



2015 Annual Report

Cleveland Clinic Cancer Center at Hillcrest Hospital

Accredited as a Comprehensive Cancer Center by the Commission on Cancer, an affiliate of the American College of Surgeons.

2015 Chairman's Report/Cancer Liaison Physician



The Cancer Program at Hillcrest Hospital has been accredited by the American College of Surgeons Commission on Cancer since 1972.

The Cleveland Clinic Cancer Center at Hillcrest Hospital continues to maintain resources to provide quality and comprehensive cancer care to our patients.

The Cancer Committee acts as the governing body for the oncology program and meets every other month to review the administrative responsibilities related to the management of our program. In addition, several ad hoc committees meet to discuss and report on quality improvements suggested by the Cancer Committee.

A Quality Improvement for 2015 was the establishment of an outpatient palliative medicine clinic staffed by boardcertified physicians in Palliative Medicine.

The oncology program expanded services with the addition of Stephanie Ricci, MD.

Dr. Ricci is board-certified in Gynecologic Oncology.

Tumor conferences, which provide a multidisciplinary approach to the care of patients and education to staff, continued throughout 2015. These patient case presentations provide a forum and opportunity for radiologists, surgeons, pathologists, oncologists and other medical specialties to provide consultative services by discussing staging with diagnostic and treatment options for cancer patients, thereby improving the quality of care for the patients. 160 total patients were presented at the tumor conferences during 2015.

The Cancer Committee continued to evaluate and increase physician use of stage and evidence-based national treatment guidelines in treatment planning for our cancer patients. The Hillcrest Hospital Cancer Center strives to continue providing comprehensive, quality cancer care to our patients through the integration of new supportive patient programs and multidisciplinary services to enhance patient care and experience.

Collaboration with the American Cancer Society (ACS) and The Gathering Place on community outreach activities continued throughout 2015 focusing on supportive services, prevention and early detection. Starting in late 2015, survivorship plans including treatment summary and recommendations were shared with the patients. In January and February 2015, Diana Simsic, LISW-S, OSW-C hosted Survivorship classes at the Cancer Center at Hillcrest Hospital.

The continued generous support of Executive Caterers of Landerhaven, allowed the Monthly High Tea Program for oncology patients for the fifth year. This weekly event with trained hospital volunteers provides various comforting teas and pastries to the oncology patients and their families.

Education for the oncology team continued throughout 2015. The weekly oncology grand round video conferences continued to be offered for physicians and staff. The cancer program held an educational event on June 11, 2015. The title of the presentation was "Current Best Practice in the Management of Castrate-Resistant Prostate Cancer" by Edouard Trabulsi, M.D., Associate Professor of Urology, Kimmel Cancer Center, Thomas Jefferson University,

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Chairman's Report

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Philadelphia, PA. Online educational webinars were provided throughout the year.

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Henry Blair, MD Co-Director, Cleveland Clinic Cancer Center at Hillcrest Hospital Chairman, Cancer Committee Cancer Liaison Physician

New Staff



Stephanie Ricci, MD

Dr. Ricci graduated from the University of Connecticut School of Medicine Farmington, CT. She completed her residency at the University

of Connecticut School of Medicine in Farmington, CT and her fellowship at Johns Hopkins Hospital in Baltimore, MD.

Special Amenities

The Cleveland Clinic Cancer Center at Hillcrest Hospital provides a certified Cancer Resource Center for the educational support to our cancer patients, their family members and caregivers. The Cancer Resource Center offers the most up-to-date cancer information, cancer programs and services, as well as referrals to community resources.

The Department of Medical Oncology in conjunction with the Pharmacy Department provides one on one chemotherapy education for patients undergoing chemotherapy treatment. This service provides an opportunity for patients to learn more about their treatment and any potential side effects. This service has proved to be a very valuable resource for our patients.

Patients and physicians have access to an electronic medical record system. This allows for streamlined communication between providers, immediate access to patient resources through a highly secure internal network, efficient coordination of care between multiple sites and providers. Authorized physicians can access a patient's medical record, check medications and monitor quality data at all times, thereby improving the care of our patients. Patients also have access to their medical record through the patient portal, MyChart. MyChart is a secure, online tool that connects patients to personalized health information from the privacy of their homes at any time. Via this portal, patients can request appointments, manage prescription renewals, view a health summary, including test results released by their physician. Additionally, patients receive important health reminders and health questionnaires to support health management.

Cancer Center Patient Financial Assistance

The Cancer Center continues to provide financial assistance services to our patients, proactively obtaining prior authorization and pre-certification for treatments. Additionally, our finance team manages drug replacement and co-pay assistance opportunities for our patients. Furthermore, through Community Outreach and fundraising events, the Cancer Center has established a fund to address patient's cost of living and medication assistance needs while undergoing treatment. For more information on this resource, please ask to speak with a Social Worker during your visit.



When cancer is the diagnosis...

Confidence and hope come from knowing that advanced medical treatment is being provided by highly skilled and compassionate professionals. That's why so many people choose the Cleveland Clinic Cancer Center at Hillcrest Hospital.

Cancer Center personnel consists of Cleveland Clinic physicians, certified oncology nurses, advance practice nurses, pharmacists, radiation therapists and other professionals.

Our commitment to providing high quality compassionate care from diagnosis, to treatment, and through survivorship is indicated by our over 30 year successful, uninterrupted accreditation by the American College of Surgeons Commission on Cancer.

Prevention

A healthy diet and lifestyle can reduce the chance of developing some forms of cancer. Cleveland Clinic provides a series of programs that can help:

• **Tobacco Treatment Clinic** – Cleveland Clinic offers assistance to cancer patients who want to quit smoking and improve their health. To contact the treatment program call the Cancer Answer Line at 866.223.8100.

- Screening Services Community programs and clinical services for breast, skin, and colorectal cancers.
- Wellness Seminars Featured topics cover a range of controllable risk factors and lifestyle changes, such as nutrition, exercise and environment.

Early Detection and Diagnosis

Hillcrest Hospital Cancer Center offers advanced technology for early and accurate diagnosis including:

- CT Scan
- PET/CT Scan
- Ambient MRI (Magnetic Resonance Imaging)
- Nuclear of Isotope (bone) Scan
- Digital Mammography
- Colonoscopy

Treatment

Cleveland Clinic medical, radiation, gynecologic (GYN) and urologic oncologists work in partnership with surgical specialists to provide patients with the highest level of comprehensive care. A superior team of health professionals



support physicians in the coordination of patient care. When a hospital stay is required, the Hillcrest inpatient oncology unit is dedicated to the unique needs of cancer and blood disorder patients. All patients receive individual consultations with their oncologist and other medical staff to ensure that they understand their individualized treatment plans.

Surgery

Surgery was the first form of cancer treatment and continues to be a vital part of diagnosing and treating cancer. Surgeons renowned for their training and skills utilize clinical advances in non-invasive and invasive surgical techniques to improve patient outcomes. For many cancers that have not spread to other body parts, surgery is the most likely possibility for a cure.

- Hillcrest Hospital surgical oncologists specialize in GYN, breast and urological cancers.
- Hillcrest Hospital is the only community hospital on the east side of Cleveland to offer robotic surgery for prostate and GYN cancers. Robotic surgery offers the benefits of smaller incisions, a shorter hospital stay and a faster recovery.

