

PIH HEALTH WHITTIER HOSPITAL

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C A N C E R
P R O G R A M
A N N U A L
R E P O R T



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Delivering Excellence in
Responsible Screening



Cancer Committee 2021



The PIH Health Whittier Hospital cancer committee is a multi-disciplinary team composed of medical staff members from diagnostic and therapeutic specialties, administrative staff and allied health professionals involved in the care of cancer patients. The committee members work together to provide the highest quality of care to our cancer patients and play a key role in the success of the PIH Health Cancer Care department.

PHYSICIAN MEMBERS

Anthony Britto MD

PLASTIC SURGEON

Armen Gregorian MD

COLORECTAL SURGEON

Brent Gray MD

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RADIATION ONCOLOGIST

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MEDICAL DIRECTOR/PATHOLOGIST

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DIAGNOSTIC RADIOLOGIST

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SURGEON

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William MacDonald MD

PATHOLOGIST

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Breaz DeRousse

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CLINICAL DIRECTOR, HOSPICE

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ADMINISTRATOR

Sharice Johnson CTR

CANCER DATA SPECIALIST/CONFERENCE ACTIVITY COORDINATOR

Shelly Hart PTA-CLT

PHYSICAL THERAPIST LYMPHEDEMA PROGRAM

Sovirny Preston

ADMINISTRATOR QUALITY MANAGEMENT & PERFORMANCE
EXCELLENCE

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PAIN MANAGEMENT EDUCATOR

Thia Le RD

MANAGER, CLINICAL NUTRITION

Roberta Delgado

DIRECTOR, COMMUNITY BENEFIT AND COMMUNITY HEALTH

Vicky Wen

PHYSICAL THERAPIST LYMPHEDEMA PROGRAM

2021 Cancer Program Highlights



The COVID-19 Pandemic was still prevalent in 2021. Many programs and initiatives continued to be disrupted. Some programs were cancelled and some became a virtual event.

The PIH Health Whittier Hospital Comprehensive Community Cancer Program provided a number of services to cancer patients in our community and beyond.

In the past, PIH Health participated in activities such as the American Cancer Society Relay for Life, Wig events such as partnering up with Vogue Wigs for cancer patients and survivors. Due to the pandemic, in-person activities were cancelled or became virtual if it was feasible.

The National Comprehensive Cancer Network (NCCN) distress tool was given to all appropriate patients at PIH Health undergoing cancer treatment in the infusion center and radiation oncology.

PIH HEALTH

*I am strength.
I am hope.
I am a survivor.*

Cancer Survivorship Program

The PIH Health Whittier Hospital Comprehensive Community Cancer Center invites you to attend the Cancer Survivor Program's virtual lecture on Fear of Recurrence.

FEAR OF RECURRENCE
Saturday, March 20, 2021
10 am
The presentation will explore the psychosocial aspect and give practical tips to overcome the fear of recurrence in cancer survivors.

ALL ARE WELCOME. TO RSVP:
Call 562.789.5401 Ext. 12570
Learn more at:
PIHHealth.org/CancerCare

I am a survivor. I am hope. I am strength.

CANCER SURVIVORSHIP PROGRAM

The PIH Health Whittier Hospital Comprehensive Community Cancer Program invites you to attend a virtual lecture on Overcoming Fear of Recurrence.

This presentation will focus on ways to overcome the fear of a cancer recurrence by combining spiritual and emotional well-being, and breathing techniques to educate and empower cancer survivors.

Overcoming Fear of Recurrence
Saturday, November 13, 2021
10 am to 12 noon
A Virtual Event Only

All are welcome. TO RSVP:
Call 562.789.5401 Ext. 12570
Learn more: PIHHealth.org/CancerCare

PIH HEALTH

Survivorship Care Plan delivery continued to be a priority throughout 2021. The Survivorship Care Plan summarizes the patient's diagnosis, treatment plan and provided follow-up information and is essential for the continued journey into survivorship for cancer patients. New standards also helped to focus in developing programs and resources for cancer survivors.

On March 20th and November 13th we had our Overcoming Fear of Recurrence seminar for those who completed their cancer treatments. The seminar included experts from social work, spiritual care, nursing and meditation to give practical, spiritual and holistic ways to feel empowered and overcome the fear of a cancer recurrence.

On November 16, 2021 we had a virtual nutrition workshop focused on cancer patients nutritional needs, Nutrition Through Treatment and Beyond. Facilitated by Alexa Giron BSN RN CBCN and Courtney Kaller MDA RD.

On November 18, 2021, PIH Health raised awareness about the dangers of smoking by participating in the Great American Smokeout. We screened visitors to see if they qualify for our lung screening program. We also provided information about our smoking cessation program for those that would like to stop smoking.

