

## **Mercy Cancer Services Annual Report 2018**

As we enter 2019, let's take a moment to reflect on many significant developments at cancer services across Mercy in 2018. In October, Mercy South, formerly the St. Anthony's Medical Center, began construction of a new cancer center which will bring medical oncology, radiation oncology and many supportive services under one roof. Mercy has also announced the plan to bring proton radiation therapy to the David C. Pratt Cancer Center over the next few years. In addition, we are in the process of replacing and upgrading our radiation equipment throughout the Mercy system to better serve our patients.

Over the past year, we have added many new physicians to our cancer program, who were instrumental in expanding and strengthening services in surgical and medical oncology. In 2019, we plan to further expand our patient navigation program, improve our intake coordination and continue our tradition of high quality patient care. We are looking forward to another exciting year at Mercy Cancer Services.

**Shawn, Hu, MD**  
**Chairman of Oncology Services**  
**Chief of Oncology and Hematology**  
**Mercy East Community**

### **Top Five Most-Commonly Diagnosed Cancers**

At Mercy Cancer Services in St. Louis, we treat a full range of cancers. In 2016, the top five most-commonly diagnosed cancers were:

1. Breast
2. Lung
3. Prostate
4. Corpus Uteri
5. Colon

### **Standard 4.3 Cancer Liaison Responsibilities**

### **Standard: 4.4 Accountability Measures**

### **Standard 4.5 Quality Improvement Measures**

### **Standard 4.6 Monitoring Compliance with Evidence-Based Guidelines**

**Reporting Tool:** CP3R

**Topic of Study:** Breast quality performance rates using 2015 data.

**Purpose:** Standards 4.4 and 4.5 required at least an annual review of the performance rates to ensure they met the set rate. For those that do not an action plan must be established to correct the low rate.

**Measure Terminology:**

**BCSRT:** Radiation is administered within 1 year (365days) of diagnosis for women under the age of 70 receiving breast conservation surgery. (Accountability)

**HT:** Tamoxifen or third generation aromatase inhibitor is recommended or administered within one year (365 days) of diagnosis for women with AJCC T1c or IB-III hormone receptor positive breast cancer. (Accountability)

**MASTRT:** Radiation is recommended or administered following mastectomy within 1 year (365 days) of diagnosis of breast cancer for women with  $\geq 4$  positive regional lymph nodes. (Accountability)

**nBx:** Image or palpation-guided needle biopsy to the primary site is performed to establish diagnosis of breast cancer. (Quality Improvement)

**BCS:** Breast conservation surgery rate for women with AJCC clinical stage 0, I, II breast cancer. (Surveillance)

**MAC:** Combination chemotherapy is recommended or administered within 4 months (120) days of diagnosis for women under the age of 70 with AJCC T1cNO, or stage IB-III

Breast cancers diagnosed and or treated at Mercy from January 2014 through October 15, 2018.

<i>Year</i>	<i>2014</i>	<i>2015</i>	<i>2016</i>	<i>2017</i>	<i>2018</i>
<i>Breast cases</i>	<i>819</i>	<i>826</i>	<i>703</i>	<i>766</i>	<i>578</i>