Medical Oncology and Hematology

Infusion and chemotherapy services are provided under the direct supervision of medical oncologists and administered by oncology certified nurses.

- Each patient undergoing active chemotherapy is offered an individualized consultation with a clinical pharmacist or clinical educator. This allows the patient and family members the opportunity to fully understand the administration of a chemotherapy regimen and common side effects of their treatment.
- Individual treatment areas feature reclining chairs and televisions for personal privacy and comfort.
- Hematology services for blood diseases are also offered.

Radiation Oncology

More than half of all cancer patients will require radiation therapy during the course of their illness. Hillcrest Hospital's Radiation Oncology Department is staffed by Cleveland Clinic physicians, nurses, physicists, medical dosimetrists, radiation therapists who collaborate to create a plan for radiation therapy treatments. The first step to prepare a course of radiation therapy is the simulation, where we use a Philip's Brilliance CT simulator which can image the area to be treated in 3D or 4D setting. The result is the ability to spare normal tissue.

Radiation therapy can be delivered via external (teletherapy) or internal (brachytherapy) route. Brachytherapy can be delivered with a low dose rate (LDR) or high dose rate (HDR). Some patients with low to moderate risk prostate cancer are eligible for LDR brachytherapy with a permanent placement of radioactive seeds into the prostate gland. Some patients with breast, cervix and uterus cancer are eligible for HDR brachytherapy with a temporary implant in the tumor area. Image-guided radiation therapy (IGRT) is a method to deliver highly concentrated external beam radiation therapy using intensity-modulated radiation therapy (IMRT) with pretreatment imaging with the goal of targeting the tumor while sparing normal tissue and reducing side effects. Stereotactic body radiation therapy (SBRT) is a method to deliver highly concentrated external beam radiation therapy in considerably less time than IGRT.

For breast cancer patients considering a lumpectomy, partial accelerated breast radiation therapy procedure involves placing a HDR applicator in the tumor cavity and requires considerably less time to complete than traditional external radiation therapy treatments with minimal exposure to healthy tissue. This has been available at Hillcrest Hospital since 2004.

In July 2015, a project began to add a technologically advanced linear accelerator to the department offering IGRT and SBRT. To ensure the best possible patient care, we continually upgrade our record and verify system, brachytherapy equipment, and treatment planning and immobilization devices. The continued growth in our technologies has allowed Hillcrest to remain one of the most advanced community based Radiation Oncology departments on the east side of Cleveland.

Gynecologic Oncology

Gynecologic (GYN) oncologists undergo special training and certification in surgery, chemotherapy and GYN cancers. Advanced practice nurses and oncology certified nurses assist them on the treatment of cancers of the cervix, uterus, ovaries, fallopian tubes, vagina and vulva.

- Hillcrest Hospital has the only GYN Oncology program at a community hospital on the east side of Cleveland.
- Services include minimally invasive surgery including standard multiport, robotic and single incision laparoscopy.

• This highly specialized team of clinical professionals understands and addresses the various impacts of cancer on a woman's life including sexuality, child bearing, and emotional well-being.

Breast Oncology

Our breast surgeons offer multiple progressive surgical options in the treatment of breast cancer. Patients are offered surgical choices that include breast conservation surgery, lumpectomy/ partial mastectomy, nipple sparing mastectomy(s), total mastectomy(s) and mastectomy(s) with reconstruction. Treatment is delivered using a multidisciplinary approach that includes medical oncology, radiation oncology, genetics and plastic surgery. Guidance throughout this multidisciplinary process is done with the aid of a breast navigator. The breast navigator is key in helping to coordinate and move the patient through their entire breast cancer journey.

Urologic Oncology

Our urologists provide leading edge treatment for kidney, prostate, bladder and testicular cancers, using a multidisciplinary approach to care, as well as the latest technology. Services include robotic surgery for prostate, kidney and bladder cancer, MRI guided prostate biopsy and genetic analysis of prostate cancer biopsies.

Supportive Services

A variety of unique services at Hillcrest Hospital are designed to enhance the care of cancer patients and their families:

Clinical Research – Physicians are dedicated to providing patients innovative cancer treatment options. Hillcrest Hospital participates in numerous local and national research efforts designed to answer scientific questions and determine if promising new therapies are safe and effective. Through Cleveland Clinic's Taussig Cancer and Women's Health Institutes, patients gain access to treatments usually available only at major medical educational institutions in a community setting.

Hereditary Cancer Risk Assessment – A genetic counselor meets with individuals concerned about their family or personal history to assess their cancer risk. Genetic testing may be offered, and if necessary, screening and management strategies are implemented.

Financial Services – A financial counselor is available for uninsured or under-insured patients. A reimbursement

specialist can assist with insurance verification and precertification.

Social Services – Support groups and community resources create a support system for each patient. An oncology social worker is available to assess and support the psychosocial needs of the cancer patient. One-on-one counseling sessions are also available for patients and their family.

Cancer Resource Center – Magazines, videos and brochures on cancer information, cancer programs and services, survivorship and referrals to community resources are available in the Cancer Center.

Dietary Consultation – A registered dietitian assesses and educates patients on healthy nutrition during and after treatment.

Rehabilitation – Services include physical, occupational and speech therapy services.

Pain Management – Options are available that include medications and medical care that eliminates or reduces pain associated with symptoms related to cancer.

Tumor Registry – The tumor registry ensures that the hospital's cancer program is approved by the American College of Surgeons Commission on Cancer and is vital in providing information on the occurrence of cancer and outcomes of treatment.

Transportation – Transportation can be difficult for people who are undergoing cancer treatments. We are pleased to offer courtesy round-trip van service to those patients who qualify. Please ask your nurse or social worker for information if you are interested in this service.

Community Outreach – Hillcrest Hospital partners with local organizations such as: American Cancer Society, The Gathering Place and Speaking of Women's Health to promote cancer prevention, early detection and survivorship. Multiple collaborative events are held throughout the year to address community needs and overcome barriers focused on the most commonly diagnosed cancers in the Cleveland East side region.

Spiritual Care – Representatives from various denominations are available to meet patients' spiritual needs.

Special Conveniences – Complimentary services include free snacks, musical entertainment, high tea and more.

Music Therapy – Music therapy is the use of music by a board-certified music therapy to assist in the healing process.

It combines music and therapeutic techniques to address the needs and goals of individual patients, groups of patients, or of patients and families. Music therapists assess and provide therapy in many ways, including listening to music, playing music, and encouraging patients to join in if they are able and willing. Music therapy can help to decrease pain, suffering, and anxiety. It can also help to manage stress and promote relaxation; promote well-being; provide an opportunity for selfexpression; and promote positive coping skills.

Music therapy at Hirsch Cancer Center is offered Monday-Friday from 9am-1pm in the chemotherapy infusion suites. Environmental music therapy is offered one hour on Thursday in the radiation oncology waiting room as well as one hour on Wednesday in the medical oncology waiting room. To make a referral please contact Stephanie Morris, MT-BC by phone at 440.312.1294 or by email at morriss4@ccf.org.