COMPLEMENTARY THERAPY

- The Mind Body Spirit Workshop, Yoga and Journey Through Cancer Support group were placed on hold. The Women's support group and metastatic cancer support group went virtual in response to the COVID-19 Pandemic.



CLINICAL TRIALS

In 2021, clinical trials continued to be an area of growth for the PIH Health Whittier Hospital. Offering clinical trials allows us to provide new approaches to treating and managing cancer. PIH Health is affiliated with SWOG, a global cancer research network that designs and conducts publicly funded clinical trials. Through this affiliation there were eight clinical trials actively accruing for various stages of selected cancers (as of December 2021). PIH Health also works with Translational Research in Oncology-US (TRIO-US). Through TRIO-US, PIH Health is able to offer further innovative clinical trial treatments to our community by collaborating with scientists, researchers, clinicians and industry partners. There were nine clinical trials open through this group (as of December 2021).

MARIPOSA BOUTIQUE

The Mariposa Boutique is a unique wellness shop that helps patients return to a full and active life after surgery by introducing them to a wide range of products and services. Staff members include Certified Mastectomy Fitters who provide consultations on special breast prostheses and bras, and specialize in fitting lymphedema sleeves and compression medical wear. Women may obtain information on lymphedema, hospital and local support groups, and internet-based resources. Other items available for purchase include scarves, hats, wigs and jewelry. The services at Mariposa enable breast cancer patients and survivors to walk away feeling confident and beautiful.

CANCER SCREENING AND EARLY DETECTION

PIH Health is focused on wellness and illness prevention. Cancer screenings are designed to detect cancer early and decrease the number of late stage disease. The Cancer Program offered screening programs for breast, colon and lung cancer. All screening programs are consistent with evidenced based guidelines.

- Breast Cancer Screening
 - » Performed with mammography
 - » 16,978 screening mamography's performed
- Colon Cancer Screening
 - » Performed via colonoscopy
 - » 2,236 screening colonoscopy's performed
- Lung Cancer Screening
 - » Performed with low-dose computed tomography (CT)
 - » 476 screening low-dose CT scans performed

COMMUNITY OUTREACH AND EDUCATION ON CANCER PREVENTION

The Cancer Committee worked with multiple internal departments and outside organizations to provide quality cancer care within our organization and throughout the community. Due to the COVID-19 Pandemic, PIH Health offered one community outreach and educational activity during 2021, the Smoking Cessation Workshop was held virtually.

ONCOLOGY RESOURCE CENTER

The Oncology Resource Center and Wig Bank are available for patients and their family members to access educational material and resources. Wigs and head coverings gifted to women provide dignity and compassion during their cancer journey. In 2021 because of the COVID-19 Pandemic only 46 wigs were distributed. The resources of the wig bank are made possible by the generosity and support of donors in our community.

PIH HEALTH AND AMERICAN CANCER SOCIETY (ACS) OFFERED NUMEROUS SUPPORT GROUPS INCLUDING:

- Women's Cancer Support Group (virtual)
- Metastatic Cancer Support Group (virtual)
- Journey Through Cancer Support Group (virtual)
- Reach to Recovery® (via ACS) – Peer-to-peer breast cancer support; 100% phone based. If you have breast cancer, you may want to connect with someone who knows what you're feeling – someone who has "been there." Through the Reach To Recovery website and app, you can chat online with a trained volunteer who has survived breast cancer and understands what you are going through
- Cancer Survivors Network (via ACS) – An online community by and for people with cancer and their families. Find and connect with others through member search, discussion boards, chat rooms and private CSN e-mail
- Springboard Beyond Cancer – A support community
- Belong – Beating Cancer Together – Belong is an app that provides people with cancer and their families a unique and innovative personalized solution to help manage care

Performance Improvement Initiatives

Established in 2021



COMMISSION ON CANCER PDSA RETURN TO SCREENING INITIATIVE

The American Cancer Society as well as other cancer organizations have warned of increased late stage cancers and 10,000 additional deaths from cancer in the next ten years as screening programs paused for some time in 2020. There was a nationwide call to action by returning to screening and to try and return or exceed the past years deficit. We were successful in returning to the pre-pandemic levels for lung and colon cancer screening and came very close to exceeding the prior years screening mammogram by 10%, well above the 2020 average.

INITIATING LUNG SCREENING FOR PATIENTS RECEIVING SCREENING MAMMOGRAM

By screening patients early, lung cancer can be curable and to that end, PIH Health initiated screening of patients going for their screening mammogram. We identified patients that qualify and informed them of the program and asked if they would like to be screened.

BARRIERS TO CARE: OFFERING AN ONCOLOGY FINANCIAL NAVIGATOR

This performance improvement sought to aid patients that are having trouble paying for cancer services by getting them in touch with our Oncology Financial Navigator. The navigator searched for co-pay assistance, free chemotherapy drugs to help offset the cost of out of pocket expenses for the most disadvantaged in the community. The financial navigator also assisted patients by enrolling them in the appropriate insurance carriers to ensure they would maximize their benefits for cancer treatment. The financial navigator helped 237 patients in 2021.

