

2012 CANCER PROGRAM ANNUAL REPORT

WITH 2011 CANCER REGISTRY DATA



ORANGE COAST MEMORIAL
MEMORIALCARE® HEALTH SYSTEM

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This report features data and information regarding cancers diagnosed and treated at the Orange Coast Memorial Medical Center, with a special focus on breast cancer. Designed for physicians and interested patients, this information demonstrates the patient-centered, high-quality approach to care that Orange Coast Memorial patients receive.

A Year In Review

Cancer Committee Chairman's Report

Julio A. Ibarra, M.D.

The accomplishments of the Cancer Program at OCMMC are remarkable. The results are visible in this report and the beneficiaries of our progress are our patients. The year of 2012 was not a year of significant growth for our program, but was a year of technological advancement and of policy making, which will help to build the infrastructure that will allow us to continue our growth and expansion. Thanks to the energy and enthusiasm of a group of physicians we were able to start the endobronchial ultrasound (EBUS) program at OCMMC. This allows patients with lung cancer to be staged with minimally invasive techniques. Administration was convinced that the technology was going to benefit patients and committed the funds to provide the equipment to our physicians who have been actively using it during the year. In the breast arena, we acquired the whole breast ultrasound, a sophisticated instrument that will allow our breast center patients with dense breasts (as it improves breast cancer detection in this population) and increased life time risk to be screened in a more accurate and comprehensive way. This year the state of California enacted a law making it mandatory for breast centers to inform patients when their breast tissue was dense on mammogram. In the oncology ward, we were able to install the new telemetry units to better monitor our patients. Although not new in technology, we must report that the low dose CT lung screening program is actively running and we are screening patients that qualify according to the established guidelines. Electronic TNM forms have been created by the informatics team and incorporated into Epic as "Cancer Staging Notes"; these are initiated by the pathologists and then completed by the attending physician. These forms are mandatory for any Commission on Cancer accredited program and are used by our tumor registrars to obtain data regarding our cancer patients.

Not all the improvements have been technological. We have been very fortunate to secure the presence of genetic counselor Nadine Rayes for 2.5 days per week at OCMMC. Genetic counseling and risk assessment is a service that was very much needed for the evaluation of our patients. Nadine has been extremely helpful at tumor boards making recommendations and analyzing the risk of patients. Rehabilitation services for our cancer patients are growing under the direction of John Fenger, Michelle Whitney and their team. Our patients no longer need to be referred to an outside facility to be evaluated and managed for lymphedema and other programs are being developed. Yoga classes for cancer patients are available as well in the rehab center. A STAT path for neutropenic patients was developed, which allows for faster evaluation and the initiation of antibiotic therapy within 60 minutes of evaluation at the emergency department. A smoking cessation class was instituted at OCMMC under the guidance of Andrea Van de Ree, RN; this has already seen a significant number of individuals that have successfully graduated. These graduates are being followed to make sure they remain smoke free. We are working on the creation of an Outpatient Nutrition Service which is essential for a comprehensive cancer program. Safe and effective nutrition is critical in the quality of life of cancer patients.

None of the acquisitions and program expansion would be possible without funds. We have been fortunate to have the support of our Foundation and others to capture funds for our oncology services and education of our employees. These events have included "Fight with Grace" organized by Jodi Ferragamo and her fantastic team of volunteers, which in 2012 donated a check for \$35,000.00 to benefit the breast center. Another event was "March for Hope" where we saw outstanding support by our own staff and physicians. This event, which took place at the Center Club in Costa Mesa and attracted over 300 people, raised \$25,000.00. It is the commitment of our employees and the conviction of our physicians that allow us to move forward with more innovations and benefits for our cancer community.

Our research arm has developed slowly, but it is moving in the right direction. With the aid of Deborah Friedman and Leila Anders we are able to offer a large number of research protocols to our patients. Research is important for our program not only because it is a Commission on Cancer standard, but because it offers alternatives to patients and physicians when the standard is not working or desired. A trial using hypo-

fractionated CyberKnife radiation therapy for men with prostate cancer is open at OCMMC; we are the only facility in Southern California to offer this trial.

In the area of education we have done a large number of CME lectures to continue the education of our staff and physicians. The MemorialCare Oncology series were quite successful in 2012 with a thoracic oncology symposium that attracted a large number of physicians from all campuses to hear the latest on diagnosis and treatment.

As we continue to build our infrastructure we will continue to grow our programs. We invite physicians to be leaders and to guide us through new ideas and possibilities that will make our cancer program even better able to provide excellent care to our patients.

Julio A. Ibarra, M.D.

2012 Cancer Committee Members

Leila Anders Research Coordinator	Jamie Jernigan, C.T.R. Cancer Registrar	Richard Reitherman, M.D. Medical Director, Imaging, OCMBC Radiology
Cindy Callaghan Director Imaging Services and Breast Center	Jane Kakkis, M.D. Medical Director, Surgery OCMBC General Surgery	Homayoon Sanati, MD Medical Director, Breast Center Medical Director, Palliative Care Program
Cathy Capaldi Vice President, Strategy/Business Development	Donald Karon, M.D. Radiation Oncology	Chris Shinar, Pharm. D. Director, Quality Assurance
Lynne Daniels, L.C.S.W. Oncology Psychosocial Coordinator	Barbara Kingsbury, R.N. Oncology Nurse Educator	Suellen Skow Administrative Assistant, Oncology Services
John Fenger Manager Rehabilitation Services	Thunga Le Vietnamese Relations Coordinator	Trish Stines, C.T.R. Cancer Registry Coordinator
Sandra Foley, R.N. Oncology Case Manager	Nancy Lean, R.N. Director, Oncology Services	Andrea Van De Ree, R.N., Nurse Navigator
Deborah Fridman Research Manager, Todd Cancer Institute	Jenny Mendola, R.N. Manager, Oncology Unit	Chi Vu American Cancer Society, Health Programs Manager
Marilyn Garcia, R.D. Nutrition	Bichlien Nguyen, M.D. Medical Director, Research, OCMBC Medical Oncology	Richard Wasley, M.D. Director Radiology
Asif Harsolia, M.D. Radiation Oncology	Joanne O'Heany Director, American Cancer Society Information Center	William Wells Chaplain
Julio Ibarra, M.D. Chair, Cancer Committee Director, Pathology Medical Director, Pathology OCMBC	Les Ono, Pharm. D. Director, Pharmacy Service	Diane Woods, R.N. Breast Center Nurse Coordinator
Jack Jacoub, M.D. Cancer Liaison Physician Medical Director, Thoracic Oncology Program	Emily Randle Vice President, Operations	
	Scott Raymond Director, Information Services	

Cancer Liaison Physician Report

Including Breast Cancer Primary Site Report

Jack Jacoub, M.D.