Art Therapy – Art Therapy is engaging in the creation of art, with the help of an Art Therapist, to assist with both emotional and physical healing and growth. Anyone can benefit from art therapy, it does not depend upon talent or technical ability. The art therapist will discuss with you, your interests and goals for the session, and then suggest art tasks. This may include painting, simple sculpting, drawing, collage or craft work. Hillcrest Hospital Art Therapists are professionals who possess a Master's Degree in the field of Art Therapy.



Cleveland Clinic Arts & Medicine Institute is offering Art Therapy as a complimentary service during your (or your child's) stay in the hospital. You may request your nurse or other caregiver place a consult to Art Therapy. For more information, please contact Kelly Pecl-Dreamer, MA, AT, Art Therapist at Hillcrest Hospital Cancer Center at 440.312.5458 or dreamek@ccf.org



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Art Therapy can help:

Art Therapy

- Decrease pain
 Decrease anxiety
- Improve coping skills
- Provide an opportunity for self expression
 Enhance self esteem
- Promote relaxation
- Provide a sense of choice and control
- Improve attention span
 Assist with rehabilitation



Supportive Services

Genetics

Jill Polk, LGC

In collaboration with the Center for Personalized Genetic Healthcare, a Licensed Genetic Counselor provides hereditary cancer risk assessment, education, and coordination of genetic testing for patients and family members. Genetic counseling services are offered to individuals with a personal and/or family history of cancer. The majority of cancer occurs by chance, or is sporadic. However, some cancers are caused by an inherited gene mutation, or are hereditary. Identifying a hereditary predisposition to cancer allows individuals and families to personalize cancer screening guidelines, medical management and treatment options. Genetic counselors work closely with the treating physicians to provide collaborative care.

Research

Traci Stafford, RN

Jill Davis, RN

The most advanced current treatment plans include clinical trial options for patients that can assist in the development of new medications and/or cancer treatments. Cleveland Clinic Cancer Center at Hillcrest Hospital participates in research studies through Cleveland Clinic Taussig Cancer Institute. We work to provide the most advanced medical care to patients, while allowing them to receive that care in the community setting, closer to home. Hillcrest offers studies in Medical, Radiation, and GYN Oncology. Our staff of physicians, along with specially trained research nurses, are excited to offer these up and coming treatments to patients in their own community.

Social Services

Janet Greene, LISW-S, OSW-C

Diana Simsic, LISW-S, OSW-C

Hillcrest-sponsored support groups and community resources are utilized by two dedicated oncology social workers to create a support system for each cancer patient. One-on-one counseling sessions with a licensed independent social worker are available for patients and their families. The National Comprehensive Cancer Network (NCCN) distress tool is utilized in each of the outpatient oncology clinics to assess patients' level of coping with their disease. Based on this assessment, the social workers provide services to the patient.

The Cancer Center social workers are recognized by the Association of Oncology Social Work. In the 2012 Patient Centered Standards, the Commission on Cancer recognizes and recommends OSW-C. The Association of Community Cancer Centers recognizes and recommends Oncology Social Work Certification in their Cancer Program Guidelines. We are proud to recognize our social workers as oncology certified in social work.

Nutrition

Tiffany Bosiacki, RD

The registered dietician (RD), registered by the American Dietetic Association and licensed (LD) by the State of Ohio, provides nutrition therapy to help cancer patients get the nutrients needed to maintain body weight and strength, prevent body tissue from breaking down, rebuild tissue and fight infection. Consultation with a clinical dietitian is available for patients undergoing treatment and experiencing dietary challenges including loss of appetite, nausea, vomiting, difficulty swallowing, altered sense of taste, constipation, diarrhea, fatigue or significant weight loss. The goal of nutrition services is to provide reliable and accurate food and nutrition advice to help optimize nutritional health and recovery before, during and after cancer treatment.

Laboratory/Pathology

Jennifer Jeung, MD

Laboratory and pathology services provide a full range of testing for oncology patients. Routine testing is performed in the Hillcrest Hospital Laboratory, and more esoteric testing such as advanced coagulation studies, flow cytometry, cytogenetic and molecular studies are provided by Cleveland Clinic laboratories. Pathologists with expertise in hematology interpret bone marrow specimens and are available for consultation.

To provide effective reporting of surgical pathologic findings necessary to provide quality patient care, pathology reports on patients with a cancer diagnosis include the scientifically validated data elements as defined by the College of American Pathologists. Templates are utilized to incorporate the reporting of these elements.

Radiology

Leonard Kahn, MD

Cleveland Clinic Imaging Institute and its group of subspecialty radiologists at Hillcrest Hospital provide patients with the most up-to-date diagnostic resources for diagnosing and assessing tumor burden. We have the newest technologies in CT and MRI including an open Ambient[™] MRI that is available for patients with a fear of claustrophobia as well as offering calming music and lighting techniques for all patients to choose from. SPECT-CT was added in 2015, and we continue to offer PET-CT.

Pain Management

Teresa Dews, MD

Medications and nerve blocks, as well as non-drug methods such as relaxation are utilized by highly-trained specialists in an effort to minimize or control the acute, chronic and incidental pain patients with cancer may experience. The Cleveland Clinic Pain Management Center at Hillcrest Hospital offers each patient an individualized treatment plan that may include one or more of the following therapeutic strategies:

- Pharmacotherapy
- Rehabilitative therapy
- Psychologic therapy
- Neural blockade and injection therapies
- Radiofrequency ablation

Pharmacy

Nicholas Link, PharmD, BCOP

The Hillcrest Hospital Pharmacy is conveniently located with the medical oncology department. This allows the pharmacist to be easily accessible for the dispensing of chemotherapy medication. The pharmacist provides drug information resources, medication counseling, patient education, and assistance with insurance coverage submissions for medications and drug-specific enrollment programs.

- Neuraxial analgesia, such as epichrol infusions
- Spinal cord stimulation (SCS)
- Implanted intraspinal infusion pumps



Outpatient Medical Oncology/Patient Experience

Shared Governance

In 2015 the nursing staff in the Hillcrest Cancer Center decided to restructure the format of councils, to emulate the structure of the rest of the nursing units in the hospital and Magnet with Shared Governance. Shared Governance is a body of nursing representations that come together on behalf of the department and focus on nursing and patient opportunities. It provides a voice for the nursing body through the voting structure. For this year, the council focused on projects that focused on nursing and staff satisfaction. We are excited as the group continues to gain momentum the positive additions it will have to the unit!

Inpatient/Outpatient Huddle

The oncology inpatient/outpatient huddle, originally formed in 2013, has continued to prove a valuable asset between units. The interdisciplinary approach has strengthened continuity of care and fortified the patient centered model towards oncology care at Hillcrest Hospital. This year Palliative Medicine joined and a special focus was emphasized on appropriate patients being referred to Palliative Medicine. Representatives from three different areas are present each week: inpatient social work, case managers and nurse managers; outpatient care coordinators, social work and nurse manager; and Palliative Medicine social worker. Discussions of patient needs, history, and updates are shared between the group; each adding their unique perspective that provides everyone a fuller understanding of how best to treat the patient. The concept of a huddle between inpatient and outpatient units is a newer approach to healthcare. The development and sustaining abilities of the huddle has been shared at multiple regional conferences and cancer centers since the formation. In May of 2014, Lynn Szoka, MSN, RN, and Karen Schaedlich, MSN, RN, OCN gave a podium presentation at Oncology Nursing Society Congress in Anaheim, California; the largest oncology nursing conference in the nation.

