, for without them it would be impossible to serve our patients and community.

Respectfully submitted,

Kathleen L. Shide, MD
Cancer Committee Chair

Commission on Cancer Accreditation
In May 2013, the cancer program at Baylor All Saints received re-accreditation with commendation for our Community Hospital Comprehensive Cancer Program by the Commission on Cancer established by the American College of Surgeons. The commission sets criteria for excellence in cancer diagnosis, staging, patient-centered treatment, and focus on quality of care and patient outcomes.

Five key elements are required of a Commission on Cancer-accredited cancer program:
[1] Clinical services provide state-of-the art pretreatment evaluation, staging, treatment, and clinical follow-up for cancer patients seen at the facility for primary, secondary, tertiary and end-of-life care.
[4] A quality improvement program is the mechanism for evaluating and improving patient outcomes.

The American College of Surgeons’ Commission on Cancer Liaison Physician program was developed in 1963 as a network of volunteer physicians responsible for providing leadership and direction to support their facility’s cancer program. A Cancer Liaison Physician’s (CLP) duty is to monitor, maintain and improve the quality of the cancer program at his or her hospital. A CLP is a required component for the accreditation of a cancer program by the Commission on Cancer.

During my third year as CLP in 2013, the main focus was the implementation of the Rapid Quality Reporting System (RQRS), a reporting and quality improvement tool that provides real clinical time assessment of hospital level adherence to National Quality Forum-endorsed quality of cancer care measures for breast and colon cancers. The purpose of the RQRS is to assist our program in promoting evidence-based cancer care at the local level. The web-based, systematic data collection reporting system advances evidence-based treatment through a prospective alert system for anticipated care, which supports care coordination required for breast and colorectal cancer patients.

I am pleased that our cancer registry is abstracting cases concurrently in order to get the most benefit from the reporting tool. In 2014, additional measures will be added to include breast, colon, lung, esophagus, and gastric.

In addition, Baylor Fort Worth and the American Cancer Society continue to build their strength in community outreach and education by collaborating to provide our patients and the community with resources and activities. A review of the American Cancer Society’s Collaborative Action Plan is presented annually to the cancer committee. This plan is vetted by the committee to help facilitate both entities in reaching mutual goals and objectives for delivery of quality, patient-centered, family-focused cancer care.

It is a privilege to continue as Cancer Liaison Physician and represent Baylor Fort Worth. I am again grateful for all the hard work of our committee members and staff at Baylor Fort Worth.

Prasanthi Ganesa, MD
Commission on Cancer Liaison, American Cancer Society
CANCER PROGRAM PRACTICE PROFILE REPORTS (CP3R) +

FOR BREAST, COLON, AND RECTAL CANCERS

The National Cancer Data Base (NCDB) is a nationwide oncology outcomes database and is a joint program of the Commission on Cancer (CoC) and the American Cancer Society.

The Web-based Cancer Program Practice Profile Reports (CP3R) offer local providers comparative information to assess adherence to and consideration of standard of care therapies for major cancers. This reporting tool promotes continuous practice improvement to enhance quality of patient care at the local level and also permits hospitals to compare their care for these patients relative to that of other providers.

More than 1,500 CoC accredited Cancer Programs, such as Baylor All Saints, report cases to the NCDB annually. Data submitted to the NCDB are used to provide feedback to assess the quality of patient care. These data can be used to explore trends in cancer care, create regional and state benchmarks for participating hospitals, and serve as the basis of quality improvement. CP3R results are used to assess compliance with treatment guidelines/outcomes and to validate Cancer Registry data. Below is a detailed report of Baylor All Saints’ compliance. Cases included in the evaluation are from 2011. This is the current data available from the NCDB.

The Cancer Committee at Baylor Fort Worth is committed to providing each patient seen the quality of care he or she deserves and continuously monitors standards for compliance. Rapid Quality Reporting System (RQRS) is a reporting and quality improvement tool which provides clinical time assessment of hospital level adherence to the above National Quality Forum (NQF) endorsed quality measures. Baylor All Saints has participated in RQRS with the Commission on Cancer since mid 2013.

ONCOLOGY QUALITY METRICS 2012

<table>
<thead>
<tr>
<th>Cancer Type</th>
<th>Metric</th>
<th>NCDB Target</th>
<th>CoC State Region (West)</th>
<th>CoC Census Region (West)</th>
<th>All CoC Programs</th>
<th>Baylor All Saints</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast Cancer</td>
<td>Post Breast Conserving Surgery Irradiation</td>
<td>Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 and receiving breast conserving surgery for breast cancer (Accountability Measure)</td>
<td>NCDB, CoC, NQF, NAPBC</td>
<td>90%</td>
<td>90%</td>
<td>88.6%</td>
<td>88.8%</td>
<td>81.8%</td>
<td>97.1%</td>
</tr>
<tr>
<td></td>
<td>Adjuvant Chemotherapy: Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under 70 with ACC T1cNoMo, or Stage II or III hormone receptor negative breast cancer (Accountability Measure)</td>
<td>NCDB, CoC, NQF, NAPBC</td>
<td>90%</td>
<td>90%</td>
<td>90.0%</td>
<td>22.5%</td>
<td>94.4%</td>
<td>94.3%</td>
<td>95.5%</td>
</tr>
<tr>
<td>Colorectal Cancer</td>
<td>Adjuvant Chemotherapy: Adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis to patients under age 80 with AJCC III (lymph node positive) colon cancer (Surveillance Measure)</td>
<td>NCDB, CoC, NQF</td>
<td>90%</td>
<td>90%</td>
<td>88.3%</td>
<td>88.4%</td>
<td>83.6%</td>
<td>100%</td>
<td>90.0%</td>
</tr>
<tr>
<td></td>
<td>Surgical Resection Includes at Least 12 Lymph Nodes: At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer (Surveillance Measure)</td>
<td>NCDB, CoC, NQF</td>
<td>90%</td>
<td>90%</td>
<td>89.0%</td>
<td>89.7%</td>
<td>87.5%</td>
<td>94.7%</td>
<td>97.6%</td>
</tr>
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<td>Rectal Cancer</td>
<td>Radiation Therapy for Rectal Cancer: Radiation therapy is considered or administered within 6 months (180 days) of diagnosis for patients under the age of 80 with clinical or pathological AJCC T4N0M0 or Stage III receiving surgical resection of rectal cancer (Surveillance Measure)</td>
<td>NCDB, CoC, NQF</td>
<td>90%</td>
<td>90%</td>
<td>89.0%</td>
<td>89.0%</td>
<td>91.8%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

*Source: American College of Surgeons National Cancer Data Base*
When someone receives a diagnosis of cancer, a world of difficult choices lies ahead. One of the first and most important decisions for the new patient is deciding where to go to get quality care. For people living in North Texas, that decision has now become easier with the launch of the Baylor Charles A. Sammons Cancer Center network. Last year, Baylor Fort Worth became a proud member of the Baylor Charles A. Sammons Cancer Center network. Baylor Fort Worth worked arduously to achieve the distinction of using the Baylor Sammons Cancer Center name for its oncology programs by meeting or exceeding the stringent criteria established by Baylor Health Care System (BHCS). Baylor Fort Worth is honored to be part of this collaborative effort to bring quality cancer care to the citizens of North Texas and beyond.

