2014 ANNUAL CANCER REPORT
Dear Colleagues, Patients, Friends and Supporters,

As we reflect on another year of accomplishments within our cancer program, we are honored to present the Tanner Cancer Care 2014 Annual Report. We continue our mission: to be the preferred provider of cancer services in our communities, providing the complete continuum of cancer services from diagnosis through survivorship and emphasizing evidence-based care in a clinically advanced environment—all while remaining fully focused on our patients.

We remain committed to the Tanner Cancer Care Promise and our ability to provide treatment options to our patients within three days of their diagnosis. This year, we served 261 patients who were referred to the program. Each of these patients received a call from their patient navigator and were scheduled to complete all diagnostic testing and meet with an oncologist within three days of receiving the diagnosis of cancer, limiting wait times and improving their chances for the best possible outcome.

It has been another busy year for Tanner Cancer Care as we continue to implement new programs, services and technology to support the patients of west Georgia and east Alabama during their always difficult diagnosis of cancer. This year, Tanner Health System, in maintaining a commitment to utilize the most state-of-the-art technology to conquer cancer, moved forward with the purchase of the Varian TrueBeam Linear Accelerator for the Roy Richards, Sr. Cancer Center. The TrueBeam offers the most advanced radiation therapy treatments available on a platform that allows for a faster, more accurate delivery of radiation, increasing cure rates and decreasing side effects. We also invested in a large-bore GE Optima CT 580 simulator to improve our efficiency and workflow, while also providing the best possible image quality for optimal treatment planning. These are being installed now and will be highlighted in greater detail in our 2015 report.

A major area of focus for the Cancer Committee this year centered on the recognition and treatment of neutropenia, as well as the unified treatment of several other oncologic emergencies. David Shepard, MD, a medical oncologist with Northwest Georgia Oncology Centers, developed a presentation for the hospital nursing staff and presented the information during two sessions of the annual Medical Surgical Conference held in October. This is just one of many examples in which participation by our physicians sets Tanner Cancer Care apart and creates an environment of shared learning, as well as a commitment to quality care. Protocols, policies and procedures have been developed and distributed based on the outcome of research, analysis and discussions by committee members and other departments within the health system.

In addition to the continued efforts of our outstanding Cancer Committee, a Breast Program Leadership team was formed this year to assist in our progress toward achieving accreditation for Tanner Breast Health through the National Accreditation Program for Breast Centers (NAPBC), as well as an American College of Radiology Center of Excellence recognition, again demonstrating Tanner’s commitment to attaining the highest quality care in breast cancer diagnosis and treatment.

Our prior accomplishments include accreditation through the American College of Surgeons’ Commission on Cancer for Tanner Cancer Care and accreditation by the American College of Radiology for the Roy Richards, Sr. Cancer Center. These accreditations further illustrate the credibility of the patient-centered care approach pursued by Tanner Cancer Care and certifies that the program’s patients will benefit from the expertise of an entire team of cancer specialists.

This year, we broadened the scope of clinical trials available to our patients. Because we know that 85 percent of all cancer care is provided in the community setting, we want to ensure that our patients have appropriate access to the most current investigational clinical trials available. In addition to the trials already being offered through Northwest Georgia Oncology Centers,
Tanner Cancer Care has formed an affiliation with the Emory Winship Cancer Institute to provide clinical trials through NRG Oncology, formerly Radiation Therapy Oncology Group, National Surgical Adjuvant Breast and Bowel Project, and Gynecologic Oncology Group. NRG Oncology is a National Cancer Institute-funded cooperative group dedicated to the advancement of cancer treatment and improvement of outcomes. We will continue to seek out new opportunities for expansion in this important area.

Our patient stories are a favorite in the annual report, and this year we highlight several remarkable journeys. These patient experiences have rejuvenated our commitment to increased education, awareness and action within the community to promote early detection through screening and prevention efforts. This year, we enhanced our screening events and, in addition to free prostate screenings, we offered skin cancer screenings and mammograms, dubbing this year’s event the 2014 Cancer Answer Screenathons. We scheduled four events across several of our communities, screening more than 100 participants.

We hope you will enjoy this year’s annual report. We are so proud of the accomplishments achieved by the dedicated physicians and staff of Tanner Cancer Care and look forward to another year of continued growth and development. As always, thank you for your ongoing support of Tanner Cancer Care and our mission. We welcome any questions concerning the information in this report. For more details on the many services available at Tanner Cancer Care, please visit www.TannerCancerCare.org.