Cancer Registry

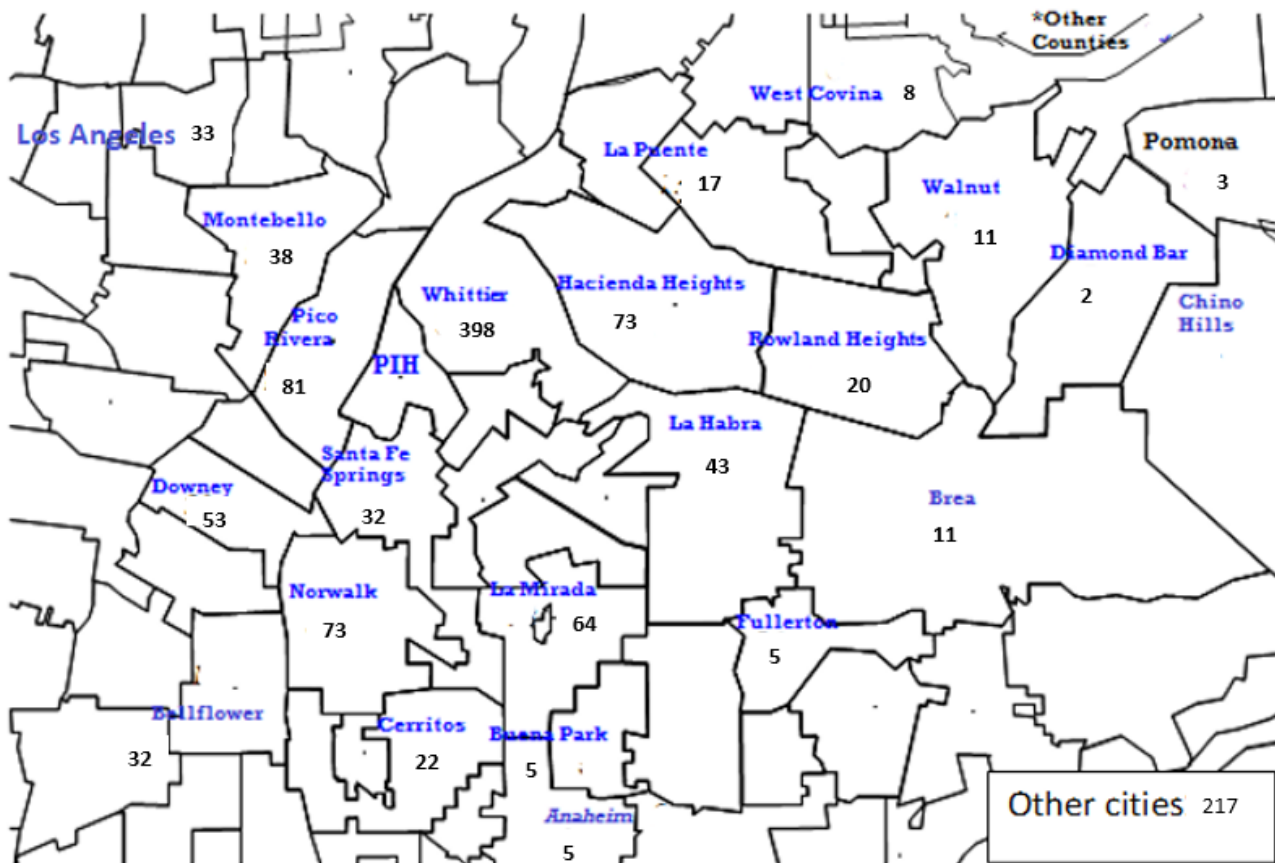


Established in 1987, the Cancer Registry is an essential component of the PIH Health Whittier Hospital Comprehensive Community Cancer Program. Our cancer database management system is designed to monitor all types of cancers diagnosed and/or treated at PIH Health and is a critical element in the evaluation of cancer care. Demographic information, cancer type, treatment and follow-up data are collected on each cancer patient by the registry staff, who are specially trained in the field of oncology data management. In 2021, the Cancer Registry database included data on 42,099 cases.

