

**PUBLIC REPORTING OF OUTCOMES STANDARD 1.12**  
**LLUMC 2018**

In 2018, Loma Linda University Medical Center continued to move forward with the expansion of the Loma Linda University Cancer Center (LUCC) to provide whole person care for cancer patients in the Inland Empire. We have expertise in all areas of cancer surgery, including robotics, minimally invasive surgery, organ-preserving surgery, neurosurgical oncology, urologic oncology, orthopedic oncology, head/neck oncology, gynecologic oncology, thoracic oncology, and complex surgical oncology (HIPEC, hepatectomy, multivisceral organ resection, etc). We are also a leader in radiation oncology, offering all important radiation modalities, including the most experience of any center in the world in proton therapy for cancer. We also provide world class medical oncology services, including targeted therapies, immunotherapy, both pediatric and adult bone marrow transplantation, integrated palliative care, and subspecialty expertise in all areas of cancer. We also provide state of the art non-invasive diagnostic and therapeutic cancer techniques, including all interventional pulmonology, interventional gastroenterology, and interventional radiology services. In addition, we also make available the latest in cancer imaging and molecular diagnostics to complement our targeted approach to cancer treatment. Perhaps most important is the way that the Cancer Center ties all of this expertise together and provides navigators to guide patients through it.

In addition to our expertise in diagnosing and treating cancer, we also provide a wide array of important cancer support services. These include the Cancer Resource Center, cancer nutrition services, oncology financial counseling, psycho-oncology services, lymphedema services, and the new Neuropathic Therapy Center. These survivorship programs help patients to not only survive cancer, but to thrive beyond it.

As important as cancer treatment and support are, early detection and cancer prevention are truly the hallmarks for reducing and eliminating the scourge of cancer. Loma Linda University has long been a world leader in understanding how lifestyle changes can prevent cancer through the NCI-funded Adventist Health Studies. We also offer sophisticated and mature genetic risk assessment and counseling programs for specific cancers. In addition, we sponsor a formal screening program for lung cancer that has been shown to save the lives of high risk patients.

On the educational front, the Cancer Center is training the next generation of cancer professionals for our region. Research shows that most cancer professionals stay and work near where they were trained rather than moving here after training elsewhere. This is why we are so passionate about training in the Cancer Center. We have mature accredited fellowships in each of the “Big 3” oncology specialties: Medical Oncology, Radiation Oncology, and Surgical Oncology. To put this in perspective, we are only one of two Cancer Centers West of the Mississippi River that has accredited fellowships in all three of these specialties. In addition, we also have accredited training programs in oncology nursing, oncology pharmacy, psycho-oncology, and radiation technology, and are developing fellowship programs in Gynecologic Oncology and Palliative Medicine.

We are also developing and supporting Shared Core Facilities. Some examples include the newly-created Institute for Genetics and Translational Genomics, the Biospecimen Repository, the Bioinformatics Core, the Center for Imaging Research, the Flow Cytometry Core, the Advanced Imaging and Microscopy Core, the Particle Therapy Core, the Animal Care Facility Core, and a Patient-derived Xenograft Core. All of these Shared Core Facilities support cancer research and its translation into the clinic.

Lastly, Clinical Research is a critical part of all strategies for translation of scientific findings into new treatments for cancer. There are 65 subjects enrolled in Clinical Trials Prevention and Control Research Studies, 455 subjects enrolled in Bio-Repository/Bio-Bank Studies, and 456 subjects enrolled in Patient Registry Studies. We are particularly focused on the development of more early-phase and investigator-initiated trials in order to translate exciting scientific discoveries into the clinic more quickly.

**American College of Surgeons/ Commission on Cancer Standard 4.1 Melanoma Prevention Program:**

An educational seminar was given for the prevention of Melanoma and was held at the Drayson Center during a community outreach Cancer Prevention Seminar by Dr. Dos Santos, LLU Associate Professor, on October 4, 2018. The information presented was from the American Cancer Society and the American Academy of Dermatology Evidence-Based National Guidelines. Our goal: 75% of the people who participate in the education of Melanoma prevention respond that they are more aware of the dangers of Melanoma and understand how to prevent Melanoma and other skin cancer. A pre-test was given to participants - ‘Do you feel that you have the knowledge needed to prevent Melanoma.’ Out of 14 participants, 7 responded ‘no’, 4 responded ‘yes’, and 2 responded ‘somewhat’.

A post-test was given to participants after presentation - ‘Do you plan to change your habits and follow the Melanoma prevention guidelines presented to you today?’ and ‘Do you believe the Melanoma prevention education presented today taught you an effective way to change your lifestyle?’ Out of 14 participants, 12 responded ‘yes’ to both questions, 2 responded ‘no’ to both questions.

**GOAL OF 75% WAS MET** – 86% of participants were more aware of Melanoma prevention after prevention education.

**American College of Surgeons/ Commission on Cancer Standard 4.2 Colorectal Screening Intervention Activity:**

A Colorectal FIT screening activity was held at the Drayson Center during a community outreach Cancer Prevention Seminar by Dr. Dos Santos, LLU Associate Professor, on October 4, 2018. The process and results for the screening is as follows:

- a) 14 FIT screening tests were given out
- b) Education completed for each individual regarding why it is important to screen for colorectal cancer according to the American Cancer Society (Evidence-Based national Guidelines), how the FIT screening test works, and that there would be a follow-up call within the next 2 weeks. The participants were also counseled that if results were positive, we would assist them in a referral.
- c) A sign-up sheet included individuals name, address, phone number and email. Each individual was counseled to ask their permission to call them about the test and the individual also checked off that they are aware that we would follow-up.
- d) Follow-up calls were completed on October 29 & Nov 1, 2018. Individuals were asked if they did the test and also asked the results if they had completed the test.
- e) Out of 14 FIT screenings given out – 4 participants completed the FIT screening and the results were negative.

**Standard 4.4 Accountability Measures:** LLUMC Cancer Committee reviews the Cancer Program Practice Profile Reports (CP<sup>3</sup>R) for compliance to nationally accepted measures for the quality of patient care for breast, colon and rectal cancer. The National Cancer Database released 2015 data in October 2017 and as of November 2018, 2016 data has not been released. Colon and Rectal Cancer Measure include: 1) preoperative chemo and RT are administered for clinical AJCC T3N0, T4N0, or stage III – CoC Standard 85% - LLUCC 100%, 2) At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer – CoC standard 85% - LLUCC 100%. Breast measures 1) Radiation is considered or administered following mastectomy within 1 year of diagnosis – CoC Standard 90% - LLUCC 66.7% 2) Radiation is administered within 1 year of diagnosis for women under the age of 70 receiving breast conservation surgery – CoC standard 90% - LLUCC 90%. 3) Tamoxifen or aromatase inhibitor is considered or administered within 1 year for women under 70 with AJCC stage T1c or stage IB-III hormone receptor positive – CoC standard 90% - LLUCC 75.4%.