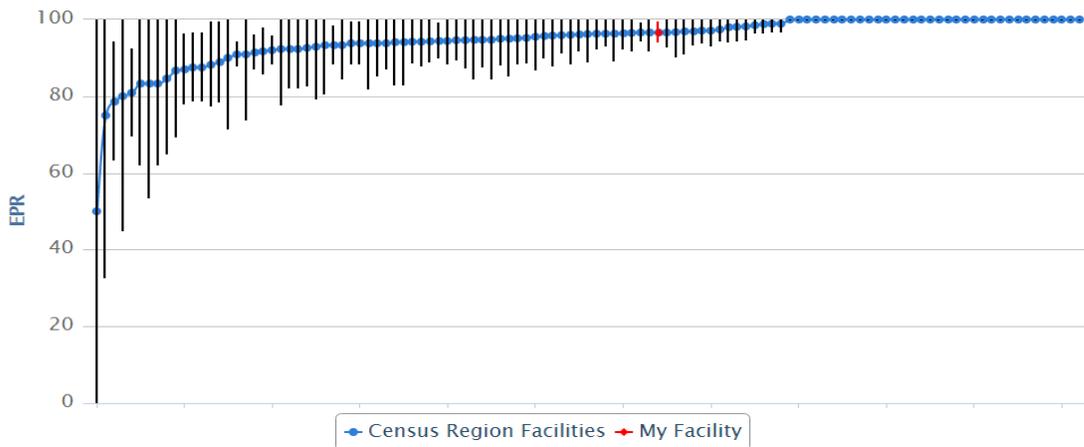
**Data:**

Table of CP3R performance rates 2015 data

<b>Measure</b>	<b>Set Rate</b>	<b>EPR</b>	<b>Compliant</b>
BCSRT	90%	96.6	yes

HT	90%	91.5	yes
MASTRT	90%	100.00	yes
<b>nBx</b>	<b>80%</b>	<b>90.0</b>	<b>yes</b>
BCS	Not applicable	67.7	yes
MAC	Not applicable	93.3	yes

**BREAST, 2015, BCSRT: Breast radiation after breast conserving surgery (NQF 0219 - Accountability)**



	My Program	My State (MO)	My Census Region (West North Central)	My ACS Division (High Plains)	My CoC Program Type (CCCP)	All CoC Programs
Performance Rate	96.6 %	95.8 %	95.3 %	89.6 %	91.9 %	92 %
Denominator	205	1159	4059	5691	24844	56406
95 % CI	(94.1,99.1)	(94.6,97.0)	(94.6,96.0)	(88.8,90.4)	(91.6,92.2)	(91.8,92.2)

Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer. (CP3R data as of 02/15/2018)

**Analysis:**

A review of six accountability and quality improvement measures for 2015 were reviewed. All met the expected EPR. When data was originally reviewed in early October 2018, the results for **nBx**: Image or palpation-guided needle biopsy to the primary site is performed to establish diagnosis of breast cancer. (Quality Improvement) was originally at 86 percent which was compliant but we felt our facility should be in the 90 percent percentile. In conjunction with the cancer registry staff a review of 88 patients was conducted to determine if a needle biopsy was preformed and accuracy of documented results.

## **Conclusion:**

Cancer registry staff was able to reduce the number of non-concordant patients from 88 down to 47 with amended documentation i.e.-lesion too superficial, benign biopsy, high risk lesion diagnosed by needle biopsy requiring excisional biopsy. This brought our compliance rate to 90.0 percent. The cancer registry staff's current software program does not allow to record benign biopsy results into the initial treatment portion of the abstract.

## **Cancer Information Center**

The Cancer Information Center in the David C. Pratt Cancer Center assists cancer patients and their family members. Our services include health promotion, patient education, early detection and support for cancer patients who are trying to find the best way to cope with a serious disease that affects nearly every aspect of their lives. Staffed by a team of health care professionals, including nurses, an oncology social worker, dietitians, a psychologist and many others, it offers free cancer information and assistance with a variety of issues beneficial to patients undergoing treatment.

## **Oncology Patient Navigation: Patient-Centered Care**

By Angela Ruppel, MSW, LCSW

Discovering that you or a loved one has cancer can be overwhelming. Not only is there emotional and physical stress, there are appointments, treatments and paperwork to juggle. Managing life with cancer can leave you feeling lost and unsure. Our Oncology Patient Navigation Program is here to support cancer patients and their families every step of the way. This service, available at no cost to cancer patients, provides personalized support.

Our Navigation Team is comprised of health care professionals focused on each patient's well-being and quality of life. They are prepared to walk with patients and families throughout their journey.

Our nurse navigators work with patients and their families to assist in coordinating cancer care and support resources. They advocate for patients by helping translate complex medical information into language they can understand and apply. They also make the overwhelming more manageable. For those with cancer, the nurse navigator becomes a dedicated member of their care team helping facilitate personalized, patient-centered care. The nurse navigator is a trained oncology nurse specialist who will advocate for their patient from diagnosis to survivorship.