The role of the Cancer Liaison Physician is to spearhead COC initiatives within Orange Coast Memorial's cancer program; collaborate with local agencies, such as the American Cancer Society; and to facilitate quality improvement initiatives utilizing data submitted to the Commission on Cancer's National Cancer Database. These functions are aligned with the goals of all the physician and ancillary members of our cancer program who collaborate to eliminate cancer and to reduce the burden it places on our patients, their loved ones and our communities.

Early Detection and Prevention through Education and Screening:

We are committed to providing education on cancer prevention and early detection. Our focus is to increase awareness about the warning signs of cancer and to provide access to regular, free cancer screenings. Through our involvement in community wellness programs, individual counseling and support, and offering information to make lifestyle changes which may help to reduce the risk of a cancer diagnosis, we make clear our dedication to lessening the effects of cancer on our community.

2012 Screening & Education Events

- Vietnamese Prostate Cancer Screening held in February with 109 men received PSA and digital rectal screening examinations.
- Orange Coast co-hosted two Hepatitis Screening events with the Vietnamese American Cancer Foundation in March and in October with a total 684 community members screened.
- Vietnamese Breast Clinical Examination Workshop including consultations with Dr. Bichlien Nguyen held in February, July and November with a total of 109 women screened.
- Skin Cancer Screening was held in June with 104 community members screened.
- Prostate Cancer Screening was held Thursday, September 22, 2011 in the Compassionate Cancer Care suite and 56 men received PSA and digital rectal screening examinations.
- Community Lecture Series: Topics included advances in breast, colorectal, skin, prostate, lung and brain cancer as well as early detection and prevention via better nutrition and exercise choices.
- Smoking Cessation classes were held in June/July and October/November.

Survivorship & Community Outreach:

We are proud of the quality, comprehensive services that we offer to our patients and families during the diagnosis and treatment of cancer and the continued surveillance and support offered after the completion of definitive treatment. In 2010, approximately 3,000 members of our community participated in monthly support group meetings and community outreach activities that were facilitated by the dedicated and committed health care professionals employed at Orange Coast Memorial Medical Center.

2012 Community Outreach and Survivorship Events

- Orange Coast Memorial Center enjoys a strong relationship with the American Cancer Society. Joanne O'Heany, Director of the ACS Information Center, and Chi Vu, ACS Health Programs Manager, are both active member of our Cancer Committee.
- On-site American Cancer Society Information Center at the Orange Coast Patient Care Pavilion, which serves as a resource library that includes brochures, newsletters and videotapes on a variety cancer related topics, including clinical trials, and also houses a wig and prosthetics bank. Volunteers facilitate the "Look Good Feel Better" program.
- We continue to actively sponsor and participate in the American Cancer Society's "Relay for Life". This year's event was held at Fountain Valley High School on July 14 & 15, 2012. Orange Coast efforts were led by Lynne Daniels, L.C.S.W.

Cancer Liaison Physician Report

Including Breast Cancer Primary Site Report

Jack Jacoub, M.D.

- A team of approximately 180 members represented Orange Coast Memorial Medical Center at this year's Susan B. Komen "Race for the Cure". Orange Coast Memorial Medical Center was awarded for the number of participants and the amount of donations earned.
- The Community Advisory Council for the Cancer Institute planned and coordinated the third annual "Fall Festival for Life", a survivors' celebration/health fair to provide education to the community on cancer services available at OCMMC. The "Fall Festival for Life" was held on November 10, 2012, over 120 volunteers and physicians were on hand to greet and educate approximately 300 community members.
- The fourth annual "Be the Match" bone marrow drive was held in conjunction with the "Fall Festival for Life" and registered 19 potential donors.
- Education on early detection and screening offered via our community lectures including the Senior Lecture Series, Vietnamese Lecture Series and First Christian Church of Huntington Beach Cancer Support Group Lecture Series. Topics included advances in breast, colorectal, skin, GI, lung cancer, and new diagnostic tools such as whole breast ultrasound.
- Support Groups. "The Journey" is a support group for women at any stage of the breast cancer experience, female family members and friends. "Women in Treatment" (WIT) is a special group for women currently undergoing treatment for cancer. The prostate cancer support group provides supportive discussion and educational information for prostate cancer patients, family members and friends. "Support Connection" is a general cancer support group. "Bereavement/Transitions" group provides support to adults who have recently lost a loved one to cancer. The Yoga and Cancer group utilizes yoga. Yoga instruction provided free of charge.

Commission on Cancer (COC) Accredited Cancer Program & National Cancer Data Base

The cancer programs that are accredited by the Commission on Cancer submit their institution's cancer data to a national cancer data base known as the NCDB. This allows a facility to look at its treatment of cancers by stage and site and compare themselves to the national and state treatment averages. The NCDB has developed Cancer Program Practice Profile Reports (CP3R) that look at specific quality of care indicators for the major cancer sites. The first sites that have been addressed are colon, rectal, and breast cancers. Through a parallel process the American Society for Clinical Oncology (ASCO) and the National Comprehensive Cancer Network (NCCN) developed a similar set of measures for breast and colorectal cancer. Facilitated by the NQF, the CoC, ASCO, and NCCN agreed to synchronize their developed measures to ensure that a unified set were put forth to the public.

As colon & rectal cancer is the focus of this year's primary site report, the report includes comparisons between Orange Coast Memorial Medical Center's estimated performance rate and the state and national estimated performance rates of COC-approved cancer programs for the three quality care indicators for breast:

- Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer.
- Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1c No Mo, or Stage II or III ERA and PRA negative breast cancer.
- Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1c No Mo, or Stage II or III ERA and/or PRA positive breast cancer.

