2013 CANCER PROGRAM ANNUAL REPORT
WITH 2012 CANCER REGISTRY DATA

Orange Coast Memorial
MemorialCare Health System
Table of Contents

Cancer Committee Chair Report.............................................................. 2
Cancer Committee Members.................................................................... 4
Cancer Liaison Physician Report............................................................. 5
Cancer Program Growth.......................................................................... 7
Primary Site Review: Non-Small Cell Lung Cancer.................................. 8
Cancer Registry Primary Site Table........................................................... 11
Cancer Program and Services................................................................. 12

This report features data and information regarding cancers diagnosed and treated at the Orange Coast Memorial Medical Center, with a special focus on lung cancer. Designed for physicians and interested patients, this information demonstrates the patient-centered, high-quality approach to care that Orange Coast Memorial patients receive.
Health Care is in crisis; we are under constant pressure to do more with less. Cancer treatment is constantly changing and we must adapt or perish; financial support is constantly declining while demands are increasing. Cancer care is no different and it is critical that we continue to work in multidisciplinary groups to maximize efforts and reduce costs. With some hesitation we changed our meeting schedule for 2013. This change has been welcomed by most, particularly our physician members whose time is precious; we appreciate their attendance and participation. We are constantly being reminded that we need to evaluate our programs to determine the future course; one simple tool is the SWOT (Strengths, Weaknesses, Opportunities and Threats). Here are some ideas presented by committee members:

**Strengths.** There is no doubt that one of the most important aspects for the success of our program has been the dedication and enthusiasm of our members including physicians and non-physicians. Evidence based medicine, one of the pillars of the physician’s society, results in better treatment for our patients and consequently better outcomes. Availability of clinical trials, inpatient support, multidisciplinary tumor boards, availability of such things such as nurse navigation, staging procedures (i.e., EBUS), and radiation oncology are seen as strengths of the program.

**Weaknesses.** Finding dedicated specialists in certain areas has certainly been a challenge for our program; we continue to work with administration to secure the best people. Accrual of patients into research trials continues to be a problem; additional efforts are being implemented but ultimately the only way this will change is by the determination of our doctors to place patients in the multiple trials we have available; there is evidence in the literature that outcome is improved by the wide use of clinical trials. Marketing has been working hard, but there is always room for more work in this area. Our programs are not well known to physicians and community members and therefore we have low volume of patient accrual thus far.

**Opportunities.** These are innumerable. All we have to do is think about any condition that afflicts the human body and we will find an opportunity to improve it. The hepatobiliary cancer program has escaped our grasp until now even though we know there is a significant need in the Vietnamese community for this program. Other organ specific programs should be considered. Affiliation to a university, being more inclusive among the primary referring physicians, and the development of a short and long term strategy with definition of specific goals are also seen as areas of opportunity.

**Threats.** Our competitors are a threat; this is why we must strive to be the best of the best and offer our patients state of the art technology and medical knowledge. Managed care organizations and other healthcare changes which dictate how and where patients are seen are potential threats. Reimbursement issues and the lack of control in the referral pattern are also considered threats.

One of the highlights of this year was the NAPBC survey and accreditation of our breast program. Our breast center was inaugurated in 1998 and has become a symbol of quality and success in the community. During our first re-accreditation by this prestigious organization, we were told that we were compliant with all 27 standards. The surveyor pointed out the fact that we had an excellent program with all the elements needed to provide state of the art care for our patients.
Our work does not end in the hospital. As many of you know, some of the team members from cancer committee are active in the education, political and news arenas. Drs. Reitherman and Kakkis have been active promoting and supporting the dense breast law and educating physicians and politicians regarding the significance of dense breast. Dr. Jacoub continues his efforts to educate the community by working with the media. Several of us participate in national and international organizations, participate in board discussions and deliver lectures on different cancer topics; this is something expected for physicians in academic institutions, but is totally voluntary for physicians in community practice; we believe this is important for us as individuals and for our organization’s reputation at the national and international level. Another example has been the outstanding work that was done by the nursing personnel with the poster presentation entitled “Oncology Specific New Employee Orientation” at the “Oncology Nursing Society”.

Distribution of information to our patients is essential in our role as leaders of care. We are extremely fortunate to have a devoted group of volunteers working in the American Cancer Society office located on the fourth floor of the Patient Care Pavilion, which operates under the direction of the relentless and unpretentious Joanne O’Heany. We encourage everyone to please make sure patients know of this outstanding (and free) resource and make use of it.

