BUILDING On STRENGTH
2013 ONCOLOGY ANNUAL REPORT

MULTIDISCIPLINARY CLINICAL TEAMS + PATIENT NAVIGATION
+ GENETIC COUNSELING + CLINICAL RESEARCH + CLINICAL
EDUCATION + INTEGRATIVE MEDICINE + PATIENT SUPPORT
AND EDUCATION + INNOVATIVE CLINICAL TRIALS CENTER
+ SURVIVOR CELEBRATIONS + COMMUNITY OUTREACH
Baylor Carrollton Leadership: Building on Strength

Cancer Committee Membership

Baylor Charles A. Sammons Cancer Center

Programs of Focus

NICHE
Magneti0 Rath
Oncology Nursing Forum

Patient Support

Community Events/Outreach
Patient Spotlight: Tiffany Chambers
American Cancer Society

Continent of Care

Breast Imaging Services
Achievements
Patient Navigation

Cancer Registry
Summary of 2012 Cancer Registry Data

Cancer Conferences

Contact Information

Area Map

Cancer research studies on the campus of Baylor Medical Center at Carrollton are conducted through Baylor Research Institute, Texas Oncology, and US Oncology. Each reviews, approves, and conducts clinical trials independently. Their clinical trials are listed together in this publication for the convenience of patients and physicians.

Physicians are members of the medical staff of one of Baylor Health Care System’s subsidiary, central or affiliated medical centers and are neither employees nor agents of those medical centers, Baylor Medical Center at Carrollton or Baylor Health Care System.

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Baylor Medical Center at Carrollton has been recognized nationally as a top performer in quality by The Joint Commission for the second consecutive year. There have been multiple quality improvement initiatives implemented throughout the facility including advancements in the delivery of cancer care. Baylor Carrollton will apply for Commission on Cancer Community Cancer Program accreditation in 2014. The oncology program will continue further expansion of hospital services in 2014, including the addition of a cancer navigator and the growth of the palliative care program. In addition, VITAS Innovative Hospice Care will open an inpatient hospital unit on the Baylor Carrollton campus.

During 2013, Baylor Carrollton added a number of physicians to the medical staff, including medical oncologists and surgeons specializing in breast, colorectal, and general cancer surgery, to support the oncology program.

In 2013, Baylor Carrollton’s community outreach efforts gained momentum. The Baylor Carrollton oncology staff participated in multiple community events that offered individualized cancer screening programs for men and women. A low-dose CT screening exam for lung cancer was added to Baylor Carrollton’s offerings and a cancer resource center was established where patients and families can find comprehensive cancer information.

Baylor Carrollton, as a member of Baylor Health Care System, has developed strong ties to the Baylor Charles A. Sammons Cancer Center Network to provide a complete continuum of care encompassing additional research options for cancer patients managed within the health care system. Once Commission on Cancer accreditation is achieved, Baylor Carrollton will be able to proudly use the Baylor Sammons Cancer Center name to distinguish the oncology program.

Sincerely,

Mike Sanborn
Tom James, MD
President, Baylor Medical Center at Carrollton
Cancer Committee Chairman

CANCER COMMITTEE MEMBERS

Physician Members
Tom James, MD, chair, pathologist
(cancer liaison physician, cancer conference coordinator)
Cory Morgan, MD, diagnostic radiologist
Anil Bhogaraju, MD, medical oncologist
Enrique Perez, MD, medical oncologist
Zainab Bahr, MD, radiation oncologist
Bryan Brewer, MD, surgeon

Non-physician Members
Mike Sanborn, president, Baylor Medical Center at Carrollton
Susan Watson, administration
Barbara Vaughan, RN, MSN, CCM, nursing
Diana Davis, RN, nursing
Laura Sculino, CTR, cancer registry, QC cancer registry coordinator