Jack Jacoub, MD

Cancer Liaison Physician Report

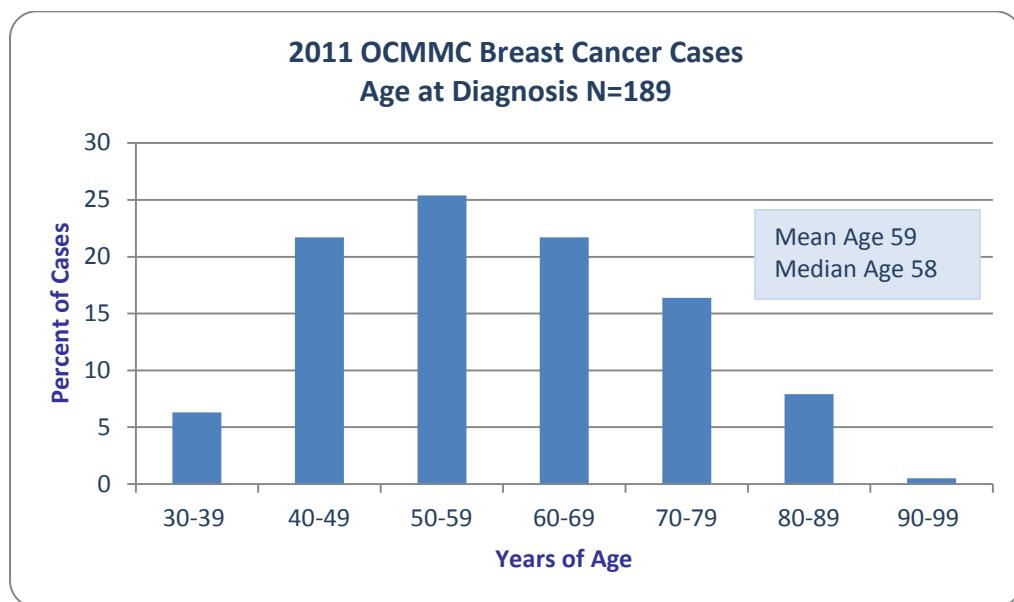
Including Breast Cancer Primary Site Report

Jack Jacoub, MD

At this time there are more than 2.9 million breast cancer survivors in the United States.

Breast cancer is the most common cancer among American women, except for skin cancers. About 1 in 8 (12%) women in the US will develop invasive breast cancer during their lifetime. The American Cancer Society estimates that about 232,340 new cases of invasive breast cancer will be diagnosed in women in the United States.

After increasing for more than 2 decades, female breast cancer incidence rates began decreasing in 2000, then dropped by about 7% from 2002 to 2003. This large decrease was thought to be due to the decline in use of hormone therapy after menopause that occurred after the results of the Women's Health Initiative were published in 2002. This study linked the use of hormone therapy to an increased risk of breast cancer and heart diseases. Incidence rates have been stable in recent years.



Aside from being female, age is the most important risk factor for breast cancer. Potentially modifiable risk factors include weight gain after age 18, being overweight or obese (for postmenopausal breast cancer), use of combined estrogen and progestin MHT, physical inactivity and consumption of one or more alcoholic beverages per day.

Medical findings that predict higher risk include high breast tissue density (a mammographic measure of the amount of glandular tissue relative to fatty tissue in the breast), high bone mineral density (routinely measured to identify women at increased risk for osteoporosis) and biopsy-confirmed hyperplasia (especially atypical hyperplasia). High-dose radiation to the chest, typically related to cancer treatment, also increases risk.

Reproductive factors that increase risk include a long menstrual history (menstrual periods that start early and/or end late in life), recent use of oral contraceptives, never having children and having one's first child after age 30.

Risk also is increased by a personal or family history of breast cancer and inherited genetic mutations in the breast cancer susceptibility genes BRCA1 and BRCA2. Although these mutations account for approximately 5 percent to 10 percent of all breast cancer cases, they are very rare in the general population (less than 1

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Including Breast Cancer Primary Site Report

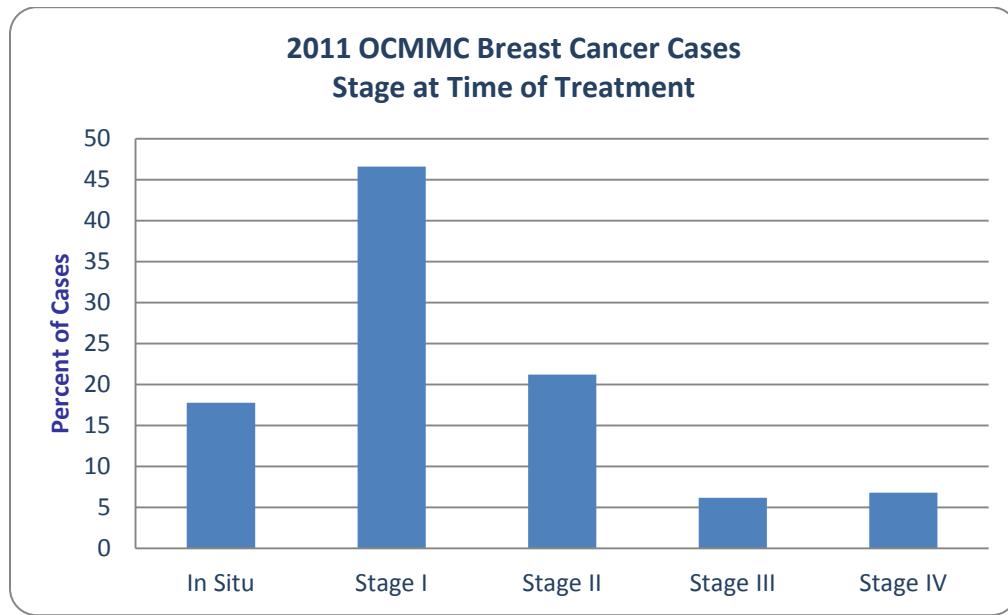
Jack Jacoub, MD

percent), so widespread genetic testing is not recommended. Some population groups, such as individuals of Ashkenazi Jewish descent, have an increased prevalence of BRCA1 and BRCA2 mutation carriers. Women with a strong family history of breast and/or ovarian cancer should be offered counseling to determine if genetic testing is appropriate. Studies suggest that prophylactic removal of the ovaries and/or breasts in BRCA1 and BRCA2 mutation carriers decreases the risk of breast cancer considerably, although not all women who choose this surgery would have developed breast cancer. Women who consider these options should undergo counseling before reaching a decision.