Each nurse navigator serves as:

- **Patient Advocates** —they work collaboratively with the patient’s health care team as their advocate to ensure that barriers to timely treatment and any other barriers to care are minimized.
- **Resource and Information Specialists** — After assessing each patient’s individual needs, our patient navigator team provides customized resource information, educational materials, and links to both internal resources, such as social workers, dietitians, chaplains, and Integrative Medicine services such as acupuncture, massage, healing touch, Mercy Oncology Rehab as well as many of the local community resources.

Mercy recognizes the ever-growing need for patient navigation services and is currently in the process of expanding the program. We have made a commitment to ongoing process improvement with the goals of minimizing gaps in patient care and streamlining inefficient procedures. Each cancer type is unique and we believe by offering an expert point person for patients following diagnosis, prior to their initial oncology-related appointment allows the navigator to establish patient trust sooner in the patient’s journey. Because patients are not charged for these services, philanthropic support from the community is needed to sustain this important program. If you are interested in helping support this program, please contact Mercy Health Foundation, 314.251.1800 or [Katie.Nunn@mercy.net](mailto:Katie.Nunn@mercy.net) .

## **Patient Resources**

We’re committed to supporting our patients as they journey through diagnosis, treatment and beyond. In addition to medical treatment, we offer patients and families a variety of resources and support.

New patient education programs offered in 2018 included:

- Palliative Care for the Cancer Patient
- Survivorship Series Monthly Group
- Preventative Nutrition of Colon Cancer
- Caregiver Support
- Acupuncture - To the Point
- Yoga Basics - All Ages
- Ask the Doctor - Symptom Management

## Cancer Prevention Events for 2018

### March

- **Colon Cancer Awareness Booth** – A booth was set up in Mercy Hospital lobby to provide information and scheduling materials to visitors and coworkers.
- **Colorectal Awareness – Mercy Dress in Blue Day** – Mercy co-workers were encouraged to dress in blue for Colon Cancer Awareness Month.
- **Colorectal Awareness – Week of GI Nurse and Associates** – Daisies were given out to patients with a note card stating “March is colon cancer awareness month. Give this note to someone you love. Screening saves lives. Be seen and get screened.”
- **Healthification Article, “Stack the Deck Against Colon Cancer”** - Article written for the Healthification newsletter, which included information on colon cancer statistics, weight, physical activity and diet to aid in the prevention of colon cancer. This newsletter was distributed to all Mercy staff members in the East Community.
- **The Colon Cancer Alliance Undy Run /Walk** was held on March 24, 2018, in Forest Park, with a Mercy team of patients and co-workers, who staffed a booth with information about colon cancer prevention, in addition to participating in the 5K Run-Walk. For the second year, Mercy was a Blue Hope partner with the Colon Cancer Alliance, so we received a portion of the money raised (\$17,500) to provide colonoscopies for uninsured patients served by our JFK Clinic at Mercy Hospital St. Louis.

### June

- **Komen Race for the Cure-Missouri** (St. Louis race), June 8, 2018 – Mercy co-workers and patients joined a team of 2,000 walkers/runners with the St. Louis Cardinals and Entercom radio stations to bring more awareness of breast cancer to the community. At the halfway point, we distributed lip balm and sunscreen to the walkers. Funds raised during this race are distributed to local cancer centers. Mercy’s portion is used to provide mammograms for uninsured patients treated through our JFK Clinic.

### October

- **Sista Strut**, October 6, 2018 – Mercy physicians and co-workers staffed a booth prior to the walk, handing out information about breast cancer, monthly schedules of our mobile mammography van as well as lip balm and fans. Sista Strut is a breast cancer awareness walk for women of color, organized by the iHeart radio stations in St. Louis with approximately 10,000 participants.
- **Co-worker Benefits Fair** – GI and Endoscopy Center staff provided education on the risk factors and symptoms of colon cancer during the day-long health fair for Mercy co-workers.

