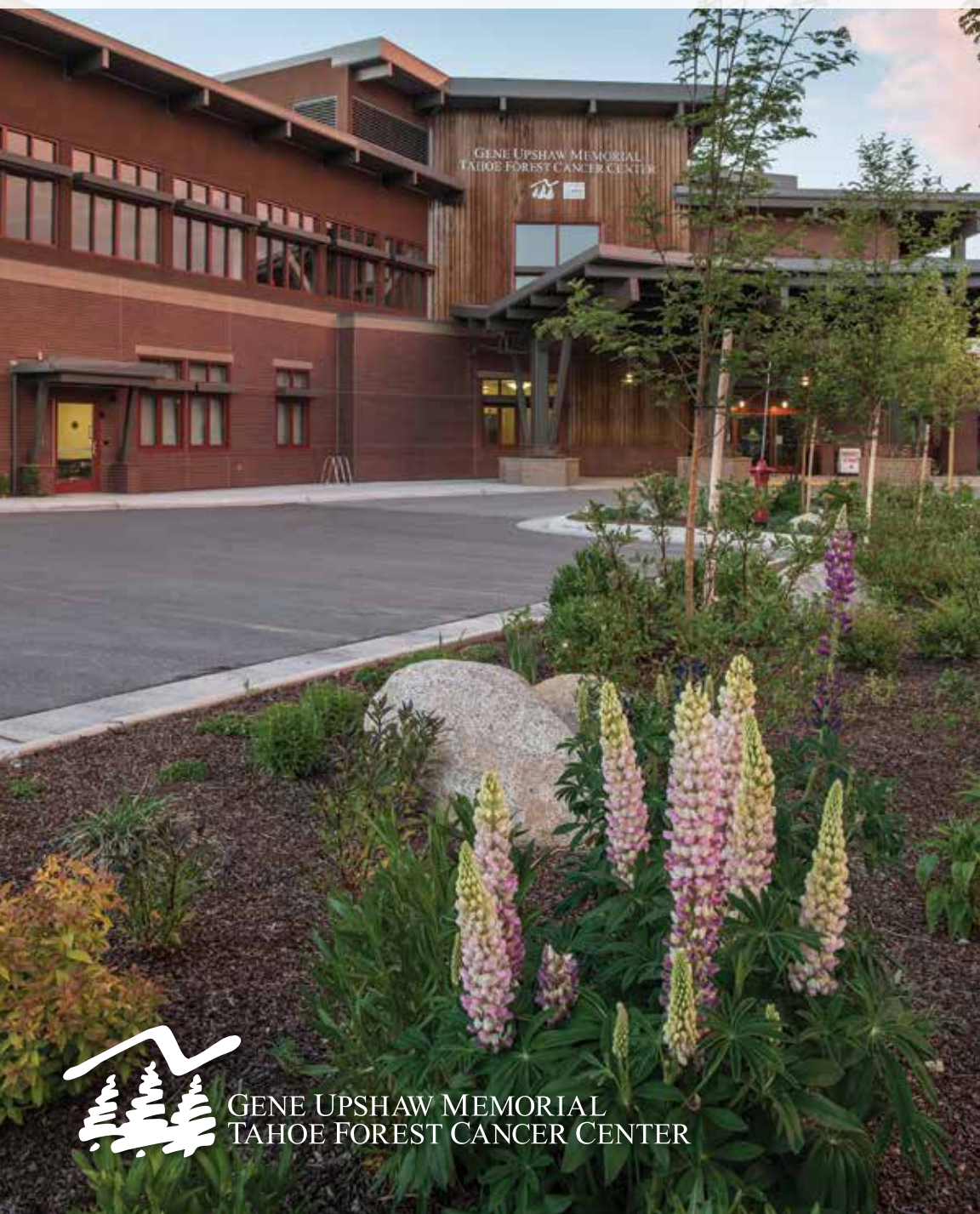


GENE UPSHAW MEMORIAL TAHOE FOREST CANCER CENTER COMMUNITY ONCOLOGY REPORT



GENE UPSHAW MEMORIAL
TAHOE FOREST CANCER CENTER



FROM *our* MEDICAL DIRECTOR

Laurence J. Heifetz, MD, FACP

Welcome to our inaugural Community Oncology Report. Since we started providing hematology and oncology services in this community in 2006 we have been honored to be your doctors. Your trust in us is not taken for granted, and we hope to continue to earn it every day.



Our cancer program is focused on delivering the best care you can get and still stay close to home. This has been enabled by our close relationship with the UC Davis Comprehensive Cancer Center. Our virtual tumor board program has allowed us to routinely discuss complex cases with thought leaders in an easy and open forum throughout the week.

Our coordinated patient and family services programs, available to you without charge, are testing the idea that physical and emotional stability will result in improved symptoms and outcomes for our cancer patients.

Please allow me to share this story with you.

"Aspen Grove" by Troy Corliss welcomes patients and visitors to the Radiation Therapy waiting area at Gene upshaw memorial Tahoe Forest Cancer Center.



