WE’RE IN THIS TOGETHER

Comprehensive cancer services from diagnosis through recovery
VISION
a community where all individuals reach their highest potential for health.

MISSION
to continuously improve the health and well-being of our entire community and to work in partnership with others who share the core values of Blount Memorial Hospital.

hospitality • excellence • advocacy • leadership • stewardship

Patient- and Family-Centered Resources
The four-story, 80,000-square-foot Cancer Center is located on the hospital’s main campus, making it easy for patients and their family members to address a variety of health needs in a single visit. Patient- and family-centered resources available through the Cancer Center include:

- comprehensive support services such as rehabilitation, spiritual care and nutrition consults
- advanced imaging, biopsy and treatment technologies
- MEND (Mobilize, Educate, Normalize and Detect) post-cancer and lymphedema rehabilitation program
- a non-denominalional chapel open 24 hours-a-day, seven days-a-week
- the Perfect Fit full-service specialty shop offering post-mastectomy and lymphedema accessories, supplies and adaptive clothing
- a dedicated oncology social worker
- a medical library
- patient and family support groups and education programs including a Managing Your Cancer class for newly diagnosed patients
- cancer-related physician specialists
- a certified oncology dietitian for inpatient and outpatient needs
- a certified nurse navigator for breast cancer patients

Cancer Program Standards: Ensuring Patient-Centered Care establishes new requirements around patient-centered needs and expands the focus on improving the quality of care and patient outcomes. Five elements are key to the success of a CoC-accredited cancer program: The clinical services provide state-of-the-art pretreatment evaluation, staging, treatment, and clinical follow-up for cancer patients seen at the facility for primary, secondary, tertiary, or end-of-life care.
We expect excellence in cancer care. You should, too.

Where would you go for cancer treatment?

At the Blount Memorial Cancer Center, we understand that question is one few people consider unless they are diagnosed with cancer. That’s because knowing where to turn for the most-advanced cancer diagnostic tests, the latest cancer treatments and comprehensive cancer support rarely matters until it’s what matters most.

This annual report provides an overview of the exceptional cancer care delivered at the Cancer Center every day. Included are three survivor stories of cancer patients who were diagnosed and treated at Blount Memorial. Their experiences help illustrate who we are and what we do.

From diagnosis through recovery, we expect excellence in every aspect of the care we provide at the Cancer Center. You should expect the same. Even if you never require cancer care, you can take comfort in knowing that your local cancer center has the expertise, resources and leading-edge technologies needed to diagnose, treat and survive cancer.

For more information about cancer care at Blount Memorial, visit www.blountmemorial.org or call the Cancer Center at 865-980-5534.

“At Blount Memorial, we benchmark ourselves against other programs and meet and/or exceed state and national standards here for breast and colorectal cancers. We are proud of our patient outcomes and the care that we provide to our patients. I can honestly say that people with cancer can’t get any better care anywhere else.”

DR. MELISSA TREKELL
Blount Memorial surgeon and Cancer Center liaison to the American College of Surgeons Commission on Cancer
THE YEAR IN REVIEW

A message from the medical director

Thank you for your interest in the Blount Memorial Cancer Center.

We’ve expanded, enhanced and added a number of services of the past year, and I welcome the opportunity to share this exciting news with you. Additional details about the topics I’ll address are included in this annual report and online at www.blountmemorial.org.

To start off, I want to let you know that the nurse navigator program we fully implemented in 2014 has been very successful. Our nurse navigator, Denia Lash, now is following about 150 breast cancer patients. One aspect of this program is creating a survivorship care plan for each patient. The plan is a summary of a patient’s treatment, plus physician recommendations for follow-up after the patient has completed treatment. Denia has been developing plans for breast cancer patients and some prostate cancer patients. In the coming year, we will expand the survivorship plans, working toward our ultimate goal of providing plans to all of our patients who are being treated for cure. Everyone is so appreciative of Denia’s efforts, and we’ve received such positive feedback. We hope to expand the navigator program in the future to include people diagnosed with lung cancer, prostate cancer, and, perhaps, head and neck cancer.

Another exciting area for us is radiation therapy. We are enhancing technologies, and are planning for a major expansion of the department. Recently, we installed a high-dose rate radiation therapy unit. This highly sophisticated tool uses an extremely high-intensity strength radiation source targeted in a limited area to treat tumors. This technology is used, in particular, to treat types of gynecological cancer, including endometrial or cervical cancer. There also are certain situations where it is very helpful in shrinking lung cancer tumors located down in a breathing tube. In some instances, it can be appropriate for prostate cancer and certain skin cancers. The advantage of this type of treatment is that radiation is delivered in short, intense and targeted treatments.

The other major development in radiation therapy is that we are installing a new, state-of-the-art linear accelerator in 2016. This will expand our radiation therapy capabilities, allowing us to treat some tumors that we have not treated in the past. Also, in 2015 we were accepted into a national cooperative group that is conducting a number of clinical trials related to radiation therapy. We have several of those trials open, and hope to expand those opportunities. This is an important piece of our cancer program, since clinical trials advance our knowledge of what we need to do to treat patients. Patients who participate in clinical trials can be assured that rigorous quality measures are in place, and that the treatment they are receiving is the very latest available anywhere.

Speaking of leading-edge treatments, the Cancer Center also has introduced some new techniques to treat difficult-to-reach lung cancers. Using ultrasound guidance, our pulmonologists are performing 3D bronchoscopies. This allows them to do biopsies of lymph nodes in the lung area in a much-less-invasive fashion, and to biopsy lesions in
the far reaches of the lung that could not be approached by bronchoscopy. The 3D bronchoscopy is a more accurate and, perhaps, safer way to diagnose hard-to-reach tumors at any earlier stage, which hopefully results in a better outcome.

Another highlight is our new breast cancer support group, open to anyone who has been recently diagnosed, is currently undergoing treatment or is a breast cancer survivor. In the coming year, Blount Memorial also will begin hosting a support group for people with prostate cancer, and continue groups for head and neck cancer, lymphedema, and a support group for caregivers.

Support groups are part of the Cancer Center’s active community outreach program. Top community outreach priorities for 2016 include: increasing participation in our smoking cessation program, promoting awareness of the health risks related to smoking, and emphasizing the importance of being physically active and maintaining a healthy weight to reduce cancer risk. We now know that obesity is a risk factor for many types of cancer. In fact, it likely is the second-leading cause of cancer behind smoking. We want to help people in our community understand the connection between obesity and cancer so that they can be as healthy as possible.

Thank you once again for your interest in the Cancer Center. We are honored to serve this community, and are committed to providing state-of-the-art cancer diagnostics, treatment and rehabilitation—right here in Blount County.

Sincerely,

DR. ALBERT PETTY
Radiation oncologist, Cancer Center medical director

“With electromagnetic navigation bronchoscopy, we can accurately diagnose lung nodules when they are still small. Using a CT (computed tomography) scan as the ‘map,’ the technology provides guidance similar to the GPS system in your car. This allows the doctor to use special tools to travel through the lung and reach the desired spot that needs to be biopsied. This new technology can reach any spot in the lung, while the needle biopsy cannot reach all spots. Hopefully, this will allow earlier diagnosis of lung cancers when they still can be cured with surgery.”

DR. GREG LEMENSE
Board-certified interventional pulmonologist
Managing Your Cancer

A free class that covers everything you want to know about your cancer treatment, including side effects, nutrition, pain management and more

A cancer diagnosis unleashes a steady stream of new, and often complex, information. In addition to learning about your specific type of cancer and prognosis, you’re given detailed information about treatment options, potential side effects, pain management and nutrition. And, while you’re trying to process everything, there are practical matters such as finances, scheduling multiple appointments, and transportation to and from treatment.