Anita Hunt, RN, MS, CHC, CPHQ, performance improvement, quality improvement coordinator
Stacie McClinton, MS, LSW, ACM, case management, psychosocial coordinator
Connie Rill, LMSW, ACM, case management
David Frenner, PT, rehabilitation
Sidney Phillips, PharmD, FPh, pharmacy
Sally Dykes, marketing, community outreach coordinator
Pam Green, APRN, MSN, FNP-BC, chaplain/palliative care, palliative care coordinator
Cory Morgan, MD, breast imaging center
Tracy Messing, research
Cheryl Sampson, research coordinator
Baylor Medical Center at Carrollton continued to develop its cancer programs and services in 2013. The oncology team worked diligently toward achieving accreditation by the Commission on Cancer (CoC) of the American College of Surgeons. This accreditation indicates that a hospital’s cancer program provides quality care when measured against national standards and that the hospital continuously strives to address each patient’s needs while improving outcomes. The CoC accreditation process spans at least a two-year period. Baylor Carrollton plans to formally submit its application for accreditation in 2014. Once CoC accreditation is received, Baylor Carrollton will have met one of the high standards of participation required by the Baylor Charles A. Sammons Cancer Center network. The network already provides Baylor Carrollton with access to its vast resources of oncology expertise. As a result of this close working relationship, Baylor Carrollton can continue to develop its oncology programs and services at the community level while using the specialized support services offered throughout the Baylor Charles A. Sammons Cancer Center network. The network provides oncology patients at Baylor Carrollton with access to cancer clinical trials, genetic screening experts, patient navigation tools and personnel, support and educational programs and oncology specialties like blood and marrow transplant.
In 2013, Baylor Carrollton laid the groundwork for becoming a NICHE (Nurses Improving Care for Healthsystem Elders) facility. NICHE is a national program designed to improve care for older hospitalized adults. It was created in recognition of the aging of hospital patients, the ongoing national shortage of nurses trained in gerontology and the need for hospitals to contain costs while improving patients’ health care experience. By joining NICHE, Baylor Carrollton expects to significantly advance its understanding of the needs of older patients, train nurses to meet those needs and launch several new protocols to prevent health care problems that are common in this population. Through this program, Baylor Carrollton will undertake a number of steps to recognize and prevent or treat these health problems.

American Nurses Credentialing Center’s Pathway to Excellence® Designation and Magnet® Journey

In 2013, Baylor began working toward achieving designation from the American Nurses Credentialing Center’s Pathway to Excellence. The prestigious designation recognizes health care organizations that have the essential elements of an ideal nursing practice environment. To obtain designation, Baylor Carrollton must demonstrate that it has integrated 12 practice standards into its operating policies, procedures and management structure. Data was gathered to complete a written application that will be submitted in 2014. The Pathway to Excellence designation will be the first step in Baylor Carrollton’s journey to Magnet® status, also conferred by the American Nurses Credentialing Center.

Oncology Nursing Forum

In 2013, Baylor Carrollton participated in the Baylor Health Care System oncology nursing forum. The forum was created to provide oncology clinicians throughout the system with a way to discuss shared concerns/issues that affect the safety and outcomes of their oncology patient population. Diana Davis, RN, represented Baylor Carrollton at forum meetings.
Caring for cancer patients and their families in Carrollton and surrounding communities requires comprehensive planning to provide the diagnostic and treatment capabilities for the full spectrum of care. This means reaching beyond the hospital’s doors with information, education and support to enable cancer patients to take control of their own health in a preventive and meaningful way. One of the ways Baylor Carrollton fulfills this role is through community health events and outreach activities. In 2013, the hospital hosted several awareness events and screenings that included cancer information. The following list includes just a few of the opportunities where Baylor Carrollton interacted with the community in an effort to promote healthy living and disease prevention.

- Sponsored a team for the American Cancer Society’s Relay for Life
- Skin cancer screening for the city of Farmers Branch employees
- For Women For Life™ event
- It’s a Guy Thing event
- Community health screenings
- Spa mammo days for women in the community

Baylor Carrollton finalized plans in 2013 for opening a Cancer Resource Center in 2014. The center will be located in the hospital and will provide meeting space for a variety of cancer support groups.
PATIENT SUPPORT +

PATIENT SPOTLIGHT: SUE WILSON

Sue Wilson is busy. Busy working nights as a customer service rep. Busy socializing with her friends. Busy cooking and pursuing her other hobbies. So, when she began to feel tired and run down and noticed her feet were swollen, she decided to see her primary care physician. Her blood work revealed a low white count and hemoglobin. Her PCP told her she had leukemia and told her to see her oncologist for specific diagnosis and treatment.

As a breast cancer survivor of several years, she already had a relationship with an oncologist. The oncologist ordered a bone marrow biopsy to determine the type of leukemia Sue had. As she waited for the results of the biopsy, she became ill and sought treatment at the Baylor Carrollton emergency department. After reviewing her medical history, the emergency room physician admitted her to the hospital. While in the hospital, Sue learned she had acute promyelocytic leukemia. Her oncologist told her this was a rare type of leukemia and usually was very responsive to treatment.

While the news was a set-back for Sue, she took solace in her oncologist’s positive approach to her treatment and prognosis. He told her that 30 years ago there was no treatment for this type of leukemia. Now, thanks to a combination of two drugs, the disease can be put into complete remission.