Men with family members who are BRCA gene mutation carriers are also at risk for these mutations, and male BRCA 2 mutation carriers are at particularly increased risk for breast cancer. Modifiable factors that are associated with a lower risk of breast cancer include breastfeeding, moderate or vigorous physical activity and maintaining a healthy body weight.

Two medications, tamoxifen and raloxifene, have been approved to reduce breast cancer risk in women at high risk. Raloxifene appears to have a lower risk of side effects, such as uterine cancer and blood clots. In women with estrogen-receptor positive breast cancer, additional treatment with tamoxifen reduces the risk of second breast cancers by about half.

Research is ongoing to identify additional modifiable risk factors for breast cancer. The International Agency for Research on Cancer recently concluded that there is limited evidence that tobacco smoking causes breast cancer. There is also some evidence that shift work, particularly at night, is associated with an increased risk of breast cancer.



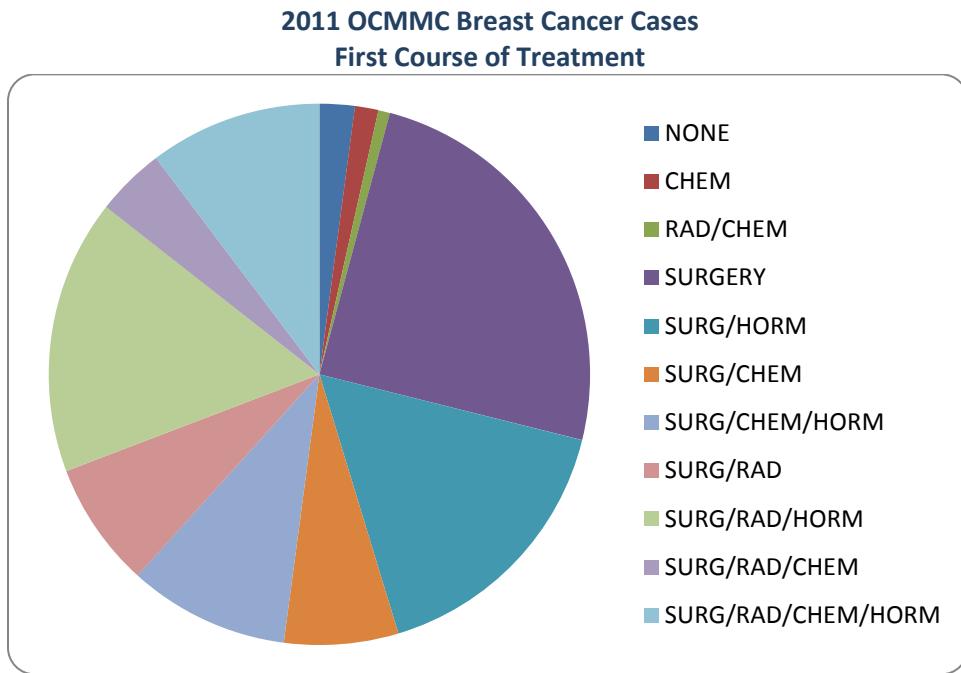
Mammography can detect breast cancer at an early stage, when treatment is more effective and a cure is more likely. Numerous studies have shown that early detection saves lives and increases treatment options. Steady declines in breast cancer mortality among women since 1990 have been attributed to a combination of early detection and improvements in treatment. Mammography is a very accurate screening tool, both for women at average and increased risk; however, like most medical tests, it is not perfect. On average, mammography will detect about 80 percent to 90 percent of breast cancers in women without symptoms. All suspicious abnormalities should be biopsied for a definitive diagnosis. Annual screening using magnetic

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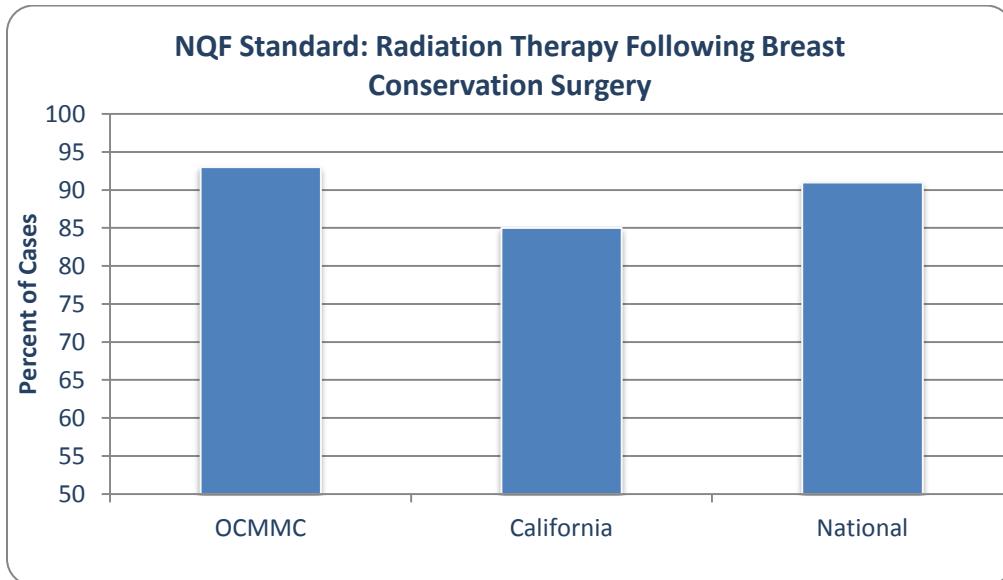
Jack Jacoub, MD

resonance imaging (MRI) in addition to mammography is recommended for women at high lifetime risk of breast cancer starting at age 30. Concerted efforts should be made to improve access to health care and to encourage all women 40 and older to receive regular mammograms.