In other words, being diagnosed with cancer can be exhausting. And, that’s before your treatment even begins.

It doesn’t have to be this way. At the Blount Memorial Cancer Center, we believe that people with cancer and their caregivers have the right to know what is happening and why throughout the course of treatment. Knowledge helps reduce anxiety, supports overall health and empowers people to make informed decisions about their care.

That’s why the Cancer Center offers a free Managing Your Cancer class to anyone newly diagnosed with cancer or currently undergoing cancer treatment. This informative class also is open to families and caregivers so that they can ask questions, and feel more comfortable providing care and support.

“When you first get that cancer diagnosis, there is so much information to take in at one time,” says Cancer Center oncology nurse and oncology clinical educator Regina Vandiver. “Once patients leave their physician’s office, they naturally have questions and need information reinforced over time. That is what this class is all about. We provide the information, answers and resources patients need to understand what to expect and what their treatments will entail.”

Custom-Tailored Classes and Individual Attention

The free Managing Your Cancer class reflects the Cancer Center’s multidisciplinary and per-

REGINA VANDIVER, RN
oncology nurse and oncology clinical educator

“Managing Your Cancer is held the second and fourth Tuesday of each month from 1–4 p.m. in the Cancer Center classroom 2. Pre-registration is required. Regina Vandiver recommends signing up at least two weeks in advance to allow time for assembling the multidisciplinary team matched to your individual diagnosis and plan of care. For more information or to register, call 865-273-4004 or 865-980-4819.

Class topics may include:

- chemotherapy and/or radiation therapy, including how the patient’s specific treatment works, plan of care, what to expect and managing side effects
- nutrition, such as how eating small, frequent meals and bland foods can be helpful when undergoing chemotherapy
- emotional health issues
- exercise and managing fatigue
- lymphedema and related MEND rehabilitation services
- pain management
- palliative care, including the difference between palliative care and hospice
- personal appearance such as specialty clothing, wigs and accessories

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- personal appearance such as specialty clothing, wigs and accessories
sonalized approach to care. Instead of sitting in a big group class, attendees receive one-on-one attention and information tailored to fit their specific needs. Once a patient (or caregiver or family member) registers for a class, Vandiver assembles a multidisciplinary team of experts who can address that patient’s type of cancer, plan of care and individual questions.

Depending on the patient’s diagnosis and treatment, this team could include the Cancer Center’s nurse navigator, a chemotherapy pharmacist, a clinical educator, an oncology nurse, a palliative care specialist, a registered dietician, and a social worker, as well as a physical therapist, speech-language pathologist or other lymphedema specialist from the MEND (Mobilize, Educate, Normalize and Detect) rehabilitation program.

Class attendees work their way through a series of stations, each staffed by one of Blount Memorial’s cancer care experts. This individualized format allows ample time for confidential discussion, instruction and questions.

“We get such positive feedback from the people who come to the class,” says Vandiver. “They feel it is a great help, and they appreciate the book we provide that covers all of the topics discussed in the class. There’s also room in the book to take notes and keep track of lab results, plus a calendar to write down appointments.”

And while most class participants are newly diagnosed patients, Vandiver stresses that people are welcome to register at any time during their course of treatment.

“When people have new symptoms or their treatment changes, the class can be really helpful, too,” she adds. “We’re here to help the community. If you have been diagnosed with cancer or are caring for someone with cancer, Managing Your Cancer is a free resource that is available to you.”

**Cancer Center staff (back row):**
Denia Lash, RN, patient navigator; Sonya Douglas, RD, registered dietician; Deborah Nichols, LMSW, social worker; Aubrey Waddell, PharmD, chemotherapy pharmacist; Angela Boles, RN, registered nurse. **(front row):** Jenna Murphy, RN, nurse manager; Heather Tipton, MS, speech-language pathologist; Regina Vandiver, RN, clinical manager; Andi Heinemann, PT, certified lymphedema specialist.
“I am preaching the gospel of annual mammograms, I’ve always gotten my yearly mammogram, but I never thought much about it since nothing ever showed up. I never had any problems before.”

NANCY SCOTT
Breast cancer survivor
MAMMOGRAMS MATTER AT ANY AGE

Breast cancer patient receives diagnosis at age 73, encourages all women to have annual screenings

Nancy Scott has a mission. “I am preaching the gospel of annual mammograms,” says the 73-year-old Lenoir City resident who recently completed breast cancer treatment at Blount Memorial. “I’ve always gotten my yearly mammogram, but I never thought much about it since nothing ever showed up. I never had any problems before.”

That all changed in November 2014 when Blount Memorial radiologist Dr. Kristen Carver spotted something suspicious on Scott’s mammogram. Scott says she was “flabbergasted” when Dr. Carver asked her to return to the Breast Health Center for a core needle biopsy. This simple, yet precise, procedure spares more healthy tissue and speeds up diagnoses by using imaging guidance to pinpoint exactly what needs to be biopsied.

Based on the results of the biopsy, Scott was diagnosed with early stage breast cancer. Because her tumor was small, Blount Memorial surgeon Dr. Melissa Trekell recommended a wire localization (or, hook wire) biopsy to remove all of the cancerous tissue in one procedure. The hook wire technique may be used to remove abnormal lesions seen on a mammogram, but not easily felt. Following the surgery, Scott had six weeks of radiation treatments at the Cancer Center.

“I met another lady at the Cancer Center who was 73, and who just had been diagnosed with breast cancer for the first time, too,” adds Scott. “Both of us were so blessed because we kept having our annual mammograms, which is how they found our cancers early. If I had stopped my mammograms or had waited another year, I may not have been so lucky.”

Even though Scott lives in Lenoir City, she chose to stay at Blount Memorial for all of her breast cancer care. She explains, “I really felt like it would be best to stay within Blount Memorial for my treatment since I was diagnosed here, and all my doctors and health information is here. I didn’t even realize at the time that breast cancer patients at Blount Memorial have a nurse navigator, Denia Lash. It was such a relief knowing that she was there for me. She wasn’t on the doctor’s side or the insurance company’s side. She was on my side, and still is. I’d call her in a heartbeat with any questions.”

Currently, Scott’s follow-up care includes taking Tamoxifen and having mammograms every six months. If her next mammogram is clear, she’ll return to her regular routine of annual screenings. In the meantime, Scott says, she’s sharing her story in hopes of reaching any women who may have stopped or delayed annual mammograms.

“Because of my diagnosis, several people I know who had been putting off their mammograms went and got one,” she adds. “I am glad that my experience helped them get back on track.”
Mammograms still matter.

Despite recent debates about the value of mammograms, both the American Cancer Society (ACS) and the American College of Obstetricians and Gynecologists (ACOG) state that having the screening test, plus a clinical breast exam annually is the most-effective way to detect breast cancer in the earliest, most-treatable stages.

In October 2015, the ACS revised its recommendations, raising the age for the first screening mammogram from 40 to 45. However, the ACOG still recommends a screening mammogram every year for women age 40 and over, and a clinical breast exam every year for women age 19 or older.

All women are encouraged to talk to their doctors about the benefits, limitations and potential harms associated with breast cancer screening. They also should be familiar with how their breasts normally look and feel, and their family history of the disease.