CANCER STATISTICS

- In 2021, 1,286 patients were diagnosed or received cancer care at PIH Health. These cases were diagnosed through the PIH Health service area. (Figure 1)
- The most commonly diagnosed cancers detected and treated at PIH Health were compared to California cancer incidence and ranked according to frequency. Cancer incidence by gender at PIH Health was 534 males, 748 females and 4 listed as other. (Table 1)

2021 Geographic Distribution of Caseload (Figure 1)



2021 CANCER INCIDENCE BY GENDER AT PIH HEALTH

Table 1

534 MALES, 748 FEMALES AND 4 OTHERS TOTAL 1,286									
MALE					FEMALE				
Cancer Site	#pts	PIH Health	#pts	US	Cancer Site	#pts	PIH Health	#pts	US
Prostate	90	17%	180,890	25%	Breast	271	36%	278,373	30%
Lung	52	10%	116,430	12%	Lung	55	7%	120,628	13%
Colon and Rectum	69	13%	77,620	8%	Colon and Rectum	58	8%	74,233	8%
Kidney and Renal Pelvis	30	6%	48,513	5%	Uterus	83	11%	64,954	7%
Non-Hodgkins Lymphoma	24	4%	48,513	5%	Non-Hodgkins Lymphoma	26	3%	37,116	4%

The Primary Site Distribution Table details PIH Health Whittier Hospital's 2021 cancer experiences by site, age, gender and stage of disease at diagnosis (Table 2).

Table 2

Code	Primary Site	CLASS OF CASE				SEX*			STAGE AT DIAGNOSIS*							
		Cases	A	N/A	Other	M	F	Other	0	v	II	III	IV	UNK	Applicable	Missing
	All Sites	1286	1029	155	104	524	755	12	74	339	136	129	173	49	121	2
	Oral Cavity/Pharynx	20	12	7	1	15	5	0	0	2	4	2	2	1	1	0
410	Tongue	7	5	2	0	7	0	0	0	2	1	1	0	1	0	0
461	Tonsil	5	3	1	1	2	3	0	0	0	2	0	0	0	1	0
400	Lip	2	1	1	0	1	1	0	0	0	1	0	0	0	0	0
450	Mouth other & Nose	2	2	0	0	2	0	0	0	0	0	1	1	0	0	0
430	Gum	1	1	0	0	0	1	0	0	0	0	0	1	0	0	0
420	Salivary Glands, Major	1	0	1	0	1	0	0	0	0	0	0	0	0	0	0
480	Hypopharynx	1	0	1	0	1	0	0	0	0	0	0	0	0	0	0
490	Pharynx/ill-defined	1	0	1	0	1	0	0	0	0	0	0	0	0	0	0
	Digestive System	280	219	35	26	154	125	1	7	34	43	50	55	20	8	1
530	Colon	87	80	7	0	45	42	0	5	9	24	24	11	6	0	1
550	Liver	51	36	10	5	32	19	0	0	7	5	9	7	6	2	0
570	Pancreas	44	33	7	4	24	19	1	0	2	3	4	20	3	1	0
541	Rectum/Rectosigmoid	37	26	7	4	23	14	0	1	1	6	8	7	3	0	0
510	Stomach	21	17	2	2	11	10	0	0	8	1	1	4	2	0	0
500	Esophagus	13	12	0	1	11	2	0	0	4	1	2	2	0	3	0
561	Gallbladder	8	5	1	2	2	6	0	1	0	1	1	2	0	0	0
562	Bile Ducts	4	4	0	0	1	3	0	0	1	1	0	2	0	0	0
542	Anus/Anal Canal/Anorectum	4	1	0	3	1	3	0	0	1	0	0	0	0	0	0
590	Other Digestive	4	2	0	2	2	2	0	0	0	0	0	0	0	2	0
582	Peritoneum, Omentum, Meso	3	0	0	3	0	3	0	0	0	0	0	0	0	0	0
520	Small Intestine	2	1	1	0	1	1	0	0	0	1	0	0	0	0	0
581	Retroperitoneum	2	2	0	0	1	1	0	0	1	0	1	0	0	0	0
	Respiratory/ Intrathoracic	114	99	8	7	60	54	0	4	26	8	10	47	4	0	0
622	Lung/Bronchus	101	87	7	7	51	50	0	4	23	7	10	42	1	0	0
621	Lung/Bronchus Small Cell	6	6	0	0	2	4	0	0	0	0	0	4	2	0	0
610	Larynx	5	4	1	0	5	0	0	0	2	1	0	0	1	0	0
640	Pleura	2	2	0	0	2	0	0	0	1	0	0	1	0	0	0

*Stage reflects analytic cases **AJCC Stage not applicable NA = Non-applicable UNK = Unknown Stage

