ANNUAL REPORT

2016

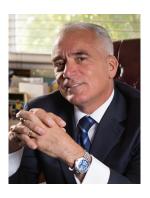


CANCER

355 Bard Avenue, Staten Island, NY 10310

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MESSAGE FROM THE PRESIDENT & CHIEF EXECUTIVE OFFICER

In this past year, Richmond University Medical Center took great strides in the battle against cancer. We are proud of our oncology doctors, nurses, and technicians who spend every day helping people combat this dreaded disease. The knowledge they constantly build on and the compassion they show — in caring for their patients and helping their patients' families as they work toward healing, recovery, and remission — are appreciated by all.

We are grateful for their dedication and their tremendous efforts, and we will continue to push forward together to defeat this disease.

Daniel J. Messina, PhD, FACHE, LNHA President & Chief Executive Officer



MESSAGE FROM THE DIRECTOR OF ONCOLOGY

The members of the oncology department at Richmond University Medical Center are committed to our patients and to combating cancer. We now have three nurse navigators on board — for breast, lung, and general cancer — to help our patients through this journey. Our adult oncology unit is now diversified, for treatment-focused patient care. We

help honor our patients' perseverance with our National Cancer Survival Day and our group walks, like those for breast cancer and leukemia. Locally, our cancer services were honored by the Stapleton U.A.M.E. Church during its annual Dr. Martin Luther King banquet.

We continue to stress the importance of research. We have increased the number of participants in the Miraca Study on Bone Marrow. Cancer Liaison Physician Nisha Lakhi, MD, was recognized for her presentation at the Commission on Cancer Quality Symposium, and Radiation Oncologist, Marc Adams, MD, was recognized by the American Cancer Society.

We remain resolved to giving our patients the best of oncological care.



Angiography
Bronchoscopy
Computerized Axial Tomography Scan (CT)
Digital Radiography for Mammography
Echocardiography
Magnetic Resonance Imaging (MRI)
Magnetic Resonance (MR)

Mammography
Mammography
Mediastinoscopy
Nuclear Medicine
Positron Emission Tomography Scan (PET)
Stereotactic Guided Biopsy
Ultrasound

Radiation Therapy Services

3D Conformal Radiation Therapy Brachytherapy - High Dose Rate (HDR) Brachytherapy - Low Dose Rate (LDR) Computerized Treatment Planning Electron Beam External Beam Radiation Therapy HDR Radiation Therapy System Image-Guided Radiation Therapy (IGRT)
Intensity Modulated Radiation Therapy (IMRT)
Linear Accelerator
Proton Beam
Radiosurgery to treat brain tumors
Systemic Radioisotopes

Systemic Therapy Services

Chemoembolization Hormone Therapy Infusion Center with Chemotherapy Plasmapheresis

Other services

Speciality Navigators - Breast and Lung Ambulatory Oncology Unit & Infusion Center for both Adult and Pediatric Satelite Chemotherapy Pharmacy Clinical Trials Behavioral Health Services



COUNSELING AND SUPPORT

Services	Facility	Referred
Adjustment to Illness Counseling	•	
Advanced Care Planning	•	•
Art Therapy	•	
Bio-Psychosocial Assessment	•	
Caregiver and Family Counseling	•	
Case Management and/or Patient Navigation	•	
Community Resource Coordination (e.g. transportation, financial resources)	•	
Facilitation of Patient/Family, Provider Communication	•	
Fertility Counseling	•	•
Home Care Program	•	
Hospice		•
Inpatient Psychiatric Consult	•	
Mental Health Counseling	•	
Music Therapy	•	
Outpatient Psychiatric Care	•	
Pain and Palliative Care Program	•	
Patient Resource Center or Library	•	
Pastoral Care	•	
Psycho-Education to Enhance Coping Skills	•	
Support and Education Related to Parenting through Cancer	•	
Survivorship Program	•	
Wellness Program	•	
Look Good Feel Better	•	
Patient Navigator Program	•	
Reach to Recovery - Breast Cancer	•	
Meet the Nurses	•	

REHABILITATION SERVICES

Services	Facility	Referred
Fitness and Exercise	•	
Occupational Therapy	•	
Physical Therapy	•	
Speech and language pathology	•	
Stomal Services/Wound Care Therapy	•	•
Therapy for Bladder and bowel Control	•	

NUTRITION SERVICES

Services	Facility	Referred
Screening for nutrition	•	
Nutritional assessment	•	
Referral for nutrition	•	
Nutritional counseling and education	•	

SURGICAL SERVICES

Services	Facility	Referred
Ultrasonic Surgical Aspiration	•	
Catheter based Partial Breast Irradiation (ex: Mammosite)	•	
Robotic Assisted Procedures	•	
Seed Implants	•	
GYN Implants	•	
Cryosurgery	•	
Minimally Invasive Surgery	•	
Radiofrequency Ablation	•	
Sentinel Lymph Node Biopsy	•	