Weekday mammogram appointments are available at the Blount Memorial Breast Health Center. To schedule a mammogram, call 865-977-5590.

Reconstructive breast surgery

Board-certified plastic and reconstructive surgeon Dr. Matthew Becker specializes in breast reconstruction after mastectomy. Breast reconstruction can be done at the same time as the mastectomy or as a separate procedure. Having a reconstructive surgeon onsite allows women to discuss their breast reconstruction options early in the treatment process.

For example, a woman technically may be a candidate for a partial mastectomy and radiation, but her tumor location or breast size may produce a poor aesthetic result. Knowing about this beforehand may change the decisions she makes about her treatment plan.

To request a referral for an initial breast reconstruction consultation or to schedule an appointment, call Dr. Becker at 865-984-3864.
Meet our nurse navigator

Registered nurse Denia Lash guides breast cancer patients and their families.

Registered nurse Denia Lash, who served as director of Blount Memorial Business Health for nearly 30 years, brings a wealth of health care and organizational expertise to her role as the Cancer Center’s nurse navigator. The Blount County resident and active community volunteer is a friendly, reassuring presence for the newly diagnosed breast cancer patients served through the navigator program.

Lash informs patients and their families about all the services they can access, and lets them know she is available to assist them as they go through the process from diagnosis through treatment. This support can include explaining test results and treatment plans, and tracking down answers to questions related to billing and insurance coverage.

In addition, Lash provides patients with a survivorship care plan when they complete their treatment. This written document, developed under the direction of the American College of Surgeons Commission on Cancer, details all the information about a patient’s cancer: stage and treatment, specific recommendations for follow-up and long-term things to look for in the future. The plan also is sent to each patient’s primary care doctor, ensuring that the physician has a thorough understanding of the patient’s diagnosis, treatment, progress and prognosis.

WHAT: Breast cancer is the most-common non-skin cancer in the United States, and the second-leading cause of cancer-related death in American women.

TREATMENT: Depending on the stage and type of breast cancer, treatment may include surgery, radiation, chemotherapy, hormone therapy, targeted therapy and bone-directed therapy.

WHO: Breast cancer is much more common in women than in men. Those at highest risk include women over age 50, and those with dense breast tissue, a family history of the disease or inherited mutations in certain genes like BRCA1 and BRCA2.

Source: American Cancer Society

Blount Memorial’s comprehensive breast cancer resources include:

- a dedicated Breast Health Center with an onsite, fellowship-trained radiologist specializing in breast health care
- state-of-the-art diagnostic tools, including advanced imaging and laboratory tests
- a certified nurse navigator to assist newly diagnosed patients and their families throughout their breast cancer journey
- the latest surgical techniques for post-mastectomy breast reconstruction
- customized lymphedema and post-cancer therapies at the innovative Total Rehabilitation MEND program
- Perfect Fit post-mastectomy shop for after-care needs
- breast cancer, lymphedema and caregiver support groups

“My role is really a patient advocate. I’m available for any questions they may have. I’ve had patients call me with lingering questions from their physician visits and questions about their options. At my first meeting with patients, we talk about what’s stressing them and what they’re worried about. Sometimes it’s housing and bills, and other times it’s the cancer itself and their anxieties or worries. We help get them resources and provide support for them so that, hopefully, those problems are minimized or in some cases resolved.”

DENIA LASH, RN
Nurse navigator
Blount Memorial Cancer Center
For people treated at the Cancer Center, follow-up care and support continue for a lifetime. Depending on a patient’s diagnosis, this ongoing care could include rehabilitation to resolve or manage side effects of radiation, surgery or other curative cancer treatments.

Blount Memorial Total Rehabilitation’s MEND program offers a variety of innovative therapies and services to meet the unique needs of cancer patients and survivors. MEND’s mission is improving quality-of-life, says MEND certified lymphedema therapist and physical therapist Andi Heinemann.

“So often, people who have had a cancer experience don’t realize that there may be long-term effects of treatment, and that those effects can be managed,” she adds. “They are glad to be alive, but the quality of their lives is lacking. They don’t realize that there is help to live better. That is what MEND offers. No matter where people have had cancer treatment, MEND is here to help improve their quality-of-life after treatment.”

Bill Orcutt of Vonore understands firsthand how MEND can transform lives after cancer. From February to May 2013, the retired United States Air Force colonel under-
went powerful radiation treatments for Stage 3 head and neck cancer. Following the successful treatment, Orcutt developed lymphedema in his neck and severe swallowing issues, which made it difficult to eat and drink.

“The folks at MEND were the bright spot in my cancer treatment,” says Orcutt. “Andi showed me how to manage my lymphedema at home by manipulating my neck throughout the day to stimulate the movement of fluids. And, the speech therapists helped me stop using a feeding tube and start swallowing on my own again.”

The feeding tube was inserted during Orcutt’s radiation treatment to ensure he got adequate nutrition despite being unable to swallow properly. “I still was relying on the tube after the treatment stopped, which wasn’t good,” he adds. “The speech therapists at MEND explained to me that any time you give up the use of a muscular function, you lose it. They gave me swallowing exercises to follow, and I forced myself to start swallowing again.”

Of all of his life-improving achievements made at MEND, Orcutt says he is particularly proud of being able to swallow water again. He explains, “Water is the thinnest of about all liquids, and I had not been able to swallow it until a MEND therapist gave me some tips on how to control areas of my throat that had caused me problems. With her technical help, I was able to start swallowing water, which is tremendous. One side effect of radiation is dry mouth. So, the fluid that you take in is about all you’ve got. It is incredibly critical to eating normally that you have fluid that you can swallow without aspirating (inhaling into the lungs).”

Since lymphedema is a chronic condition, Orcutt says he is thankful he can return to MEND at any time for the specialized decongestive and ASTYM therapies needed to drain any fluid buildup he can’t manage at home. He also credits the MEND therapists with helping him get back to the activity he loves most: flying.

“When you are treated for cancer, you have to apply to the FAA (Federal Aviation Administration) to get back your medical certification to fly,” adds Orcutt. “Thanks to all the documentation provided by Dr. Petty (Cancer Center medical director and radiation oncologist Dr. Albert Petty), I was able to get it back in only seven weeks, which is incredibly fast. To me, being able to fly again is another symbol of beating this cancer and of the success with MEND.”

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BILL ORCUTT
Head and neck cancer survivor and retired United States Air Force SR-71 Blackbird pilot
WE'RE IN THIS TOGETHER

Learn about L-Dex

_Free MEND test can help stop or reverse lymphedema._

Head and neck cancer treatment can result in lymphedema. A simple, painless and free pre-surgery test can help cancer survivors plan ahead for a safe, healthy recovery. Offered by MEND, the L-Dex (lymphedema index) test measures how much lymph fluid is present before surgery in a patient’s affected side (where surgery will be performed) compared to his or her other arm. This measurement is called the L-Dex Index number.

Fluid levels are measured by passing a harmless, low-strength electrical signal from the L-Dex device through each arm. The procedure takes only minutes to complete, and the results are used to help detect any post-surgical lymph fluid buildup. Identifying increased fluid levels in the soft tissues of the arm, chest or neck before any swelling is noticed can help prevent pain, skin tightness and reduced range of motion associated with lymphedema.

Any cancer surgery to remove harmful tissue may require the removal of lymph nodes, increasing the chance that the flow of lymph could be interrupted. A five-year study by the National Institutes of Health (NIH) showed that early intervention helped the majority of those whose post-surgery L-Dex levels rose remain free of lymph congestion for five years.