RN Specialty Certification

Nurses in the cancer center are strongly encouraged to obtain oncology certification within two years of employment. Oncology nursing certification (OCN) is a rigorous test and validates a nurse has met stringent requirements for knowledge and experience related to oncology. Recertification is required every four years. These nurses have proven qualified to give high quality of oncology care to patients. OCN certification benefits patients and their families, nurses, and employers.

Chemotherapy/Biotherapy Education Visits

Every patient scheduled to start chemotherapy and/or biotherapy treatment has an education session with an oncology trained pharmacist. The one-on-one teaching involves reviewing the patient's individualized treatment regimen including possible side effects, measures to help prevent potential complications, and what to expect during the treatment visits. Each patient receives a treatment binder resource guide and a listing of important symptoms that require immediate intervention. The clinical pharmacist performs a medication review of all medications or herbal remedies the patient is taking and makes any necessary recommendations for changes to the managing oncologist.

Tumor Registry

The Tumor Registry operates under the supervision of the Cancer Committee and maintains a complete database of all cancer cases as well as other reportable diseases diagnosed and/or treated at this facility. With the addition of 1,640 cases in 2014, the Hillcrest registry now has a database consisting of 23,453 cases.

Hillcrest Hospital is part of a two-hospital registry system that also includes data from South Pointe Hospital. Utilizing the Electronic Registry Systems software allows the East Region Cleveland Clinic hospitals to share and merge data while at the same time report data independently. The registry is staffed by certified tumor registrars who are dedicated to quality database management and strive to obtain complete and accurate data on all information entered into the database. Numerous quality measures are in place so as to assure the most accurate data reporting.

The Tumor Registry is responsible for coordinating and monitoring the cancer program for continuous compliance with the American College of Surgeons Commission on Cancer standards for accreditation. Hillcrest Hospital has maintained accreditation since 1972 and was again awarded approval in 2013.

The Registry continues to maintain current follow-up information on all eligible living patients and has consistently exceeded the minimum follow-up rates as required by the American College of Surgeons Commission on Cancer. Approximately 9,983 patients are currently followed.

The Tumor Registry coordinates weekly tumor conferences. Physicians are encouraged to present cases of interest. Tumor conferences are certified for Category I CME credit. These conferences are a vital component of cancer patient care and provide the opportunity for multidisciplinary consultative services, which are integral to improving the care of cancer patients. Weekly videoconferences from Cleveland Clinic are also offered to physicians and other allied health professionals to promote education and for the care of the cancer patient.

The Tumor Registry provides statistical data to interested parties and encourages the use of data for outcome analysis. Data from the registry is submitted for inclusion in the Ohio Cancer Incidence and Surveillance System database as well as the National Cancer Data Base (NCDB).

Continuing education is an important factor for the Tumor Registry. The Tumor Registry staff attends local, regional, state and national meetings to enhance their knowledge of all aspects related to cancer care.

Justine Leinweber, CTR Supervisor, Tumor Registry



Hillcrest Hospital 2014 Site Distribution Summary

A total of 1640 cases were accessioned into the Tumor Registry for 2014. Analysis of our data revealed that our top five cancer sites are breast, prostate, lung, bladder and corpus uteri.

Breast cancer was the most common cancer among females and prostate was the most common among males. Lung cancer was the second most common cancer among both females and males.

Hillcrest Hospital's top cancer sites were comparable to Ohio and National data.

Site	Total	Analytic	Non-Analytic	Male	Female
Breast	408	380	28	4	404
Prostate	236	189	47	236	0
Lung	174	160	14	83	91
Bladder	123	106	17	95	28
Corpus Uteri	95	90	5	0	95
Colon	78	75	3	30	48
Pancreas	56	56	0	27	29
Non-Hodgkin's Lymphoma	50	43	7	24	26
Kidney/rRenal	47	41	6	32	15
Other Digestive System	36	34	2	15	21
Unknown Primary	31	31	0	21	10
Ovary	28	18	10	0	28
Rectum	27	25	2	18	9
Other Brain	25	23	2	11	14
Melanoma	22	19	3	12	10
Leukemia	21	19	2	14	7
Thyroid	21	21	0	9	12
Multiple Myekoma	17	15	2	12	5
Brain (Malignant)	12	12	0	8	4
Testis	11	11	0	11	0
Stomach	10	10	0	7	3
Other Female Genital	10	9	1	0	10
Other Urinary System	9	8	1	4	5
Other Blood & Bone Marrow	9	8	1	7	2
Esophagus	8	7	1	6	2
Larynx	8	8	0	7	1
Cervix Uteri	8	7	1	0	8
Hodgkin's Disease	8	7	1	6	2
Other/III-Defined	7	6	1	2	5
Liver	7	7	0	4	3
Other Endocrine	6	6	0	3	3
Other Oral Cavity	5	5	0	3	2
Other Respiratory System	5	3	2	1	4
Connective/Soft Tissue	5	5	0	4	1
Other Male Genital	5	3	2	0	5
Tongue	4	2	2	3	1
Anus/Anal Canal	3	3	0	0	3
Vulva	3	3	0	0	3
Other Skin	1	1	0	1	0
Brain (Benign)	1	1	0	0	1
Total	1640	1477	163	725	915

It's All About Team



Palliative Care is for patients with complex or serious medical illness that aims to ease suffering and enhance quality of life. Palliative specialists have expertise in the management of the symptoms of serious illness. Common symptoms include (but are not limited to) pain, shortness of breath, fatigue, nausea, diarrhea or constipation, anxiety, insomnia, and poor appetite. Enhancing communication between patients, families, and care providers is another essential function of the Palliative Care team. Often, members of the team will facilitate discussions about care preferences and goals to assist with medical decision making and assure that care plans are aligned with a patient's values.

Palliative Care may begin early in the course of treatment for a serious illness and may be delivered in a number of locations, from outpatient clinic, to inpatient hospitalizations, to the home, assisted living or nursing facility.

Palliative care is delivered by an interdisciplinary care team that works collaboratively to address the physical, emotional, social, and spiritual needs of patients and their families. Cancer impacts the lives patients and their loved ones. Palliative Care addresses the needs of all who are touched by this illness.

For the members of Hillcrest Hospitals' Palliative Care Program, it's "all about team." The Palliative Care team is composed of physicians, advance practice nurses, and social worker. The team approaches patient and family care with a unique, integrated, interdisciplinary approach. Care is enhanced because each team member contributes a specialized skillset and views a patient and family's needs through a different lens. The result is a patient-centered, comprehensive care plan. "Palliative Medicine allows me to work with a team of extra-ordinary clinicians providing whole patient care to our most vulnerable patients and their families. I appreciate being able to work with the physical, emotional, social and spiritual components of patient and family distress, helping them cope and persevere in the face of severe and advanced illnesses. The goals of Palliative Medicine are the relief of suffering whatever form it takes, improvement of quality of life, and assistance with difficult decision making. More often than not these goals can be achieved. We are privileged to be able to participate in this noble and inspiring work that daily speaks to the spirit of what it means to be human."