Last year, Baylor Fort Worth debuted the Baylor Charles A. Sammons Cancer Network signage at the dedicated oncology unit—Building A7. Integration with the network has allowed Baylor Fort Worth to further explore opportunities to work closely with physicians interested in sponsoring their own clinical studies. Patients are the major beneficiaries of the Baylor Sammons Cancer Center network because they have the assurance that any hospital carrying the Baylor Sammons Cancer Center brand will offer quality cancer care. By receiving care at a Baylor Charles A. Sammons Cancer Center, patients can be treated close to home for most of their cancer care needs. As oncology services become more sophisticated, Baylor Fort Worth is committed to being a step ahead, offering more advanced, innovative procedures with one main focus-improving patient outcomes.

Baylor Fort Worth is eager to join the dialogue among physicians throughout the metroplex and be at the forefront of community cancer care by integrating a multidisciplinary team of physicians, nurses, and allied health care professionals with administrative support.
In April 2013, BASMC became a NICHE (Nurses Improving Care for Healthsystem Elders) facility. NICHE is a national program designed to improve care for older hospitalized adults. It was created in recognition of the aging of hospital patients, the ongoing national shortage of nurses trained in gerontology, and the need for hospitals to contain costs while improving patients’ health care experience. By joining NICHE, Baylor Fort Worth expects to significantly advance its understanding of the needs of older patients, train nurses to meet those needs, and launch several new protocols to recognize and prevent these health problems. In the first phase of the program, Baylor Fort Worth will begin providing additional training to a core group of geriatric resource nurses, who will become leaders and role models to their peers on the inpatient units throughout the hospital.

Magnet® Journey

In 2013, Baylor Fort Worth continued its journey towards Magnet® designation. The American Nurses Credentialing Center (ANCC) is the organization that awards hospitals Magnet® status after they have demonstrated excellence in providing patient care in more than 35 areas throughout the hospital. The Magnet® Recognition Program is the benchmark for patients to measure the quality of care they should expect to receive while in a hospital. The Magnet® designation signifies a hospital’s ability to attract and retain professional nurses.

Baylor Fort Worth accomplished much during the 2013 Magnet® journey. A Simulation manikin was purchased using Faxel funds. The manikin provides learning experiences that simulate patient situations. Eleven registered nurses attended the National Magnet Conference in October 2013. Baylor Fort Worth continued to increase the number of advanced certified nurses on staff through group studies and enhanced awareness and recognition. Through quarterly senior leadership award breakfasts the hospital honored nurses who achieved a higher level of education, advanced certification, and other accomplishments over the quarter. In September, 2013, Baylor Fort Worth achieved 100% participation in the RN Survey. Results showed a significant increase in RN satisfaction over the previous year. More than 20 ASPIR projects occurred in the hospital in 2013. These projects involved quality improvement centered on better patient care based on the nursing evidence/research. In late 2013, Baylor Fort Worth started a Glycemic Task Force designed to improve the quality of care for diabetic patients. Each year BHCS awards an advancing nursing excellence scholarship to a deserving candidate. The 2013 award was given to a lab technician who will continue her education to become a registered nurse. The Oncology unit held its annual Service of Remembrance in the fall. The community event allowed family members of loved ones who have lost the battle with cancer to celebrate their lives. The DAISY award continued to recognize outstanding nurses each month for the extraordinary care they provided. Award recipients are nominated by patients, families, and staff.

Ellen Pitcher, Baylor Fort Worth’s chief nursing officer, brought key bedside nurses and leadership together for a nursing retreat on March 7th. During the retreat nurses from Baylor Fort Worth reviewed the hospital’s mission, vision, values and the four non-negotiables. The group also evaluated Baylor Fort Worth’s nursing practice model and how it integrated with everyday practice.

The four pillars: quality, people, finance and service plus the Magnet domains rounded out the morning session. In the afternoon nurses participated in breakout sessions focused on unit goal planning for the Magnet domains with the goal of incorporating the Baylor mission, vision and values into the goals. The main objective of the retreat was to help lay the groundwork for the hospital’s Magnet journey.
The term “bundle” has been a buzzword in health care for more than a decade. Just like the dictionary definition, bundle refers to a collection of things. In health care, those things are a set of actions or interventions that, when used together, significantly improve patient outcomes. Bundles are evidence-based, designed to improve patient outcomes when used consistently.

Baylor Health Care System uses a variety of bundles. Clinical employees with direct patient care responsibilities are familiar with the ventilator-associated pneumonia and central line bundles. While these are clinical bundles, the newest bundle on Baylor’s radar with the ventilator-associated pneumonia and central line bundles. While these are clinical bundles, the newest bundle on Baylor’s radar is the patient experience bundle. The service bundle is a set of activities and behaviors that are proven to improve patient experiences when all elements are practiced consistently. How do we know this is so? Because 18 of the 32 questions in the HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) survey are about the patient’s hospital experience.

Evidence shows that when employees apply the service bundle, it is contributing to an atmosphere that promotes trust and confidence and lessens fear and anxiety. So what is the service bundle? The service bundle is a set of activities and behaviors that are proven to improve patient experiences when all elements are practiced consistently. How do we know this is so? Because 18 of the 32 questions in the HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) survey are about the patient’s hospital experience.

The HCAHPS survey is a nationally standardized questionnaire for measuring how patients perceive the care they receive in hospitals. Evidence shows that when employees apply the service bundle appropriately, scores go up. When Baylor Fort Worth employs the service bundle, it is contributing to an atmosphere that promotes trust and confidence and lessens fear and anxiety. So what is the service bundle? The service bundle is a set of activities and behaviors that are proven to improve patient experiences when all elements are practiced consistently. How do we know this is so? Because 18 of the 32 questions in the HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) survey are about the patient’s hospital experience.

Bundled Up: Click here to view the toolkit! https://www.mybaylor.com/patient_care/patient_centeredness/toolkits/Pages/Service-Bundle.aspx
PROGRAMS OF FOCUS 2013 +

Supportive and Palliative Care

Baylor Fort Worth’s Supportive and Palliative Care (SPC) program serves patients with life-limiting, terminal or irreversible illness. It was initially established in 2005 with a physician, chaplain, and social worker and has blossomed into one of the leading palliative care programs in Baylor Health Care System. In 2009, the team hired its first full time palliative care advanced practice nurse, followed by full-time social worker in 2010. In 2013 the program hired full-time child life specialists and its first full-time physician leader.