*For more information about the L-Dex test and other steps to help prevent lymphedema, call MEND at 865-980-5044.*

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### RESOURCES ROUNDUP: HEAD AND NECK CANCER

#### BY THE NUMBERS

**75**

At least 75 percent of head and neck cancers are caused by tobacco and alcohol use. Other risk factors include infection with cancer-causing types of HPV (human papillomavirus), poor oral hygiene, radiation exposure, infection with the Epstein-Barr virus and certain occupational exposures (such as to wood or nickel dust, asbestos or formaldehyde).

_Source: National Cancer Institute_

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### WHAT: Head and neck cancer includes cancers of the mouth, nose, sinuses, salivary glands, throat and lymph nodes in the neck. Most cancers begin in the moist tissues lining the mouth, nose and throat.

### TREATMENT: If found early, head and neck cancers often are curable. Treatments vary depending on the specific diagnosis but could include: surgery, radiation therapy, chemotherapy or a combination of all three.

### WHO: Head and neck cancers are nearly twice as common among men as they are among women.

_Source: National Cancer Institute_

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### WHAT TO WATCH FOR

Head and neck cancer symptoms may include:

- Unusual bleeding or pain in the mouth
- Chronic sinus infections that do not respond to antibiotic treatment
- Frequent headaches or ear pain
- Unexplained pain in the upper teeth or problems with dentures
- Numbness or paralysis of the muscles in the face
- Face or chin pain that does not go away

*Source: National Institutes of Health*
Total Rehabilitation MEND provides innovative therapies that improve quality-of-life.

Potentially life-saving cancer treatments commonly cause side effects. Many of these—such as nausea and fatigue related to chemotherapy—subside once treatment ends. Other side effects can be chronic, requiring lifelong management.

To help cancer survivors and those patients undergoing treatment achieve their highest potential for function and quality of life, Total Rehabilitation MEND offers customized therapy plans. MEND’s physical therapists and speech-language pathologists are specially trained in innovative rehabilitation techniques including:

- lymphedema and chronic swelling therapies
- wound management
- post-cancer therapy
- Pelvic Floor Dysfunction (PFD) therapy
- and more

For more information or to request a referral, call Total Rehabilitation at 865-238-6118.

GET SCREENED.
Early detection helps improve head and neck cancer survival rates.

If you regularly use tobacco products or alcohol, or have another risk factor for head and neck cancer, call 865-983-4090 to schedule a screening with one of the Blount Memorial board-certified otolaryngologists (ear, nose and throat specialists) pictured here:

Dr. Robert Adham  Dr. Bond Almand III  Dr. Bryan Tigner

“As a part of Total Rehabilitation MEND, I can evaluate and treat voice and swallowing issues, lymphedema of the head and neck, and the cognitive defects that often are associated with cancer and cancer treatments.”

HEATHER TIPTON
MEND Speech-language pathologist

“So often, people who have experienced cancer don’t realize that there may be long-term effects of treatment, and that those effects can be managed. They are glad to be alive, but the quality of their lives are lacking. They don’t realize that there is help to live better. That is what MEND offers.”

ANDI HEINEMANN , PT
Certified lymphedema specialist
James Stewart tells it like it is. "I felt like I was peeing like a 90-year-old man," says Stewart, 56, describing the prostate symptoms that inspired him to schedule a variety of health screenings in December 2014. "I was 55, so I knew it was time to ask my general practitioner about getting some baseline tests: PSA (prostate-specific antigen blood test), colonoscopy and skin cancer check."

Stewart, who relocated a few years ago from Florida to Monroe County with his wife, Tammy, admits that he hadn’t had regular medical checkups since retiring in 2011 from the motorcycle and traffic unit of the Indian River County (Fla.) Sheriff’s Office. While he felt “fine,” except for the urinary issues, Stewart says he was fearful about what the colonoscopy would reveal since colorectal cancer runs in his family.

When the colonoscopy showed no polyps or cancer, Stewart was relieved. That sense of relief was short-lived, however, when he learned the results of his PSA test. During his appointment with then Blount Memorial urologist Dr. Kevin Art (who since has relocated to Kentucky), Stewart learned that his PSA level was 33 ng/ml (nanograms per milliliter of blood). According to the American Cancer Society, men with a PSA level between 4 and 10 have about a one in four chance of having prostate cancer. If the PSA is more than 10, the chance of having prostate cancer is more than 50 percent.

“Dr. Art told me my PSA level was ‘off the charts,’” Stewart recalls. “He did an examination, and didn’t like what he found. So, he scheduled me for a biopsy.”

The biopsy revealed that Stewart had stage 3 prostate cancer. Stewart says he was “in shock.”

“When I heard that word, ‘cancer,’ my mind went crazy thinking about all the things I needed to do to get my affairs in order,” he adds. “But, once I met with Dr. Art, and the radiation oncologists Dr. (Albert) Petty and Dr. (Daniel) Green at Blount Memorial, and had a plan in place, I was really positive. I have had a really good attitude about the whole thing because the team of doctors and staff at Blount are absolutely phenomenal. Everyone has treated me with such dignity and respect.”

Choosing a Treatment Plan

With so many different prostate cancer treatment options available, it can be difficult for men to figure out which course of action is best. Stewart says that having the physicians at Blount Memorial walk him through the pros and cons of each treatment plan made the process easier and less stressful than he expected.

“Dr. Art said that the first option was surgery (to remove the entire prostate gland plus some surrounding tissue),” Stewart explains. “Being only 55 years old, I thought, ‘I am not..."
TREATMENT OPTIONS:

Know the facts to make an informed decision about prostate cancer

If you’re diagnosed with prostate cancer (or any cancer), the multiple treatment options can seem overwhelming. To help make the most-informed decision about your care, ask your physician which treatment has been proven to provide the best outcome and is considered the “standard of care.”

In addition, ask your physician if you qualify for the “standard of care” treatment, or if other medical conditions put you at risk for complications. It is your right to know your treatment options, as well as the risks and rewards of that treatment. At Blount Memorial, we are committed to providing cancer treatment proved to provide the best outcomes. We welcome your questions, and encourage you to know the facts about the treatments you are considering.

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going to do that.’ Dr. Art strongly suggested that I go with the second option, hormone therapy and radiation. I was diagnosed with a very aggressive form of cancer, so they needed to treat it aggressively. But, they also understood that I was concerned about potential side effects and complications. (Prostate surgery has a low risk of serious complications, however, postsurgical urinary incontinence and erectile dysfunction can occur.)

Beginning treatment with hormone therapy helped decrease the production of the testosterone feeding the tumor. Stewart was scheduled for two months of hormone shots to be followed by 44 radiation treatments. When he met with Dr. Petty and Dr. Green, however, they explained that Stewart was an ideal candidate for outpatient radioactive seed implantation therapy, or brachytherapy, at Blount Memorial. In addition to reducing his radiation sessions to only 28, the radiation oncologists explained the potential benefits of this minimally invasive procedure included precise targeting of the tumor, sparing of surrounding healthy tissue, and fewer side effects than standard therapies.

“When I heard the word, ‘cancer,’ my mind went crazy thinking about all the things I needed to do to get my affairs in order. But, once I met with Dr. Art, and the radiation oncologists Dr. Petty and Dr. Green at Blount Memorial, and had a plan in place, I was really positive. I have had a really good attitude about the whole thing because the team of doctors and staff at Blount are absolutely phenomenal.”