Table 2, continued

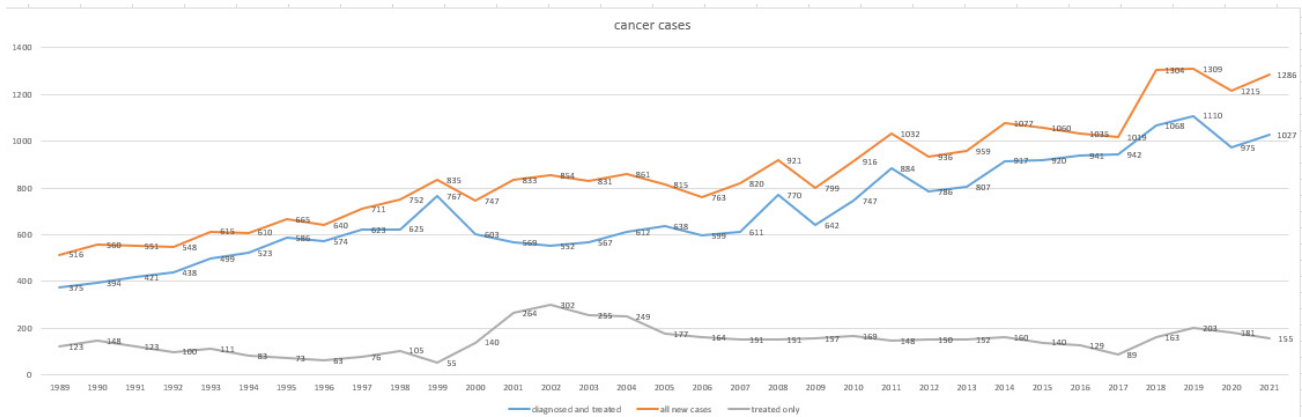
Code		CLASS OF CASE				SEX*			STAGE AT DIAGNOSIS*							
	Blood & Bone Marrow**	50	32	14	4	21	29	0	0	0	0	0	0	0	32	0
692	Myeloma	27	17	9	1	12	15	0	0	0	0	0	0	0	17	0
691	HemeRetic	19	15	4	0	8	11	0	0	0	0	0	0	15	0	
700	Bone	2	0	1	1	1	1	0	0	0	0	0	0	0	0	
699	Other Hematopoetic	2	0	0	2	0	2	0	0	0	0	0	0	0	0	
710	Soft Tissue	5	3	2	0	2	3	0	0	1	2	0	0	0	0	
	Skin	35	32	1	2	21	14	0	5	15	3	3	6	0	0	
731	Melanoma Of Skin	31	30	1	0	21	10	0	5	14	3	3	5	0	0	
733	Other Skin/Kaposi Sarcoma	4	2	0	2	0	4	0	0	1	0	0	1	0	0	
740	Breast	273	247	24	2	2	271	0	42	131	33	15	12	9	5	
	Female Genital	113	85	10	18	0	113	0	0	54	6	12	7	2	4	
820	Corpus Uteri	65	55	5	5	0	65	0	0	41	4	6	4	0	0	
830	Ovary	20	12	2	6	0	20	0	0	5	2	3	0	1	1	
802	Cervix Uteri	14	7	2	5	0	14	0	0	4	0	1	0	1	1	
843	Vulva	9	7	1	1	0	9	0	0	3	0	2	1	0	1	
821	Uterus Nos	4	3	0	1	0	4	0	0	1	0	0	2	0	0	
842	Other Female Genital	1	1	0	0	0	1	0	0	0	0	0	0	0	1	
	Male Genital	103	63	19	21	102	0	1	0	17	20	9	12	4	0	
850	Prostate	90	51	19	20	89	0	1	0	11	17	6	12	4	0	
860	Testis	11	10	0	1	11	0	0	0	6	2	2	0	0	0	
871	Penis	2	2	0	0	2	0	0	0	0	1	1	0	0	0	
	Urinary	187	161	21	7	89	94	9	16	46	3	16	15	8	52	
891	Kidney and Renal Pelvis	54	45	6	3	32	22	0	1	18	1	13	6	6	0	
880	Bladder	41	34	5	2	29	12	0	15	7	1	3	5	2	1	
940	Other Endocrine	29	24	3	2	12	16	1	0	2	0	0	2	0	20	
910	Brain	23	18	5	0	5	15	8	0	0	0	0	0	0	18	
930	Thyroid	23	22	1	0	5	18	0	0	19	1	0	2	0	0	
920	Other Nervous System	13	12	1	0	3	10	0	0	0	0	0	0	0	12	
892	Ureter	3	3	0	0	2	1	0	1	0	1	0	0	1	0	
893	Other Urinary	1	3	0	0	1	0	0	0	0	0	0	0	0	1	
	Lymphatic System	77	63	13	1	44	33	0	0	13	14	12	17	1	6	
962	Non-Hodgkin's Lymphoma	66	52	13	1	34	32	0	0	11	10	8	16	1	6	
961	Hodgkin's Disease	11	11	0	0	10	1	0	0	2	4	4	1	0	0	
999	Unknown or Ill-defined**	29	13	1	15	14	14	1	0	0	0	0	0	0	13	

*Stage reflects analytic cases **AJCC Stage not applicable NA = Non-applicable UNK = Unknown Stage

NUMBER OF NEW CANCER CASES 1987-2021

Figure 2 depicts the number of newly diagnosed cancer cases added to the Cancer Registry since 1989. These cases are categorized into three groups: new cancer cases for the year 2021; cases diagnosed and treatment given; and those diagnosed elsewhere, but received their initial treatment at PIH Health.