Sincerely,

J. Richard Bland, MD       Shellie A. Sherrod, MBA
Medical Operations Leader  Director
Tanner Cancer Care          Tanner Cancer Care

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2014 CANCER COMMITTEE

PHYSICIAN MEMBERS

John Arnold, MD - Radiology
Brian Barden, MD - General Surgery - Physician Liaison
Richard Bland, MD - Radiation Oncology - Chairman
Lorien Goodale, MD - Pathology
Anna Harris, MD - Radiation Oncology
Brad Larson, MD - Medical Oncology - Vice Chairman
Randall Pierce, MD - Medical Oncology
Thomas Reeve, III, MD - General Surgery
David Shepard, MD - Medical Oncology
Raul Zunzunegui, MD - Breast Surgery

ADMINISTRATIVE AND ANCILLARY REPRESENTATIVES

Nikki Adams - American Cancer Society Representative
Jane Baker, RN, MSN, CBPN-IC - Tanner Breast Health Nurse Navigator
Lynn Barrett, RPh - Director, Pharmacy
Debbie Brock, RN - Director, Tanner Hospice Care and Tanner Home Health
Rev. Alex Brookhuis - Chaplain
Mary Busby - Director of Development, Tanner Medical Foundation
Hope Davenport, RN - Nursing Manager, Tanner Medical Center/Carrollton, Fourth Floor and Infusion Center
Carole Eddleman, MSW - Oncology Navigator
Holly Garner, RD - Oncology Nutrition Services
Lori Graham, MSLS - Conference Coordinator
Donna Lindley, RT (T), CMD - Dosimetrist
Deborah Matthews, RN - Chief Nursing Officer
Kelly Meigs – Director, Tanner Marketing and Public Relations
Cathleen Murray, CTR - Certified Tumor Registrar
Krissy Parker – Clinical Research Representative
David Scholl, PA-C - Medical Oncology
Shellie Sherrod - Director, Oncology Services
Venita Steed, RN - Program Director, Tanner Breast Health
Tommy Thomas, ACSW, LCSW - Oncology Social Worker
David Thornhill, RT (R) BSRT, CRA - Director, Diagnostic Imaging
Ashley Underwood - Radiation Therapist
Regina Vines - Manager, Rehabilitation Services
Sue Walls, RN, OCN - Oncology Nurse
Melissa Walker, RN, MSN, FNP-C - Medical Oncology
Ansley Whitley, LCSW - Psychosocial Service Coordinator/Oncology Navigator
Arlene Wright, RN, OCN - Clinical Manager, Oncology Services
Sylvia Yaw - Director, Quality
OUR PROMISE TO KEEP
THE TANNER CANCER CARE PROMISE:
3 DAYS FROM DIAGNOSIS TO TREATMENT OPTIONS

There’s one way to help cancer patients that goes beyond excellent outcomes: speed.

Like many of the exceptional cancer treatment programs available throughout Georgia, Tanner Cancer Care offers leading-edge technology and treatments, a comprehensive approach to care and excellent clinical outcomes. But Tanner Cancer Care also has a tight-knit team of cancer specialists who already work closely together, representing a variety of disciplines in the fight against cancer. This makes Tanner uniquely positioned to establish a process that gets patients ready to start a treatment plan fast.

That’s the idea behind the Tanner Cancer Care Promise: 3 Days from Diagnosis to Treatment Options. To fulfill the Tanner Cancer Care Promise, staff members begin devising a treatment plan as soon as they receive a referral. Within three days, the patient knows his or her treatment options.

Keeping that promise is the first step of each patient’s personalized path to recovery, developed by a team of experts that includes experienced surgery, oncology, hematology, radiology, nutrition, rehabilitation, patient navigation and nursing professionals. When necessary, Tanner’s cancer team also may call in other specialists. Tanner has a medical staff of more than 300 physicians representing more than 34 specialties, ready to help address a wide range of cancer diagnoses.

Tanner Cancer Care treats the whole person, not just the disease. Patients are not just a number. Unlike in many larger cities, our staff not only works here in west Georgia, they live here, too. Each patient is also a neighbor, friend or family member. And that’s exactly how they’ll be treated.

During a meeting in 2013, the Tanner Oncology Advisory Council discussed options for creating a garden in the open space between the Roy Richards, Sr. Cancer Center and the offices of Northwest Georgia Oncology Centers.