## Throughout the Year

- **Smoking Cessation Counseling-Mercy-Road to Freedom** - One-on-one counseling sessions are provided to smokers by an RN who is certified through the Mayo Clinic as a Certified Tobacco Treatment Specialist. For the first three quarters in 2018, nine patients have quit smoking.
- **HPV Vaccination Administration**- Participating pediatricians armed with education and data elect to implement a minimum of one intervention per project cycle in their clinic to increase HPV immunization rates. For the first three quarters in 2018, 12,004 vaccines were administered.

## Cancer Screenings

### Skin Cancer Screening

A skin cancer screening event was conducted at the David C. Pratt Cancer Center at Mercy St. Louis on May 19, 2018. This free service was offered to the general public and the uninsured. The screening was sponsored by Mercy, the American Cancer Society and the American Academy of Dermatologists. Mercy dermatologists, Drs. Michael McCadden, Emily Beck, Joseph Duvall, Jason Amato, Jeffrey Reed and Wei Wei Huang conducted the screenings. They were assisted by Jennifer Stumpf, RN, Michelle Keating, RN, and other volunteers.

The findings were as follows:

- 88 patients were screened for skin cancer
- 27 patients were referred for follow-up of skin lesions
- All patients who were referred indicated they had insurance
- Biopsy was recommended for 13 lesions
- Presumptive cancer diagnoses were:
  - o Basal cell carcinoma in 10 lesions
  - o Squamous cell carcinoma in 1 lesion
- Other presumptive diagnoses included:
  - o Seborrheic keratosis in 27 lesions
  - o Actinic keratosis in 16 lesions
  - o Dysplastic nevus in 3 lesions
  - o Congenital nevus in 4 lesions
  - o Mole/nevus in 24 lesions
  - o Other non-malignant dermatological conditions in 13 lesions

## 2018 Community Outreach Report

Screenings	Q1	Q2	Q3	Q4	Total
Breast	154	152	156	163	625
Lung	226	272	251	303	1,052
Skin	n/a	88	n/a	n/a	88
Colon	1809	1838	1679	2073	7,399
<b>Totals</b>					<b>9,164</b> total screenings

Education and Prevention	Q1	Q2	Q3	Q4	Total
ACS Look Good Feel Better	14	22	5	8	49
ACS Reach to Recovery	1	1	2	0	4
ACS Personal Health Managers	5	38	27	3	73
Smoking Cessation: Road to Freedom (new patients)	7	7	5	7	26
HPV Vaccination Administration	2154	3420	6030	2338	14,942
Colon cancer awareness booth (#signed up for colonoscopy)	9	n/a	n/a	n/a	9
Mercy & CSC – The Power of Mindfulness: A Deeper Look	n/a	12	15	n/a	27
Ask the Doctor: Symptom Management	16	n/a	n/a	n/a	16
Acupuncture: To the Point	n/a	8	n/a	n/a	8
Yoga Basics	n/a	11	28	7	46
Preventative Nutrition of Colon Cancer	n/a	n/a	3	n/a	3
Caregiver Support	n/a	n/a	0	n/a	0

Palliative Care for the Cancer Patient	n/a	n/a	n/a	5	5
Estate Planning and Wills	n/a	n/a	n/a	2	2
Medicare 101	n/a	n/a	n/a	8	8
Relax and Rejuvenate Retreat	n/a	n/a	n/a	11	11
Komen Race for the Cure		1,000 +			1,000 +
Stories of Hope				39	39
<b>Totals</b>					<b>16,268</b> participants

<b>Support Groups</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Totals</b>
Breast Cancer	39	43	59	43	184
Prostate Cancer	69	78	55	63	265
Thyroid Cancer	19	27	10	11	67
Head & Neck Cancer	25	22	3	9	59
Young Adult Cancer Survivors	8	6	5	0	19
Lymphedema	5	6	12	5	28
Mercy & CSC - Survivorship	8	7	8	5	28
Fun, Friends & Food	7	12	0	19	38
<b>Totals</b>					<b>688</b>

### **Breast Cancer Screening**

Mercy Cancer Services serves those in need. Our breast screening and education outreach program provides breast self-awareness education, free breast screening and diagnostic services to women who either have no insurance or are underinsured.