Gene Upshaw Memorial Tahoe Forest Cancer Center

WHAT'S INSIDE

- 1 Our Story
- 6 Improving the Quality of Care: ASCO's *CancerLinq™*
- 7 Recognition of Care:
Quality Oncology Practice Initiative (QOPI®)
- 8 Advice from Nurse Navigation
- 9 Patient, Family and Caregivers Programs
- 13 Clinical Trials: *What, Why, When, and Where?*
- 15 Quality Care Matters: *Cancer Registry Report*
- 19 Cancer Committee
- 20 Cancer Advisory Council
- 21 Tahoe Forest Health System Foundation:
The Impact of Your Support
- 22 Foundation Fundraising Events
 - *Best of Tahoe Chefs*
 - *Gene Upshaw Memorial Fund/Golf Classic*



Our STORY

In 2006 we designed and implemented a hospital-based program that recognized three fears from a diagnosis of cancer enhanced in the rural setting – the worry of disjointed medical care, the worry of being isolated from social networks at a time of maximum need, and the worry of not receiving state-of-the-art therapy. Addressing this last and most important worry, we reached out to regional academic cancer programs in Northern California and developed personal relationships with their medical leadership. It wasn't very difficult, as many of them owned vacation cabins at Lake Tahoe.

“
I don't want yesterday's therapy, doc!
”

There are about 20 separate headings in the cancer staging manual. But four of them (20%) account for 80% of all of our patients. Those are colorectal, prostate, lung and breast cancer, demonstrating that the 80/20 rule is also biologic. Since we were building a program from scratch, we decided that focusing on the 20% of diseases that made up 80% of our patients would build an infrastructure that would enable us to take care of most of the remaining conditions.

The UC Davis Cancer Care Network

The challenge was to create a program to help us feel confident that we would be practicing at that cutting-edge level of knowledge. Shortly after opening our program with one medical oncologist and one nurse practitioner, we met with the leadership of the UC Davis Comprehensive Cancer Center in Sacramento, CA, to share our vision. They were expanding their network to service smaller communities such as ours, and in 2008 we joined the UC Davis Cancer Care Network. It was a perfect fit.

The glue that holds the organization together is our virtual tumor board program. Reflecting the 80/20 rule, UC Davis arranged its disease specific tumor boards with gastrointestinal on Monday, genitourinary on Tuesday, thoracic on Wednesday, and breast on Thursday. Over time, the program expanded to include gynecology on Friday, and Leukemia/Lymphoma on alternate Mondays. This became our “doctor’s dining room”. We scheduled ourselves to be sure we attended tumor board almost every day, even if we didn’t have a case to present.

The physical layout is a conference room with a teleconferencing camera in the center of one wall. To the left of the camera is a large flat-screen monitor where all of the participants can see each other. On the right is a second monitor for shared PowerPoints, MRI’s, pathology slides, etc. Technologic bugs were easily worked out. Within a short time of experiencing active and open communication among community and academic oncologists at these tumor boards, the traditional psychological and communication barriers were broken down and a true collaborative spirit emerged. These tumor boards provided a forum for a rapid presentation of a new or problem case frequently within a few days of the patient’s initial visit. This resulted in a significant shortening of the usual time delay in obtaining a formal second opinion or surgical referral at an academic center, as well as the time to have advanced diagnostic or therapeutic interventions scheduled.

Membership in the network also allowed us to participate and develop a clinical trials program with an NCI designated comprehensive cancer center as a partner. UC Davis provided their IRB plus operational backup and guidance. The word got out and our patient population grew beyond our predictions. Before we knew it, we were recruiting more physicians and expanding into radiation therapy.

Community Engagement

In a small town there is an intimate relationship among many levels of society. Our community spearheaded the passing of a local tax bond to pay not only for a proper cancer center, but also an expansion of emergency services and labor and delivery services at the hospital. We benchmarked numerous cancer centers around the country and designed a center to optimize the patient, nurse and physician experiences.

In 2012, the 20,000 ft² Gene Upshaw Memorial Tahoe Forest Cancer Center opened on the campus of Tahoe Forest Health System with a creatively designed chemotherapy treatment center, examination rooms, PET/CT scanning for both diagnostic imaging and radiation treatment planning, a Varian TrueBeam linear accelerator with comprehensive capacity including stereotactic radio-surgery, and a family resource center.

The hospital foundation and its Cancer Advisory Council (CAC) provided a mechanism for ongoing community financial support that enabled us to provide a coordinated and comprehensive Patient and Family Services program with clinical psychology, massage, acupuncture, nutrition, biofeedback, and an “Exercise for Energy” program. All of these services are provided at absolutely no charge to the patients.

The Sierra Crest Initiative

As our team became more comfortable with the telecommunications experience, we decided to adapt it to the special needs of other rural communities in our region without cancer services. Our patients traveled upwards of an hour, frequently in dangerous weather, for chemotherapy and radiation therapy. They also needed to make the same drive for interim visits while on chemo as well as routine follow-up visits. We felt that we could provide the same level of care for those interim and follow-up visits by using telemedicine instead of face-to-face office visits.

The communities of Quincy, Portola, Loyalton, and South Lake Tahoe, CA, have their own medical facilities with varying capacities. They were all members of the California Telehealth Network, so already had the necessary systems in place for telemedicine with large urban academic medical centers. With the help of a properly trained nurse practitioner at each location, we were able to schedule those interim and routine office visits via telemedicine without difficulty. It would not be uncommon for a doctor to see two or three telemedicine patients at different locations during normal office hours. The only consistent complaint we received from patients was, “I miss the hugs!”