JAMES STEWART
Prostate cancer survivor

Stewart chose the radioactive seed route. He had his last radiation treatment on June 9, and, about a month later, had 60 seeds implanted in his prostate. During the procedure, Dr. Green used needles to insert radioactive seeds—each no bigger than a grain of rice—into the prostate gland. Over time, the seeds slowly give off radiation from the inside out to destroy cancer cells at the targeted site.

“That is where we are now,” says Stewart. “I had a follow-up with Dr. Green on July 21, and he said I was doing great. All the seeds are in the proper place, I don’t have to go back and see him until January 2016, and I was cleared to ride my motorcycle again on July 29.”

The seeds will deliver low-dose radiation for three to four months, and Stewart will continue hormone therapy for two years. Other than that, his prostate cancer treatment is complete.

“If I can help anyone else now by sharing my story, that would be great,” he adds. “My brother went to get his PSA checked because of what happened to me, and that’s wonderful. The bottom line: it’s not a big deal to get screened. Just go.”

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Know the facts to make an informed decision about prostate cancer

If you’re diagnosed with prostate cancer (or any cancer), the multiple treatment options can seem overwhelming. To help make the most-informed decision about your care, ask your physician which treatment has been proven to provide the best outcome and is considered the “standard of care.”

In addition, ask your physician if you qualify for the “standard of care” treatment, or if other medical conditions put you at risk for complications. It is your right to know your treatment options, as well as the risks and rewards of that treatment. At Blount Memorial, we are committed to providing cancer treatment proved to provide the best outcomes. We welcome your questions, and encourage you to know the facts about the treatments you are considering.

continued from page 16

going to do that.’ Dr. Art strongly suggested that I go with the second option, hormone therapy and radiation. I was diagnosed with a very aggressive form of cancer, so they needed to treat it aggressively. But, they also understood that I was concerned about potential side effects and complications. (Prostate surgery has a low risk of serious complications, however, postsurgical urinary incontinence and erectile dysfunction can occur.)

Beginning treatment with hormone therapy helped decrease the production of the testosterone feeding the tumor. Stewart was scheduled for two months of hormone shots to be followed by 44 radiation treatments. When he met with Dr. Petty and Dr. Green, however, they explained that Stewart was an ideal candidate for outpatient radioactive seed implantation therapy, or brachytherapy, at Blount Memorial. In addition to reducing his radiation sessions to only 28, the radiation oncologists explained the potential benefits of this minimally invasive procedure included precise targeting of the tumor, sparing of surrounding healthy tissue, and fewer side effects than standard therapies.

“When I heard the word, ‘cancer,’ my mind went crazy thinking about all the things I needed to do to get my affairs in order. But, once I met with Dr. Art, and the radiation oncologists Dr. Petty and Dr. Green at Blount Memorial, and had a plan in place, I was really positive. I have had a really good attitude about the whole thing because the team of doctors and staff at Blount are absolutely phenomenal.”

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ациональной раковой сети (NCCN) на сайте www.nccn.org/patients/guidelines/prostate/index.html.

Для получения информации о других вариантах лечения, рекомендуется ознакомиться с руководством по раку, доступным на сайте www.nccn.org/patients/guidelines/default.aspx.
Radioactive seeds are inserted through needles into the prostate gland. The number of seeds implanted depends on the size of the prostate.

Following the procedure, X-rays are taken to document the position of the seeds.

The total time spent at the hospital on procedure day is generally five to six hours.

About one month after the procedure, a CT (computed tomography) scan of the prostate gland is taken to verify that the seed placement was adequate and to calculate the radiation dosage each area of the gland will receive.

Prostate specific antigen (PSA) blood tests will be administered during follow-up visits with the urologist and/or radiation oncologist. The first test generally is conducted three months after the procedure. Additional testing takes place every three to six months. Individual patient results vary, however, it may take 12-36 months for PSA levels to drop to their lowest point.

To determine if seed implantation therapy could be the right prostate cancer treatment for you, call 865-977-5534.
**EDUCATION, SUPPORT, SCREENINGS AND PREVENTION**

**BY THE NUMBERS**

- **1 in 3** cancer deaths in Tennessee is due to lung cancer.
- **1/3** of all cancer deaths in the United States each year are linked to diet and lack of physical activity, including being overweight or obese.
- **Top 2** preventable cancer risk factors are smoking and obesity.
- **90%** the percentage of colon cancers that are curable when detected and treated at an early stage.

**EDUCATION**

Abbreviated Smoking Cessation Class

Get the tools you need to be a successful quitter at this free smoking cessation class. This abbreviated class is held the second and fourth Tuesday of each month at 5:30 p.m. in the Medical Fitness Center, Blount Memorial Hospital, 2-east. For more information or to register, call 865-980-4811.

Look Good, Feel Better

This national American Cancer Society program is dedicated to teaching women who are cancer patients the techniques to help restore their appearance and self-image. You are invited to attend any one session free of charge, providing you are currently receiving either chemotherapy or radiation therapy at any hospital. This program is presented the first Monday of each month from 10 a.m. to noon in the Blount Memorial Cancer Center conference room 1, located on the second floor. A light lunch is provided. To register, call the Blount Memorial Cancer Center at 865-977-5534.

Sun Safety Education

The Cancer Center offers free and fun age-appropriate skin cancer awareness programs for children in pre-K through eighth grade. For more information about Sunscreen Safari (pre-K through grade 2), Surf Riders (grades 3-5) or Shade Brigade (grades 6-8), or to schedule a program for your school or youth group, call the radiation oncology department at 865-977-5534.

Sources: American Lung Association
American Cancer Society
American Society of Colorectal Surgery (ASCRS)
SUPPORT

Adult Grief Support Group
This support group is a free, four-to six-week series offering education, support and encouragement to any grieving adult age 18 and older. The group meets at the Blount Memorial Home Services and Hospice building, located at 1095 E. Lamar Alexander Parkway in Maryville. For more information or to register, call 865-977-5702.

Caregiver Coffee and Conversation
This is a free opportunity for caregivers of other adults to gather at an informal setting to discuss the experiences of caregiving and the availability of resources. Edward Harper, Senior Services coordinator and licensed clinical social worker, and Beverly Sherrod, Senior Services assistant present the program on the first and third Tuesday of each month from 10-11 a.m. at the Vienna Coffee House, located at 212 College Street in Maryville. The Caregiver Coffee and Conversation is a collaboration between Blount Memorial Senior Services and Vienna Coffee Company. For more information, call 865-977-5744.

Caregiver Support Group
This support group meets every Wednesday from 6-7 p.m. at Blount Memorial Hospital in the 3-east classroom. For more information, call 865-977-5744.

Head and Neck Resource Support Group
This support group is dedicated to raising awareness and meeting the needs of head and neck cancer patients and family members. Members meet the first Thursday of each month from 2-3:30 p.m. in the Blount Memorial Cancer Center conference room 2, located on the second floor. For more information, call 865-977-4729.

LifeStories
Preserve your memories by scrapbooking in this monthly art program. This support group is for cancer patients, survivors and their families. All supplies are furnished. Participants should bring the photos they wish to use. This program is presented the second Monday of each month from 9 a.m. until 1 p.m. and meets in the Blount Memorial Cancer Center conference room 2, located on the second floor. A light lunch is provided. For more information or to register, call 865-977-5534.

Lymphedema Support Group
This support group for lymphedema patients focuses on home therapy and management techniques. The group meets quarterly from noon to 1:30 p.m. in the Blount Memorial Cancer Center conference room 1, located on the second floor. A light lunch is provided. For more information or to register, call 865-980-5089.