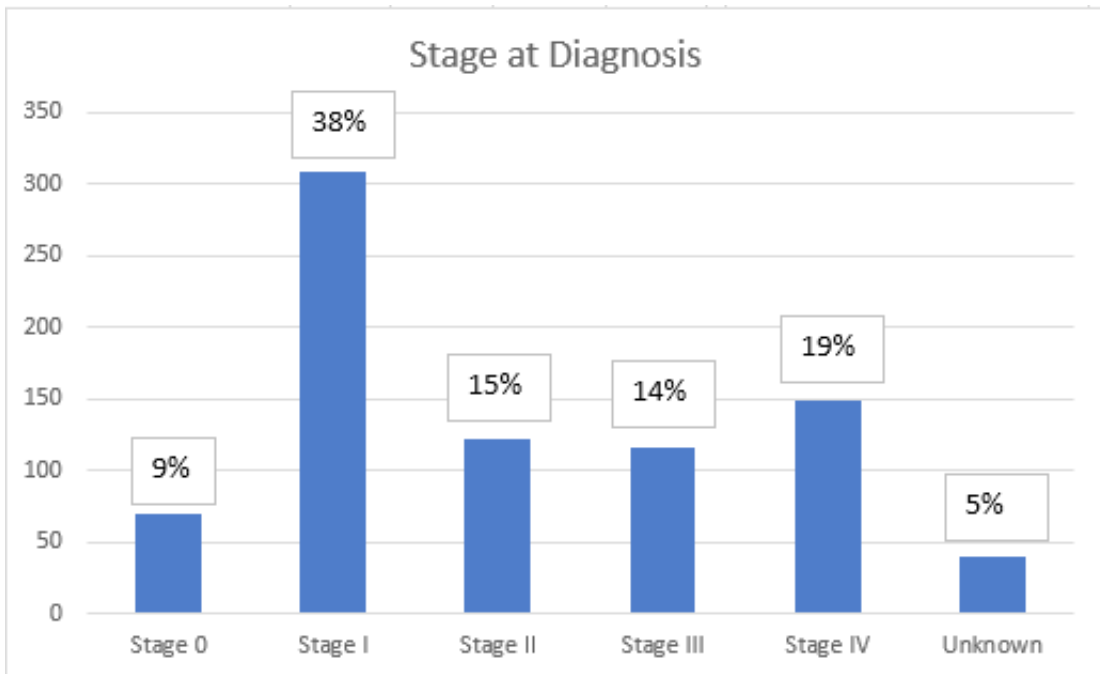
Figure 2



STAGE AT DIAGNOSIS

The stage of disease at the time of diagnosis plays a vital role in the prognosis and treatment of a cancer patient. In 2021, 47% of all newly diagnosed patients were in early stage at diagnosis (in-situ or Stage I), 15% were Stage II, 14% were Stage III, 19% were Stage IV and 5% were classified as unknown stage at time of diagnosis. (Figure 3)

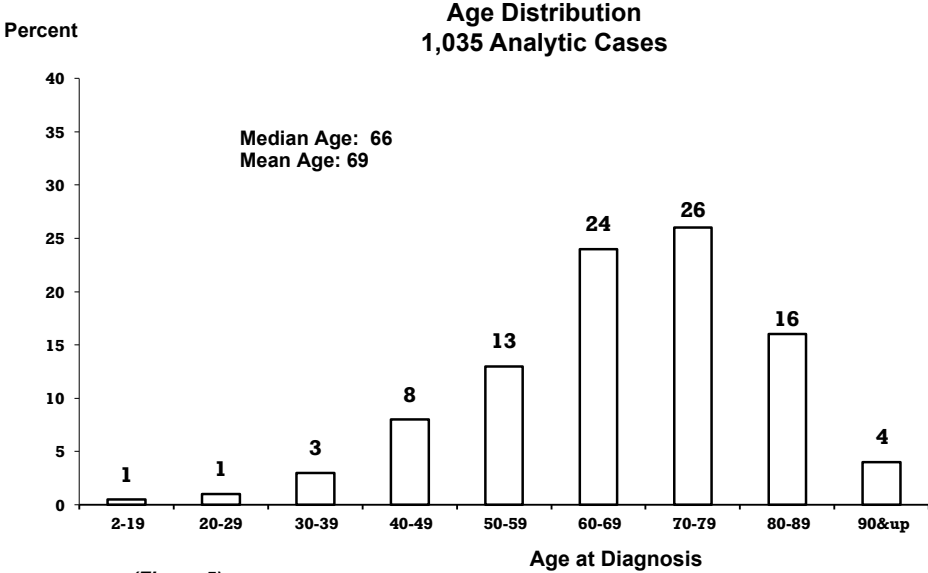
Figure 3



AGE DISTRIBUTION AT DIAGNOSIS

Sixty-six percent of patients were between the ages of 60 and 90 at diagnosis. The median age was 66 years.