– Terence Gutgsell, MD

Team Members:

Terence Gutgsell, MD

Dr. Terence Gutgsell completed his Medical School education and Residency training in Internal Medicine at the University of Kentucky in 1976. He practiced General Internal Medicine in Lexington, Kentucky until 1995 at which time he undertook a Fellowship in Palliative Medicine at the Cleveland Clinic. He then returned to Lexington and became the Medical Director and Chief Medical Officer for Hospice of the Bluegrass between 1996 and 2007. There he established a 17 bed inpatient hospice unit at St. Joseph Hospital, 2 inpatient Palliative Medicine consultation services at St. Joseph Hospital and Central Baptist Hospital and an out-patient Palliative Medicine clinic serving the needs of patients in the Central Kentucky region. The Palliative Care Center of the Bluegrass was chosen as one of seven designated "Palliative Care Leadership Centers" in the nation by the Center to Advance Palliative Care (CAPC). For his work in establishing the above programs, Dr. Gutgsell received awards for community service from the Fayette County Medical Society, the Kentucky Hospice and Palliative Care Organization and the American Association of Hospice and Palliative Medicine (AAHPM).

In 2007, he joined the Cleveland Clinic's Palliative Medicine program where he served as Medical Director of the Horvitz Center for Palliative Medicine, Acting Section Chief of the Palliative Medicine Section, and Chief Medical Officer of Hospice of the Cleveland Clinic. Since May of 2014 he, along with his Palliative Medicine team, have been providing Palliative Medicine consultations at Hillcrest Hospital.

Cathy Palcisco, LISW-S

Cathy is a Social Worker with the Palliative Medicine Consult Team at Hillcrest Hospital. She came to Hillcrest following 22 years as a Social Worker with Hospice of Cleveland Clinic. Other experiences have been with UHC Rainbow & Childrens Hospital in Hem/Onc Division, Southwest General Hospital Hospice and Kaiser Hospital Cancer Center. Cathy is a graduate of Ursuline College and CWRU/MSASS and is an LISW-S through the State of Ohio Counselor & Social Work, Marriage & Family Therapist Board. Cathy feels that the experience of having served the age groups of infancy through adulthood in the context of serious illness has left "me in awe of the strength, resilience, and uniqueness of people." "It is a privilege to be apart of an interdisciplinary team that values presence and listens attentively to meet the needs of comfort of patients and families during this most vulnerable and sacred time in life. I value the lessons they have taught going through the journey together and look forward to being of service to others as we work to continue developing this program."

Julia Lemon Jones, RN, MSN, FNP, CNP

Julia is a Nurse Practitioner with the Palliative Medicine consult service at Hillcrest Hospital. She earned her Bachelor of Arts in Political Science from the University of Notre Dame and her Masters in Science of Nursing from Case Western Reserve University. Julia is a certified Family Nurse Practitioner and also a member of the Bioethics Committee and Bioethics Consult Service at Hillcrest. Julia came to nursing as a second career with the specific goal of helping Oncology patients and their families navigate some of the most challenges times in their lives. She was drawn to Palliative Medicine for its focus on alleviating suffering and the role Palliative Medicine teams play in affirming and maximizing a patient's quality of life during times of medical uncertainty or crisis. "The relationships that we are able to build with our patients and their families are incredibly special," Julia said. "Understanding a person's journey allows us care for the minds, bodies and spirits of our patients."

Laura Shoemaker, DO, MS

Dr. Shoemaker is a Palliative Medicine specialist. She graduated from the Ohio University Heritage College of Osteopathic Medicine. She also has a Master of Science from Case Western Reserve University. She completed both her Internal Medicine Residency and Palliative Medicine Fellowship training at Cleveland Clinic. She is board certified in Internal Medicine and Hospice and Palliative Medicine. Previous work experience includes community Hospice as Medical Director for Hospice of the Western Reserve from 2009-2013. Dr. Shoemaker has been an Associate Staff physician in the Palliative Medicine Program at the Taussig Cancer Institute at Cleveland Clinic since 2013.

Dr. Shoemaker's special interests include symptom management, end-of-life care, narrative medicine, and medical education. She has faculty appointments with the Cleveland Clinic Lerner College of Medicine of Case Western Reserve University and the Ohio University College of Osteopathic Medicine.

"I entered medical school with a sincere desire to 'help people.' I didn't truly know what that meant until I discovered Palliative Care. Being a Palliative Care physician affords me the opportunity to engage with patients and their families about what matters most to them. We focus on their comfort, preferences, and goals. I appreciate the opportunity to be part of a team of talented colleagues who collaborate with the common aim of helping patients and families faced with the challenges that accompany serious illness."

– Laura Shoemaker, MD

Program Statistics

In 2015, the Palliative Care team did over 600 consultations for patients hospitalized at Hillcrest Hospital. The Palliative Care Program also started an outpatient clinic in the Cancer Center to increase access to Palliative Care. Clinic appointments are scheduled at the Cancer Center front desk upon referral from a patient's primary oncologist.

Many of the patients and families seen by the Palliative Care team have a primary cancer diagnosis.

The primary reasons for Palliative Care consultation include: Facilitation of Discussions regarding Goals of Care, Pain Management, and Other symptom Management (i.e. nausea, shortness of breath, anxiety, etc.). Often, multiple reasons for consultation are identified.

In September, 2015, the Palliative Care team distributed a survey to referring physicians to assess program quality. All respondents indicated a high degree of satisfaction with the Palliative Medicine team's responsiveness and communication. 78% of respondents rated the Palliative Care consultations as "always" helpful.

Cancer Program Practice Profile Reports (CP3R) for Breast, Cervical, Colon, Endometrial, Gastric, Lung, Ovarian and Rectal Cancers

The National Cancer Data Base (NCDB) provides data from cancer programs. The Web-based Cancer Program Practice Profile Reports (CP3R) offer providers comparative information to assess adherence to and consideration of standard of care therapies for major cancers. This reporting tool provides a platform from which to promote continuous practice improvement to improve quality of patient care at the local level and also permits hospitals to compare their care for these patients relative to that of other providers. (American College of Surgeons, Commission on Cancer, NCDB)

Breast Measures		2012		2013		
	Hillcrest	Ohio	National	Hillcrest	Ohio	National
Breast conservation surgery rate for women with AJCC clinical stage 0, 1, or II breast cancer. (BCS) (Surveillance)	58.9%	64.5%	62.6%	61.8%	65.9%	62.6%
Image or palpation-guided needle biopsy (core or FNA) is performed to establish diagnosis of breast cancer. (nBx) (Quality Improvement)	84.8%	85.4%	90%	80%	88%	89.8%
Radiation therapy is considered or administered following any mastectomy within 1 year (365 days) of diagnosis of breast cancer for women with $>= 4$ positive regional lymph nodes. (MASTRT) (Accountability)	100%	88.4%	89.3%	90%	87.7%	86.2%
Radiation therapy is administered within 1 year (365 day) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer. (BCS/RT) (Accountability)	93.8%	93.2%	92.5%	94%	93.5%	90.8%
Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cNOMO or Stage II or Stage III hormone receptor-negative breast cancer. (MAC) (Accountability)	93.8%	94%	92.1%	85%	90.6%	91.9%
Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1cNOMO or Stage II or Stage III hormone-receptor positive breast cancer. (HT) (Accountability)	90.7%	93.7%	91.7%	88.3%	92.6%	90.6%