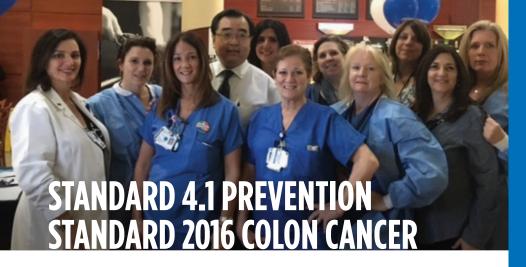
HEALTHY LIFESTYLE AND PREVENTION PROGRAMS

Services	Facility	Referred
Breast	•	
Cervix	•	
Colorectal	•	
General Cancer	•	
Lung	•	
Prostate	•	
Skin	•	
Exercise Program		•
Health Fair	•	
Nutritional Dietary Education Program	•	
Smoking Cessation Program	•	



SITE SPECIFIC PREVENTION

Services	Facility	Referred
Breast MRI	•	
Clinical Breast Exam	•	
Digital Mammography	•	
Mammography	•	
Reduced Cost Mammography	•	
Risk Assessment for Breast Cancer	•	•
Cervical Cancer Testing	•	
Endometrial Biopsy	•	
Human Papilloma Virus Test	•	
Liquid-based Pap Test	•	
Pap Test	•	
Reduced Cost Cervical Cancer Testing	•	
CT Colonography (virtual colonoscopy)	•	
Colonoscopy	•	
Colorectal Screening	•	
Double-Contrast Barium Enema	•	
Fecal Immunochemical Test	•	
Fecal Occult Blood Test	•	
Flexible Sigmoidoscopy	•	
Stool DNA		•
Low-dose CT scan	•	
Lymph Node Exam	•	
Oral Exam	•	
Digital Rectal Exam	•	
PSA Blood Test	•	
Prostate Screening	•	
Skin Exam	•	
Testes Exam	•	
Thyroid Exam	•	



COMMUNITY OUTREACH COORDINATOR REPORT

To determine the needs of the Staten Island (Richmond County) community for our cancer services in 2016, Richmond University Medical Center has consulted the New York State Department of Health database for Incidence and Mortality for Richmond County. According to the American Cancer Society, excluding skin cancers, colorectal cancer is the third most common cancer diagnosed in both men and women in the United States. The American Cancer Society's estimates for the number of colorectal cancer cases in the United States for 2016 are 95,270 new cases of colon cancer and 39,220 new cases of rectal cancer. As was discussed at January's committee meeting, in Richmond County there is an 89.4 average annual rate of colon cancer with an average annual death rate of 36.8.

On March 18, 2016, to coincide with "National Colorectal Cancer Awareness Month", Richmond University Medical Center hosted a free, four-hour, open to the public, prevention event in our lobby. Represented at this event were the American Cancer Society; local food markets, which distributed "colon-friendly foods"; Microvasive, US Endoscopy; an interactive video; Endo nurses, and an Endo doctor. There were giveaways, including "Colon Cancer Awareness" lapel pins donated by NY State Senator Andrew Lanza. In addition, 10 FIT (Fecal Immunochemical Test) Tests were distributed to attendees. Those who received the FIT Tests were instructed in how to take the tests and the procedure by which the test should be returned to our lab for examination and results. Only five people returned the FIT Test to date; two patients had positive tests and have been referred to GI Clinic for management. We continued to follow up with those individuals to ensure that access to any services needed is without barriers. The two individuals with positive tests received colonoscopies with negative cancer results. Approximately 50 members of the public attended the event.



COMMUNITY OUTREACH COORDINATOR REPORT

To determine the needs of the Staten Island community for our cancer services in 2016, Richmond University Medical Center consulted the New York State Department of Health database for Incidence and Mortality for Richmond County. According to the American Cancer Society, lung cancer is the leading cause of cancer death in the United States for both men and women. It is the most preventable form of cancer death in the world. Statistics produced by the New York City Coalition for a Smoke-Free City give us these Staten Island statistics: 16.5% of the residents smoke; it has the highest youth smoking rate of all five boroughs; nearly two-thirds of the smokers are heavy smokers, smoking 11 or more cigarettes a day; and 1% of women smoked in their third trimester of pregnancy. The death rate from cancer is higher on Staten Island than in New York City overall, and lung cancer is the number one cancer-related death among men and women in our community.