Baylor Fort Worth’s Palliative Care program strives to provide compassionate, quality patient-centered care. In December 2013, the program received distinction as the second Baylor hospital to receive The Joint Commission certification. Baylor University Medical Center at Dallas was the first program in Texas—and one of the first 10 in the nation—to receive this certification from TJC.

The SPC team includes an advanced practice registered nurse, chaplain, child life specialist, social worker and physician. The team’s goal is to improve physical, emotional, social and spiritual symptoms associated with advance illness. The child life specialist is instrumental in helping children of seriously ill parents and siblings cope with the impact of the illness. The palliative care chaplain and Baylor Fort Worth’s pastoral care department developed and implemented MFACTS, a tool dedicated to addressing the emotional and spiritual needs of patients, families and staff through intervention and support in an interfaith context. This tool is now used by all chaplains across Baylor Health-Care System for patients seen on the SPC service.

To help improve communication between sites of treatment the SPC team uses the MOST form (Medical Orders for Scope of Treatment). This form is not an advance directive but rather a communication tool which helps deliver the treatment patients need and want. This is important when patients are discharged to nursing homes and acute care facilities. The SPC team has worked with hospital staff to educate them about the MOST form. The team has also met with emergency care physicians. This initiative has been implemented as an ED palliative care screening tool in MEDHOST, the ED documentation system. It has been instrumental in identifying patients in need of palliative care early in their hospital experience. In the community, SPC has collaborated with two local home health care agencies in efforts to improve patient and family awareness of advance directives.

Throughout the year, the team continued to evolve to change the culture of palliative care to best meet the needs of the community, staff and patients.
Baylor Charles A. Sammons Cancer Center at Baylor Fort Worth offered patients a full service community outpatient infusion center staffed by certified oncology nurses. The infusion center’s mission is to deliver quality, compassionate care to all patients. The infusion center offered a wide range of services in a convenient location with flexible hours and scheduling, including Saturday and Sunday appointments upon request:

- Blood administration
- Chemotherapy
- Biotherapy
- Antibiotic therapy
- Hydration therapy
- Regular injections (including B12 and Procrit®)
- Hormone injections for cancer patients

Looking after the health of Fort Worth and surrounding communities involves far more than treating sick patients who come through the hospital’s door. It also means providing education and the opportunity for people to take control of their own health in a preventive and meaningful way. One of the ways Baylor Fort Worth fulfills this role is through community health events and outreach activities.

In 2013, Baylor Fort Worth’s oncology program hosted several awareness events and screenings. The events covered breast cancer, head and neck cancer, and skin cancer.

For Women For Life™ was held on Saturday, January 25, 2013, and attracted nearly 229 women from across the Fort Worth area. The event offered health screenings and presentations by specialists during the day that celebrated women’s health.

The 2013 men’s health education event, It’s a Guy Thing, was held on Saturday, June 22, with 108 participants from the Fort Worth area. The event was held at Baylor Fort Worth’s Martin Center. Health screenings and wellness booths were offered and “Ask the Expert” sessions allowed attendees to ask health questions.

Baylor Fort Worth also supported various local organizations and awareness programs that promote healthy living in our community.

- The Hispanic Wellness Coalition held its annual Hispanic Wellness Fair on Saturday, August 3, 2013, at the Will Rogers Memorial Center - Amon Carter Exhibit Hall. The Joan Katz Breast Center, the head and neck comprehensive program, and oncology services provided education materials about breast, gynecological cancers, and head and neck cancers to hundreds of attendees at the fair.

Community involvement
- American Cancer Society’s Relay for Life®
- Cancer Care Service’s National Survivors’ Day
- City of Arlington Employee Health Fair
- City of Fort Worth Employee Health Fair
- American Cancer Society’s Crimson Ball Ride to Live Cycles Combating Cancer
- American Cancer Society’s Daffodil Days®
- WFAA - Good Morning Texas, yearly interviews
- Awareness Health Seminar
- Paint the Town Pink
- Susan G. Komen, Tarrant County Race for the Cure®
- Let’s Talk Choices (breast cancer focus)
- Service of Remembrance
- Texas Christian University, Pink Out football game
- Texas Christian University, Frogs for the Cure
When Tiffany Chambers visited her dentist for a routine appointment, she had no idea that it would be a life-changing event. While cleaning her teeth, the dentist noticed something abnormal. He suggested that Tiffany see an otolaryngologist (ENT) to have the abnormality examined. Her appointment with the ENT resulted in a diagnosis of low grade adenocarcinoma versus adenoid cystic carcinoma. Chambers, a registered nurse, was surprised by the diagnosis. Her mother had had cancer, but there wasn’t an extensive history of the disease in her family.

“I didn’t have any symptoms,” recalls Chambers. “Within a few days I had surgery at Baylor Fort Worth. The surgeon removed the tumor above my palate and a prosthetic device was placed in my mouth for one week while they waited for the pathology to come back. After they received the pathology report and determined the margins were clear, I underwent a reconstruction of my palate. Thankfully, I didn’t have to have any radiation or chemotherapy.”

Chambers says the entire episode, from pre-surgery to post-surgery and recovery, went smoothly. She credits the oncology team at Baylor Fort Worth for helping her through the experience. “They were available to answer any questions I had and that gave me peace of mind,” says Chambers.

Today, Chambers, 41, is enjoying a healthy life with her husband. She has been getting regular follow up PET scans to monitor her progress. All of the scans have been negative. She also visits her surgeon on a regular basis.

“The relationship between Baylor Fort Worth’s oncology program and the North Texas Laryngectomy Society continued to evolve and strengthen in 2013. For Society members, the year was about giving back to the hospital and to the community. Recognizing that patients’ families needed something to keep them occupied when their loved ones were in the hospital, the Society donated a bookshelf stocked with reading materials. The bookshelf is located in the second floor family area and is a welcome addition and resource for family members.”

The relationship between Baylor Fort Worth’s oncology program and the North Texas Laryngectomy Society continued to evolve and strengthen in 2013. For Society members, the year was about giving back to the hospital and to the community. Recognizing that patients’ families needed something to keep them occupied when their loved ones were in the hospital, the Society donated a bookshelf stocked with reading materials. The bookshelf is located in the second floor family area and is a welcome addition and resource for family members.

The video! Check out the video!
The American Cancer Society has been an incredible resource to Baylor Sammons Cancer Centers, including Baylor Fort Worth, delivering lifesaving results. American Cancer Society representatives collaborated with oncology staff to deliver support, and served on the cancer committee to help provide resources to fulfill the Commission on Cancer standards for cancer care. Dr. David Klein, president of Baylor Fort Worth, is a member of the American Cancer Society’s Greater Tarrant County Board.