What do we have to offer our patients in addition to outstanding medical care at our facility? As doctors, nurses and pharmacists we alone cannot provide the gamma of services that patients need to survive cancer in a reasonable and dignified way. We need, and in fact we have, Genetic Counseling, Psychosocial Services, Navigation, Physical Therapy, Palliative Care, Research Trials, ACS Information Center that also includes wig, hat and prosthetic banks, Massage Therapy, etc. Outpatient Nutritional Services are being developed and will probably be available this coming year.

Fundraising is essential for the vitality of many of our activities. We thank the Jodi Ferragamo Foundation and all of our family members from OCMMC that have contributed in one form or another to the Foundation. Philanthropy is vital.

Our program continues to grow at a healthy pace. We can always do more however. In this annual report you can find details of our growth on page 7. The graphs illustrate the increase in the number of new cases accessioned into our cancer registry since 2006.

Finally, be aware of the fact that new requirements are coming from CoC and NAPBC. Stay tuned for those and how to modify your practice in order to comply.

Julio A. Ibarra, M.D.
2013 Cancer Committee Members

Leila Anders  
Research Coordinator

Thomas Asciuto, M.D.  
Pulmonary Medicine

Cindy Callaghan  
Director Imaging Services and Breast Center

Cathy Capaldi  
Vice President, Strategy/Business Development

Mallorie Croal, M.S.N., R.N.  
Nurse Navigator

Lynne Daniels, L.C.S.W.  
Oncology Psychosocial Coordinator

John Fenger  
Manager Rehabilitation Services

Sandra Foley, R.N.  
Oncology Case Manager

Deborah Fridman  
Research Manager, Todd Cancer Institute

Asif Harsolia, M.D.  
Radiation Oncology

Julio Ibarra, M.D.  
Chair, Cancer Committee  
Director, Pathology  
Medical Director, Pathology OCMBC

Jack Jacoub, M.D.  
Cancer Liaison Physician  
Medical Director, Thoracic Oncology Program

Jamie Jernigan, C.T.R.  
Cancer Registrar

Jane Kakkis, M.D.  
Medical Director, Surgery OCMBC  
General Surgery

Barbara Kingsbury, R.N.  
Oncology Nurse Educator

Tam Le, M.D.  
General Surgery

Thunga Le  
Vietnamese Relations Coordinator

Nancy Lean, M.S.N., M.H.S.A., R.N.  
Director, Oncology Services

Jenny Mendola, M.S.N., R.N.  
Manager, Oncology Unit

Medhat Mikhael, M.D.  
Pain Medicine

Bichlien Nguyen, M.D.  
Medical Director, Research, OCMBC  
Medical Oncology

Joanne O’Heany  
Director, American Cancer Society Information Center

Les Ono, Pharm. D.  
Director, Pharmacy Service

Ajmel Puthawala, M.D.  
Radiation Oncology

Emily Randle  
Vice President, Operations

Jessica Rayhanabad, M.D.  
General Surgery

Richard Reitherman, M.D.  
Medical Director, Imaging, OCMBC  
Radiology

Homayoon Sanati, MD  
Medical Director, Breast Center  
Medical Director, Palliative Care Program

Chris Shinar, Pharm. D.  
Director, Quality Assurance

Suellen Skow  
Administrative Assistant, Oncology Services

Trish Stines  
Cancer Registry Coordinator

Chi Vu  
American Cancer Society, Health Programs Manager

Collin Vu, M.D.  
Medical Oncologist

Richard Wasley, M.D.  
Director Radiology

William Wells  
Chaplain

Diane Woods, R.N.  
Breast Center Nurse Coordinator
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.

**2013 Screening & Education Events**
- Vietnamese Prostate Cancer Screening held in February with 106 men received PSA and digital rectal screening examinations.
- Orange Coast co-hosted two Hepatitis Screening events with the Vietnamese American Cancer Foundation in March, September and November with a total 888 community members screened.
- Vietnamese Breast Clinical Examination Workshop including consultations with Dr. Bichlien Nguyen held in February, July and November with a total of 139 women screened.
- Skin Cancer Screening was held in June and November with 181 community members screened.
- Prostate Cancer Screening was held Thursday, September 26, 2011 in the Compassionate Cancer Care suite and 38 men received PSA and digital rectal screening examinations.
- Tissue Bank Collection Event held in November 2013 with 2,012 participants. OCMMC partnered with Komen Orange County and Susan G. Komen Tissue Bank at Indiana University Melvin and Bren Simon Cancer Center with the goal of collecting tissue samples from racially and ethnically diverse women. The Komen Tissue Bank is the only repository in the world for normal breast tissue and matched serum, plasma and DNA.
- Education on early detection and screening offered via our community lectures including the Senior Lecture Series and the Vietnamese Lecture Series.
- Smoking Cessation classes were held in June/July, September/ October, and November/December.