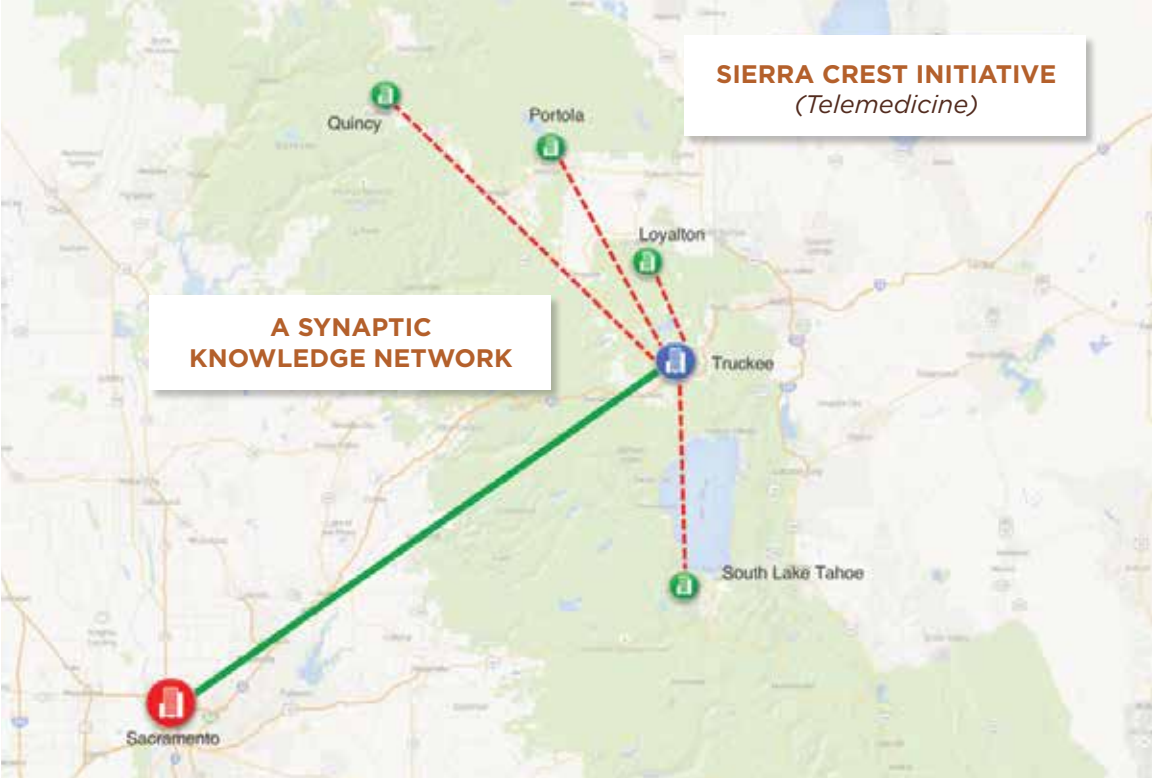
The Inverse Square Law For Knowledge

Just as a Wi-Fi signal loses strength the farther it is from a router, so does knowledge diminish with distance from medical thought leaders, especially in the rural setting.

There are 69 NCI-Designated Cancer Centers in the USA. Seven are Basic Science Cancer Centers, 13 are Clinical Cancer Centers, and 49 are Comprehensive Cancer Centers. UC Davis is one of those 49. The UC Davis Cancer Care Network transmits the highest quality information from a central source to its four remote partners. The Tahoe Forest Tele-Oncology Program re-packages that information and delivers it to even more remote nodes. This synaptic knowledge network must mitigate against the inverse square law of knowledge loss over distance.

Everyone Benefits

The entire system provides synergistic benefits to all of the stakeholders. Patients can address their fears of receiving outdated therapy and still stay close to home.



This is proven by the shift from 100% out-migration of cancer patients in 2006 (before we started the program) to 53% in-migration of patients from outside of our catchment area by 2016.

Tahoe Forest Health System along with the medical facilities at Quincy, Portola, Loyalton, and South Lake Tahoe benefit from more diagnostic and therapeutic procedures being done at their facilities.


UC Davis benefits from having a new source for clinical trial accrual and an organic relationship with community oncologists that facilitates advanced specialized care from thoracic surgery to bone marrow transplantation. The program is an absolute proof of their commitment to community services.

The success of this project required one important observation and one cultural shift. The observation was to recognize the 80/20 rule and build a clinical program around it. The cultural shift was to do something smart at lunch – attend a disease specific case-based conference every day.

This synaptic knowledge network model could be scaled to address care disparities not only in other physically remote regions challenged by educational, economic, and cultural issues, but in urban centers where access to quality oncology care can be just as challenging. 🙌



Varian TruBeam Linear Accelerator



IMPROVING THE QUALITY of CARE:

ASCO's CancerLinQ™

The Tahoe Forest Cancer Center's electronic health records are now part of the growing CancerLinQ™ database to help physicians uncover patterns and trends and receive real-time quality feedback.

The Gene Upshaw Memorial Tahoe Forest Cancer Center in Truckee, CA, has joined CancerLinQ™, a big data initiative developed and led by the American Society of Clinical Oncology (ASCO) to rapidly improve the quality of care for people with cancer. Tahoe Forest Cancer Center is one of more than 93 practices that have signed agreements with a CancerLinQ LLC, a wholly owned nonprofit of ASCO dedicated to the development and operation of the CancerLinQ™ system.

CancerLinQ™ will allow cancer care providers to improve the quality and value of care by analyzing millions of cancer patient medical records, uncovering patterns and trends, and measuring their care against that of their peers and recommended guidelines. The CancerLinQ™ platform is the only effort of its kind being driven by a non-profit, physician organization, and it leverages the combined expertise of 40,000 of the world's leading oncologists (who comprise ASCO's membership) and merges it with market-leading big data analytics from SAP. The platform uses SAP Connected Health built on the SAP HANA® platform, a flexible, multi-purpose data management and application platform.