In 2013, the American Cancer Society engaged with 560 patients providing 1,250 services at Baylor Fort Worth. All newly diagnosed patients received a Personal Health Manager kit from the Society which provided personalized information on the patient’s specific cancer type, resource information, and tools that helped patients and caregivers keep appointments, monitor test results and keep prescriptions organized throughout treatment. American Cancer Society patient navigators provided free and confidential support and guidance to all patients and their caregivers during their cancer journey. Patients received support from the Society’s wig program as well as transportation services. Newly diagnosed breast cancer patients received assistance through the Reach To Recovery® program where Society-trained breast cancer survivors provided valuable information and encouragement to patients in their journey through breast cancer. In addition, female patients were introduced to the Look Good Feel Better® program, dedicated to improving appearance related side effects, and building personal confidence while undergoing treatment.

As the official sponsor of birthdays, the American Cancer Society knows how important each and every birthday can be. In May of 2013, the Society celebrated its 100th birthday – one-hundred years of saving lives and twenty years collaborating with Baylor hospitals. The Society saves lives by helping individuals stay well through prevention and early detection, helping them get well by being there during and after a diagnosis, finding cures through groundbreaking discovery, and fighting back through public policy. In the last two decades the Society has contributed to a 20% decline in cancer death rates in the US. Last year the Society and Baylor hospitals reached over 2,100 patients with more than 6,000 programs and services. That’s one in four cancer patients treated at Baylor hospitals.

The American Cancer Society is the only organization offering cancer patients and their families’ around-the-clock guidance and support through its toll-free line, 1-800-227-2345 and at www.cancer.org.
Cancer survivors often find that there is more laughter and discovery in a support group than they may have first thought. Even when a member of the support group is moving through a difficult time in his or her recovery, the theme is always HOPE. The Joan Katz Breast Center and oncology services make a concerted effort to enable people to receive support through various channels. Whether the patient is newly diagnosed or a long-time survi- vor or caring for someone with cancer, Baylor Fort Worth’s goal is to provide compassionate care and support. In 2013, new support groups were added for all types of cancers.

### Support Groups

<table>
<thead>
<tr>
<th>Group Name</th>
<th>Date</th>
<th>Time</th>
<th>More Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast Cancer Support Group</td>
<td>Every 2nd Thursday of the month</td>
<td>6 pm-7pm</td>
<td>Opportunity to connect with others experiencing the journey</td>
</tr>
<tr>
<td>Yoga</td>
<td>Every Tuesday</td>
<td>6-7 pm</td>
<td>Yoga and relaxation for all cancer patients and their families no matter where they are receiving treatment</td>
</tr>
<tr>
<td>Oral, Head, and Neck Cancer Support Group</td>
<td>24/7</td>
<td>Virtual</td>
<td>Support and resources 24/7</td>
</tr>
<tr>
<td>The North Texas Laryngectomy Society</td>
<td>Every 1st Friday of the month</td>
<td>2 pm</td>
<td>Please ask for Ana 817-9200-484 ext. 246 or <a href="http://www.thentls.com/">http://www.thentls.com/</a></td>
</tr>
<tr>
<td>Gynecological Alliance of Lady Survivors</td>
<td>Every 3rd Monday each month</td>
<td>noon</td>
<td>Opportunity to discuss issues, talk about awareness events, and a time for fellowship. Please ask for Stecy Abubakar 817-475-4912.</td>
</tr>
<tr>
<td>Chair Yoga</td>
<td>Every Thursday</td>
<td>2 pm-3pm</td>
<td>Enjoy the benefits of yoga in a safe and gentle way to increase flexibility and circulation</td>
</tr>
</tbody>
</table>

The Service of Remembrance was held in the fall of 2013. This annual commu- nity event remembered those that lost the battle to cancer during the year and were cared for by the oncology staff. This day of memories and honor to those held was held just prior to the holiday season, a time known to be one of the toughest in terms of the grieving process. Family members joined the oncology staff to share stories, huge, tears, and healing. Families were invited to bring personal ornaments as a tribute to their loved one to place on the Christmas tree.

For the fourth year in a row, ceramic ornaments made by Melissa Elbert, an RN on the oncology unit, were given to family members following the service to place on their own Christmas trees as a symbol that their loved ones will never be forgotten.

The 2013 Service of Remembrance included the induction of Amy Reyna, RN, to the “Wall of Honor”. Reyna said the wall was a tribute to loved ones with inductees invited to provide a cross of their choosing. The crosses are hung on the wall and the loved one’s name is inscribed on the wall.

Diane St. Pierre, a GI Nurse Practitioner who has gone through the cancer journey, presented a personally-designed piece of stained glass. The All Saints Health Foundation provided generous financial support for the Service of Remembrance.
About 1.6 million new cancer cases were expected to be diagnosed in 2013, according to the American Cancer Society. Of those, 7,913 new cancer cases were forecasted to be in Tarrant County (State of Texas Cancer Registry 2013), therefore the need for quality in the continuum of cancer care in the community is crucial.

Comprehensive Care
At Baylor Fort Worth, comprehensive care and a team of specialists provided patients with the tools they needed to fight cancer, including:

• Inpatient and outpatient cancer treatment programs encompassing chemotherapy, radiation and surgical intervention
• Ambulatory infusion services staffed by oncology-certified registered nurses
• Psychosocial, emotional and spiritual care from compassionate professionals
• Cancer support groups

Diagnostic and Treatment Services
• Pathology and laboratory services
• Full range of diagnostic testing
• Radiology services, including MRI and CT scans, ultrasound, nuclear medicine and endoscopic biopsies
• Radiation therapy services, including external beam radiotherapy, intensity modulated radiation therapy (IMRT), radiation treatment planning and medical physics/dosimetry

Dedicated Care
• Specially-trained oncology nurses, case managers, social workers, chaplains and patient advocates
• Navigation services for patients with breast, gynecological, and head and neck cancers
• Quality and research initiatives
• Rehabilitation services
• Wound care using traditional medical and surgical therapies, as well as advanced wound care technologies for chronic wound management
• Nutritional services for individualized nutrition planning
• Pharmacy
• Social work/case management
• Education and counseling for patients and families
• Palliative and pastoral care

Nutrition Services
Nutrition services provided assessments for approximately 1,560 patients with an oncology diagnosis in 2013. Nutrition intervention, resources and education were provided to promote recovery and improve function.
The concept of patient navigation was founded and pioneered by Harold P. Freeman in 1990 for the purpose of eliminating barriers to timely cancer screening, diagnosis, treatment, and supportive care. It has since evolved to include the timely movement of an individual across the entire health care continuum from prevention, detection, diagnosis, treatment, and supportive care to end-of-life care, survivorship and wellness. Patient navigation is the guiding force promoting the timely movement of the patient through a complex system of care. At Baylor Fort Worth, the nurse navigators work with the patient from pre-diagnosis through all phases of the cancer experience. Essentially, a nurse navigator is a problem solver and a highly resourceful person trained to anticipate, address and overcome barriers to care and to guide patients through the health care system during a very difficult time.