Prostate Support Group
Beginning in January 2016, Blount Memorial will begin sponsoring the monthly prostate cancer support group. The group is open to all prostate cancer patients, survivors and their spouse/care partner, regardless of where they received or will receive treatment. The group meets the third Monday of each month at 6:30 p.m. in the Blount Memorial Cancer Center conference rooms 1 and 2 on the second floor. Guest speakers for this group include physician members of the cancer care team, as well as those who assist in the recovery of prostate cancer patients including rehabilitation therapists, pharmacists, fitness specialists, counselors and dietitians, to name a few. For more information about the group, please call 865-977-5534.

EAT HEALTHY TO REDUCE YOUR RISK

What you eat can increase or reduce your cancer risk.
To help prevent cancer, the American Cancer Society recommends this five-point nutrition plan:

1. Eat a healthy diet, with an emphasis on plant foods.
2. Choose foods and drinks in amounts that help you get to and maintain a healthy weight.
3. Limit how much processed meat and red meat you eat.
4. Eat at least 2½ cups of vegetables and fruits each day.
5. Choose whole grains instead of refined grain products.
Early-Stage Lung Cancer Screening

Blount Memorial offers low-cost, early stage lung cancer screenings to current and former heavy smokers. The screening (offered at the significantly reduced rate of only $95) is a low-dose spiral computed tomography (CT) scan and can identify small lung cancers in the earliest, most-treatable stage. Screenings are available to adults age 55-74 who:

- are current heavy smokers with a smoking history of 30 years (one pack per day for 30 years or two packs per day for 15 years)
- are former heavy smokers who have quit smoking within the last 15 years
- have no previous diagnosis of lung cancer, pulmonary nodules or related symptoms such as shortness of breath, unusual or persistent chest or back pain, and coughing up blood
- have not undergone a chest CT within the last 18 months
- have a written order from a physician or other health care provider

For more information or to schedule a screening, call the Blount Memorial radiology department at 865-981-2288 or East Tennessee Medical Group at 865-984-3864.

SUPPORT

Breast Cancer Support Group

In 2015, Blount Memorial added a Breast Cancer Support Group to its support group offerings. Attendance is free and specifically for patients and survivors, both male and female, who are in the early stages of their breast cancer journey. Ideal participants are those men and women who have been recently diagnosed, those currently undergoing treatment or those who have been treated within the last five years. However, any survivor is welcome, regardless of where treatment was received. Meetings are held the third Monday of each month from noon to 1:30 p.m. in the Blount Memorial Cancer Center conference room 2 on the second floor. Facilitated by Lauren Passarello, a licensed marriage and family therapist with Blount Memorial Counseling and CONCERN, the group provides patients an opportunity for validation. “We have breast cancer patients who come through our office looking for a support group. Our doctors know that the patients they’re working with need other people to talk to about what they’re going through. No one else is going to be able to validate them as well as someone who also is going through the same experience,” she explained. Passarello says the benefits of a support group are numerous.

EDUCATION, SUPPORT, SCREENINGS AND PREVENTION

“The participants can encourage each other, make suggestions, cry together if they need to and, most importantly, they’ll be able to give each other hope. There are other support groups outside of Blount County, but if someone doesn’t feel well, they may not want to drive 25-30 miles into Knoxville. They want something close. Plus, they’re fostering relationships with people who are local.”

LAUREN PASSARELLO
Licensed family and marriage therapist
Blount Memorial Counseling and CONCERN

Dr. Jason Budde
Thoracic surgeon

For more information or to schedule a screening, call the Blount Memorial radiology department at 865-981-2288 or East Tennessee Medical Group at 865-984-3864.
Free Skin Cancer Screenings

National Melanoma/Skin Cancer Detection Month is in May. The Cancer Center typically offers a free skin cancer screening during the spring months. Skin cancer is the most-common form of cancer in the United States. Although most skin cancers are curable if detected early, the most-serious form—melanoma—can be deadly. Melanoma can occur anywhere on the body, yet appears most often on the upper back or face. According to the American Melanoma Foundation, check for signs of Melanoma by using the ABCDs.

<table>
<thead>
<tr>
<th>A for Asymmetry</th>
<th>One half is different than the other half.</th>
</tr>
</thead>
<tbody>
<tr>
<td>B for Border Irregularity</td>
<td>The edges are notched, uneven or blurred.</td>
</tr>
<tr>
<td>C for Color</td>
<td>The color is uneven. Shades of brown, tan and black are present.</td>
</tr>
<tr>
<td>D for Diameter</td>
<td>Diameter is greater than six millimeters.</td>
</tr>
</tbody>
</table>

Other warning signs include:
- appearance of a new bump or nodule
- color spreads into surrounding skin
- redness or swelling beyond the mole
- pain
- tenderness
- itching
- bleeding
- oozing
- scaly appearance

To reduce your risk of melanoma, practice sun safety habits such as applying sunscreen daily (even on cloudy days), and schedule an annual skin cancer screening with a Blount Memorial dermatologist to monitor changes in your skin.

Mammograms in the Moonlight

Each May and October, the Blount Memorial Breast Health Center sponsors a popular after-hours mammogram event called Mammograms in the Moonlight. Participating women can use their insurance benefit or, if uninsured, can purchase discounted screening certificates covering the digital screening mammogram and interpretation fee. Screening mammograms are for women over age 40 who do not have a history of breast cancer, breast problems or breast implants.

Colorectal Screenings Save Lives

Colorectal cancer is preventable and highly treatable when detected early, yet it remains the second-leading cause of cancer death for all adults (men and women combined) in the United States. According to the Centers for Disease Control and Prevention (CDC), if everyone age 50 and older was screened regularly, as many as 60 percent of colorectal cancer deaths could be avoided.

The Cancer Center encourages people age 50 and older to ask their health care provider what colorectal screening test is right for them. Blount Memorial’s board-certified gastroenterologists use the most-advanced and minimally invasive techniques to diagnose and treat colorectal cancer.

To schedule an appointment and learn about available screening tests, call Blount Gastroenterology Associates at 865-983-0073 or Smoky Mountain Gastroenterology at 865-980-5060.

“Colon cancer is one of the most-preventable types of cancer we treat. More than just preventable, it’s also curable when detected at an early stage. The most important step you can take to prevent colon cancer is to begin getting screened at age 50. But, if you are African American or have a family history of colon cancer, you may need to begin screening even younger than 50.”

DR. WILLIAM LYLES
Board-certified gastroenterologist
Perfect Fit at Blount Memorial

The Cancer Center’s full-service specialty shop offers post-mastectomy and lymphedema accessories, supplies and adaptive clothing.

Items are added frequently, so call or stop by Perfect Fit to see what’s new. Blount Memorial Cancer Center, second floor, Monday-Friday 8:30 a.m. - 5 p.m. Call 865-980-5077 for more information.

Women who have had a mastectomy, with or without breast reconstruction, and those experiencing lymphedema following breast cancer surgery have unique clothing and accessory needs. It can be difficult and time-consuming to track down specialty items.

That’s what makes Perfect Fit the perfect fit for breast cancer survivors and patients undergoing treatment. The Cancer Center’s full-service specialty shop stocks an extensive selection of post-mastectomy and lymphedema items, as well as adaptive aids and clothing. Even more important than the inventory, perhaps, is the supportive and helpful staff. Everyone at Perfect Fit is dedicated to helping each customer look and feel confident and comfortable.