Figure 5



PHYSICIANS AND ADVANCED PRACTICE PROVIDERS WHO PRESENTED AND PARTICIPATED IN CASE PRESENTATIONS AT CANCER CONFERENCES IN 2021

Anuj Rajput MD

DIAGNOSTIC RADIOLOGY

Regina Christ NP

Christopher Aho MD

NEUROSURGERY

Aditya Ambegaonkar MD

CARDIOVASCULAR

Ashwin Ashok MD

GASTROENTEROLOGY

Eung K. Bai

FAMILY PRACTICE

Alok Bhatt MD

RADIOLOGY

Ivan Barrett MD

DIAGNOSTIC RADIOLOGY

Kimberly Bickell MD

DIAGNOSTIC RADIOLOGY

Henry B. Bikhazi MD

OTOLARYNGOLOGY

John A. Britto MD

PLASTIC SURGERY

Elisabeth Brown MD

FAMILY MEDICINE

Leo Buxbaum MD

GASTROENTEROLOGY

Nadeem Chishti MD

PULMONARY

Eric Cheung DO

ONCOLOGY

Nelson E. Dalla Tor MD

FAMILY MEDICINE

Sabeen Dhand MD

DIAGNOSTIC RADIOLOGY

Mark Dubin MD

DIAGNOSTIC RADIOLOGY

Jack H Freimann MD

HEMATOLOGY/ONCOLOGY

Joel B. Garris MD

RADIOLOGY

Brent Gray MD

OBSTETRICS & GYNECOLOGY

Kyle Greene MD

HEMATOLOGY/ONCOLOGY

Armen Gregorian MD

GENERAL SURGERY

Christopher S. Ho MD

HEMATOLOGY/ONCOLOGY

Nathan S. Honda MD

PATHOLOGY

Samuel Im MD

GYNECOLOGIC ONCOLOGY

Maureen Jensen MD

DIAGNOSTIC RADIOLOGY

Juan B Kaplan MD

UROLOGY SURGERY

Samuel W. Kim MD

SURGICAL ONCOLOGY

Robert Kleinman MD

RADIOLOGY

Nanette Kovash DO

RADIOLOGY

James Kuo MD

RADIOLOGY

William S Kurohara MD

RADIATION ONCOLOGY

John Lah MD

GASTROENTEROLOGY

Jason Lai MD

UROLOGY

Michelle Le NP

Virginia Lee MD

OBSTETRICS & GYNECOLOGY

Edwin Lin MD

ONCOLOGY

Rosalio Lopez MD

CHIEF MEDICAL OFFICER

William D. MacDonald MD

PATHOLOGY

Talal M. Malhis MD

ORTHOPEDIC SURGERY

Norma Martinez MD

FAMILY PRACTICE

Robert Mecum MD

GASTROENTEROLOGY

Rosemary Melesko NP

Haig V. Minassian MD

NEUROSURGERY

Paul O'Connor MD

DIAGNOSTIC RADIOLOGY

Mark Odou MD

GENERAL SURGERY

Zareh J. Ounjian MD

DIAGNOSTIC RADIOLOGY

Renee Palta DO

GASTROENTEROLOGY

Christie Pang MD

PATHOLOGY

Amish Patel MD

RADIOLOGY

Jagdish Patel MD

DIAGNOSTIC RADIOLOGY

Sandip S. Patel MD

INTERNAL MEDICINE

Joseph Park MD

DIAGNOSTIC RADIOLOGY

Yong Park MD

DIAGNOSTIC RADIOLOGY

Wayne Ray MD

GENERAL SURGERY

Peter C. Roca MD

OBSTETRICS & GYNECOLOGY

Millicent O. Rovelo MD

PLASTIC SURGERY

Daniel D. Saket MD

RADIOLOGY

Ramin R. Saket MD

RADIOLOGY

Dennis J. Sargent MD

GENERAL SURGERY

Chunilal Shah MD

FAMILY MEDICINE

Ravi Shankar MD

ONCOLOGY

Bashir A. Shaw MD

INTERNAL MEDICINE

Merton L. Shew MD

DIAGNOSTIC RADIOLOGY

Alvin Shon MD

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Sonali Thakore NP

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Eduardo Tovar MD

CARDIOVASCULAR & THORACIC SURGERY

Miguel Velez MD

GENERAL SURGERY

Lisa Wang MD

ONCOLOGY

Lily Y. Wang MD

DIAGNOSTIC RADIOLOGY

Alex T. Wu MD

FAMILY MEDICINE

Gerald Yoon MD

UROLOGY

Jeffrey C. Yuen MD

RADIATION ONCOLOGY

Brian Yue MD

RADIOLOGY

Scott K. Yun MD

UROLOGY

2021 BREAST, LUNG & MULTIDISCIPLINARY CANCER CONFERENCES AND LECTURE SUMMARY

Cancer conferences provide a multidisciplinary, patient specific, treatment-planning, consultative service for patients and their managing physicians. The conferences offer a forum for discussing various treatments options and assist in determining the most appropriate patient management plan.