Nurse navigation, available through the Joan Katz Breast Center at Baylor Fort Worth, takes caring for patients with breast and gynecological cancers to another level. The navigator’s role is to help patients understand their diagnosis and treatment options, as well as coordinate care and treatment services. Nurse navigation is available to patients regardless of where they are receiving their medical services and is available 24/7. There is no fee for patient navigation, social services or related support programs. In 2013, the Joan Katz Breast Center provided navigation services for 626 patients with breast and gynecological cancers. In addition, the navigators followed up with one week, one month, three months, six months, and 12 months post surgery phone calls to check on the patient. The calls provided the ideal time to address questions and concerns the patient may have had and helped connect them to needed resources.

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Since opening in 2010, the Joan Katz Breast Center at Baylor Fort Worth has expanded its services to meet the needs of patients who are newly diagnosed, in the midst of treatment or living as a survivor. Capabilities include:

- Comprehensive, compassionate services available on one campus for those diagnosed with breast and gynecological cancers.
- Coordinated breast services ranging from nurse navigation, screening (including clinical breast exams), diagnosis, treatment, cancer conferences, counseling and social support to wellness and education.
- Pathology reports for biopsies within 48 hours.
- The Hereditary Cancer Risk Program, which provides genetic counseling, review of family and personal history, genetic testing if appropriate, and options for cancer risk management and continued monitoring.
- Complex breast cancer case discussions at multidisciplinary breast conferences to aid treatment planning.
- Physical rehabilitation and lymphedema therapy services for breast and gynecological cancer patients to help improve function.
- The Survivor Gals Specialty Products and Salon specialty boutique, offering products and services to women undergoing chemotheraphy and radiation.
- Support programs to help strengthen the body, mind and spirit from one-on-one nurse assistance to support groups and ongoing classes.

The Hereditary Cancer Risk Program in the Joan Katz Breast Center at Baylor Fort Worth continued to grow in 2013. Two genetic counselors now staff the clinic, Carolyn Garby, MS, CGC, and Ann Simmons, MS, CGC. In 2013, 140 patients were counseled regarding their risk for hereditary cancer. Counseling covered a variety of hereditary cancer syndromes including hereditary breast and ovarian cancer syndrome, Lynch syndrome, Cowden syndrome, and Li-Fraumeni syndrome and patients who have a personal and/or family history of cancer diagnosed at a young age, multiple types of cancers in one individual, rare forms of cancer, and/or a family history of similar cancers. Genetics clinic was held every Wednesday and Thursday in the Joan Katz Breast Center. The goal of the program is to deliver quality, compassionate care to both patients and their families. Genetic counseling helps individuals understand the medical, psychological, and familial implications of the genetic contributions to hereditary diseases.
The American Cancer Society estimates more than 83,000 women per year are diagnosed with some form of gynecological cancer. The good news is that women can take steps to prevent certain kinds of gynecological cancers. The Gynecological Cancer Program at the Joan Katz Breast Center at Baylor Fort Worth provides personal nurse navigation to patients. The dedicated nurse navigator has the knowledge and resources to help women understand their diagnosis and treatment options, coordinate medical and support care, and communicate across the health care team.

The program focuses on gynecological health, early detection and educating women about the forms of cancer that can affect their reproductive organs, including cervical, ovarian, uterine, vulvar and vaginal cancer. The nurse navigator helps guide a patient’s care in many areas, including education, diagnostic imaging, emotional counseling, diet, support groups, rehabilitation and appearance solutions.

Specialized Gynecological Surgery
Treatment for gynecological cancers may require surgery. In 2013, the specialized gynecological surgery program continued to mature. The skilled surgeons on the medical staff at Baylor Fort Worth used advanced options such as minimally invasive or laparoscopic techniques that promoted patient safety and rapid healing. The program offered robotic surgery that allowed greater surgical precision through openings smaller than the size of a dime thanks to 3D endoscopy integrated with advanced robotic technology for enhanced surgical control and visualization. These procedures offered potential patient benefits, including a shorter hospital stay, less pain and quicker recovery.

National Ovarian Cancer Coalition
For the second year, the Gynecological Cancer Program at the Joan Katz Breast Center and the National Ovarian Cancer Coalition collaborated to offer “Faces of Hope” teal totes bags. The “Faces of Hope” program is designed to improve an ovarian cancer patient’s quality of life and survivability. The totes were given to newly diagnosed women to provide information and materials for those facing ovarian cancer. The TEAL Tote contains several publications, such as the Ovarian Cancer Resource Guide for Newly Diagnosed Women. The totes also contained comfort items to help women through their ovarian cancer journey, including Mary Kay® Hand Cream and Mary Kay® Lip Balm, and a large blanket to keep patients warm during their chemotherapy treatments. The National Ovarian Cancer Coalition is the leading national organization dedicated to providing the general public, patients, caregivers and healthcare communities and loved ones with accurate and up-to-date information on ovarian cancer.
According to the National Cancer Institute, more than 40,000 Americans are diagnosed with head and neck cancer each year. Many types of head and neck cancers can be treated effectively and cured, especially when they are diagnosed at an early stage.

Priorities of the Comprehensive Head and Neck Cancer Program at Baylor Fort Worth are to cure or control the disease process, preserve function and restore quality of life. Our program combines medical expertise and advanced solutions for treating patients with all forms of head and neck cancers, including tumors of the oral cavity, pharynx, larynx, lips, nose, paranasal sinuses, esophagus, salivary glands, neck, ears, temporal bone and skull-base.

The program offers:
- Dedicated head and neck surgeons on the medical staff who focus on the development and implementation of strategies to detect and treat cancers of the head and neck region
- A multidisciplinary team approach that includes oncologists and radiation oncologists on the medical staff, along with nurses, speech and physical therapists, dietitians and social workers
- A dedicated designated team of nurses who provides personal care guidance by coordinating medical and support care, and communicating patient status with the health care team
- A skilled approach to diagnosis and treatment of head and neck cancers using, whenever possible, minimally invasive options and advanced technology such as endoscopic techniques and robotic surgery to help spare surrounding tissue
- The Skull Base Center at Baylor Fort Worth and Baylor University Medical Center at Dallas, which provides comprehensive treatment for complex conditions and tumors in and around the skull base
- A multidisciplinary, sub-specialized team comprised of neurosurgeons, neurologists, head and neck surgeons, orbital surgeons, radiosurgeons and interventional neuroradiologists on the medical staff
- A head and neck cancer conference that regularly meets to discuss newly diagnosed and ongoing cancer cases
## CANCER REGISTRY AND DATA +

**SUMMARY OF 2012: CANCER REGISTRY DATA**

Certified tumor registrars perform data collection in the Cancer Registry at Baylor Fort Worth. They collect diagnostic and treat-ment information on all cancer cases and submit it to the State of Texas Department of Health Services Cancer Registry as well as the American College of Surgeons Commission on Cancer National Cancer Database. The data is compared to state and national benchmarks and used in outcome measurements, ongoing quality improvement studies, and strategic planning for the cancer program.