The Tanner Oncology Advisory Council is a group of cancer survivors and caregivers who provide feedback to Tanner Cancer Care to improve services from a patient’s perspective.

“I can remember looking out the window and seeing nothing but the side of a building and utility boxes,” said Alison Jiles, a member of the council. “There was one tree and I tried to focus all of my attention on it.”

In June 2014, the dream became reality with a dedication ceremony in the new garden.

The centerpiece of the project was donated in memory of Cindy Redding, by Randall and Tena Redding. Cindy Redding was diagnosed with breast cancer in 1988 and was one of the first patients treated by Dr. Bland when he started his practice at Tanner.

Cindy Redding passed away in 1993.

The Reddings met with the project team on several occasions to discuss options for the centerpiece of the garden. They were focused on something that would be impactful and memorable.

“As a constant reminder of hope, our family gratefully places a piece of art in the new cancer center garden in memory and honor of Cynthia McIntosh Redding,” said Randall Redding. “Cindy was radiant, fun-loving, joyful and determined. This heart sculpture, created by local artist Gordon Chandler, immediately reminded us that no matter what we might have going on in our lives, love prevails. We hope those who retreat to the garden for a time of peace and reflection will be encouraged by the heart.”

Loy Howard, president and CEO of Tanner Health System, spoke during a special dedication of the garden at Tanner’s Roy Richards, Sr. Cancer Center in Carrollton. The garden, which was installed within view of patients receiving infusion treatments at Northwest Georgia Oncology Centers, was made possible with donations from Mr. and Mrs. Leon Clark, as well as Dr. and Mrs. Richie Bland and the physicians of Northwest Georgia Oncology Centers.

The centerpiece of the garden is a sculpture created by local artist Gordon Chandler and donated to Tanner Cancer Care by Randall and Tena Redding in memory of Randall Redding’s late wife, Cindy McIntosh Redding. Cindy Redding was diagnosed with breast cancer and became one of the first cancer patients treated at Tanner. She passed away in 1993. The inscription on the statue reads, “In celebration of her laugh, determination and uncompromising faith. 2 Corinthians 5:17.”
The Grammy Award-winning song “Overcomer,” by gospel star Mandisa, has a powerful message. But when it serves as a soulful serenade for the stories of cancer survivors throughout west Georgia and east Alabama, it becomes an anthem of hope for the region.

In May 2014, Tanner Health System and Tanner Cancer Care stepped into the music video business for a moment to share a message of hope and show people what “overcomer” can mean for someone who’s been through the fight of their lives against cancer. The video depicted survivors of many ages, from many walks of life and with different kinds of cancer, but they had one thing in common: they overcame their cancer at Tanner.

“We were coming up with something special that we could play for the attendees at Celebration of Life, our annual get-together for area cancer survivors,” said Shellie Sherrod, director of Tanner Cancer Care. “It’s always been an emotional night for the survivors and for us as the patient care team that provided their treatment. We wanted something fun, something touching, but not something that was overtly about having cancer. That’s when we found the song ‘Overcomer.’ We knew that would resonate with someone who’s been through cancer and won.”

“Overcomer” embodied what Tanner wanted to communicate to survivors and others who would be watching the video. The message of the song would resonate with the audience: You can overcome and life goes on.

The video shoot took two days. As the film crew set up their equipment and prepared the scenes, the survivors stood around and shared their stories with one another and the Tanner team members who were also in the video. Even as filming was taking place, it became clear that this would be a powerful experience.

It’s surprising at how long it takes to shoot enough footage for a three-minute song. And while there was hesitation at first that survivors might not want to participate or would be shy about appearing on camera, those concerns proved false — it takes more to rattle someone who’s been through cancer, it turns out, than a video camera.

On the night of Celebration of Life, survivors, their guests and staff from Tanner Cancer Care filled the 300-seat classroom at Tanner Medical Center/Carrollton. After a short introduction by a local cancer survivor, the houselights went down and the giant cinema-quality screen at the front of the room began to play.

When the lights came back up, many in the audience dabbed with tissues at their eyes. Hands were grasped tight between the survivors and the guests who had been with them at every step through their journey. Arms wrapped around shoulders. The applause was not immediate; the effect took some time to set in. The message to the audience was clear: You were not merely survivors — you were overcomers.