Site Presented	Total Cases
Lung	141
Rectum	25
Colorectal/Anus/Cecum	23
Gastric	19
Pancreas	11
Head & Neck/Scalp	11
Esophagus	10
Abdominal wall	7
Bladder	6
Appendix	6
Pelvis	5
Lymphoma	4
Thyroid	4
Stomach	3
Axilla	3
Ovary/Fallopian Tube/Omentum	5
Corpus Uteri/Vulva/Endometrium/ Cervix	3
Unknown Primary	2
Leukemia/Myeloma	2
Buttocks	2
Testis	2
Vulva	2
Retroperitoneal	2
Liver	1
Kidney	1
Brain/CNS	1
Small Intestine/Ileum	1
Bile Duct	1
Bone	1
Endocrine	1
Spine	1
Penis	1
Sarcoma	1
Thigh	1

Acknowledgments



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References



- Cancer Program Manual, 2020, American College of Surgeons, Commission on Cancer, Chicago
- Manual for Staging of Cancer, 8th Edition, American Joint Committee, On Cancer, Springer, New York, NY 2016
- Cancer Facts & Figures, 2021, American Cancer Society Inc., New York, New York
- California Facts & Figures, 2021 American Cancer Society, California Division, Inc., Oakland, California
- PIH Health Cancer Registry Statistical Database

For more information about the PIH Health Comprehensive Community Cancer Program at PIH Health, call 562.698.0811 Ext. 12456, or visit PIHHealth.org/CancerCare.

PIH Health Whittier Hospital
Cancer Program
12401 Washington Blvd.
Whittier, CA 90602

Directory of Services



PIH Health Whittier Hospital Number

562.698.0811

Breast Oncology Nurse Navigator	562.907.0667 Ext. 15326
Cancer Program Education/Support Groups	562.698.0811 Ext. 12570
Cancer Information Hotline	562.945.8326
Cancer Registry	562.698.0811 Ext. 12896
Clinical Trials Department	526.698.0811 Ext. 12930
Colorectal Oncology Nurse Navigator	562.698.0811 Ext. 12580
Hospice of Presbyterian	562.947.3668
Home Health	562.902.7763
Infusion Services	562.698.0811 Ext. 12641
Lung Cancer Screening Program	562.967.2892
Lung Nurse Navigator	562.698.0811 Ext. 11271
Lymphedema Program	562.698.0811 Ext. 12594
Nutrition Services	562.698.0811 Ext. 11320
Oncology Resource Center	562.698.0811 Ext. 12820
Patricia L. Scheifly Breast Health Center	562.907.0667
PIH Health Hematology/Oncology Clinic	562.789.5480
Radiation Oncology	562.696.5964
Website Address	PIHHealth.org

Glossary Of Terms



A = Analytic

Cases which are first diagnosed and/or received all or part of their first course of treatment at PIH Health Hospital - Whittier.

N/A = Non-Analytic

Cases which were first diagnosed and treated elsewhere, later admitted to PIH Health with disease.

Stage at Diagnosis

The extent of disease based on all diagnostic and therapeutic evidence available by the end of the first course of therapy or within four months after beginning treatment.

NA

Not Applicable. Some types of cancer do not have staging schemes.

TNM Staging System

The TNM system is an expression of the anatomic extent of disease and is based on the assessment of three components:

- **T** The extent of the primary tumor
- **N** The absence or presence and extent of regional lymph node metastasis
- **M** The absence or presence of distant metastasis

TNM Stage Groupings

After the T, N and M has been assigned, they are grouped into stages. The grouping ensures, as far as possible, that each stage group is relatively homogeneous with respect to survival and that the survival rates of these stage groupings for each cancer site are distinct. Carcinoma in situ is categorized Stage 0; for most sites, a case with distant metastasis is categorized Stage IV. Stages I, II, and III indicate relatively greater anatomic extent of cancer within the range from Stage 0 to Stage IV.

Survival Rate

A statistical index that summarizes the probable frequency of specific outcomes for a group of patients at a particular point in time.

Life Table Method

The life table method involves dividing the total period over which a group is observed into fixed intervals, usually months or years.

Relative Survival

The ratio of the observed survival rate to the expected rate for a group of people in the general population similar to the patient group with respect to race, sex and age. The relative survival rate represents the likelihood that a patient will not die from causes associated specifically with their cancer at some specified time after diagnosis.