The following graphs display 2012 Cancer Registry data. At Baylor Fort Worth 1,129 analytical cancer cases were newly diagnosed and/or received their primary course of cancer treatment. More women than men were diagnosed in 2012. The top five cancer sites were breast, lung, corpus uteri, liver, and prostate.

### Analytic versus Nonanalytic Cases

Analytic cases – Those cases diagnosed at Baylor Fort Worth with the first course of treat-ment elsewhere; cases diagnosed and or all of the first course of treatment given at Baylor Fort Worth; or cases diagnosed else-where and part or all of first course treatment given at Baylor Fort Worth.

Nonanalytic cases – Cases diagnosed and received first course of treatment at another facility/center elsewhere.

### SITE

**SITE**

<table>
<thead>
<tr>
<th>SITE</th>
<th>2013 Men</th>
<th>2013 Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prostate</td>
<td>238,590</td>
<td>854,790</td>
</tr>
<tr>
<td>Lung &amp; Bronchus</td>
<td>118,080</td>
<td>28%</td>
</tr>
<tr>
<td>Colon &amp; Rectum</td>
<td>73,660</td>
<td>14%</td>
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<td>Uterine Bladder</td>
<td>54,510</td>
<td>9%</td>
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<td>Melanoma of the Skin</td>
<td>45,060</td>
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<tr>
<td>Kidney &amp; Renal Pelvis</td>
<td>40,430</td>
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<tr>
<td>Non-Hodgkin Lymphoma</td>
<td>37,600</td>
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</tr>
<tr>
<td>Oral Cavity &amp; Pharynx</td>
<td>29,620</td>
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<tr>
<td>Leukemia</td>
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<td>Pancreas</td>
<td>37,600</td>
<td>3%</td>
</tr>
<tr>
<td>All Sites</td>
<td>854,790</td>
<td>100%</td>
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</table>

**TOP TEN CANCER SITES**

**SITE**

<table>
<thead>
<tr>
<th>SITE</th>
<th>2013 Men</th>
<th>2013 Women</th>
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</thead>
<tbody>
<tr>
<td>Breast</td>
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<td>341</td>
</tr>
<tr>
<td>Lung &amp; Bronchus</td>
<td>110,110</td>
<td>244</td>
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<tr>
<td>Colon &amp; Rectum</td>
<td>68,140</td>
<td>39</td>
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<tr>
<td>Uterine Corpus</td>
<td>49,560</td>
<td>5%</td>
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<tr>
<td>Thyroid</td>
<td>45,310</td>
<td>4%</td>
</tr>
<tr>
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<td>32,140</td>
<td>3%</td>
</tr>
<tr>
<td>Melanoma of the Skin</td>
<td>31,630</td>
<td>3%</td>
</tr>
<tr>
<td>Kidney &amp; Renal Pelvis</td>
<td>24,720</td>
<td>3%</td>
</tr>
<tr>
<td>Pancreas</td>
<td>22,480</td>
<td>7%</td>
</tr>
<tr>
<td>Ovary</td>
<td>22,240</td>
<td>3%</td>
</tr>
<tr>
<td>All Sites</td>
<td>853,390</td>
<td>100%</td>
</tr>
</tbody>
</table>


**SITE**

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<tr>
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<td>100%</td>
</tr>
</tbody>
</table>

Source: **2013, American Cancer Society, Inc., Surveillance Research Source: Cancer Epidemiology and Surveillence Branch, Texas Department of State Health Services, April 2013**

**Baylor Health Care System Cancer Registry, Electronic Registry System**

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**Source: 2013, American Cancer Society, Inc., Surveillance Research Source: Cancer Epidemiology and Surveillance Branch, Texas Department of State Health Services, April 2013**

**Baylor Health Care System Cancer Registry, Electronic Registry System**
### Baylor All Saints Medical Center at Fort Worth: Analytic/Non-Analytic Cases Diagnosed 2012

<table>
<thead>
<tr>
<th>Site</th>
<th>Total</th>
<th>Analytic</th>
<th>Non-Analytic</th>
<th>Male</th>
<th>Female</th>
<th>In Situ</th>
<th>Local</th>
<th>Regional</th>
<th>Distant</th>
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<td>620</td>
<td>630</td>
<td>1112</td>
<td>89</td>
<td>577</td>
<td>312</td>
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<td>Lip</td>
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<td>Larynx</td>
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<td>83</td>
<td>57</td>
<td>63</td>
<td>77</td>
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<td>Blood &amp; Bone Marrow</td>
<td>69</td>
<td>21</td>
<td>48</td>
<td>37</td>
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<td>1</td>
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<td>Other</td>
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<tr>
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<td>6</td>
<td>1</td>
<td>2</td>
<td>7</td>
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<td>5</td>
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<td>Connect/Soft Tissue</td>
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<td>10</td>
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<td>1</td>
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<tr>
<td>Skin</td>
<td>105</td>
<td>37</td>
<td>68</td>
<td>59</td>
<td>48</td>
<td>8</td>
<td>22</td>
<td>5</td>
<td>7</td>
<td>63</td>
</tr>
<tr>
<td>Melanoma</td>
<td>105</td>
<td>37</td>
<td>68</td>
<td>59</td>
<td>48</td>
<td>8</td>
<td>22</td>
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**Data Source:** Electronic Registry System, Baylor Health Care System Cancer Registry

This report includes CA in situ cervix cases, auricular and basal cell skin cases, and intraepithelial neoplasia cases pronea/myeloma category.
Ovarian cancer is a highly lethal disease with a lifetime risk of 1.4%. The majority of ovarian cancer arises from the epithelium of the ovary and most commonly occurs in postmenopausal women. There were 22,240 cases of ovarian cancer in the United States last year and 14,030 deaths, making it the 4th highest cause of cancer death among women. There are currently 185,138 women living with ovarian cancer in the United States.