Cervix Measures	2012			2013		
	Hillcrest	Ohio	National	Hillcrest	Ohio	National
Radiation therapy completed within 60 days of initiation among women diagnosed with any stage cervical cancer (CER RT) (Surveillance)	100%	84.8%	78.3%	100%	78.9%	78.8%
Use of brachytherapy in patients treated with primary radiation with curative intent in any stage of cervical cancer (CBR RT) (Surveillance)	100%	81%	69.9%	80%	69.6%	67.1%
Chemotherapy administered to cervical cancer patients who received radiation for stages 1B2-IV cancer (Group 1) or with positive pelvic nodes, positive surgical margin, and/or positive parametrium (Group 2) (CER CT) (Surveillance)	100%	84%	86.7%	100%	92.2%	88.5%

Colon Measures	2012			2013			
	Hillcrest	Ohio	National	Hillcrest	Ohio	National	
Adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis for patients under age 80 with AJCC Stage III (lymph node positive) (ACT) (Accountability)	90%	89.8%	89.9%	100%	88.5%	88.7%	
At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer. (12 RLN) (Quality Improvement)	86.4%	87.9%	88.3%	80.9%	89.6%	90%	

Endometrium Measures	2012		2013			
	Hillcrest	Ohio	National	Hillcrest	Ohio	National
Chemotherapy and/or radiation administered to patients with Stage IIIC or IV endometrial cancer (ENDCTRT) (Surveillance)	75%	84.8%	77.6%	100%	76.4%	79.7%
Endoscopic, laparoscopic, or robotic performed for all endometrial cancer (excluding sarcoma and lymphomas), for all stages except stage IV (ENDLRC) (Surveillance)	65.5%	54.1%	67.1%	63%	56.6%	71.9%

Gastric Measures	2012		2013			
	Hillcrest	Ohio	National	Hillcrest	Ohio	National
	33.3%	48.4%	53.2%	0%	63.9%	55.8%
examined for resected gastric cancer (G15RLN) (Quality Improvement)						

Lung Measures	2012			2013		
	Hillcrest	Ohio	National	Hillcrest	Ohio	National
At least 10 regional lymph nodes are removed and pathologically examined for 1A, 1B, 2A, 2B resected NSCLC (10RLN) (Surveillance)	65.4%	36.4%	39.7%	51.5%	36.6%	42%
Systemic chemotherapy is administered within 4 months to day preoperatively or day of surgery to 6 months postoperatively, or it is considered for surgically resected cases with pathologic lymph node-positive (pN1) and (pN2) NSCLC (LCT) (Quality Improvement)	100%	90.1%	90.8%	100%	89.4%	88.1%
Surgery is not the first course of treatment for cN2, M0 lung cases (LNoSurg) (Quality Improvement	100%	92%	91%	100%	89%	91.2%

Ovary Measures	2012		2013			
	Hillcrest	Ohio	National	Hillcrest	Ohio	National
Salpingo-oophorectomy with omentectomy, debulking/cytoreductive surgery, or pelvic exenteration in Stages I-IIIC ovarian cancer (OVSAL) (Surveillance)	80%	71.2%	69.4%	100%	71.5%	72.3%

Rectum Measures		2012		2013		
	Hillcrest	Ohio	National	Hillcrest	Ohio	National
Preoperative chemo and radiation are administered for clinical AJCC T3N0, T4N0, or Stage III; or postoperative chemo and radiation are administered within 180 days of diagnosis for clinical AJCC T1-2N0 with pathologic AJCC T3N0, T4N0, or Stage III; or treatment is recommended; for patients under the age of 80 receiving resection for rectal cancer RECRTCT) (Quality Improvement)	71.4%	83.9%	85.2%	100%	86.7%	86.8%

Analysis of CP3R Data

Current data reflects data from 2012-2013. The cancer program at Hillcrest Hospital tracks these measures on an annual basis and are reported to the cancer committee quarterly. The data reflects that measures at Hillcrest Hospital are comparable if not a little higher than state and national measures for all cancers.

Support Opportunities at Hillcrest Cancer Center

Look Good Feel Better

Look Good Feel Better is a non-medical, brand-neutral program that teaches beauty techniques to cancer patients to help them manage the appearance-related side effects of cancer treatment. Group programs are open to all women with cancer who are undergoing chemotherapy, radiation, or other forms of treatment. Local volunteer beauty professionals support Look Good Feel Better and are trained and certified by the Personal Care Products Council Foundation, the American Cancer Society, and the Professional Beauty Association. Hillcrest Hospital offers group Look Good Feel Better classes every other month on the second floor of the West Tower in the Cancer Center conference room from 1:30 to 3 p.m.

Colorectal Cancer Awareness

A free educational event that includes a free personal screening is held annually in March. This event in collaboration with the American Cancer Society, The Gathering Place, Hillcrest's Cancer Center and Digestive Health brings awareness by educating individuals on diet and screenings for prevention and early detection.

Skin Cancer Screening/Melanoma Screenings

Hillcrest Hospital, in partnership with the American Cancer Society and Cleveland Dermatologic Society, is offering free screenings to detect signs of skin cancer or any other skin abnormalities. Screenings are open to women and men of all ages. The screening is held annually in the Spring.

Hillcrest Breast Cancer Support Group

This one hour and a half psychological-educational support group is designed for women with a diagnosis of breast cancer who are active with chemotherapy, radiation or have completed treatment. An oncology social worker facilitates the group and engages speakers, focuses on supportive counseling and offers resources regarding emotional and physical health. Sessions are offered on the 4th Wednesday of each month from 6 to 7:30 p.m. For further information, please contact Janet Greene at 440.312.0270.

Relay for Life

Hillcrest Hospital annually supports the American Cancer Society by forming a team to help raise funds for the continued fight against cancer. By taking part in the Relay for Life of Hillcrest, we are joining the American Cancer Society in their quest to unite communities across the globe by celebrating cancer survivors, remembering loved ones lost, and fighting back against this horrible disease.

Hillcrest Oncology Memorial Service

This annual 2 hour program is offered to family members and loved ones of Hillcrest's oncology patients who have passed away that year. An oncology social worker facilitates the program. Pastoral Care and the medical staff participate in the service. Through the service, staff and families have a way to share grief and support one another. Attendance occurs through invitation.

Leukemia & Lymphoma Society Light The Night Walk

The Leukemia & Lymphoma Society's Light the Night Walk funds lifesaving cancer research, patient services and advocacy for the best treatments possible. Friends, families and coworkers form fundraising teams and millions of consumers help by donating at retail outlets. These efforts culminate in inspirational, memorable evening walks in nearly two hundred communities each fall across North America.

Facing Forward: Life After Cancer Treatment

This two-hour educational program is designed for patients who have recently completed chemotherapy or radiation treatment. Information will be presented to ease the transition from active treatment to follow-up. A medical oncology nurse and oncology social worker will answer questions and provide resources regarding your physical, emotional and social health following cancer treatment. Sessions are offered twice a month with morning and evening hours available. To register, please contact Diana Simsic at 440.312.4929.