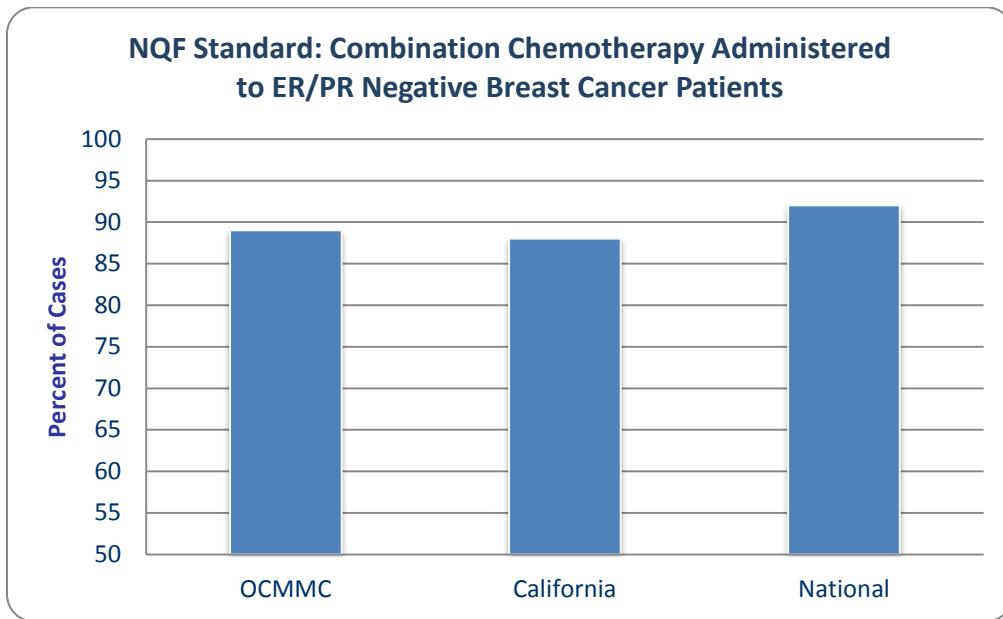


As a Commission on Cancer-Approved cancer program, Orange Coast Memorial Medical Center submits data to the National Cancer Data Base. The Commission on Cancer has adopted three breast cancer measures of the National Quality Forum (NQF). The NQF brought public and private payers together with consumers, researchers, and clinicians to broaden consensus on performance measures for breast and colorectal cancer. In light of the national movement towards Pay for Performance (P4P), these reports provide Commission on Cancer-Approved programs with the ability to examine program-specific breast, colon and rectal cancer care practices. Performance rates shown below match the specifications of the breast, colon and rectal cancer care measures endorsed by the NQF in April, 2007.

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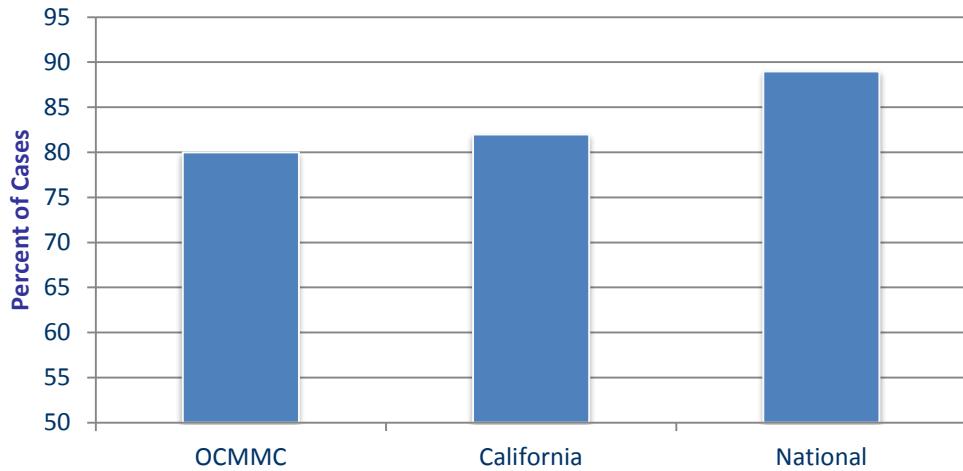
NQF National Standard: Radiation Therapy for Breast Conservation Surgery Patients. Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer. OCMMC's percentage is slightly higher than national averages and well above the California average.



NQF National Standard: Combination Chemotherapy for ER/PR Negative Breast Cancer Patients. Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cNoMo, or Stage II or III hormone receptor negative breast cancer. Orange Coast Memorial Medical Center compliance with this measure is above the California and national average.

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**NQF Standard: Tamoxifen or Aromatase Inhibitor
Administered to ER/PR Positive Breast Cancer Patients**



NQF National Standard: Tamoxifen or Aromatase Inhibitor for ER/PR Positive Breast Cancer Patients.

Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1c No Mo, or Stage II or III ER and/or PR positive breast cancer. Orange Coast Memorial Medical Center compliance with this measure is in line with the California average of 82%, but is lower than the national average of 87% of documented administration of Tamoxifen or aromatase inhibitors in ER/PR positive women.

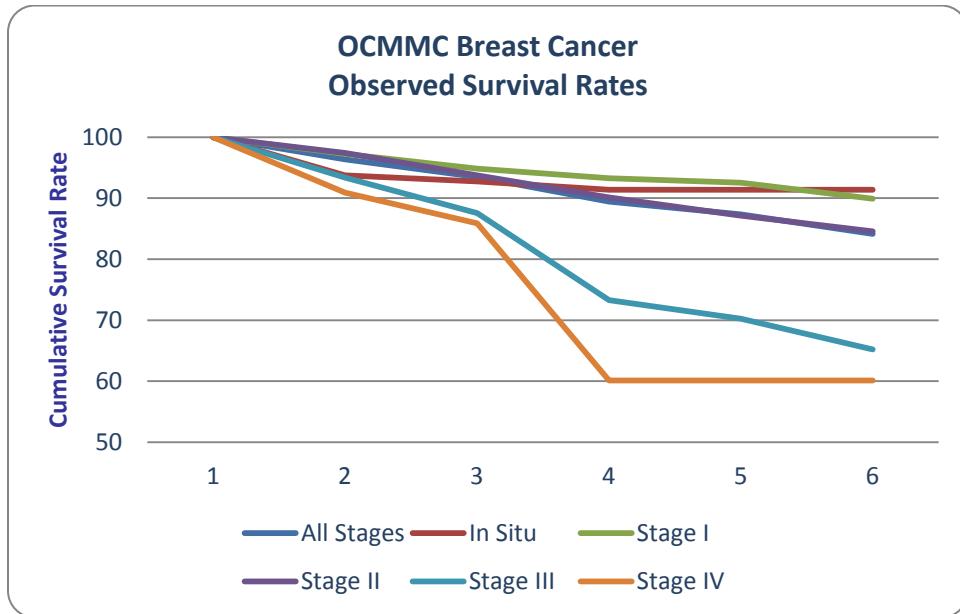
Breast cancer is the second leading cause of cancer death in women, exceeded only by lung cancer. The chance that breast cancer will be responsible for a woman's death is about 1 in 36 (about 3%). Death rates from breast cancer have been declining since about 1989, with larger decreases in women younger than 50. These decreases are believed to be the result of earlier detection through screening and increased awareness, as well as improved treatment.