On May 3, 2016, Richmond University Medical Center began a Tobacco Cessation Program. The six-week program, led by Lung Nurse Navigator Nancy Sayegh-Rooney, RN, was funded by a grant provided by the New York City Council. At these weekly meetings participants were given information, individual counseling and coping mechanisms to fight their addiction. Eight people attended the sessions, including two employees; at the end of the program all had quit smoking. Nancy Rooney is still in constant contact with each participant, offering support and assistance when needed. Two have started smoking again. One is reportedly only smoking when overwhelmed by stress; the other reported smoking too much and asked to return to future meetings.

As this program continues to show good results, it will be repeated. Another six-week Tobacco Cessation Program began in September. The program was promoted at all community events through the use of flyers and social media. The Cancer Committee reviewed the program and participant evaluations and recommended holding the program three times in 2017; contacting human resources to initiate more employee participation; and discussion regarding rewarding participants who quit smoking with a drawing, as an additional incentive to quit.



COMMUNITY OUTREACH COORDINATOR REPORT

To determine the needs of the Staten Island (Richmond County) community for our cancer services in 2016, Richmond University Medical Center has consulted the New York State Department of Health database for Incidence and Mortality for Richmond County. According to the American Cancer Society, cervical cancer was once one of the most common causes of cancer death for American women. But over the last 40 years, the cervical cancer death rate has gone down by more than 50%. The main reason for this change was the increased use of the Pap test. This screening procedure can find changes in the cervix before cancer develops. It can also find cervical cancer early in its most curable stage. The American Cancer Society's estimates for cervical cancer in the United States for 2016 are that about 12,990 new cases of invasive cervical cancer will be diagnosed and about 4,120 women nationwide will die from cervical cancer.

On June 23, 2016, Richmond University Medical Center hosted a Cervical Cancer Screening event at El Centro in Port Richmond. The population we targeted was uninsured, immigrant women who are afraid to complete a Cervical Screening due to lack of legal immigration status and/or insurance. Doctors Nisha Lakhi, Caroline Marchand and Frances Perez performed the screenings and examined a total of nine women.

This event was promoted via fliers; produced flyers for distribution in community centers both in English and Spanish. With the support of leaders in the community, we were able to provide a welcoming environment for all of the screened women. A private room was used and babysitting was provided. Giveaways and light refreshments were also provided to the women.

Of the nine PAP tests administered, no cancer was detected in any of them while one test resulted in HPV positive status. This patient was contacted and is now followed in GYN Clinic.

2015 CANCER GROUPING STATISTICS

Primary Site	Total	CI	ass	9	ex		AJC	C Stage (Group	
Timary Sicc	rotar	A	N/A	M	F	0	I	II	III	IV
ALL SITES	675	446	229	295	380	51	135	73	57	94
ORAL CAVITY	8	4	4	6	2	0	0	0	1	4
LIP	0	0	0	0	0	0	0	0	0	0
TONGUE	2	2	0	2	0	0	0	0	1	1
OROPHARYNX	0	0	0	0	0	0	0	0	0	0
HYPOPHARYNX	1	1	0	0	1	0	0	0	0	1
OTHER	5	1	4	4	1	0	0	0	0	2
DIGESTIVE SYSTEM	102	71	31	56	46	2	15	11	12	22
ESOPHAGUS	7	4	3	7	0	0	0	0	1	1
STOMACH	10	7	3	5	5	0	0	1	1	2
COLON	43	30	13	17	26	1	7	5	10	9
RECTUM	8	4	4	6	2	0	2	2	0	2
ANUS/ANAL CANAL	5	4	1	3	2	0	3	0	0	0
LIVER	9	3	6	8	1	0	3	0	0	0
PANCREAS	12	11	1	6	6	1	0	0	0	7
OTHER	8	8	0	4	4	0	0	3	0	1
RESPIRATORY SYSTEM	87	58	29	47	40	1	15	7	11	32
NASAL/SINUS	0	0	0	0	0	0	0	0	0	0
LARYNX	5	3	2	3	2	1	0	1	0	2
LUNG/BRONCHUS	82	55	27	44	38	0	15	6	11	30
OTHER	0	0	0	0	0	0	0	0	0	0
BLOOD & BONE MARROW	77	24	53	54	23	0	0	0	0	0
LEUKEMIA	36	7	29	24	12	0	0	0	0	0
MULTIPLE MYELOMA	26	11	15	17	9	0	0	0	0	0
OTHER	15	6	9	13	2	0	0	0	0	0
BONE	1	0	1	0	1	0	0	0	0	0
CONNECT/SOFT TISSUE	2	2	0	1	1	0	2	0	0	0
SKIN	12	5	7	7	5	1	2	2	0	1
MELANOMA	9	4	5	4	5	1	2	2	0	1
OTHER	3	1	2	3	0	0	0	0	0	0
BREAST	113	81	32	1	112	25	34	17	10	3
FEMALE GENITAL	87	72	15	0	87	4	39	9	14	7
CERVIX UTERI	5	4	1	0	5	0	2	0	1	0
CORPUS UTERI	57	49	8	0	57	0	33	4	8	2
OVARY	16	11	5	0	16	0	2	3	5	5
VULVA	6	5	1	0	6	4	1	0	0	0
OTHER	3	3	0	0	3	0	1	2	0	0
MALE GENITAL	36	21	15	36	0	1	2	16	0	9
PROSTATE	34	20	14	34	0	0	2	16	0	9
TESTIS	1	0	1	1	0	0	0	0	0	0
OTHER	1	1	0	1	0	1	0	0	0	0
URINARY SYSTEM	47	39	8	33	14	17	14	1	3	6
BLADDER	31	25	6	23	8	17	6	1	0	2
KIDNEY/RENAL OTHER	15 1	13	2	10	5	0	7	0	3	4
BRAIN & CNS	32	24	8	18	14	0	0	0	0	0
BRAIN (BENIGN)	2	0	2	1	1	0	0	0	0	0
BRAIN (MALIGNANT)	15	10	5	7	5	0	0	0	0	0
OTHER	15	14			8	0	0	0	0	0
ENDOCRINE	14	8	6	2	12	0	5	0	3	1
THYROID	13	8	5	2	11	0	5	0	3	0
OTHER	1	0	1	0	1					
LYMPHATIC SYSTEM	45	27	18	26	19	0	6	10	3	9
HODGKIN'S DISEASE	6	4	2	3	3	0	0	7	0	7
NON-HODGKIN'S	39	23	16	23	16	0	6		3	-
UNKNOWN PRIMARY	10	9	1	6	4	0	0	0	0	0
OTHER/ILL-DEFINED	2	1	1	2	0	0	1	0	0	0