"We are thrilled that Tahoe Forest Cancer Center joined CancerLinQ and our mission to improve the care of millions of people living with cancer," CancerLinQ LLC Chief Executive Officer Kevin Fitzpatrick said. "Each practice that joins CancerLinQ adds to our collective experience and knowledge of cancer care and better equips oncologists to provide higher-quality, tailored care for patients, no matter where they live."

CancerLinQ™ is supported in part through the Conquer Cancer Foundation, whose generous donors have helped make the system possible. CancerLinQ™ is a project of CancerLinQ LLC. For more information, please visit: **[CancerLinQ.org](https://www.cancerlinq.org)**.

RECOGNITION OF CARE:

Quality Oncology Practice Initiative (QOPI®)



Successful completion of Quality Oncology Practice Initiative three-year certification program

The Gene Upshaw Memorial Tahoe Forest Cancer Center has been recognized by the QOPI Certification Program (QCP™), an affiliate of the American Society of Clinical Oncology (ASCO), as successfully completing a three-year certification program for outpatient hematology-oncology practices that meet nationally recognized standards for quality cancer care. QCP builds on ASCO's Quality Oncology Practice Initiative (QOPI®).

"This certification is a reflection of the excellent work done at our cancer center," Melissa Kaime, MD, FACP, Medical Oncologist and Hematologist at the Gene Upshaw Memorial Tahoe Forest Cancer Center said. "We are absolutely committed to providing extraordinary, compassionate care to our patients."

In applying for certification, Gene Upshaw Memorial Tahoe Forest Cancer Center participated in a voluntary comprehensive site assessment against clearly specified standards that are consistent with national guidelines and was successful in meeting the standards and objectives of QCP.

"ASCO's QOPI certification recognizes those oncology practices that are committed to delivering the highest quality of cancer care," ASCO President Daniel F. Hayes, MD, FASCO said. "By achieving certification, these practices have demonstrated their commitment to quality and safety excellence in the care they deliver to patients, as well as to the continuous process of quality improvement."

QOPI is a voluntary self-assessment and improvement program launched by ASCO in 2006 to help hematology-oncology and medical oncology practices assess the quality of the care they provide to patients. Through the QOPI program, practices abstract data from patients' records up to twice per year and enter this information into a secure database. More than 900 oncology practices have registered for the QOPI program.

The QOPI Certification Program was launched in January 2010, and more than 250 practices are currently certified. This certification for outpatient oncology practices is the first program of its kind in the United States. Oncologists can achieve certification by participating in a voluntary comprehensive site assessment against clearly specified standards that are consistent with national guidelines.

The QCP seal designates those practices that successfully meet the standards and objectives of the QOPI Certification Program, which includes scoring above the threshold on the key QOPI quality measures and meeting chemotherapy safety standards established by ASCO and the Oncology Nursing Society. QOPI and the QCP are projects dedicated to innovative quality improvement programs.

For more information, please visit: **www.instituteforquality.org/qopi-qcp**.

Advice

FROM NURSE NAVIGATION



Communication with your health care team is an important link to good care, but navigating the complex health care system is not an easy task. Here are some pointers to help you be your own advocate and gain control of this complex process.

Prepare for your appointments:

- Write down your questions. It is not unusual to forget your questions once you are in the appointment.
- Bring a friend or loved one with you to your appointment. There's a lot to absorb and a second set of ears can help you remember.
- Bring a list of any new or bothersome symptoms. Your doctor wants to know about them.

Be involved in your appointments:

- Our care team is here to help you. Learn the best way to work together with them.
- Take notes. If there are terms you are unfamiliar with, ask what they mean and how they are spelled.
- Ask why a test is being ordered.
- Bring those lists of questions and symptoms and be direct about asking!

Stay organized:

- Keep a binder for your notes, brochures and appointment schedules.
- Keep a list of your medications and what they are for.
- Get to know your health care team. Take their business cards so you remember their names and have easy access to their contact information.

Gain knowledge:

- Ask for a second opinion.
- Collect information from your care providers, lab reports, imaging reports and discs with imaging.
- Go to reliable information sources. Forums are often not helpful.
- Ask if you have a nurse navigator available to you or a main point of contact who can offer guidance, insight into your care and answers to your questions.
- Learn the best way to contact your health care team.

Patient, Family, and Caregiver **PROGRAMS**



Studies confirm that support programs play an important role in beating cancer, which is why we offer a variety of programs at no cost to patients.

Our goal is to improve the quality of life not only for the patient, but also for the family and the caregiver.

This approach addresses social, psychological, emotional, and functional needs before, during and after the course of treatment. We use an integrated, whole-person approach that addresses the social, emotional, and functional aspects of a patient's cancer journey to improve the quality of life for the patient, the family and the caregiver.

Gene Upshaw Memorial Tahoe Forest Cancer Center offers a variety of supportive care programs. Cancer specific support programs have been shown to play an important role in a patient's overall treatment program.

Each of these programs is offered at no cost to patients and is offered through generous philanthropic support. 100% of donations to Tahoe Forest Health System are given where the donor intended.

Individual Counseling/Therapy

A cancer diagnosis can add stress to anyone's life. Gene Upshaw Memorial Tahoe Forest Cancer Center offers free individual therapy with a licensed psychologist specializing in oncology. This service is offered to patients, survivors and caregivers. Therapy can often help reduce depression, anxiety and pain, while simultaneously increasing healthy behaviors such as better nutrition, exercise and sleep.

Telehealth Counseling

Patients and caregivers who are unable to attend office sessions can meet for counseling in their own homes. Participants only need an internet connection and access to Skype or FaceTime. These sessions offer help with depression, anxiety and pain, while increasing healthy behaviors such as better nutrition and sleep.