**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 2013, approximately 3,000 members of our community participated in monthly support group meetings and community outreach activities at Orange Coast Memorial Medical Center.

**2013 Community Outreach and Survivorship Events**
- Orange Coast Memorial Medical 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 May 18th and 19th, 2013. Orange Coast efforts were led by Lynne Daniels, L.C.S.W.
A team of approximately 135 members represented Orange Coast Memorial Medical Center at this year's Susan B. Komen “Race for the Cure” on September 22, 2013.

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 9, 2013, over 120 volunteers and physicians were on hand to greet and educate approximately 500 community members.

Our second annual “March for Hope” was held on March 10, 2013 at the Center Club. This event is a collaborative effort of the Community Advisory Council and Orange Coast Memorial physicians, nursing and ancillary staff. Monies are raised to meet the unfunded needs of our patients during their journey with cancer.

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.

<table>
<thead>
<tr>
<th>Select Breast &amp; Colorectal Measures</th>
<th>Performance Rates</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2009</td>
</tr>
<tr>
<td><strong>Breast</strong></td>
<td></td>
</tr>
<tr>
<td>Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer. [BCS/RT]</td>
<td>89.7%</td>
</tr>
<tr>
<td>Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC Tc N0 M0, or Stage II or III ERA and PRA negative breast cancer. [MAC]</td>
<td>100%</td>
</tr>
<tr>
<td>Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC Tc No Mo, or Stage II or III ERA and/or PRA positive breast cancer. [HT]</td>
<td>97%</td>
</tr>
<tr>
<td><strong>Colon</strong></td>
<td></td>
</tr>
<tr>
<td>Adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer. [ACT]</td>
<td>71.4%</td>
</tr>
<tr>
<td>At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer. [12RLN]</td>
<td>87.9%</td>
</tr>
<tr>
<td><strong>Rectum</strong></td>
<td></td>
</tr>
<tr>
<td>Radiation therapy is considered or administered within 6 months (180 days) of diagnosis for patients under the age of 80 of with clinical or pathologic AJCC T4NoMo or Stage III receiving surgical resection for rectal cancer. [AdjRT]</td>
<td>100%</td>
</tr>
</tbody>
</table>
Orange Coast Memorial Medical Center’s Cancer Program Growth

OCMMC Cancer Registry Case Accessions by Year 2006 - 2012

OCMMC Case Accessions by Year 2008 - 2012
Breast, Lung, Prostate, Colorectal, Liver & NHL
Lung cancer remains the number one cause of cancer death for both men and women in the United States. The most common reasons include advanced stage or the presence of underlying medical conditions at the time of diagnosis. Survival rates are improving, but more people die each year from lung cancer than from breast, colon and prostate cancers combined.

The primary risk factor for lung cancer is smoking. It is estimated that 90% of lung cancer is caused by smoking or exposure to secondhand smoke. Other factors may include occupational or environmental exposure to radon gas, asbestos and other environmental carcinogens. Genetic susceptibility may also contribute to the development of lung cancer, especially at a younger age.

Age and Gender
Lung cancer occurs mainly in older people. Two out of three people diagnosed with lung cancer are over age 65. Less than 3% of cases are found in people younger than 45. The age of new lung cancer patients seen at OCMMC in 2012 very closely parallels state and national statistics. However, while national statistics show more lung cancer occurring in men than in women, in 2012 at OCMMC 56 women were diagnosed with lung cancer versus 46 men.

Diagnosis and Staging
Pathologic evaluation of tumor tissue must be performed to classify lung cancer into small cell and non-small cell types. The type and stage of lung cancer determine research and treatment options. Non-small cell lung cancer (NSCLC) at Orange Coast Memorial Medical Center and nationally accounts for over 85% of all lung cancers, and usually grows and spreads more slowly than small cell lung cancer.