We receive funding for screening and providing breast services to women ages 40 – 49 from the Susan G. Komen Missouri Affiliate. Show Me Healthy Women provides funding for mammograms for women ages 50 – 64, as well as for women ages 35 and up if they have issues requiring diagnostic mammograms. We offer breast screening and education events at Mercy facilities and in the community with our mobile mammography van. We also partner with community agencies and churches to provide services. Mercy conducted 462 breast outreach

screenings in the first three quarters of 2018 for the uninsured. Of those, 12 were positive for cancer.

### **Colonoscopies**

At Mercy's four Endoscopy Centers in the St. Louis area, gastroenterologists conducted 5,326 colonoscopies in the first three quarters of 2018. Of those, 26 were positive for cancer.

### **Lung Screenings - Low Dose CT Screening**

Mercy has been offering the Low-dose CT Lung Cancer Screenings since 2015. Low-dose CT chest scans are available to the most at-risk population for lung cancer – those who have been heavy smokers over the past 15 years, or those who are previous smokers. CT scans have been proven to be three times more effective in detecting lung cancer than a standard X-ray. Patients receive a very low-dose of radiation – much less than the average person receives from background radiation in six months.

The referring physician receives the results of the screening. Those patients who show positive results are referred to cancer physicians for follow-up treatment.

First three quarters of 2018: 749 screenings were conducted and four were positive for cancer.

## **Cancer Treatment at Mercy**

### **Infusion Therapy**

Mercy offers patients the convenience of three infusion centers: David C. Pratt Cancer Center, Mercy Clayton and Clarkson building and Mercy Clinic Oncology and Hematology - Chippewa. All three centers offer a complete array of infusion services in light-filled, comfortable and supportive settings.

Services include:

- Complex biologicals
- Immunotherapy
- Blood products (Pratt Cancer Center and Clarkson locations only)
- IV Fluids
- Antiemetic
- Antibiotics
- Analgesics
- Injectable medications
- Investigational therapies

## Chemotherapy

- Preparation. All chemotherapy medications are prepared onsite at each location using DoseEdge technology, a software program which is integrated with the pharmacy application of our electronic health record system, to ensure safe and accurate preparation of chemotherapy. Every step of the process, from selection of the drug, to measurement, to compounding, is captured using bar code technology and digital imaging for verification by a pharmacist prior to dispensing the medication. Only then is the chemotherapy sent to a nurse to be administered to the patient.
- Administration. Patient safety is paramount and proper administration of chemotherapy requires very strict protocols. By scanning the pump module, interoperability between Alaris IV pump and Epic extends medication safety by ensuring that the initial pump programming matches the physician's order. (Interoperability is the connection between the Alaris IV pump and the Epic electronic record.)
- Infusion data flows back to Epic in near, real time providing accurate rates and IV intake amounts.
- In addition to improved medication safety, interoperability provides an 86% reduction in the number of manual keystrokes required to program an Alaris pump. That equates to saving time for nurses.
- We operate under the guidelines of the Oncology Nursing Society for the administration of all chemotherapy. All nurses have completed chemotherapy certification training.
- Mercy's Electronic Health Record (EHR) allows our patients to receive services across the system seamlessly. This is especially helpful to patients using our infusion centers as it allows them to go wherever is most convenient for them – and not always to the same center – and their records are instantly ready and waiting. This affords our patients tremendous flexibility at a time when they especially appreciate it.
- Social workers are available at all three locations to provide counseling and assist with applications for financial resources, transportation, housing and accessing community resources. Patients may self-refer to this program, or their physicians may refer them to specific therapies, based on their needs.
- **Healing Touch** - Mercy offers an opportunity at no cost for clients to receive Healing Touch while receiving chemotherapy. Healing Touch is a gentle but powerful therapy practiced by a board-certified Holistic nurse, who is also board-certified as a Healing Touch practitioner. This therapy has been shown to be beneficial in reducing stress, calming anxiety, decreasing pain, strengthening the immune system, and easing acute

or chronic conditions. At Mercy we believe in treating the whole person - body, mind, and spirit.