Suffering is Optional

Suffering is optional during a six-session workshop that focuses on mindfulness, short meditations and readings. Through mindfulness and meditation, we become aware of how our thoughts direct our feelings and, in turn, our immune system. Experience calmness, a sense of well-being, and "tap into" your own inner resources.

Walkabout Project Exercise

Active and recovering cancer patients who are unable to attend group exercise class due to distance or desire can participate via Skype. Exercise classes meet twice a week for six weeks, with new exercises and stretches added each week. By the end of the session, participants will have an exercise program to continue on their own. Participants only need a device to connect to the internet and to download Skype.

PROGRAMS *cont'd*

Exercise for Energy

Classes available in Truckee and Incline Village

Specially designed for current and recovering cancer patients, caregivers and survivors, this ongoing class offers guidance, support and useful tools to maintain health and wellness. The class incorporates strengthening, stretching, breathing, balance, cardio, and fitness education. All classes are supportive, medically managed and taught by health professionals.

Massage Therapy

This therapy service is provided to cancer patients to help with fatigue, anxiety and some treatment side effects such as nausea. In a calm setting, cancer patients can enjoy a peaceful reprieve, feel more connected with body, mind, and spirit, feel relaxed and comfortable and experience improved sleep and a greater sense of well being. Massage therapy for active cancer patients is free of charge. Caregivers receive three free sessions. Survivors can enjoy three free massages and receive discounted sessions, afterward.



Acupuncture

Acupuncture provides a holistic perspective for patients at the cancer center. Through the practice of both acupuncture and Traditional Chinese Medicine, this program offers a complementary approach to help manage the side effects of chemotherapy and radiation and alleviate some of the stress (both physical and emotional) that cancer patients experience. Group treatments are available weekly from 5-7 p.m. or by appointment.

Biofeedback

Biofeedback trains the patient in relaxation, mindfulness and coherence and teaches self-regulation skills, which can relieve and ease chronic pain, reduce stress and anxiety, and increase relaxation. Precise instruments measure physiological activity such as heart function, breathing, muscle activity and skin temperature and accurately “feed back” the information on a computer screen. What we can see, we can change.

Caregiver Education and Navigation Workshops

Supporting your loved ones through cancer treatment and recovery can be a difficult and confusing experience. Gene Upshaw Memorial Tahoe Forest Cancer Center understands that an educated and supported caregiver is a powerful force in the fight against cancer. This workshop covers topics such as care navigation, billing and insurance, proper nutrition, and whole body wellness.

Deep Relaxation for Patients, Survivors, and Caregivers

Let go of tension in your body and your mind and learn to visualize yourself in optimal health. Class includes a guided meditation called Yoga Nidra (yogic sleep), where you experience deep relaxation and healing. No experience necessary, appropriate for all levels.

Yoga for Patients and Survivors

A combination of yoga postures, breathing techniques, and meditation, this gentle class helps students relieve stress, gain greater body awareness, and strengthen from the inside out. Students are encouraged to work at their own level to improve physical, emotional, and mental health throughout treatment and recovery. No experience necessary, appropriate for all levels.



Look Good...Feel Better® Program

This program is designed to help women overcome the appearance-related side effects of cancer treatment. Expert local estheticians, in collaboration with the American Cancer Society, offer this program monthly. Needed supplies must be ordered, so please be sure to register in advance.

WeCARE!™ Peer Navigator Program

The WeCARE!™ Community-Based Cancer Peer Navigator program provides special support on an individual basis. This program matches newly diagnosed breast cancer patients with trained cancer survivors. The WeCARE!™ program is available to any newly diagnosed cancer patient, regardless of where the patient receives treatment. Peer navigators are breast cancer survivors trained to be “coaches,” provide information on disease and treatment options, and be a resource for the patient and family. They are also trained to assist with problem-solving and provide coping strategies. If desired, a peer navigator can accompany the patient to a doctor’s visit or treatments.

Patient Support Group

Experience the camaraderie among cancer patients by sharing your fears, struggles, and changes in life perspectives. Sharing your story is an evidence-based practice that facilitates the emotional healing process and helps reduce stress and anxiety.

Kick Nicotine

In this series of workshops, trained clinical psychologists, nutritionists, pharmacists and clinicians will guide you through the process of kicking the habit. Free carbon monoxide testing, relapse prevention support and strategies, and different techniques to replace nicotine cravings are offered. 🍷



CLINICAL TRIALS:

What, Why, When, and Where?

Today's cancer treatments are complex, confusing and expensive. The Internet provides a surplus of information on treatment options, which often can seem endless. For the average person, navigating this labyrinth is overwhelming. One important aspect to understand about cancer treatment is the difference between standard therapies and experimental therapies. This difference is important and often not clear in an average Google search.

Standard cancer treatments are interventions, which may be drugs, devices, or procedures that have been proven to be safe and effective in treating cancer. Experimental therapies are drugs, devices or procedures that are being studied

but have not yet been proven to be more effective at treating cancer than standard treatments. This research process is conducted through structured human studies called "clinical trials." Participation in a clinical trial is completely voluntary and can offer access to novel treatment options beyond standard cancer treatment.