In 2012, OCMMC physicians cared for 92 new cases of non-small cell lung cancer and 10 new cases of small cell lung cancer.
The OCMMC approach to the patient with lung cancer is truly multidisciplinary in nature. OCMMC Thoracic Oncology comprises physicians in diverse fields that include medical oncology, thoracic surgery, radiation oncology, pulmonology, radiology, pathology and palliative care as well as ancillary staff including our Nurse Navigator and Clinical Research Coordinator. All are committed to a team approach that provides the finest and most advanced treatment available.

This collaborative process begins with the patient’s diagnosis and continues throughout staging, treatment and follow-up. Diagnostic testing can be centrally coordinated and expedited; resulting options are discussed; and a collaborative, personalized treatment plan is generated. The plan may include opportunities to participate in appropriate clinical research protocols. The majority of cases are reviewed at our weekly Thoracic Cancer Conference; in 2012, 94 cases were presented at OCMMC’s Thoracic Cancer Conference.
The most critical factor in determining survival rate is the stage at the time of diagnosis. As illustrated in the graph above, most people are not diagnosed until later stages because symptoms often only occur with more advanced disease. These may not be recognized because patients most at risk for developing lung cancer often have similar symptoms: cough, difficulty breathing, COPD and weight loss.

Survival Rates
OCMMC’s lung cancer survival rates correlate closely with NCDB survival rates in all stages, but stage II cases. However OCMMC, has a very small number of stage II lung cancer cases and therefore our data is of little clinical significance.
OCMMC 2012 Analytic Assessments
Top 15 Primary Sites

- BREAST: 213
- COLON/RECTUM: 110
- LUNG: 101
- PROSTATE: 89
- UTERUS: 46
- BLADDER: 36
- NON-HODGKIN LYMPHOMA: 35
- STOMACH: 27
- LIVER: 24
- OVARY: 17
- LEUKEMIA: 15
- KIDNEY: 15
- THYROID: 14
- MELANOMA: 14
- ESOPHAGUS: 13
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 Health Systems, 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.

Services offered at the Breast Center include:

- Digital screening and diagnostic mammogram
- Ultrasound and biopsy procedures
- Breast MRI and MRI-guided biopsy
- Automated whole breast ultrasound
- DEXA bone density testing
- Second-opinion evaluations
- Psychosocial services
- Breast cancer support groups
- Multidisciplinary pre-treatment planning conferences

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.

The MemorialCare Breast Center at Orange Coast also offers automated whole breast ultrasound. Women with dense breast tissue may have masses that cannot be detected by mammography. Automated whole breast ultrasound can assist in diagnosing early breast cancer in these women and in women at elevated risk of developing breast cancer. Automated whole breast ultrasound images the entire breast volume unlike traditional hand-held ultrasound, which targets specific areas in a woman's breast. Automated whole breast ultrasound uses no radiation and there is no compression. Automated whole breast ultrasound is complementary to mammography; it does not replace mammography.

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.
Orange Coast Memorial Medical Center has a dedicated, 22-bed oncology unit staffed with highly trained and companionate 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 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 Mikhail, 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.

Lymfedema 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 lymfedema (acquired lymfedema) commonly occurs following surgeries that require the removal of lymph nodes. Lymfedema can develop immediately following surgery or months to years following cancer treatment. In addition to swelling, symptoms of lymfedema may include a feeling of heaviness and tightness, skin changes, infection in the affected area, and cosmetic deformity.

Although lymfedema 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 lymfedema, 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.
- **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 must 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)

**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.

**Cancer Risk & Prevention Program**

Most cancers manifest without a known cause, but some are hereditary. Genetic counseling helps patients determine their risk for diseases that can be inherited, including colon, uterine, breast and ovarian cancer. Any family with a higher than expected number of cancer cases, regardless of the type, would benefit from having a formal “Hereditary Cancer Risk Assessment” consultation.
To help you decide if genetic testing is appropriate, a genetic counselor analyzes family cancer patterns and environmental influences. Hereditary Cancer Risk Assessments are highly individualized. Patients receive an accurate assessment of personal genetic risk and an individualized plan for cancer screening and prevention.

**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

**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.
- **Smoking Cessation Classes** provides patients with techniques and support in their effort to quit smoking.
- **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 2013, information, resources and support were accessed by approximately 3,000 individuals. The Wig Bank, located within the Information Center, is available to anyone who has experienced hair loss as a result of cancer treatment. During 2013, 277 free wigs were provided to patients. Additionally, the center provided free breast prostheses to 14 women. Several American Cancer Society programs are held regularly at Orange Coast Memorial Medical Center. During 2013, 84 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.