Tanner hopes that this inspiring video can continue to be shared and spread into the community. If you see it, share it. The video can be found on Tanner’s Facebook page or at www.TannerCancerCare.org.
Carrollton native Rose Holley has known cancer for all of her adult life. She’s known it as a caregiver and as a patient. She’s seen it claim the life of her mother, and she’s seen it beaten back in her own life.

Because cancer often runs in a family, Holley’s experience is not what makes her special. It’s the manner in which she has lived out her battle against cancer that has made her a bit of a celebrity among Tanner Health System’s cancer care team.

Holley, a volunteer at Tanner Cancer Care and founder of the non-profit Hope For The Journey, was the overwhelming choice of Tanner’s staff to be nominated for the American Cancer Society’s Lane Adams Quality of Life Award.

Northwest Georgia Oncology Center’s David Shepard, MD, described Holley as a “true angel of a woman.”

“I cannot give an accurate number of the occasions that I have opened the door to meet a new breast cancer care patient and have been greeted by Rose’s warm, smiling face in the room. This does a tremendous amount to ease the tension and fear that patients experience when first meeting their cancer care provider,” Dr. Shepard wrote in his nomination of Holley.

“Ms. Holley does not focus on her own battle with cancer as much as she utilizes her experience to provide inspiration for others,” he said.

Dr. Shepard was but one of many hailing the spirit and tireless dedication of Holley.

Board members at Hope For The Journey and breast cancer survivors joined in the parade of support for her as well.

“During my journey with breast cancer, she was my go-to person for questions about chemo, signs and symptoms, and what to expect during my treatment,” said Priscilla Clemons. “She always made the point to call or come by and see me, and never got tired of me asking the same questions.”

Holley’s mother, Rose Dumas, died of metastatic breast cancer in 1991. Dumas was 64 years old and had found a lump in her breast, but decided to wait until she turned 65 and qualified for Medicare to seek treatment.

Holley was her mother’s primary caregiver during the battle. Then, 12 years later, Holley noticed a lump in her own breast. She went to the doctor immediately and was diagnosed with HER-2/neu-positive medullary carcinoma in December 2003. She underwent surgery for a lumpectomy, three months of chemotherapy and seven weeks of radiation.

Since then, she’s had numerous scares, which resulted in benign tumors being removed from various parts of her body.

In 2009, tired of waiting for the next potential threat, she started Hope For The Journey, a grassroots organization to help patients to overcome barriers to care through education and support, both during and after cancer.

Hope For The Journey board member Melanie Kirby said Holley has been a blessing to many.

“Rose and her supporters work tirelessly to gain support for, and bring attention to, those living with breast cancer,” Kirby wrote in her nomination. “She helps us all understand the needs are far greater than just medical. There are spiritual, financial and emotional needs that must be addressed.”
Rose Holley, of Carrollton, is a leading advocate for women with cancer in West Georgia. She is the founder of Hope for the Journey.
James Pope, MD, was 3 years old when he moved to Carrollton. It was 1948, and with five traffic lights, three police cars and one fire truck, only Barney Fife was missing from this small town.

For the next 18 years, Dr. Pope matriculated through the Carrollton City School system and what is now the University of West Georgia before going to medical school at Augusta’s Medical College of Georgia (now Georgia Regents University).

Dr. Pope would spend time in Germany with the U.S. Army, in Memphis, Tenn., doing his residency and elsewhere doing internships, but none of the bigger cities ever laid claim to his heart.

“It never occurred to me to move away from Carrollton,” Dr. Pope said. “I love it here. The school system is great, and that keeps people wanting to stay here, or the young adults move away and come back.”

Dr. Pope retired from Carrollton Surgical Group in July 2014 after 36 years and countless surgeries. “I have no idea how many surgeries I performed here,” he said.

But odds are good that every time he’s on the city square or at the barber’s shop or grocery store, he’ll run into someone he’s operated on. And Dr. Pope wouldn’t have it any other way.

“Not everyone likes running into people they know every time they go out,” he said. “My sister doesn’t, so she lives in Atlanta. I like it, though. I like seeing people I’ve known forever and former patients or people from the school.”

Perhaps he likes seeing former patients because his bedside manner made many fans. He’s not a gregarious personality or one to talk a lot about himself, but his style was to always tell the truth straightforward without being so blunt as to create undue anxiety. That’s a fine line to walk, but one that Dr. Pope always tried to manage, he said.