Chances for survival vary by stage of breast cancer.

Non-invasive (*in situ*) and early stage invasive breast cancers (stages I and II) have a better prognosis than later stage cancers (stage III and IV). And, cancer that has not spread beyond the breast has a better prognosis than cancer that has spread to the lymph nodes. The poorest prognosis is for metastatic breast cancer (stage IV), where the cancer has spread beyond the lymph nodes to other parts of the body.

In nationally published data, about 88 percent of women diagnosed with stage I breast cancer survive five years beyond their diagnosis, 71 percent of women diagnosed with stage II breast cancer survive five years beyond their diagnosis, 53 percent of women diagnosed with stage III breast cancer survive five years beyond their diagnosis, 15% of women diagnosed with stage IV breast cancer survive five years beyond their diagnosis. The following graph shows Orange Coast Memorial Medical Center's five-year observed survival rate.

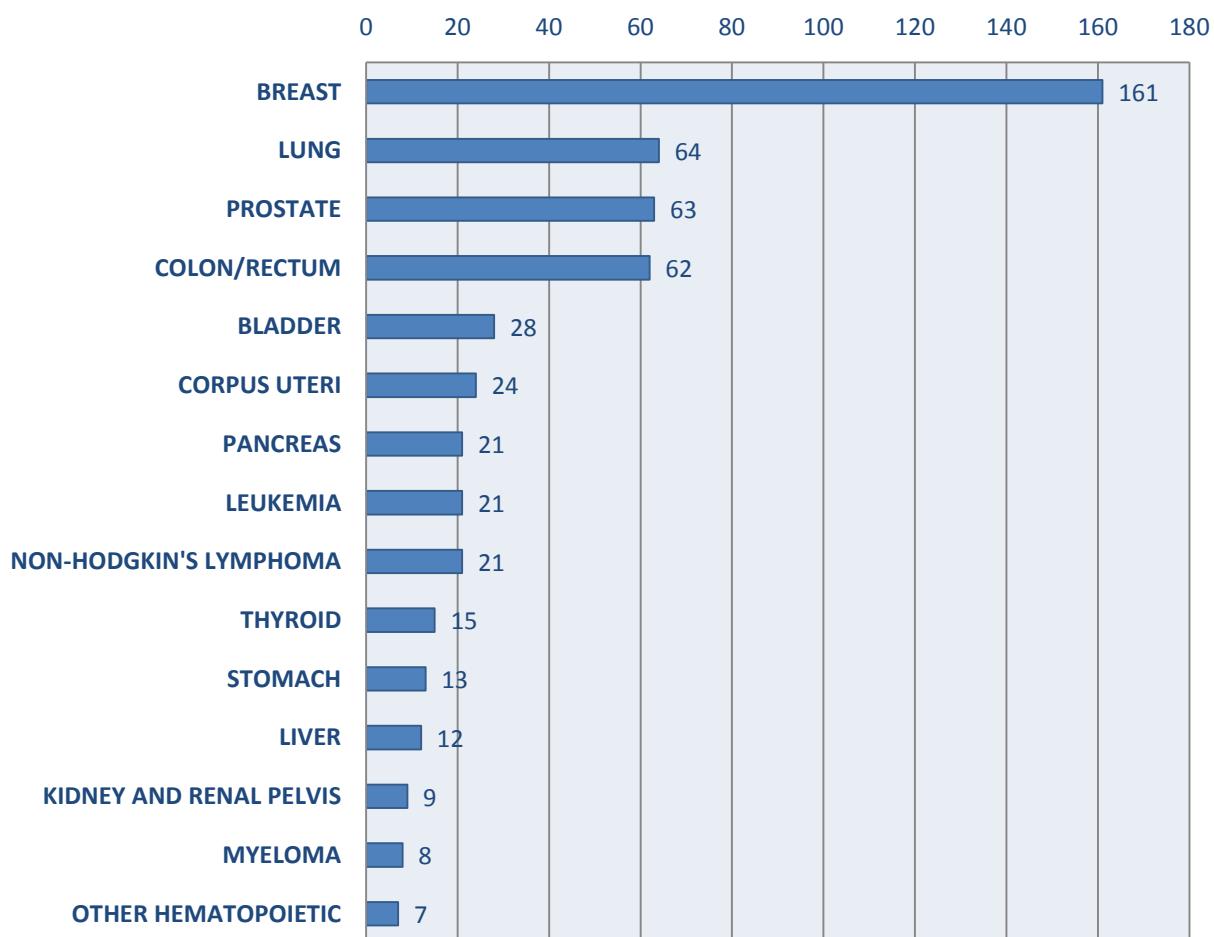
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As evidenced by the above graph, OCMMC's five-year survival rates are above the five-year survival rate published by the American Cancer Society; however, not all of the patients included in the graph have a full five years of survival. OCMMC will continue to strive to provide optimal care to our breast cancer patients with the goal of continuously improving our survival rates and helping women as they live with and beyond breast cancer.

OCMMC 2011 Analytic Assessments

Top 15 Primary Sites



Orange Coast Memorial Medical Center Cancer Program & Services

Orange Coast Memorial Medical Center is a 224-bed, full-service hospital and the only not-for-profit hospital in the Fountain Valley and Huntington Beach area.