Risk factors include age, Caucasian race, nulliparity and family history. The cause is poorly understood but in 15% of patients there is a strong family history. The gene known as BRCA. Patients who inherit this gene have an increased risk for other malignancies. Most patients present with advanced stage disease which is usually treatable with surgery only in patients with persistently large tumors. Countless studies have shown that these patients undergo debulking surgery, have microscopic metastasis and are upstaged at surgery. Ovarian cancer can be staged according to the American Joint Committee on Cancer (AJCC)/TNM system and the International Federation of Gynecology and Obstetrics (FIGO).

Ovarian cancer study by Noel E. Cloven, MD

One of the most important factors affecting ovarian cancer outcome is the initial surgical procedure. In patient with clinical findings of early ovarian cancer, complete surgical staging is mandatory to determine true pathologic stage and the need for additional treatment.

Clinical trials have demonstrated improved outcomes in patients who undergo debulking surgery. The goal of surgery is to remove all disease, considering age, and complications related to the surgery. At Baylor All Saints, treatment planning is based on National Comprehensive Cancer Network (NCCN) guidelines, which provide evidence-based management to provide optimal treatment.

Both staging systems are based on the extent of the tumor, spread to the regional lymph nodes and the presence of tumor in distant sites in the body, or metastasis.

Treatment of ovarian cancer may include surgery, chemotherapy, and radiation therapy, but surgery is the primary treatment for this cancer. A combination of these treatments may be used depending on the stage at diagnosis, the desire to maintain fertility in those of child bearing age, and complications related to the patient’s physical condition. At Baylor All Saints, treatment planning is based on National Comprehensive Cancer Network (NCCN) guidelines, which provide evidence-based management to provide patients quality treatment.

Screening for ovarian cancer has been largely unsuccessful. Clinical trials have evaluated the use of transvaginal ultrasounds and serum tumor markers in both the general population and high risk women. Most studies show that there is a high false positive rate using these modalities resulting in unacceptable surgical intervention and increased patient anxiety. False positive tests are most common in premenopausal women and women with co morbid conditions. There has been some promise in recent studies looking a CA125 “trends” over time and using pelvic ultrasound and other serum markers, such as OVA1, have been approved and are used in the evaluation of a pelvic mass in order to triage patients for referral to a gynecologic oncologist.

Staging is the process of determining how far a cancer has spread at the time of diagnosis and is the primary deciding factor in cancer treatment. For ovarian cancer, staging is not merely an academic exercise. It is crucial that these cancers are surgically staged to determine the need for additional treatment and provide the patient with prognostic information. Studies have shown that up to 30% of patients with clinical stage I epithelial ovarian cancer are found to have microscopic metastases and are upstaged at surgery. Ovarian cancer can be staged according to the American Joint Committee on Cancer (AJCC)/TNM system and the International Federation of Gynecology and Obstetrics (FIGO).

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Stage of Ovary Cancer Diagnosed in 2000 to 2011 BASMC vs. Comprehensive Community Cancer Program Hospitals in All States

Stage

Percentage (%)

I

II

III

IV

NA

UNK

BASMC

100

90

80

70

60

50

40

30

20

10

0

ALL STATES

BASMC

ALL STATES
In a study, patients who undergo surgery at low volume hos- pitals were less likely to receive appropriate care and 30% more likely to die of ovarian cancer. Most patients with ovarian can- cer still need chemotherapy which typically involves platinum and taxane combinations. In selected patients, intraperitoneal chemotherapy can improve survival through short term toxicity is increased. Despite a high initial response rate, majority of patients recur and are treated with additional chemotherapy. The role of second surgeries is controversial but may benefit certain patients, particularly those with a long disease free interval and an isolated site of recurrence. Many different approaches have been tried to increase cure rates such as maintenance therapy, alternative dosing schedules and the addition of targeted drugs.

As our understanding of the molecular factors involved in the development and spread of ovarian cancer increases, our treatment strategy is evolving. Inhibition of angiogenesis using drugs such as bevacizumab has shown promise both in com- bination with initial chemotherapy and for recurrent disease. The role of second surgeries is controversial but may benefit certain patients, particularly those with a long disease free interval and an isolated site of recurrence. Many different approaches have been tried to increase cure rates such as maintenance therapy, alternative dosing schedules and the addition of targeted drugs.

An alternative to providing quality, technically ad- vanced cancer treatment to our patients in a comfortable setting, close to home. We always strive to meet or exceed local, regional and state guidelines in the diagnosis, staging, and treatment of ovarian cancer and are dedicated to providing quality outcomes to our community.

The Clinical Oncology Research Coordination (CORC) office is part of the Baylor Research Institute (BRI) and it is located on the BUMC campus. Baylor Research Institute (BRI) is a dedicated research center for finding prevention therapies and treatments for diseases and illnesses. Research at Baylor focuses on the patient, meaning the work is more micro- scopically - it brings the research to the patient’s bedside. BRI works to understand the base of a disease, identify poten- tial treatments or preventative therapies, and enroll patients in research trials.

CORC supports BHSIS investigators with both industry- and investigator-sponsored clinical oncology research trials system- wide. This support includes assisting the investigator with study start up through close-out of the clinical trial life cycle, regulatory submissions/compliance, budget development, development of investigator-initiated trials, and collaboration with BRI resources.

The Baylor Research Institute (BRI)-clinical trial office at Baylor All Saints Medical Center at Fort Worth is part of Baylor Health Care System and is a dedicated research center for finding prevention strategies and treatments for diseases and illnesses. The graph to the right shows the number of oncology patients participating in specific research trials in the years 2010 to 2013. In 2013 alone, 67 patients were enrolled in Baylor Fort Worth clinical research trials and research-related studies.

At Baylor Fort Worth, BRI is collaborat- ing with physicians on the medical staff to provide opportunities for oncology patients to participate in research stud- ies. In the fall of 2011, BRI Fort Worth joined the Southwest Oncology Group (SWOG) as a network component of Baylor University Medical Center at Dal- las’ parent membership. BRI also offers trials for those diagnosed with breast cancer through the American College of Surgeons Oncology Group. Additionally, BRI continues to offer studies that focus on head and neck cancer. Across Baylor Health Care System, BRI investigators are currently conducting over 70 active research protocols in oncology research. Through clinical research, investigators achieve advances in medicine and bring innovative therapies to patients. To learn more about the various studies under- way at BRI, please visit BaylorHealth. com/CancerResearch.

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A multidisciplinary team of cancer specialists participated in site-specific cancer conferences in 2013. A general cancer conference and site-specific conferences for head and neck cancers, gynecologic cancers and breast cancer were held. At these regularly scheduled meetings, which featured videoconference capability, the team discussed ongoing and complex cases. The multidisciplinary approach contributes to collaborative medical decisions and promotes proactive treatment planning.