He is credited with performing the first elective vascular surgery in Carrollton, as well as the first lumpectomy sometime in the early ’80s, he figures. Before that, a patient would either go to Atlanta, or more likely, choose a mastectomy.

Like many other retired physicians, Dr. Pope does not miss the increasing bureaucracy and governmental involvement in the practice of medicine. In fact, long before recent healthcare insurance reform, Dr. Pope was known for his disdain for paperwork.

Now, he plans on hunting and playing a little more golf in his retirement. But his primary passion and most of his energy will go toward keeping the Carrollton City Schools a top-notch institution.

He’s served on the school board since 1983, the year his former surgical partner, Tom Reeve Jr., MD, stepped away from the school board after 26 years. That’s a legacy that brings Dr. Pope great pride.

Dr. Pope knows he left Carrollton Surgical Group in good hands with five capable surgeons, including his protégé’s son, Thomas Reeve III, MD.
“The schools really are one of the primary things that make Carrollton such a great place to live,” said Dr. Pope, who retired in July 2014. “The city has changed drastically since I was 3 years old, but it has always had great schools, and I think it always will.”
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The Oncology Data Management Team is responsible for abstracting and compiling data from each newly diagnosed cancer case annually. The team consists of certified tumor registrars (CTRs).
Almost 200 cancer survivors and their guests came out for Tanner Health System’s fifth annual Celebration of Life.

The celebration, hosted by Tanner Health System and Tanner Cancer Care at Tanner Medical Center/Carrollton, featured hors d’oeuvres and dessert, as well as several inspirational speakers and the debut of Tanner’s inspirational “Overcomer” video.

“This is really special,” said guest speaker Kenn Kington. “You just don’t see hospitals doing things like this, celebrating their patients.”

Kington, an Atlanta-based comedian who has appeared on Comedy Central and is heard on satellite radio stations like Laugh USA and Blue Collar Comedy, talked about his own experience watching his daughter, then 3, battle cancer.

When she lost her hair to chemotherapy, Kington had her shave his own head, too. He said they spent an hour out on the porch with clippers, a comb and scissors, until his wife finally came out and said it looked like he “has mange.”

His daughter said that she was told her hair might grow back curly because of the cancer treatments, and she asked how his would look when his grew back.

“I said, ‘Well, honey, I just hope it does grow back,’” Kington said.

CHOIRS FOR CANCER RAISES $55,000

Tanner Medical Foundation’s 2014 Choirs for Cancer concert raised $55,000 to help local cancer patients.

Directed by Kathy Waldrop for the fifth consecutive year and presented by SMI, Inc., this celebrated musical experience featured luminaries such as renowned gospel singer and songwriter Babbie Mason. Mason is the recipient of two Dove awards and has earned 11 Dove Award nominations, as well as Grammy and Stellar Award nominations. In 2010, Mason was inducted into the Christian Music Hall of Fame.

Local favorite OK2 performed their inspiring brand of contemporary praise rock and classic favorites. And Kenn Kington, known for his clean comedy shows and appearances on Comedy Central and satellite radio programs such as Laugh USA and Blue Collar Radio, quickly had the entire audience smiling and laughing.

Members of The Georgia Spiritual Ensemble performed their unique style of moving spiritual, along with The Choirs for Cancer Community Choir, directed by Jack Gantt. The choir is the product of the dedication of talented choir members from our own community who share the love of music and spirit of support for local cancer patients.

For the first time in Choirs for Cancer history, an elementary school chorus took the stage when the Sand Hill Patriot Chorus from Sand Hill Elementary School performed, led by Marcella Correa. Stacey Morin and Randall Redding also took the stage as guest speakers, and classical guitarist Harry Nelson performed musical interludes.

This vital support saves lives, yet the need continues. If you would like to give the gift of hope, please donate today:

By phone at:
770.812.GIFT (4438)

By mail at:
Tanner Medical Foundation
P.O. Box 695
Carrollton, GA 30112
KEY FACTS ON COLON CANCER

Colon cancer, or colorectal cancer, usually begins with non-cancerous polyps, which are small growths on the lining of the colon. Some of the polyps, adenomas polyps, can become cancer. Often, taking out the polyp early, while it is still small, will prevent it from becoming cancerous. The vast majority of colon and rectal cancers are adenocarcinomas, meaning the disease started in gland cells.

The colon, or large intestine, is a long, muscular tube that absorbs water and nutrients from food that has been broken down through the digestive system and small intestines. The remnants become stool and stay in the colon until it is passed through the rectum.