She spent a total of 43 days as a patient at Baylor Carrollton. “When your hemoglobin, white cells and platelets are so low, you can bleed easily,” explains Wilson. “My low counts were stubborn and refused to come up, so they gave me lots of blood transfusions. Thank God for blood donors! I began chemotherapy right away. Because of complications from treatment and the fear that I might hemorrhage if I returned home, Baylor Carrollton basically became my second home for about a month and one-half.”

Wilson says the nurses also went out of their way to make her stay as comfortable as possible. “The chemotherapy caused my hair to fall out,” says Wilson. “It was coming out in clumps and really bothering me. It was even falling into my food. I asked if someone would cut my hair and one nurse accommodated my wish, cutting my long hair and making me much more comfortable.

“Perhaps her best memory of her time in the hospital was early in her hospital stay.” Shortly after I was diagnosed, I was having a really tough time,” admits Wilson. “I couldn’t sleep one night and I called the nurse to bring some medications my physician had prescribed. The nurses could see I was upset. It was especially hard because my condition required visitors to wear masks and I couldn’t get hugs and as possible. “The chemotherapy caused my hair to fall out,” says Wilson. “It was coming out in clumps and really bothering me. It was even falling into my food. I asked if someone would cut my hair and one nurse accommodated my wish, cutting my long hair and making me much more comfortable.

“I’m so thankful for the wonderful compassionate care I received from my physicians and everyone at Baylor Carrollton.”

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The American Cancer Society has been an incredible resource to Baylor Health Care System hospitals, including Baylor Carrollton. American Cancer Society representatives collaborated with oncology staff to deliver support, and served on the cancer committee to help provide resources to fulfill the Commission on Cancer standards for cancer care.

In 2013, all newly diagnosed patients received a Personal Health Manager kit from the Society which provided personalized information on the patient’s specific cancer type, resource information and tools that helped patients and caregivers keep appointments, monitor test results and keep prescriptions organized throughout treatment. American Cancer Society patient navigators provided free and confidential support and guidance to all patients and their caregivers during their cancer journey.

As the official sponsor of birthdays, the American Cancer Society knows how important each and every birthday can be. In May of 2013, the Society celebrated its 100th birthday – one-hundred years of saving lives and twenty years collaborating with Baylor hospitals. The Society saves lives by helping individuals stay well through prevention and early detection, helping them get well by being there during and after a diagnosis, finding cures through groundbreaking discovery, and fighting back through public policy. In the last two decades, the Society has contributed to a 20% decline in cancer death rates in the U.S. Last year, the Society and Baylor hospitals reached more than 2,100 patients with more than 6,000 programs and services, that’s one in four cancer patients treated at Baylor hospitals.

The American Cancer Society is the only organization offering cancer patients and their families around-the-clock guidance and support through its toll-free line, 1-800-227-2345 and at www.cancer.org.
Baylor Carrollton served area women’s breast health needs in 2013 by providing breast imaging services at two locations. Baylor Diagnostic Imaging Center at Flower Mound provided mammography services. Baylor Diagnostic Imaging Center at Carrollton provided mammography, stereotactic breast biopsy, breast ultrasound and ultrasound-guided breast biopsy services. Both locations are accredited by the American College of Radiology. In 2013, the two facilities combined performed:

- 7671 screening mammograms
- 1712 diagnostic mammograms
- 20,709 total procedures.

Baylor Carrollton’s focus of providing quality cancer services to the community are rooted in the hospital’s commitment to quality improvement and clinical excellence. In 2012, the hospital was named a Top Performer on Key Quality Measures® by The Joint Commission, the leading accrediting body of health care organizations in America. The honor recognized Baylor Carrollton’s performance in using evidence-based clinical processes that have been shown to improve care for certain conditions. The 2012 designation recognized the hospital’s performance in heart attack, heart failure, pneumonia and surgical care. The hospital’s cancer programs and services benefited from this dedication to excellence in 2013.
As Baylor Carrollton’s oncology program continues to evolve and mature, plans are in place to add a new member to the cancer team – a patient navigator. Until the new staff member is in place, the hospital’s oncology team and other health care professionals provide support and guidance to cancer patients and their families. Every cancer patient admitted to the hospital is evaluated for his or her psycho-social needs via a social work consult. Based on the results of the evaluation, patients are referred to the appropriate hospital or community resources to meet their identified needs. These needs include: nutritional care, psychological issues, social issues, rehabilitation services, chaplain visits, transitional care, palliative care and referral to the American Cancer Society for community resources. A report is presented at the hospital’s Cancer Committee regular meetings that details the number of social work referrals, the percentage of cancer patients screened for distress, and the actions taken as a result of the distress screening findings. In addition, a community resource guide is provided to inpatient and outpatient cancer patients and their families. The guide provides information about available and appropriate medical, dental, financial, psychological and disease-specific resources.
### SUMMARY of 2012: CANCER REGISTRY DATA