The conferences also offered education to physicians and allied health professionals. Activities in 2013 included:

- Discussion of stage including prognostic indicators and treatment planning using evidence-based treatment guidelines.
- Discussion of options for clinical trials

The Baylor All Saints Medical Center at Fort Worth cancer program has met the American College of Surgeons Commission on Cancer program standards by presenting 312 total cases at cancer conferences, which equals 27.8% of the analytic cases accessioned at Baylor Fort Worth. Of the 312 cases presented, 280 or 89.7% cases were prospective in nature.

The following chart is a summary of Baylor All Saints Medical Center’s cancer conference activity for 2013.

### MULTIDISCIPLINARY CANCER CONFERENCES

**2013 CANCER CONFERENCE REPORT - DECEMBER 31, 2013**

<table>
<thead>
<tr>
<th>Conference</th>
<th>Schedule</th>
<th>Number of Monthly Conference</th>
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</thead>
<tbody>
<tr>
<td>Breast Conference</td>
<td>Every Wednesday noon- 1 pm</td>
<td>Total 45</td>
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<tr>
<td>General Cancer Conference</td>
<td>1st Thursday of Every Month noon- 1 pm</td>
<td>Total 11</td>
</tr>
<tr>
<td>Head and Neck Cancer Conference</td>
<td>3rd Tuesday of Every Month 8:30 am- 9:30 am</td>
<td>Total 11</td>
</tr>
<tr>
<td>Gynecology Oncology Cancer Conference</td>
<td>3rd Thursday of Every Month 7:30 am- 8:30 am</td>
<td>Total 11</td>
</tr>
</tbody>
</table>

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### GYNECOLOGY ONCOLOGY SYMPOSIUM

The 2nd Annual Gynecology Oncology Symposium was held Sept. 14, 2013, at the Joan Katz Breast Center at Baylor Fort Worth. The Symposium focused on the “State of the Science in Gynecology Oncology: Where We Are Today and Where We Need to Go.” The symposium was generously supported and co-sponsored by the National Ovarian Cancer Coalition (NOCC), which raises awareness and promotes education about ovarian cancer. The Coalition is committed to improving the survival rate and quality of life for women with ovarian cancer. The day-long event centered on recent advances in gynecology cancer. Approximately 48 professionals attended including physicians, nurses, fellows, and physician assistants from North Texas and areas west of Fort Worth. Participants earned continuing medical education credits.

**Speaker presentations covered the following topics/themes:**

- Workshop of the abnormal PAP 2012: A Gynecologic Oncologist's Perspective
- What's New in Ovarian Cancer Screening?
- The Role of the Primary Health Care Provider in Genetic Screening: The Genetic Link Between Ovarian and Breast Cancers
- Clearing Up the Confusion with DVT Prophylaxis
- Robotic Surgery for Gynecologic Cancer: Giving Your Patients a Heads Up
- Spiritual Care for the Gynecological Oncology Patient (Ethics Credit)

A new aspect of the symposium in 2013 was the audience response system used to engage attendees and provide an interactive platform. In addition to the lectures, open discussions led by a moderator were initiated after each group of talks, enabling participants to ask questions of a particular speaker. Cases were presented to further assess the field of gynecology oncology. The symposium provided time for discussion and one-on-one interactions with the symposium faculty. The symposium was well received and accomplished the goal of updating medical practitioners on the latest information in the field of gynecology oncology treatment and research.
For 31 years, the All Saints Health Foundation has successfully gained financial support from individuals, corporations and foundations. Baylor All Saints Medical Center at Fort Worth’s oncology programs and services have been primary beneficiaries of this philanthropy. With the expansion of diagnostic, treatment and support groups, donors have found increasing ways to lend their financial support to the cancer patients who turn to Baylor All Saints for their care and wellbeing. To date, more than $22 million has been raised by All Saints Health Foundation to fund oncology services. This strong support bodes well for a bright future for cancer patients and their families in Fort Worth and surrounding communities.

Head and Neck Cancer
The Dallas-Fort Worth area has the highest incidence of head and neck cancer in the United States. To help meet the increasing needs of these patients, Baylor All Saints has developed one of the premier head and neck cancer programs in the area. In 2013 All Saints Health Foundation received an $8,000 grant dedicated to supporting the head and neck cancer program. Five laryngectomy patients received supplies and many other patients received tube feeding formula thanks to the grant. Finding additional sources of financial support is critical for patients received tube feeding formula thanks to the grant.

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CONTACT INFORMATION

Reference
Physician Consult Line 1.800.364.1251

Administration
All Saints Health Foundation 817.922.7377
Akin Miller, MD, PhD, Medical Director, Baylor Charles A. Sammons Cancer Center 214.600.2881
Charles A. Sammons Cancer Center

Bevle Hartle, RN-C-CISW, MS
HOAC, NEA-BIC
Administration for Andrews Women’s Hospital at Baylor All Saints Medical Center at Fort Worth & Joan Kitz Beasert Center

David Klein, MD
Interim President, Chief Operating Officer, Chief Medical Officer, Baylor All Saints Medical Center at Fort Worth 214.600.2881

Jalewines L. Jones, RN, BSN
Vice President/Oncology, Baylor Health Care System Chief Operating Officer, Baylor Charles A. Sammons Cancer Center/Joan Kitz Beasrt Cancer Institute Texas Cancer Hospital

Cancer Center Programs
Behavioral Health Program 817.922.1162
Cancer Genetics Program 214.820.9600
Clinical Oncology Research Coordination 214.818.8417
Center Rehabilitation & Fitness Center 817.922.1199
Diagnostic Imaging 817.922.3232
Headache Center 817.922.3600
Joan Kitz Beasert Center 817.922.2323
Lymphedema Treatment Center 817.922.2530
Pastoral/Chaplaincy Program 817.807.6150
The Nicholas and Louella Martin Center for Chronic Pain Management 817.922.7346
Transplant Program 817.922.4850
Wound Management Program 817.922.2440

Research
Baylor Research Institute 214.600.2881
Michael A.E. Ramsay, MD, PhD, President

Support Services
A. Webb Roberts Center for Continuing Education 214.600.2317
Cancer Registry 214.600.3576
Court yard Pharmacy 817.922.3686
Gift Shop 817.698.8090
Guest Services 817.698.2336
Joan Kitz Beasert Center 817.922.3323
Patient/family education and support programs
Patient resource centers/ oncology libraries
Oncology Events and Community Relations 817.922.1121
Oncology Unit 817.922.4800
Oncology Infusion Center 817.922.4590
Patient Transport 817.922.1527
Survivor Gals 817.924.8800
Wound care specialty consultants for cancer patients

Valet Parking 817.698.8680
For a physician referral or for more information about oncology services at Baylor Fort Worth, call 1.800.4BAYLOR or visit us online at BaylorHealth.com/AllSaintsCancer.