STATISTICS
With 93,090 new cases of colon cancer and 39,610 new cases of rectal cancer expected to be diagnosed in the United States this year, colorectal cancer is the third most common cancer found in men and women (excluding skin cancers). The disease is expected to account for almost 50,000 deaths this year.

The mortality rate for colorectal cancer has been declining for about two decades. Part of this decline is due to surgeons removing polyps before they can become cancers. More people are also getting screened for colorectal cancer, allowing providers to detect the disease and begin treatment earlier. There are about one million people alive today who had colorectal cancer in the past.

The lifetime risk of developing colorectal cancer is about 5 percent, or one in 20. Women have a slightly lower risk of developing the disease than men.

RISK FACTORS
There are no known causes for colon cancer, and the risk factors are somewhat vague and not as telling as in some cancers. A family history of colon cancer puts one in a higher-risk category, as does having Crohn’s disease or type 2 diabetes.

Doctors believe smoking, being chronically overweight, eating large amounts of red meat and fried foods, and not being physically active all play a role in increasing the likelihood of getting colon cancer.

SCREENING
Colon cancer screening can help detect the presence of polyps or the early stages of cancer. Screenings include fecal occult blood tests and colonoscopies. Most people with no family history or symptoms do not need a colonoscopy until they are 50 years old. This is a general rule only. Talk with your primary care provider about when certain screenings are right for you.

TREATMENT
Like most cancers, there are four primary treatments for colon cancer — surgery, radiation, chemotherapy and targeted therapies, such as monoclonal antibodies. Researchers are making advances in all of these treatments. An oncologist will recommend a treatment plan based largely on the stage of the cancer. Often, two or more of these treatments will be employed as part of the therapy.

As with many forms of cancer, colon cancer can recur, but such recurrences are hard to predict. Even when you are cancer-free, it is important to adhere to your physician’s plan for follow-up screenings, exams and blood tests.

THE FUTURE
Doctors are also looking at dozens of new, targeted therapy drugs to increase treatment choices for people with colorectal cancer. And newer studies are researching the use of these drugs with chemotherapy in earlier-stage cancers to reduce the risk of recurrence. Also, clinical trials are testing vaccines that could treat colorectal cancer or keep it from coming back after treatment.
HOWARD SEEMAN, MD

Howard Seeman, MD, is board-certified in internal medicine and gastroenterology and has been in private practice in Carrollton since 1991. Dr. Seeman specializes in esophageal reflux and colon cancer screenings.

Dr. Seeman graduated from Columbia University and Boston University School of Medicine. He completed his residency at St. Mary’s Hospital/Yale University School of Medicine and did a fellowship at Griffin Hospital/Yale University School of Medicine Affiliated Hospital Program.

THELMA W. LUCAS, MD

Thelma W. Lucas, MD, is board-certified in internal medicine and gastroenterology, specializing in liver diseases. Dr. Lucas has been practicing at West Georgia Gastroenterology Associates since 2007. Before that, Dr. Lucas served as medical director of liver transplantation at the University of Illinois College of Medicine at Chicago and at Rush University Medical Center.

Dr. Lucas graduated from the University of Illinois at Urbana-Champaign and the University of Illinois College of Medicine at Chicago. She completed her residency and fellowship at University of Illinois Hospitals and Clinics.

SUSAN PRESCOTT, FNP-C

Prescott is certified by the American Academy of Nurse Practitioners. Before joining West Georgia Gastroenterology Associates, she was a nurse practitioner with Piedmont Physicians in Newnan.

Prescott graduated from the Medical College of Georgia with a bachelor’s degree in nursing. She earned her masters in nursing with a family nurse practitioner certification from Georgia State University.

JOHN A. ARLEDGE, MD

John A. Arledge, MD, is board-certified in internal medicine and gastroenterology. He is also a flight surgeon, with the rank of major, in the Georgia Air National Guard, based in Savannah. Dr. Arledge joined West Georgia Gastroenterology Associates in September 2008.

Dr. Arledge graduated from the University of Virginia with a bachelor’s in biology. He graduated from the Medical College of Virginia and completed a residency at the same institution. He completed his fellowship in gastroenterology at the University of South Florida.

PRASHANT SHARMA, MD

Prashant Sharma, MD, is board-certified in internal medicine and gastroenterology. He joined West Georgia Gastroenterology Associates in October 2014.