Here’s a quick look at what you’ll find at Perfect Fit:

<table>
<thead>
<tr>
<th>Lymphedema items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mastectomy bras, swimsuits and post-operative camisoles</td>
</tr>
<tr>
<td>Full breast prostheses and partial shapers</td>
</tr>
<tr>
<td>Wigs, hats, scarves and turbans</td>
</tr>
<tr>
<td>Specialty gifts</td>
</tr>
<tr>
<td>Unisex soft t-shirts, shower shirts and cancer awareness t-shirts</td>
</tr>
<tr>
<td>Certified mastectomy fitters (CMF) on staff</td>
</tr>
</tbody>
</table>

Advancements and Achievements

Re-accreditation from Commission on Cancer
Three-year approval with commendation (Silver Rating)

Ted Mashburn received the Meritorious Service Award for a Department Head from the Tennessee Hospital Association.

Regina Vandiver, RN received her certification as an oncology certified nurse.

Tony Davis-Myers became president of the Tennessee Oncology Data Analyst Association.

Dr. Melissa Trekell (left) took part in a National Breast Cancer Advisory Board on Saturday, Oct. 3. Trekell participated in Genetech Pharmaceutical’s Breast Cancer Advisory Board in Chicago. The board was made up of 16 surgeons from across the country who met to discuss neoadjuvant chemotherapy.

TONYA DAVIS-MYERS, oncology data supervisor
TED MASHBURN, Administrative director of radiology services
Education/Support Groups

<table>
<thead>
<tr>
<th>Group</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>LifeStories</td>
<td>86</td>
</tr>
<tr>
<td>Managing Your Cancer</td>
<td>4</td>
</tr>
<tr>
<td>Head &amp; Neck</td>
<td>31</td>
</tr>
<tr>
<td>Look Good, Feel Better</td>
<td>19</td>
</tr>
<tr>
<td>Breast Cancer Support Group</td>
<td>58</td>
</tr>
<tr>
<td>Lymphedema Support Group</td>
<td>139</td>
</tr>
<tr>
<td>Grief Support Activities</td>
<td>212</td>
</tr>
<tr>
<td>Smoking Cessation counseling</td>
<td>1,344</td>
</tr>
<tr>
<td>CHI-healthy lifestyle initiatives</td>
<td>3,000</td>
</tr>
<tr>
<td>Maryville High School</td>
<td>500</td>
</tr>
<tr>
<td>Football Game Pink Out</td>
<td></td>
</tr>
</tbody>
</table>

The Blount Memorial Foundation Cancer Patient Resource Fund provided transportation, nutritional, utility and other basic needs assistance to more than 160 cancer patients.

Health Fairs and Health Screenings

<table>
<thead>
<tr>
<th>Event</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Skin Cancer Screening</td>
<td>60</td>
</tr>
<tr>
<td>Lung Cancer Discounted screening</td>
<td>123</td>
</tr>
<tr>
<td>St. Johns Church Health Fair</td>
<td>100</td>
</tr>
<tr>
<td>Alcoa Middle School Health Fair</td>
<td>125</td>
</tr>
<tr>
<td>Health Fair, Alcoa, Inc.</td>
<td>465</td>
</tr>
<tr>
<td>Mammograms in the Moonlight</td>
<td>44</td>
</tr>
<tr>
<td>Helping Hands event</td>
<td>6,000</td>
</tr>
<tr>
<td>City of Maryville BMI screening</td>
<td>150</td>
</tr>
<tr>
<td>Blount County Schools</td>
<td>100</td>
</tr>
</tbody>
</table>

Community and School Presentations

<table>
<thead>
<tr>
<th>Event</th>
<th>Attendees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sunscreen Safety</td>
<td>134</td>
</tr>
<tr>
<td>Cancer Survivors Day celebration</td>
<td>200</td>
</tr>
</tbody>
</table>

Blount Memorial Cancer Center Community Outreach efforts reached more than 13,000 individuals in our community during 2015 with education, financial assistance and other information regarding cancer risk, prevention and screening.

For information or to contribute to the Blount Memorial cancer patient fund, call 865-977-5727.
CANCER REGISTRY AND DIAGNOSES

Monitoring progress to improve outcomes

The Blount Memorial Cancer Center maintains a confidential database of all patients who have received cancer treatment at Blount Memorial. Names are entered upon diagnosis, treatment regimens and outcomes, and progress is monitored throughout the rest of their lives. The registry offers patients an easily accessible review of their treatment plan, and helps ensure the best quality of care and survival results.

NON-PHYSICIAN MEMBERS

Cynthia Albright
Quality improvement coordinator
Jane Andrews
Community outreach coordinator
Angela Boles
Cancer conference coordinator
Tonya Davis-Myers
Cancer registry quality coordinator
Stephanie Griffin
Weight Management Center
Jenna Murphy
Nursing/clinical research coordinator
Jane Nelson
Administration
Deborah Nichols
Psychosocial services coordinator/
Palliative care representative

AD HOC MEMBERS

Koki Best
Breast Health Center
Jennie Bounds
Public relations and marketing
Randy Carr
Radiation oncology
Sonya Douglas
Food and nutrition services
Amy Fields
American Cancer Society
Sheila Garrett
Radiation oncology
Andi Heinemann
Lymphedema/rehabilitation
Hannah Johnson
Inpatient case management
Denia Lash
Nurse navigator
Ted Mashburn
Radiology
Michelle McPherson
Thoracic services
Dr. Harold Naramore
Chief medical officer
Heather Tipton
MEND/rehabilitation
Regina Vandiver
Clinical education 5E
Aubrey Waddell
Pharmacy
Mark Wyatt
Physicist, radiation oncology

ONCOLOGY COMMITTEE PHYSICIAN MEMBERS • 2015

Albert Petty, MD
chairman, radiation oncology, Cancer Center medical director

Eric Schrock, MD
medical oncology

John Niethammer, MD
radiology

Michael Teague, MD
pathology

Melissa Trekell, MD
Commission on Cancer liaison and surgery

Matthew McCarty, MD
medical oncology
## 2014 Blount Memorial New Cancer Diagnoses