#### Estimated Number of New Cancer Cases by Sex, US, 2013/State of Texas, 2013 versus Actual Number of Analytic Cancer Cases by Sex, Baylor Health Care System, 2012

<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>prostate</td>
<td>238,590</td>
<td>17,379 (26%)</td>
<td>11,808 (14%)</td>
<td>6 (17%)</td>
</tr>
<tr>
<td>lung &amp; bronchus</td>
<td>118,080</td>
<td>9,034 (14%)</td>
<td>6,058 (10%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>colon &amp; rectum</td>
<td>73,680</td>
<td>5,681 (9%)</td>
<td>3,851 (5%)</td>
<td>3 (0%)</td>
</tr>
<tr>
<td>urinary bladder</td>
<td>54,610</td>
<td>3,521 (6%)</td>
<td>3,520 (5%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>melanoma of the skin</td>
<td>45,060</td>
<td>2,492 (5%)</td>
<td>2,492 (5%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>kidney &amp; renal pelvis</td>
<td>40,430</td>
<td>2,394 (5%)</td>
<td>2,394 (4%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>non-Hodgkin lymphoma</td>
<td>29,620</td>
<td>1,643 (3%)</td>
<td>1,643 (3%)</td>
<td>1 (3%)</td>
</tr>
<tr>
<td>oral cavity &amp; pharynx</td>
<td>27,880</td>
<td>1,470 (3%)</td>
<td>1,470 (3%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>leukemia</td>
<td>22,740</td>
<td>1,440 (3%)</td>
<td>1,440 (2%)</td>
<td>1 (3%)</td>
</tr>
<tr>
<td>all sites</td>
<td>854,790</td>
<td>58,140 (100%)</td>
<td>62,740 (100%)</td>
<td>35 (100%)</td>
</tr>
</tbody>
</table>

**Source:** *2013, American Cancer Society, Inc., Surveillance Research*

#### Estimated Number of New Cancer Cases by Sex, US, 2013/State of Texas, 2013 versus Actual Number of Analytic Cancer Cases by Sex, Baylor Health Care System, 2012

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>breast</td>
<td>232,340</td>
<td>17,002 (31%)</td>
<td>13,002 (22%)</td>
<td>22 (25%)</td>
</tr>
<tr>
<td>lung &amp; bronchus</td>
<td>110,110</td>
<td>8,570 (12%)</td>
<td>7,570 (12%)</td>
<td>12 (13%)</td>
</tr>
<tr>
<td>colon &amp; rectum</td>
<td>68,140</td>
<td>4,975 (9%)</td>
<td>4,975 (9%)</td>
<td>6 (10%)</td>
</tr>
<tr>
<td>uterine corpus</td>
<td>49,980</td>
<td>2,663 (5%)</td>
<td>2,663 (5%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>thyroid</td>
<td>45,310</td>
<td>2,076 (4%)</td>
<td>2,076 (4%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>non-Hodgkin lymphoma</td>
<td>32,140</td>
<td>2,111 (4%)</td>
<td>2,111 (4%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>melanoma of the skin</td>
<td>31,630</td>
<td>1,978 (4%)</td>
<td>1,978 (4%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>kidney &amp; renal pelvis</td>
<td>24,720</td>
<td>1,775 (3%)</td>
<td>1,775 (3%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>pancreas</td>
<td>22,480</td>
<td>1,205 (2%)</td>
<td>1,205 (2%)</td>
<td>1 (2%)</td>
</tr>
<tr>
<td>ovary</td>
<td>22,240</td>
<td>1,028 (3%)</td>
<td>1,028 (3%)</td>
<td>1 (2%)</td>
</tr>
<tr>
<td>all sites</td>
<td>805,500</td>
<td>54,732 (100%)</td>
<td>54,732 (100%)</td>
<td>62 (100%)</td>
</tr>
</tbody>
</table>

**Source:** *2013, American Cancer Society, Inc., Surveillance Research*

**Source:** *Surveillance, Epidemiology, and End Results Branch, Texas Department of State Health Services, April 2013*

**Source:** *Baylor Health Care System Cancer Registry, Electronic Registry System*
## Baylor Medical Center at Carrollton: Analytic/Non-Analytic Cases Diagnosed 2012