 $Number of cases excluded: 9 \\ This report EXCLUDES CA in-situ cervix cases, squamous and basal cell skin cases, and intraepithelial neoplasia cases$

YEAR: **2016**

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Required Physician and Non-Physician Members	Designated Member Name	Designated Alternate Name		
Cancer Liaison Physician	Nisha Lakhi, M.D.			
Cancer Committee Chair	Thomas Forlenza, M.D.			
Cancer Conference Coordinator	Mahmoud Aly, M.D.	Marc Adams, M.D.		
Cancer Program Administrator	Kathryn Giovinazzo, MBRT			
Cancer Registry Quality Coordinator	Richard Steinbruck, M.D.	Deborah Rodriguez, C.T.R.		
Clinical Research Representative or Coordinator	Adnan Nassir, M.D.	Dennis Bloomfield, M.D.		
Community Outreach Coordinator	William Smith	Lorraine Scanni		
Psychosocial Services Coordinator	Martin Phillips, AAMFT, LMFT			
Quality Improvement Coordinator	Patricia Abbruzzese, R.N.	Nancy Taranto, V.P.		
Diagnostic Radiologist	Michael Mantello, M.D.	George Viscikis, M.D.		
Medical Oncologist	Thomas Forlenza, M.D.	Shamin Salman, M.D.		
Pathologist	David Burnstein, M.D.	Thomas Hansen, M.D.		
Radiation Oncologist	Marc Adams, M.D.	Hoon Lee, M.D.		
Surgeon, general or specialist in cancer care	Michael Bernstein, M.D.	Richard Steinbruck, M.D.		
Certified Tumor Registrar (CTR)	Deborah Rodriguez, C.T.R.			
Oncology Nurse	Rosa Driscoll, R.N.	Lauren Stazzone- Marrone, R.N.		
Palliative Care team member, when these services are provided on-site	Tania Hardiman, R.N., A.V.P.	Martin Phillips, AAMFT, LMFT		
Performance Improvement or Quality Management representative	Nancy Taranto, V.P.	Patricia Abbruzzese, R.N.		
Social Worker or Case Manager	Tania Hardiman, R.N., A.V.P.			
American Cancer Society staff representative	Lauren Moore, M.S.			
Psychiatric or mental health professional trained in the psychosocial aspects of cancer care	Martin Phillips, A.A.M.F.T., LMFT			
Pharmacist	Angela Gilbride, R.Ph.	Lenny Shats, R.Ph.		
Registered Dietician	Kristin Thonsgaard, R.D.	Gerri Wasser, R.D.		
Rehabilitation representative	Claire Cifarelli, P.T.			
Breast Navigator	Nancy Rooney, R.N.			
Gynecology Oncology	Eli Serur, M.D.	Nisha Lakhi, M.D.		
Lung Navigator	Nancy Rooney, R.N.			
Pediatric Oncology	Joan Graziano, M.D.	Joann Stewart, R.N.		



Richmond University Medical Center

An Affiliate of the Mount Sinai Health Network