<table>
<thead>
<tr>
<th>Site Name</th>
<th># Cases</th>
<th>Male</th>
<th>Female</th>
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</thead>
<tbody>
<tr>
<td>Base of Tongue</td>
<td>3</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Other Parts of Tongue</td>
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<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Parotid Gland</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Other Salivary Glands</td>
<td>2</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Tonsil</td>
<td>2</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Oropharynx</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Esophagus</td>
<td>7</td>
<td>7</td>
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</tr>
<tr>
<td>Stomach</td>
<td>8</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>Small Intestine</td>
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<td>2</td>
<td>0</td>
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<tr>
<td>Colon</td>
<td>39</td>
<td>17</td>
<td>22</td>
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<tr>
<td>Rectosigmoid Junction</td>
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<td>1</td>
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<tr>
<td>Rectum</td>
<td>10</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Anus &amp; Anal Canal</td>
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<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Liver &amp; Bile Ducts</td>
<td>9</td>
<td>7</td>
<td>2</td>
</tr>
<tr>
<td>Gallbladder</td>
<td>2</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Other Biliary Tract</td>
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<td>0</td>
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<tr>
<td>Pancreas</td>
<td>14</td>
<td>8</td>
<td>6</td>
</tr>
<tr>
<td>Larynx</td>
<td>8</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>Bronchus &amp; Lung</td>
<td>110</td>
<td>56</td>
<td>54</td>
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<tr>
<td>Thymus</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Heart Mediastinum Pleura</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Bones, Joints, Other Unspecified Sites</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Blood &amp; Bone Marrow</td>
<td>28</td>
<td>15</td>
<td>13</td>
</tr>
<tr>
<td>Skin</td>
<td>10</td>
<td>8</td>
<td>2</td>
</tr>
<tr>
<td>Connective Subcutaneous other soft tissue</td>
<td>5</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Breast</td>
<td>100</td>
<td>2</td>
<td>98</td>
</tr>
<tr>
<td>Vulva</td>
<td>2</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Cervix Uteri</td>
<td>2</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Corpus Uteri</td>
<td>10</td>
<td>0</td>
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<tr>
<td>Ovary</td>
<td>8</td>
<td>0</td>
<td>8</td>
</tr>
<tr>
<td>Prostate Gland</td>
<td>40</td>
<td>40</td>
<td>0</td>
</tr>
<tr>
<td>Testis</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Kidney</td>
<td>17</td>
<td>11</td>
<td>6</td>
</tr>
<tr>
<td>Kidney, Renal Pelvis</td>
<td>4</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Urinary Bladder</td>
<td>25</td>
<td>21</td>
<td>4</td>
</tr>
<tr>
<td>Brain</td>
<td>4</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Thyroid Gland</td>
<td>16</td>
<td>7</td>
<td>9</td>
</tr>
<tr>
<td>Lymph Nodes</td>
<td>27</td>
<td>14</td>
<td>13</td>
</tr>
<tr>
<td>Unk Primary</td>
<td>14</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td>Overall Total Cases</td>
<td>539</td>
<td>259</td>
<td>280</td>
</tr>
</tbody>
</table>
BREAST CANCER

Breast cancer is the most-common non-skin cancer in the United States and the second-leading cause of cancer-related death in American women. Women can help detect breast cancer in its earliest, most-treatable stages by following three steps:

1. Get a yearly mammogram beginning at age 40 and continuing for as long as they are in good health.
2. Have a clinical breast exam every three years in their 20s and 30s, and every year from age 40 on.
3. Perform a monthly breast self-exam, and report any breast changes to their health care provider.

Symptoms may include:
- a change in how the breast or nipple feels
- a lump or thickening in or near the breast or in the underarm area
- nipple tenderness
- a change in how the breast or nipple looks
- a change in the size or shape of the breast
- a nipple turned inward into the breast
- scaly, red or swollen skin on the breast, areola or nipple that may have ridges or pitting so that it looks like the skin of an orange
- fluid discharge from the nipple

LUNG CANCER

More people in the United States die each year from lung cancer than from colon, breast and prostate cancers combined. Cigarette smoking is the leading cause of the disease, however, genetic and environmental factors also may play a role. While early lung cancer often does not cause symptoms, the conditions listed below could indicate cancer or another serious health problem. Tell your doctor if you experience:
- a cough that gets worse or does not go away
- breathing trouble, such as shortness of breath
- constant chest pain
- coughing up blood
- a hoarse voice
- frequent lung infections, such as pneumonia
- feeling very tired all the time
- weight loss with no known cause

PROSTATE CANCER

Prostate cancer is the second-leading cause of cancer death for men in the United States. If detected early, however, minimally invasive options usually can treat the cancer and restore body function. Early prostate cancer typically causes no symptoms. To help protect their prostate health, men should follow three steps:

1. Schedule an annual physical exam with a health care provider.
2. At age 40 and older, ask their doctors about the benefits and risks of having a prostate-specific antigen (PSA) blood test and digital rectal exam (DRE) to screen for prostate cancer.
3. Watch for potential warning signs, including:
- difficulty urinating
- decreased force in the stream of urine
- blood in the urine
- blood in the semen
- swelling in the legs
- discomfort in the pelvic area
- bone pain

Sources: American Cancer Society 2014 Facts and Figures, Blount Memorial Cancer Registry
1 Information from the 2014 Blount Memorial Tumor Registry Data.
2 Blount Memorial’s prostate cancer incidence may be lower due to many patients being diagnosed and treated in physician offices.
COLORECTAL CANCER

Colorectal cancer is the third-leading cause of cancer death in both men and women in the United States, yet it is preventable and highly treatable when detected early. Routine screenings combined with healthy eating and lifestyle habits help save lives. Beginning at age 50, both men and women should get screened for colorectal cancers following one of these testing schedules:*  
- Flexible sigmoidoscopy every five years  
- Colonoscopy every 10 years  
- Double-contrast barium enema every five years  
- CT colonography (virtual colonoscopy) every five years

Symptoms may include:  
- having diarrhea or constipation  
- feeling that your bowel does not empty completely  
- finding blood (either bright red or very dark) in your stool  
- finding your stools are narrower than usual  
- frequently having gas pains or cramps, or feeling full or bloated  
- losing weight with no known reason  
- feeling very tired all the time  
- having nausea or vomiting

* Your physician may recommend earlier and/or more frequent screenings.

LYMPHOMA

Lymphoma is cancer that begins in cells of the immune system, which is the mechanism that fights infections and other diseases in the body. There are two basic categories of lymphomas: Hodgkin lymphoma (also known as Hodgkin’s disease) and non-Hodgkin lymphoma, encompassing a large group of cancers.

Hodgkin lymphoma is considered one of the most-curable forms of cancer, especially if it is diagnosed and treated early. It is most common among people ages 15-35 and 50-70. Non-Hodgkin lymphoma can be slow-growing or fast-growing, and is much more common than Hodgkin lymphoma. In the United States, non-Hodgkin lymphoma is the sixth most-common cancer among males and the fifth most-common cancer among females. Slow-growing lymphomas usually cause few symptoms while fast-growing lymphomas can spread quickly and cause severe symptoms. Warning signs of lymphoma include:  
- swollen, painless lymph nodes in the neck, armpits or groin  
- unexplained weight loss  
- fever  
- soaking night sweats  
- coughing, trouble breathing or chest pain  
- weakness and tiredness that don’t go away  
- pain, swelling or a feeling of fullness in the abdomen
PATIENT AND FAMILY RESOURCES

Numbers to Know

**Blount Memorial Cancer Center**
- Information Desk: 865-980-5534
- Patient Support Services: 865-980-5534
- Perfect Fit: 865-980-5077
- Radiation Oncology Department: 865-980-5534

**Blount Memorial Total Rehabilitation**
- Appointments and Referrals: 865-238-6118
- MEND *(including lymphedema and wound care)*: 865-980-5044

**Blount Memorial Hospital**
- Main Number: 865-983-7211
  - 800-448-0219
- Business Office: 865-977-5599
- Chaplain: 865-977-5574
- Counseling and CONCERN: 865-984-4223
- Gift Shop: 865-977-5539
- Home Equipment Services: 865-980-5300
- Home Services: 865-981-2160 or 2161
- Hospice and Palliative Care: 865-977-5702
- Transitional Care Center: 865-273-8300

For more information or resources, visit our website [www.blountmemorial.org](http://www.blountmemorial.org).
The Blount Memorial Auxiliary is comprised of approximately 280 active volunteers who, in the last year donated more than 63,000 combined hours to Blount Memorial Hospital. In addition to its time, the organization performs other tasks such as providing extra services to patients, promoting community relations and providing funds.

WANT TO VOLUNTEER?

For more information about the Blount Memorial Auxiliary, visit Blount Memorial volunteer services located on the hospital’s service level, Monday-Friday from 8 a.m.-4 p.m., or call 865-977-5609.