Molly Loney Patient Assistance Fund

The Molly Loney Patient Assistance Fund provides cost of living financial resources for patients currently undergoing cancer treatment at Hillcrest Hospital. Need is assessed by licensed oncology social workers and provided by the Fund.

Ladies Night Out/Speaking of Women's Health

Hillcrest Hospital participated in this event on September 17, 2015, at Executive Caterers at Landerhaven. Complimentary screenings and wellness information were provided along with breast examination demonstrations. Registered nurses discussed the importance of prevention techniques and was available to answer any questions related to breast cancer.

Community Outreach

Screenings and Education

Hillcrest Hospital had over 900 participants in our 2015 cancer community outreach educational, screening, and fundraising events that include the above.

Skin Cancer Screening

We have had a total of 130 participants screened for melanoma where 37 patients were recommended for biopsy. Participants were navigated through the follow up process by the Community Outreach coordinator to ensure access to appropriate care.



Breast Cancer Screening

Chesterland, Ohio was one of three communities identified in 3 year patient data analysis with greater than 20% of cases diagnosed at stage 3 or stage 4 breast cancer. Geauga County health needs assessment indicates only 55% of women (over 40) had a mammogram in the past year, 56% reported having a clinical breast exam in the past year. Barriers identified by Geauga County residents to obtaining preventive medical care include: cost, hours not convenient, difficult to get an appointment, no insurance.

Hillcrest Hospital hosted hosted a free, community breast cancer screening and education event in October, 2015. An all female provider staff conducted a 20 minute exam and

consultation including: clinical breast exam, individual risk assessment, and breast self exam/ awareness education.

Members of the scheduling and financial assistance teams were on site to provide appointment scheduling at event for mammogram the following week at patient's location of choice.

41 women were screened and navigated through the mammogram process.

Hillcrest Breast Fair

Collaborative community event hosted by the Hillcrest Cancer Center, also including: Radiology, Occupational Therapy and The Gathering Place. One on one education provided to 125+ participants regarding breast self-exam/ awareness and screening guidelines. Outcomes documented regarding participant's ability to perform a practical selfassessment pre and post education intervention. Three participants able to perform a practical self-assessment preintervention. 125 participants able to perform a practical self-assessment post-intervention.

Lung Cancer Prevention Event

Collaborative event with Hillcrest Hospital, the South Euclid Library and the American Cancer Society. 18 adult participants and 15 teenage participants received focused education on connection to community resources and long term effects of smoking. Participants were able to registerer for Cleveland Clinic Health System smoking cessation programs in their community and accross the region, in various formats (classes, support groups, online). Community Outreach Coordinator navigated post-event follow up to ensure resource connection for participants.

Additional outreach efforts

Hillcrest has participated in other events where we helped raise funds for the Leukemia and Lymphoma Society and the American Cancer Society.

Hillcrest also collaborates with other hospitals such as South Pointe and Cleveland Clinic main campus supporting their community events and assisting with the development of community outreach programs.

An Emphasis on Comfort

Palliative Care

Palliative Care is interdisciplinary care for patients with a complex or serious medical illness. The palliative care team works collaboratively with oncology to address the comprehensive needs of patients and their families. Primary aims include: 1) The relief and prevention of suffering in all its forms at any stage of illness; 2) Improving quality of life by managing pain and other distressing symptoms; 3) Helping patients and families determine the most appropriate goals of care when faced with difficult and complex decisions.

Palliative Care is provided simultaneously with other medical therapies, like chemotherapy, radiation, or advanced therapies for heart and lung diseases. The palliative care team attends to the physical, emotional, spiritual and social concerns of patients and their families. This team facilitates discussion with patients and families regarding medical decision-making, quality of life, and goals of care. Through close collaboration with ancillary hospital staff, the Palliative Care team aims to optimize patient care.

Palliative Care Consultation Program

The Hillcrest Hospital Palliative Care Consultation Program now includes a physician, nurse practitioner and social worker. The existing consultation program was augmented by the addition of a Hospice and Palliative Medicine board certified physician in May, 2015. The physician and nurse practitioner team was further complemented by the addition of an experienced and dedicated social worker in November of 2015.

Hospice Care

Hospice is not a place; it is a philosophy of care when curative measures are no longer beneficial. The emphasis is on providing comfort, not cure; on family, not just the patient; on quality of life, not duration.

The goal is to assist patients and their families to prepare physically, spiritually and emotionally for the end of life. Hospice strives to make dying a life experience. It allows patients to maintain control over their lives, prepare for death in their own way and live their final months in a familiar environment, with a sense of personal dignity.

When a Cure Is No Longer Possible

Hospice care is valuable when:

• a person is diagnosed with a terminal illness and has a life expectancy measured in months rather than years

- the goal of treatment is comfort and symptom management
- curative treatments are no longer beneficial

Our Support Team

Hospice care is provided to the patient and family by dedicated support professionals, utilizing a team approach. Each member of the team provides expertise in developing a plan of care to meet the patient's specific needs.

The specially trained (in end of life care) team includes:

- Personal physician
- Physicians with expertise in palliative medicine, who are available to consult with the patient's personal physician and act as a resource for pain and symptom management.
- Registered nurses, who collaborate with the hospice team to develop a plan of care that will meet the individual needs of each patient/family. Nurses provide expertise in assessment and pain and symptom management.
- Home health aides, who provide bathing and personal care services, light housekeeping and assistance with activities of daily living.
- Medical social workers who provide emotional support and counseling. Social workers also help with financial concerns and coordinate community resource needs.
- Volunteers, who offer helping hands with errands and provide companionship.
- Chaplains, who offer support and guidance in matters of spirituality and bereavement.
- Music and art therapists.

Additional services provided by Hospice at Home include:

- 24-hour-a-day, seven-day-a-week access to a hospice registered nurse for support and coordination of care
- medications for controlling symptoms
- medical supplies
- durable medical equipment

Hospice Care Settings

Although hospice care is usually provided in the patient's home, care can be provided in a number of alternative settings:

Inpatient

When symptoms cannot be managed at home and hospitalization is needed, patients can get medical care at contracted facilities including Cleveland Clinic hospitals.

Alternative Home Setting

Hospice care can be provided to patients residing in various nursing facilities, such as skilled nursing facilities, independent and assisted living facilities and nursing homes.

Respite Care

In the event the primary caregiver needs a rest from caregiving responsibilities, hospice may provide short-term care in contracted facilities.

Requesting Hospice Care

Hospice care can be requested by the patient, as well as by family members, physicians, friends or clergy on behalf of the patient, by calling 216.444.HOME (4663) or tollfree, 800.263.0403, 24 hours a day, seven days a week. A hospice team member will discuss patient needs, explain available services and review insurance coverage options. Services generally start within 24 hours of the initial call.

Paying for Care

Hospice care is a defined benefit under both the Medicare and Medicaid programs. Most major insurance plans also provide for hospice care.

Charitable Donations

Cleveland Clinic Hospice at Home accepts memorial donations to assist in providing care to individuals regardless of their ability to pay.