People are living longer with cancer due to treatment advances; all of which were tested and proven in past clinical trials. Clinical trials benefit patients by offering new treatment options not otherwise available and empower patients to help others who will inevitably follow. Clinical trials are available for all stages of cancer prevention, diagnosis and treatment. Frequently, standard treatment options with proven safety and efficacy are offered as the first line of therapy. However, if a well-designed clinical trial is available as the first line of treatment, participation is always encouraged. Most trials are conducted at the university level while most cancer treatment is provided in a community setting such as ours. This discrepancy can be attributed to many factors with distance being paramount. Often, participation in a clinical trial requires patients to make frequent trips to that facility, which may not always be possible.

At the Gene Upshaw Memorial Tahoe Forest Cancer Center, we offer clinical trials through our affiliation with UC Davis and will soon offer trials through the UCLA TRIO network. We are committed to providing high quality clinical studies for cancer patients in the North Lake Tahoe region that would otherwise only be available at larger institutions and would require patients to travel a significant distance for treatment.

Nationally, only 3% of cancer patients are enrolled in clinical trials in the United States. We are proud to report that from 2014 through 2017 our average annual enrollment was almost four times the national average at 11%. 🙌

“ Clinical trials benefit patients by offering new treatment options not otherwise available and empower patients to help others who will inevitably follow. ”



*Infusion Room at Gene Upshaw Memorial
Tahoe Forest Cancer Center*

QUALITY CARE MATTERS

Never Stop Improving, it's in the Data

From January 1, 2009, through December 31, 2016, the Tahoe Forest Cancer Registry accessioned 1,545 new cases. Cancer Registrars strive to capture a complete summary of patient history, diagnosis, treatment, and disease status for every patient at the hospital. This could not have been done without the leadership of Kelley Bottomley, CTR, and Managing Cancer Registrar, and the cooperation and support of our entire medical staff, especially our Cancer Committee Chair, Dr. Melissa Kaime, medical oncology, and Cancer Liaison Physician, Dr. Ellen Cooper, surgery.

The Tahoe Forest Cancer program is accredited by the American College of Surgeons' (ACoS) Commission on Cancer (CoC). As a member, Tahoe Forest sends all analytic cancer cases to the National Data Base on Cancer for statistical compilation and analysis. The National Cancer Data Base (NCDB), a joint program of the Commission on Cancer (CoC) and the American Cancer Society (ACS), is a nationwide oncology outcomes database for more than 1,500 commission-accredited cancer programs in the US and Puerto Rico. Some 70% of all newly diagnosed cases of cancer in the US are captured at the institutional level and reported to the NCDB. The NCDB, which began in 1989, now contains approximately 29 million records from hospital cancer

registries across the United States. This data is used to explore trends in cancer care, to create regional and state benchmarks for participating hospitals, and to serve as the basis for quality improvement.

Why does this matter to patients? Because to maintain its CoC accreditation, Tahoe Forest must always study and improve how it cares for patients. The ACoS/CoC requires organizations to report quality core measures on breast, colon and rectal cancer. Each measure has an individually determined goal set by the ACoS/CoC. Cases must meet specific criteria in order to qualify for inclusion. All cases not meeting the benchmark are analyzed and reviewed by the Cancer Committee therefore promoting continuous quality improvement in patient care. The Tahoe Forest Program beats the benchmarks for best practices and often scores significantly higher than the average CoC program in the country. This means that the processes and treatments that the program uses are the best practices available. And when patients know they can receive this level of care close to home, they can fight cancer while surrounded by their friends and family. Tahoe Forest is very proud of our outcomes data and the quality of care our patients receive.

This data is for cases diagnosed and/or treated at Tahoe Forest (2009 – 2016) and includes the most recent data submitted to ACOS in 2018.

**Top Five Cancer Sites Diagnosed and/or Treated at
Gene Upshaw Memorial Tahoe Forest Cancer Center**
(1,545 patients from 2009-2016)

Cancer Site	Number of Patients
Breast Cancer	373 (24%)
Colorectal	127 (8%)
Prostate	124 (8%)
Lung/Bronchus Non-Small Cell Carcinoma	123 (8%)
Melanoma	82 (5%)
All Other Sites	829 (54%)

Source: Tahoe Forest Cancer Registry CNEXT Database

These top five cancers are consistent with national averages, confirming no difference in incidence of cancers in our region from the country at large.

Tahoe Forest Cancer Program CoC Measures for Quality of Breast Cancer Care (2018)

Site of Cancer	Expected Performance Rate	Measure Descriptions	Tahoe Forest	State of California	National CoC Programs
Breast	90%	Radiation therapy is administered within 1 year (365 days) of diagnosis for women under the age of 70 receiving breast conserving surgery for breast cancer	97%	89%	92.1%
Breast	90%	Combination chemotherapy is recommended or administered within 4 months (120 days) or stage IB-III hormone receptor negative breast cancer	100%	89.2%	93.1%
Breast	90%	Tamoxifen or third generation aromatase inhibitor is recommended or administered within 1 year (365 days) of diagnosis for women with AJCC T1N0MO, or stage IB-III hormone positive breast cancer	100%	89.3%	92.%
Breast	90%	Radiation Therapy is recommended or administered following any mastectomy within 1 year (365 days) of diagnosis of breast cancer for women with ≥ 4 positive regional lymph nodes	100%	83.1%	83.1%

Source: CoC National Cancer Database

We are expected to treat 90% of our breast cancer patients according to these guidelines. Our data shows that we have consistently done this at the 97-100% level.

.....