As a member of MemorialCare Medical Centers, we are committed to health care excellence through best practice medicine. Our physicians study the best practices in health care from around the country and implement them here, resulting in innovative and effective treatments for our patients.

MemorialCare Breast Center

The MemorialCare Breast Center is among the most highly regarded centers for breast care in the area. Our multidisciplinary team of highly acclaimed experts is completely dedicated to the prevention, early diagnosis and treatment of breast cancer.

Whether visiting our Breast Center for a routine mammogram or for more urgent needs, our patients find comfort in knowing they are supported by radiologists, oncologists, pathologists and surgeons who work side-by-side to provide comprehensive, coordinated, leading edge care to each patient.

Our expert physician team remains current on research studies, treatment advances and quality of life enhancements for our patients. From digital mammograms and other diagnostic breast services like ultrasound, MRI and biopsy procedures to genetics, nutrition and psychosocial services, their primary focus is optimal individualized care for the woman with breast disease.

Services offered at the Breast Center include:

- Digital screening and diagnostic mammogram
- Ultrasound and biopsy procedures
- Breast MRI and MRI guided biopsy
- Dexa bone density testing
- Second-opinion evaluations
- Psychosocial services
- Breast cancer supports groups
- Multidisciplinary pre-treatment planning conferences

Orange County CyberKnife and Radiation Oncology Center

Radiation therapy has long been established as a highly-effective method for limiting the growth of, or completely eliminating cancer. Our experienced radiation oncologists employ advanced robotic radiation therapy technologies designed to deliver precise treatment to tumors while conserving the

healthy tissue surrounding them. Available services include:

- **Accuray CyberKnife**, a noninvasive, state-of-the art, robotic, radiosurgery system that involves no cutting. It targets cancerous and non-cancerous tumors anywhere in the body. This technology provides a pain-free, non-surgical option for patients who have inoperable or surgically complex tumors, as well a shorter treatment cycle than traditional radiation therapy.
- **RapidArc Linear Accelerator**, an innovative, fast and precise form of radiation therapy. Image-guidance improves tumor targeting and RapidArc provides a complete treatment in a single rotation of the machine around the patient, which takes less than two minutes. Using the system's advanced mapping and planning technology, clinicians can deliver a precise radiation dose that conforms to the shape of the tumor, thus reducing potential side effects.
- **High-Dose Rate (HDR) Brachytherapy**, an advanced form of internal radiotherapy. It places radiation inside a tumor, tightly focused within the site of the cancer. This technique ensures the maximum radiation dose is given when it is needed most. Brachytherapy often reduces the total treatment time. Side effects may also be reduced because HDR does not cause skin irritation or burning.

Dedicated Oncology Inpatient Unit

Orange Coast Memorial Medical Center has a dedicated, 22-bed oncology unit staffed with highly trained and compassionate registered nurses, the majority of whom have been certified in oncology nursing by the Oncology Nursing Society (ONS). An integral part of our multidisciplinary treatment team at every stage of the disease process, these highly experienced oncology nurses provide care for symptom management and chemotherapy delivery. The unit has a dedicated clinical educator who provides specific educational programs, such as a chemotherapy course twice a year, to help develop our staff on an on-going basis. The unit also has a dedicated Care Coordinator that works

Orange Coast Memorial Medical Center Cancer Program & Services

closely with patients and their families with discharge planning, helping to ensure all of their needs are met. Additional, a licensed clinical social worker is available to address all patients' psychosocial needs. The patient satisfaction scores for the oncology unit have steadfastly remained among the highest in our medical center. A nursing journal club meets monthly to help nurses stay current with advances in medical research and to bring the latest nursing results to patients' bedsides as quickly as possible.

Outpatient Infusion Center

Our outpatient infusion center, located within the Patient Care Pavilion, provides one-to-one nursing care with our highly skilled and compassionate nursing staff. The infusion center provides patients with the utmost comfort and convenience from on site registration to administration of chemotherapy and other transfusion services all provided in our center by our caring staff.

Pain Management

With quality of life being a major focus of our Cancer Program, there is "zero tolerance" for pain. Under the direction of pain management specialist Medhat Mkhail, M.D., several methods, including medication and nerve blocks, are available to control pain and other side effects resulting from cancer treatment. Our oncology nursing staff is specially trained in managing our patients' pain and works closely with our physicians on pain management, including alternative management methods. Enhancing the quality of each patient's life is an important part of the care we provide.

Outpatient Rehabilitation Center

Our full-service outpatient rehabilitation department occupies 3,500 square feet in the Patient Care Pavilion and has been equipped with the newest state-of-the-art equipment available.

Women and men diagnosed with cancer often undergo treatment including surgery, radiation therapy, and chemotherapy. In some cases, side effects from these treatments may include pain, limited mobility, decreased strength, swelling, and fatigue. Physical therapy interventions beneficial in counteracting these side effects may include:

- **Postural awareness** for retraining affected muscles and joints
- **Therapeutic exercises** to improve flexibility and strength in the involved area
- **Aerobic conditioning** to combat cancer related fatigue
- **Education** on skincare, scar management and safety during daily activities.

Lymphedema is an accumulation of lymphatic fluid that causes swelling, and can develop when the channels and ducts that transport lymph are missing, impaired, or damaged. Secondary lymphedema (acquired lymphedema) commonly occurs following surgeries that require the removal of lymph nodes. Lymphedema can develop immediately following surgery or months to years following cancer treatment. In addition to swelling, symptoms of lymphedema may include a feeling of heaviness and tightness, skin changes, infection in the affected area, and cosmetic deformity.

Although lymphedema is a chronic condition, specially trained physical therapists can provide invaluable rehabilitative care. Early intervention and learning lifelong management techniques are essential to allow patients to lead full, normal lives. Orange Coast Memorial Medical Center employs a comprehensive care approach that emphasizes the importance of the patient's understanding of the condition and treatment. In addition to learning about precautionary measures that reduce the risk of developing lymphedema, patients benefit from a rehabilitation program that increases range of motion, flexibility, strength, and endurance.