## **Radiation Oncology**

David C. Pratt Cancer Center offers a full range of radiation therapy options, including both stereotactic radiosurgery (SRS) and stereotactic body radiotherapy (SBRT). SRS refers to treatments within the brain, while SBRT refers to treatments given to sites in the body outside of the brain (lung, liver, pancreas, spine, head and neck region, adrenal gland, pelvis and bone).

Both treatments do not involve invasive surgery, but rather refer to the precise, high doses of radiation that are delivered. Treatment is highly accurate and painless. Treatment is given on an outpatient basis at a dedicated radiosurgery suite and takes only one to five treatment sessions as compared to several weeks for traditional radiation therapy. As there is no surgical incision, patients can go home the same day and return to their usual activities within 24 hours. SRS/SBRT procedures are administered by a team, including a radiation oncologist, neurosurgeon, medical physicist and radiation therapists.

SBRT also includes the use of advanced technology for accurate and precise tumor targeting. For example, in some patients with tumors that move with breathing, an active breathing coordinator can be used to manage tumor motion. Multiple beams are used, allowing the shape and dose of the radiation to precisely treat the target – and spare surrounding healthy tissue. The SRS/SBRT system utilizes a specially designed robotic table to aid in precise localization of the tumor.

The ideal tumor for SRS/SBRT is relatively small with well-circumscribed borders that can be accurately imaged by MRI or CT. SRS/SBRT is also ideal for specific tumor types, including melanoma, renal cell carcinoma and soft tissue sarcoma.

## **Imaging**

### **3D Mammography**

Mercy Breast Center offers 3D tomosynthesis mammography for women who are at high risk for breast cancer or who have dense breast tissue. A 3D tomosynthesis mammogram can detect breast cancer at early stages because it provides more images for the radiologist to review. It also helps reduce the number of false positives for breast cancer, so women don't have to return for additional screenings as often.

Women who have a history of breast cancer should ask for a 3D mammogram when they schedule their annual mammogram. It's available at Mercy Breast Center in Tower A on the Mercy Hospital St. Louis campus, at the Mercy Breast Center at Mercy Clayton-Clarkson in Ballwin and the Mercy Cancer Center in Washington.

### **Ultrasound Breast Screening (ABUS)**

Since 2016, the Mercy Breast Center in Medical Tower A has been offering ABUS – ultrasound breast screening for women with dense breasts. This machine is an advancement in preventive and diagnostic breast screening for women, using sound waves instead of X-rays.

### **Total Screenings**

Thanks to generous grants from Komen Missouri, Show Me Healthy Women and Sista Strut, we screened 625 uninsured or underinsured women in 2018 - 17 breast outreach patients were diagnosed with breast cancer. In 2017, we screened a total of 635 women, of those, 19 were positive for cancer.

### **Surgical Treatment**

Mercy Cancer Services has two world-class surgery centers: Mercy Hospital St. Louis and a second outpatient surgery center at Mercy Clayton-Clarkson.

We offer many types of surgery for the treatment of oncology patients and their specific diagnoses. Our surgeons work closely with each individual patient to discuss treatment options and propose the best choice available.

Mercy is a leader in robotic surgery. We were the first hospital in St. Louis to acquire the da Vinci Surgical System in 2003 and now have three da Vinci systems. Our patients realize significant advantages: using da Vinci, surgeons work with robotic arms through small incisions – resulting in less blood loss, fewer effects from surgery and faster recovery times.

### **Integrative Medicine**

Integrative medicine focuses on a patient's spiritual health, emotional health and physical well-being.