<table>
<thead>
<tr>
<th>Primary Site</th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
<th>In Situ</th>
<th>Local</th>
<th>Regional</th>
<th>Distant</th>
<th>NA/Unknown</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>All Sites</strong></td>
<td>215</td>
<td>96</td>
<td>123</td>
<td>92</td>
<td>127</td>
<td>6</td>
<td>22</td>
<td>27</td>
</tr>
</tbody>
</table>

### Oral Cavity
- Total: 4 | 2 | 2 | 2 | 0 | 0 | 0 | 0 | 0 | 2 | 2

### Other/Ill-Defined
- Total: 73 | 20 | 11 | 12 | 11 | 12 | 16 | 1 | 2 | 9 | 0

### Analytic/Non-Analytic

#### Male
- Oral Cavity: 2 | 2 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 2
- Other/Ill-Defined: 14 | 5 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 5 | 9

#### Female
- Oral Cavity: 2 | 2 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 2
- Other/Ill-Defined: 6 | 4 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 2

### Strength Building
- Oral Cavity: 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0
- Other/Ill-Defined: 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0

### Data Source: Electronic Registry System, Baylor Health Care System Cancer Registry

This report INCLUDES CA in situ cervix cases, squamous and basal cell skin cases, and intrapathological neoplasia cases phoma/myeloma category.
**ONCOLOGY QUALITY METRICS 2012**

<table>
<thead>
<tr>
<th>Cancer Type</th>
<th>Performance Metric</th>
<th>2012 Target</th>
<th>NCDB, CoC State of Texas Performance Rate</th>
<th>NCDB, CoC Census Region Performance Rate</th>
<th>All CoC Programs Performance Rate</th>
<th>Baylor Medical Center at Carrollton Performance Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Breast Cancer</strong></td>
<td>Post Breast Conserving Surgery Radiation:</td>
<td>Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 and receiving breast conserving surgery for breast cancer (Accountability Measure)</td>
<td>90%</td>
<td>90%</td>
<td>90.6%</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Adjuvant Chemotherapy: Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cN0M0, or Stage II or III hormone receptor negative breast cancer (Accountability Measure)</td>
<td>90%</td>
<td>90%</td>
<td>90%</td>
<td>92.5%</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Adjuvant Hormonal Therapy: Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1cN0M0, or Stage II or III hormone receptor positive breast cancer (Accountability Measure)</td>
<td>90%</td>
<td>90%</td>
<td>90.3%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Colorectal Cancer</strong></td>
<td>Adjuvant Chemotherapy:</td>
<td>Adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis to patients under age 80 with AJCC III (lymph node positive) colon cancer (Accountability Measure)</td>
<td>90%</td>
<td>90%</td>
<td>90%</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Surgical Resection Includes at Least 12 Lymph Nodes:</td>
<td>At least 12 regional lymph nodes are removed and pathologically exam- ined for resected colon cancer (Surveillance Measure)</td>
<td>90%</td>
<td>90%</td>
<td>93.7%</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Rectal Cancer</strong></td>
<td>Radiation Therapy for Rectal Cancer:</td>
<td>Radiation therapy is considered or adminis- tered within 6 months (180 days) of diagnosis for patients under the age of 80 with clinical or pathological AJCC T3N0M0 or Stage II receiving surgical resection of rectal cancer (Surveillance Measure)</td>
<td>90%</td>
<td>90%</td>
<td>91.8%</td>
<td>NA</td>
</tr>
</tbody>
</table>

*Source: Baylor Health Care System Cancer Registry/Baylor Carrollton*
Cancer conferences are an essential forum to provide multi-disciplinary, consultative services for oncology patients, as well as to offer education to physicians and allied health professionals.

Baylor Carrollton held a monthly general cancer conference in 2013. The tumor conference reviewed 47 prospective cases which represented 48.9% of the analytic load.

The top five cancer sites presented included breast, colorectal, lung, bladder and lymphomas.

### CONTACT INFORMATION

**Baylor Carrollton Support Services**
- Baylor Carrollton Palliative Care: 972-394-3507
- Oncology Patient Referral: 214-820-2881
- Oncology Support Services: 214-820-3287
- A. Webb Roberts Center for Continuing Education: 972-394-1080
- Research: 972-394-2277

**Diagnosis Imaging**
- Women’s Imaging Center at Carrollton: 972-394-3067
- Diagnostic Imaging Center at Carrollton: 972-394-1080

**Research**
- Baylor Research Institute: 214-820-3287
- NHCS Support Services: 214-820-3287

**Baylor Carrollton Support Services**
- Baylor Carrollton Palliative Care: 972-394-3507
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**Research**
- Baylor Research Institute: 214-820-3287
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BEATING CANCER