Lymphedema treatment may include:

- **Manual lymphatic drainage** to mobilize fluid and protein from an affected area by a non-invasive manual therapy technique.
- **Multi-layer bandaging** to reduce swelling and assist in softening of skin and tissue in a swollen limb
- **Therapeutic exercises** to improve lymph drainage through a program of flexibility, strength training and aerobic activities
- **Patient education** to allow patients to take control of their own lives. In addition to

learning how to manage lymphedema at home, patients may receive guidance on specific questions from nutritionists, social workers, support groups, or other health professionals.

Orange Coast Memorial Medical Center Cancer Program & Services

- **Compression garments** to help minimize swelling during daytime activities.
- **Compression pumping** (in select cases) to assist with circulation through state-of-the-art pneumatic pumps.

Imaging & Radiology

Orange Coast Memorial offers a wide-array of diagnostic services. These services are performed using a variety of state-of-the-art imaging methods and therapeutic treatments—all in one convenient location by an expert team of radiologists and technicians who have specialized training and licensure in numerous radiological procedures.

Our 64 multi-slice CT scanner is a multi-channel spiral CT scanner, which is much faster than conventional single channel scanners, allowing imaging of the body within a single breath hold. This technology allows efficient appointment scheduling and helps us to ensure that our patients are treated in as timely a manner as possible. In addition, the 64 Multi-slice CT Scanner is specifically designed to minimize patient radiation exposure.

Imaging Services at Orange Coast Memorial Medical Center offers a variety of diagnostic and therapeutic services using many different imaging modalities.

Imaging services include:

- PET/CT Fusion Scan
- Computed Tomography (CT Scan)
- Diagnostic Radiology
- Interventional Radiology Procedures
- MRI (Magnetic Resonance Imaging)
- Nuclear Medicine
- Ultrasound

Treatments offered:

- Interventional Radiology
- Laser Vein Ablation (LVA)
- Uterine Fibroid Embolization

Pathology

The pathology group that serves OCMMC and LBMMC is composed of 11 highly qualified professionals that have pursued subspecialties in areas such as breast, GYN, genitourinary, hematopathology, dermatopathology, thoracic

oncology, gastrointestinal pathology, blood blanking, chemistry and microbiology. Many of these professionals have reached academic levels recognized by their peers and have published scientific papers in peer reviewed journals as well as participated in national and international symposia in their own sub-specialties. Despite the fact that we have two pathologists on site at OCMMC, we have all the above expertise available for our patient population.

Research

We believe clinical trials are the front line in the battle against cancer. Our physicians offer among the best and most innovative treatment options to our patients and are involved in more than 40 of the world's most promising research protocols. Our approach to research centers on clinical trials that offer the hope and promise of more effective patient care, recuperation and healing. Through this collaboration, patients in our community have access to many of Orange County's top cancer specialists with more than 30 years of clinical research experience and completion of more than 500 clinical trials.

Tumor Boards

Our physician team conducts weekly roundtable discussions designed to review cases and recommend treatment for each patient individually. Medical and radiation oncologists, surgeons, pathologists and radiologists are required attendees of these conferences. National Comprehensive Cancer Network (NCCN) practice guidelines, information on open clinical trials, and review and discussion of AJCC staging are included in case presentations.

Breast Cancer Treatment Planning Conference

Every Wednesday at 12:30 p.m.

Neuro/Thoracic & General Tumor Board

Every Friday at noon.

*Please call the Cancer Registry
to schedule a patient for presentation.
(714) 378-7940*

Orange Coast Memorial Medical Center Cancer Program & Services

Psychosocial Services

At Orange Coast Memorial Medical Center, we understand how a cancer diagnosis impacts every area of a patient's life. Under the direction of a professional licensed clinical social worker, we assist patients and their families with the emotional effects of cancer diagnosis and treatment. Individual and family counseling, group support, and referrals to appropriate community resources are provided according to each patient's particular needs.

Support Groups include:

- **The Journey** support group for women at any stage of the breast cancer experience, female family members and friends.
- **Women in Treatment (WIT)** A special group for women currently undergoing treatment for cancer.
- **Prostate Cancer Support Group** Provides supportive discussion and educational information for prostate cancer patients, family members and friends.
- **Kids, Inc.** A peer group for children ages 6 to 17 whose parents, loved ones or siblings have cancer.
- **Bereavement/Transitions** Provides support to adults who have recently lost a loved one to cancer.
- **Yoga:** Yoga instruction provided free of charge.

American Cancer Society Information Center

MemorialCare Cancer Center enjoys a collaborative partnership with the American Cancer Society. The American Cancer Society Information Center has been on the campus of Orange Coast Memorial Medical Center since April 2006. The Information Center is located on the fourth floor of the new Patient Care Pavilion on the Orange Coast Memorial Medical Center campus. Staffed with highly trained volunteers, the center provides extensive information and education about cancer prevention, early detection, treatment alternatives and advances in research. A tremendous resource for patients, family members and healthcare professionals, the center is open to the general public. During 2012, information, resources and support were accessed by 1,283 individuals who walked into the center and 1,389 individuals who called the center. The Wig Bank, located within the Information Center, is available to anyone who has

experienced hair loss as a result of cancer treatment. During 2012, 306 free wigs and/or were provided to patients.

Additionally, the center provided free breast prostheses to 15 women. Several American Cancer Society programs are held regularly at Orange Coast Memorial Medical Center. During 2012, 99 women attended "Look Good, Feel Better," a hands-on course for patients who have experienced appearance-related changes as a side effect of cancer treatment. The Warm Wishes Program, provides hospitalized cancer patients with cancer information and donated knitted or crocheted lap blankets.

Education and Outreach

Professional education and community outreach are a major focus of our Cancer Center Program. Monthly Oncology Grand Rounds were offered to physicians and ancillary staff throughout the year. We also held several community lectures on current cancer topics that were attended by hundreds of local residents.

Outreach efforts into the community also included early detection screenings and special events to promote cancer awareness within the general public. Free prostate cancer screenings was held in 2012, providing education, PSA testing and digital rectal examinations to men in our community over the age of 50. A skin cancer screening was also provided for the at-risk population. At the Fall Festival for Life multiple screening and prevention sessions were offered to community members as well as "Ask the Doctor" and other educational booths.

Clinical breast examinations, hepatitis screenings and prostate cancer screenings were offered to members of our local Vietnamese community. In addition, a Vietnamese lecture series was also provided by our physicians.