Mercy offers the most comprehensive Integrative Medicine program in St. Louis. Acupuncture, chiropractic, fitness classes, guided imagery, healing touch, lymphedema, massage therapy, nutritional counseling, physical therapy, reflexology and yoga are among the services offered through Mercy's Integrative Medicine program. Patients may use these services to help in achieving healing during and following their cancer treatments. These integrative therapies help patients who may be experiencing pain, nausea, neuropathy, headaches, fatigue, weakness, restricted range of motion, swelling, difficulty performing activities of daily living and

issues with sleep and anxiety or stress. Following these treatments, patients may additionally feel more relaxed and have less stress.

A new type of therapy was added in 2017 to help patients who are experiencing pain as a result of their chemotherapy treatment. Calmare is an FDA- approved device that uses small surface electrodes to deliver a very low current of electrical stimulation through the skin and nerve fibers. It is administered by trained doctors. It is a non-invasive, drug- free solution for pain control for many chronic pain conditions, with no side effects. This treatment has been shown to be effective in successfully reducing pain in 80 percent of patients treated in clinical trials.

### **Mercy Oncology Rehab and Survivorship Program**

Completing their treatments is just the beginning for cancer survivors. They may suffer side effects caused by their chemotherapy and radiation treatments. To help our cancer survivors, Mercy offers a multi-faceted Oncology Rehabilitation and Survivorship Program.

The Mercy survivorship program helps cancer survivors heal physically, emotionally and spiritually through an interdisciplinary approach. Caregivers from many different specialties work together to help patients increase their strength and energy, alleviate pain and improve their quality of life after cancer. The goal of the program is to return patients to their pre-treatment lives and activities.

Patients may self-refer to this program, or their physicians may refer them to specific therapies, based on their needs.

### **Palliative Care**

Palliative care, an integral part of our oncology program at Mercy, is specialized medical care that focuses on managing the pain and other distressing symptoms of serious illness. The goal is to ease suffering and to enable the best possible quality of life for patients and their families. Patients can receive palliative care at the same time as active cancer treatment, independent of life expectancy. Mercy's Palliative Care team includes physicians, nurse practitioners, social workers and chaplains who work together with our patients' other doctors to provide consistent medical treatments and coordinated care that is tailored to individual patients' needs.

Palliative care consultation is now available two days per week, Tuesday and Friday afternoons for outpatients at the David C. Pratt Cancer Center with Michelle Schultz, MD, and Gail Hurt, ANP. Referral to palliative care early in the course of cancer treatment has been shown to improve quality of life for patients and their families. It helps people carry on with their daily lives and improves their ability to tolerate cancer treatments. Patients gain more control over their care by improving understanding of treatment options and matching their goals to those options.

## **Mercy Research Oncology**

### **Clinical Trials**

The Mercy Research Oncology portfolio includes 190 clinical trials in active enrollment, with 153 trials open in the St. Louis community. There are another 173 clinical trials that are no longer enrolling but with patients in follow-up, 107 of which are in St. Louis. In sum, there are 363 active oncology studies, with 260 of those studies located in St. Louis.

In 2018, the St. Louis oncology clinical research team:

- Facilitated more than 110 clinical trial enrollments.
- Enrolled adults in 29 different cancer studies.
- Enrolled thirty-nine pediatric patients in Children’s Oncology Group protocols.

The Mercy Research Oncology clinical team includes 30 co-workers across the ministry, with additional support from dedicated business and regulatory operations Mercy Research co-workers. In the St. Louis community, 11 Mercy Research co-workers support oncology research occurring at the David C. Pratt Cancer Center, Mercy South, Mercy Clinic Oncology and Hematology Clayton-Clarkson, and Mercy Clinic Oncology and Hematology – Chippewa locations. We will soon begin supporting oncology research at the Mercy Clinic Oncology and Hematology – Jefferson.

### **Disease States**

The Mercy Research clinical trial portfolio includes options for many disease states, including the following types of cancer:

- Bladder Cancer
- Blood Cancer
- Breast Cancer
- Colorectal Cancer
- Gastrointestinal Cancers
- Gynecologic Cancers
- Head & Neck Cancers
- Lung Cancer
- Genitourinary Cancers

### **Guardian Research Network**

Mercy Research is a founding partner of Guardian Research Network (GRN), a consortium of like-minded health systems engaged in oncology research. GRN’s objectives are to accelerate cures for cancer, bring clinical trials to community health settings, and eliminate the difficulties of matching patients to clinical trials. Nearly 600 patients have enrolled in a clinical trial since Mercy began its relationship with GRN.