Bereavement Services

A component of the philosophy of hospice is that we need not walk alone after the death of a loved one. As part of the healing process, our bereavement support meetings offer emotional support in a caring environment with others who share a similar experience.

Why Choose Cleveland Clinic?

Experience: Cleveland Clinic Hospice at Home is backed by the resources of Cleveland Clinic, which is consistently ranked one of the top hospitals in the United States.

Access: Hospice at Home staff can be reached 24 hours a day, seven days a week.

Convenience: We directly bill insurance companies, Medicare and Medicaid for services.

Credentials: Cleveland Clinic Hospice at Home is accredited by The Joint Commission and is certified by the state of Ohio to participate in the Medicare/Medicaid program. In addition, the World Health Organization has recognized our Palliative Medicine Program as "a unique model of a much-needed service."

We recognize that this is a difficult time. We listen to our patients and caregivers' concerns and answer their questions so that they can make an informed decision.

Partnerships with the American Cancer Society and The Gathering Place

The partnership between the American Cancer Society and Hillcrest Hospital has thrived since the signing of the initial Collaborative Action Plan in March 2010 (updated June 2013). Hillcrest hosts American Cancer Society programs and refers patients to the wide range of services the Society offers. Aside from patient care, Hillcrest employees have been involved in the American Cancer Society Cancer Action Network, working with legislators to maintain funding for cancer research and on legislation that directly affects cancer patients. The Gathering Place is a caring community that supports, educates and empowers individuals and families touched by cancer through programs and services provided free of charge. Programs include support groups, counseling, free wigs, exercise and hands-on cooking classes, lectures and workshops and services for children, teens and families.

To learn more about The Gathering Place visit touchedbycancer.org.

the gathering place



Cleveland Clinic Cancer Center at Hillcrest Hospital Staff Directory

Medical Oncology



Vinit Makkar, MD

Co-Director, Cleveland Clinic Cancer Center at Hillcrest Hospital Specialty interests: all cancers, head/ neck cancer, lung cancer



IIa Tamaskar, MD Specialty interests: all cancers, breast cancer



Prateek Mendiratta, MD Specialty interests: all cancers, bladder cancer, prostate cancer, kidney cancer



Desiree Carcioppolo, PA





Neha Mitra, MD Specialty interests: all cancers, breast cancer, genitourinary cancers



Henry Blair, MD

Co-Director, Cleveland Clinic Cancer Center at Hillcrest Hospital Specialty interests: breast cancer, prostate cancer, lung cancer, brain cancer, bladder cancer, gastrointestinal cancer



Michael Nemunaitis, MD

Specialty interests: all cancers, gastrointestinal cancers, colorectal cancer



Betty Obi, MD

Specialty interests: breast cancer, head/neck cancer, bladder cancer, gastrointestinal cancers, gynecologic cancers, lung cancer, lymphoma



Carmen Vermont, MD Specialty interests: breast cancer, gastrointestinal cancer, colorectal cancer, lung cancer, lymphoma



Julia Miller-Lemon, CNP

Genetic Counseling



Palliative Care

Mona Gupta, MD

Specialty interests: internal medicine, cancer, cancer anorexia and cachexia, cancer fatigue, cancer pain, cancer symptoms, end stage liver disease, end stage lung disease, end stage renal disease, cancer complications



Jill Polk, MS, LGC



Terrence Gutgsell, MD

Specialty interests: palliative medicine, cancer, cancer anorexia and cachexia, cancer fatigue, cancer symptoms



Laura Shoemaker, DO

Specialty interests: internal medicine, palliative medicine

Breast Center

Breast Surgery



Alicia Fanning, MD

Specialty interests: Breast cancer, breast diagnostics, breast diseases, breast surgical oncology, minimally invasive breast surgery, oncoplastic surgery, high risk breast cancer and prevention

General Sugery





Plastic Surgery

Andrea Moreira, MD

Risal Djohan, MD

aesthetic surgery

Specialty interests: breast reconstruction, microsurgery, cosmetic surgery, general plastic surgery

Specialty interests: breast surgery,



James Malgieri, MD

Specialty interests: breast, breast and endocrine, breast cancer, breast diagnostics, breast diseases, breast surgery, breast surgical oncology



Graham Schwarz, MD

Specialty interests: breast cancer, breast surgery, Microsurgical breast reconstruction (DIEP, SIEA, SGAP, TUG flaps), aesthetic surgery of the breast



William O'Brien, MD

Specialty interests: breast, breast and endocrine, breast cancer, breast diagnostics, breast diseases, breast surgery



Women's Health Institute

Gynecological Oncology



Robert DeBernardo, MD

Specialty interests: cervical cancer, cervical dysplasia, cervical tumors, endometriosis, fibroids and leiomyoma, gestational trophoblastic tumor, hereditary gynecologic cancers, advanced and recurrent ovarian, fallopian tube and peritoneal cancer, HIPEC, intra-peritoneal chemotherapy, minimally invasive surgery

Glickman Urological and Kidney Institute

Urology/Urologic Oncology



Ryan Berglund, MD

Specialty interests: open and laparoscopic kidney surgery, open and laparoscopic surgery for bladder cancer, open, laparoscopic, and robotic assisted surgery for prostate cancer, urinary reconstructive techniques, urologic oncology



Chad Michener, MD

Specialty interests: cervical cancer, endometrial cancer, gynecologic oncology, ovarian cancer, vulvar cancer



Michael Gong, MD, PhD

Specialty interests: bladder cancer, kidney cancer, prostate cancer, robotic and laparoscopic surgery, testis cancer



Suzanne Elliott, CNP



Jeanne Walker, CNP

2015 Hillcrest Hospital Comprehensive Community Cancer Program Cancer Committee

Kris Austin The Gathering Place

Ryan Berglund, MD Genitourinary Surgical Oncology

Henry Blair, MD Chair, Cancer Committee Cancer Liaison Physician Radiation Oncology

Catherine Carlo, RN Homecare / Hospice

Debra Dale, MSM, RT (R)(T) Radiation Oncology

Teresa Dews, MD Pain Management

Alicia Fanning, MD Surgery Breast Center

Mike Garlisi, MBA Vice President Oncology Services

Janet Greene, LISW-S, OSW-C Social Work Psychosocial Coordinator Jennifer Jeung, MD Pathology

Leonard Kahn, MD Radiology

Justine Leinweber, CTR Cancer Registry Quality Control of Cancer Registry Coordinator

Nicholas Link, PharmD, BCOP Pharmacy

Marybeth Mack Community Outreach

Vinit Makkar, MD Medical Oncology Cancer Conference Coordinator

Chad Michener, MD Gynecologic Oncology

Emily Miller, RN Quality Management Quality Improvement Coordinator

Julia Miller-Lemon, CNP Palliative Medicine Lisa Mirossay, CCRP Clinical Research Research Coordinator

Kristy Neylon, RN Homecare/Hospice

Susan Nientimp American Cancer Society

Jill Polk, GC Genetics

Karen Schaedlich, RN, BSN, OCN Nurse Manager Outpatient Medical Oncology

Mary Jo Schultz Quality Management

Diana Simsic, LISW-S, OSW-C Social Work

Ellie Westerburg Marketing

Katie Vriezen, RN, MSN Community Outreach





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