Tahoe Forest Cancer Program CoC Measures for Quality of Colorectal Cancer Care (2018)

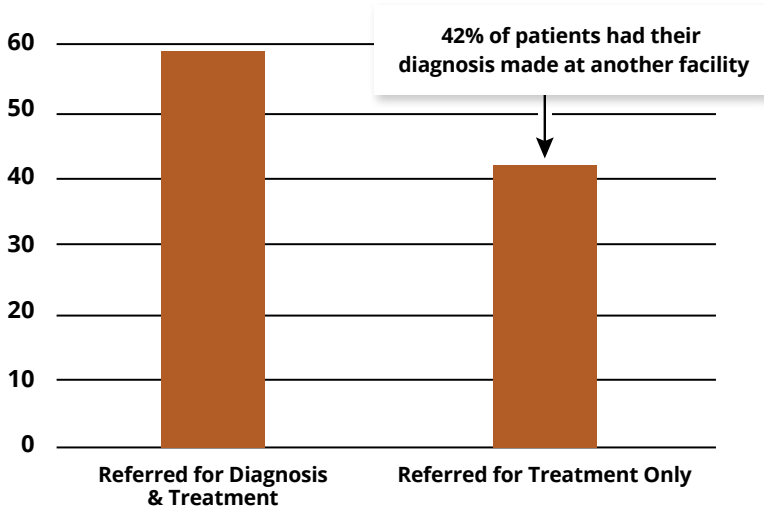
Colon and Rectum	Expected Performance Rate	Measure Descriptions	Tahoe Forest	State of California	National CoC Programs
Colon	85%	At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer	100%	92.7%	92.2%

Source: CoC National Cancer Database

We achieved 100% compliance with this colorectal cancer goal.

Colorectal Cancer Diagnosed (2009-2016)

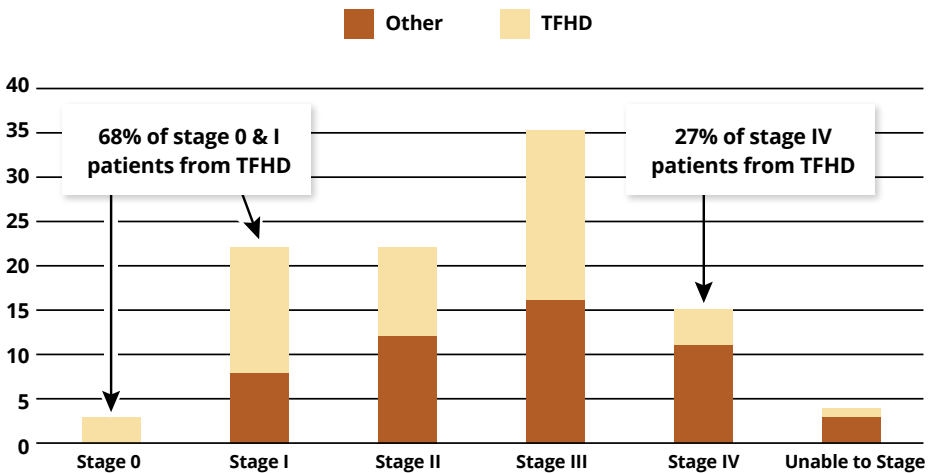
No. Patients Referred for Diagnosis & Treatment vs. Treatment Only



Source: Cancer Registry CNEXT Database

Colorectal Cancer Stage at Diagnosis (2009-2016)

Tahoe Forest Hospital District (TFHD) Residents vs. Out-of-Area Residents



Source: Cancer Registry CNEXT Database

Tahoe Forest CANCER COMMITTEE

The membership of the Commission on Cancer Committee is multidisciplinary, representing physicians from diagnostic and treatment specialties and non-physicians from administrative and supportive services. Committee coordinators, who are responsible for specific areas of cancer program activity, are designated each calendar year. The care of patients with cancer requires a multidisciplinary approach and encompasses numerous physician and non-physician professionals.

Karen Aaron, RN, OSN

Nurse Navigator/Survivorship

Kelley A. Bottomley, CTR

Cancer Registry, Coordinator Quality/Compliance

Bruno Carlini

Radiation Therapy Manager

Ellen M. Cooper, MD

CoC Physician Liaison and General Surgeon

Payton Davis

Financial Counseling

Kirk W. Ditterich, PsyD

Social Services Coordinator

Laurence J. Heifetz, MD, FACP

Program Medical Director and Medical Oncologist

Lizzy Henessy

Community Outreach Coordinator

Melissa Kaime, MD, FACP

Physician Chairman and Medical Oncologist

Rachel Kitchen

Cancer Research Coordinator

Johanna S. Koch, MD

Palliative Care and Hospice

Ahrin B. Koppel, MD

Medical Oncology and Hematology

Thaddeus A. Laird, MD

Radiology

Michelle Larson, RPT

Director, Physical Therapy

Heather Lutz, MS, RD, CSO

Nutrition Services

James McKenna, MHA

Cancer Program Director

Daphne Palmer, MD, FACRO

Director Radiation Oncology

Gregg Paul, MD

Family Medicine

Michael Powell, MD

Pathology

Thomas J. Semrad, MD, MAS, FACP

Medical Oncology and Hematology

Jean Steinberg

Director, Medical Staff Services

Peter Taylor, MD

OB/GYN and Medical Staff Quality Liaison

Janet VanGelder, RN

Director of Quality

Hillary Ward, Pharm D

Pharmacy

Robin Ward, CME

Hospitalist Coordinator

Harry Weis

*Chief Executive Officer,
Tahoe Forest Health System*

Rebecca Zadig-Escalera

Operations Manager, Conference Coordinator

Janet Zipser Zipkin

Community Member

Cathleen Zoller

American Cancer Society

Tahoe Forest CANCER ADVISORY COUNCIL

The Cancer Advisory Council was formed in 2006 by community volunteers with a common vision to shape the future of cancer care in our community.