### **Cancer Research for the Ozarks**

Cancer Research for the Ozarks (CRO) is a joint venture between Mercy and CoxHealth, headquartered in Springfield, Missouri. CRO is the organization through which Mercy accesses National Cancer Institute (NCI)-funded clinical trials. NCI-funded clinical trials comprise 60% of our oncology research portfolio. Several Mercy physicians and Mercy Research co-workers have

been selected as members of NCI committees that are focused on various aspects of oncology research and cancer care delivery.

## **Mercy Pastoral Services**

Religion and spirituality can have both positive and negative effects in cancer care as shown by many recent studies. Positive effects of spiritual care include better quality of life, self-esteem and optimism, better coping skills, less social alienation, decreased anxiety and lower levels of discomfort. Cancer patients experiencing religious/spiritual struggle (e.g., feeling abandoned by or punished by God) experienced poorer quality of life, greater emotional distress, anxiety, higher levels of depression, poorer outcomes and increased disability. The National Comprehensive Cancer Network recommends that every cancer patient be screened for spiritual distress. The goal of screening is to identify patients with distress, including spiritual distress, and to ensure they are referred to trained professionals.

Mercy chaplains are available 24/7 both in the ambulatory setting as well as the in-patient setting. Chaplains are available to respond with face-to-face contacts, by telephone or by e-chaplaincy. Contact with a Mercy chaplain or for additional information on our spiritual care outreach is available at our Pastoral Services Office at Mercy Hospital St. Louis, 314.251.6470 or at the David C. Pratt Cancer Center, 314.251.6947.

## **Cancer Committee**

Mercy's 2018 Cancer Committee is a multidisciplinary committee that includes board-certified physicians, members of the administration, nursing, social services, radiology, quality assurance, pastoral care, cancer registry and other related ancillary specialty staff. The chair for 2018 is John Finnie, MD, medical oncologist, and the co-chair is Jeffrey Craft, MD, radiation oncologist. Robert Frazier, MD, radiation oncologist, is cancer liaison.

## **Multidisciplinary Cancer Conferences**

The David C. Pratt Cancer Center holds site-specific cancer conferences to bring together physician sub-specialists and other health care professionals to examine specific cases and suggest the most appropriate treatment. In addition, twice-a-month site specific breast conferences are also held at our Clayton-Clarkson location. These conferences benefit patients by encouraging collaboration while each member brings a unique view of the different aspects of the patient's disease process and available treatment options.

Cancer conferences include:

- Breast Conference
- GI Conference
- GYN Conference
- Head and Neck Conference

- Hematology/Oncology
- Liver Conference
- Neurology Conference
- Pediatric Conference
- Speaker Presentation
- Surgical Oncology Conference
- Thoracic Conference
- Urology Conference

## **Mercy: Fully Accredited. Clearly Committed**

Professional accreditations are evidence that patients can expect the highest quality of care at Mercy – innovative, comprehensive care.

Our cancer program currently holds a Comprehensive Community Program three-year accreditation with commendations from the Commission on Cancer of the American College of Surgeons. This distinction is given to fewer than 20 percent of all cancer programs in the country. Mercy has been accredited by the American College of Surgeons Commission on Cancer since 1984 and is also accredited by The Joint Commission.

We also hold a three-year term of accreditation in breast ultrasound from the American College of Radiology (ACR). The ACR gold seal of accreditation represents the highest level of image quality and patient safety and is awarded only after peer evaluation by board-certified physicians and medical physicists.

Mercy is also proud to have been named a Breast Imaging Center of Excellence (BICOE) by the American College of Radiology (ACR). The BICOE designation is awarded to breast imaging centers that achieve excellence by seeking and earning accreditation in all the ACR's voluntary breast-imaging accreditation programs and modules in addition to the mandatory Mammography Accreditation Program.