This group:

- Worked with the Tahoe Forest Health System Foundation staff and the Health System Board of Directors on projects related to local cancer care.
- Benchmarked 12 regional cancer centers for best practices.
- Established a business advisory model for feedback to local cancer programs.
- Played an instrumental role in development and planning the annual cancer fundraiser, Best of Tahoe Chefs.
- Provided research and feedback in collaboration with staff for innovative psychosocial oncology services.
- Increased community awareness with patient and community advocacy for design of a new cancer center.

After the successful opening of the Gene Upshaw Memorial Tahoe Forest Cancer Center in 2012, several founding members moved to stewardship, innovation and oversight. This group ensured that the endowment funds continue to provide necessary support to patient and family programs, sustainability for the latest oncology equipment and top talent in cancer care, as well as the general fund for programs that support services within the cancer center.



Back row, left to right: Randy Hill, Trinkie Watson, Alison Elder, Gary Boxeth, Colleen Chapman, Stefanie Oliveri, Patti Boxeth, Martha Simon, Valerie Forte, Jessica Portnoy, Fritz Briner, Janet Zipkin, Larry Heifetz, MD, Paul Kucharski. **Front row:** Schatzi Boyd, Jean Ludwick, Tom Hobday, Pamela Hurt Hobday, Ernie Grossman, Carey Hood. **Not pictured:** Margo Lalchandani, Barbara Pearlman Whyman, MD, Andy Whyman, MD.

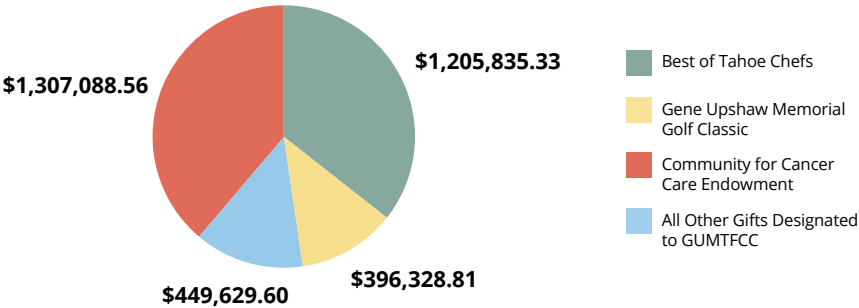


Tahoe Forest Health System Foundation **IMPACT OF YOUR SUPPORT**

Tahoe Forest Health System Foundation offers many ways to connect donors to the causes they care about. Through our special events, memorial gifts, direct donations, and endowment funds, a total of **\$3,358,882** was raised to support the Gene Upshaw Memorial Tahoe Forest Cancer Center from 2009-2016.

Total raised from 2009-2016: \$3,358,882.30

IMPACT OF YOUR SUPPORT



100% of the proceeds from **Best of Tahoe Chefs** supports patient and family programs at the Gene Upshaw Memorial Tahoe Forest Cancer Center.

Proceeds from the **Gene Upshaw Memorial Golf Classic** support quality medical care for patients and their families, sustainability and advancement of medical technology, and funds research in areas such as pancreatic cancer and traumatic brain injury. Since 2009, the Gene Upshaw Memorial Golf Classic has generated \$1.5 million dollars with a significant portion allocated to supporting our cancer programs and services.

To make a gift donation in support of the Gene Upshaw Memorial Tahoe Forest Cancer Center visit **tfhd.com/giving**.

FUNDRAISING *Events*

Tahoe Forest Health System Foundation connects donors to the causes at Tahoe Forest Health System they are passionate about.

Best of Tahoe Chefs

One-hundred 100% of the proceeds from our annual fundraising event, The Best of Tahoe Chefs, supports patient and family programs. This whole-person approach to cancer care addresses the social, psychological, emotional and functional aspects of the journey to improve the quality of life for the patient, family and caregiver. Each of these programs is provided at no cost to patients and is offered through your generous philanthropic support.

Gene Upshaw Memorial Fund/ Golf Classic

The purpose of the Gene Upshaw Memorial Fund is to honor Gene Upshaw's legacy and to advance the Upshaw families' passion of providing quality medical care for patients and their families, sustainability and advancement of medical technology, and funding research in areas such as pancreatic cancer and traumatic brain injury. Gene Upshaw, a professional athlete, NFL Players Association leader and humanitarian, was a member of the Tahoe Truckee community for 35 years until his death from pancreatic cancer in 2008. Because of the outstanding quality of care Gene received at Tahoe Forest Hospital and the dedication of the hospital staff to patient care and family services, Gene's family established the Gene Upshaw Memorial Fund at Tahoe Forest Health System Foundation.



Gene Upshaw



GENE UPSHAW MEMORIAL
TAHOE FOREST CANCER CENTER

PO Box 759
Truckee, CA 96160

PRSRT STD
U.S. POSTAGE
PAID
RENO, NV
PERMIT #931

Gene Upshaw Memorial Tahoe Forest Cancer Center

SENIOR STAFF

Laurence J Heifetz, MD, FACP

Cancer Center Medical Director

Melissa Kaime, MD, FACP

Medical Oncology/Hematology

Ahrin B Koppel, MD

Medical Oncology/Hematology

Daphne Palmer, MD, FACRO

Radiation Oncology Medical Director

Thomas J Semrad, MD, MAS, FACP

Medical Oncology/Hematology

James McKenna, MHA

Cancer Program Director

phone (530) 582-6450 | fax (530) 582-6430 | info@tfhd.com

tahoecancercenter.com