Dr. Sharma graduated from Northern Illinois University and Baroda Medical College at the University in Vadodara, India. He completed his residency at Interfaith Medical Center in Brooklyn, N.Y. and completed his fellowship in gastroenterology at New York Methodist Hospital.
Tom Reeve Jr., MD, the first board-certified surgeon on Tanner’s medical staff, opened the doors to his practice the day after Tanner Memorial Hospital was dedicated in 1949.

As some of the region’s most notable providers joined Dr. Reeve in practice, like Talmadge “Mac” Martin, MD, James Pope, MD, and others, the practice grew into Carrollton Surgical Group.

For west Georgians in need of major colon surgery or a minimally invasive biopsy — and everything in between — the staff at Carrollton Surgical Group wants you to know a few things: You can travel farther, wait longer and get less-personalized care. Or, you can see one its five board-certified surgeons in Bremen, Carrollton or Villa Rica.

General surgeons David W. Griffin, MD, FACS, and Thomas E. Reeve III, MD, FACS, list colon cancer and breast cancer as two of their primary clinical interests.

Other areas of interest include laparoscopy, diabetes-related surgeries and vascular procedures.

All five surgeons at Carrollton Surgical Group are board-certified and are part of Tanner Medical Group — meaning they have full access to all the resources of Tanner Health System.

The surgeons at Carrollton Surgical Group know there are hundreds of options 60 miles to the east. That’s why the staff provides patients with its expertise and personalized approach to pre-surgical education and post-surgical support.

The staff works to alleviate patient anxiety before surgery. Patients will find the practice’s surgeons are not only experts in their fields, but also compassionate physicians who care deeply about their patients’ well-being.

With more than 50 years of practice history in west Georgia and east Alabama, Carrollton Surgical Group has become a valued resource in meeting patients’ healthcare needs.

From left to right: Brian Barden, MD, FACS; Thomas Reeve, MD, FACS; Jon Stanford, MD, FACS; Barry Harris, MD, FACS; David Griffin, MD, FACS; Kathryn Samples, PA-C
COLON CANCER SURVIVOR SAYS REGULAR SCREENING IS A ‘NO BRAINER’

Charles “Kenny” Benefield said he had never visited a doctor with anything worse than a cold until spring of 2012, when his energy level became so low he couldn’t walk from his house to his car without pausing to rest.

A routine examination by his doctor showed that Benefield was extremely anemic. The physician ordered a blood transfusion, then began tests to find the cause of the anemia. The test results stunned Benefield: he had colon cancer.

“I considered myself totally healthy,” said Benefield, who underwent cancer treatment at Tanner Cancer Care, a partner of the American Cancer Society. “But by May 2012, I just started having less and less energy. I didn’t want to do anything because I didn’t feel physically capable of doing anything. When initial tests showed my red blood count was so low, doctors said my body either wasn’t making red blood cells or I was losing blood. A colonoscopy showed what was wrong: I had cancerous tumors in my colon. It certainly wasn’t a diagnosis I was happy about.”

Colon cancer is the third-leading cancer killer of men and women, striking more than 138,000 people in the United States and killing more than 50,000. The American Cancer Society recommends that men and women aged 50 and older get regular screenings for colon cancer, which can prevent the disease when polyps are found and removed before they become cancerous. The survival rate is 90 percent if the disease is detected early, before it has spread.

During National Colon Cancer Awareness Month in March, the American Cancer Society launched a campaign developed to convince 80 percent of people aged 50 and older to get regular screenings by 2018. Currently, only one in three people aged 50 and older get a regular screening.

“There’s no doubt that regular colon cancer screenings save lives,” said Richard Wender, MD, the American Cancer Society’s chief cancer control officer. “There are several recommended screening test options, including colonoscopy, fecal occult blood test (FOBT), fecal immunochemical test (FIT) and sigmoidoscopy. We encourage people aged 50 and older to talk with their doctors and choose a test that’s right for them. The best test is the one that gets done.”

For Benefield, his treatment for colon cancer began with surgery to remove the colon. But there were complications from the surgery, and he spent three weeks in the hospital recuperating and lost 50 pounds during the ordeal. Chemotherapy was delayed while he regained his strength.

“The doctor wanted to start chemotherapy as soon as possible, but obviously, that wasn’t going to be possible for a while,” Benefield recalled. “I had no strength, continued to lose weight and wasn’t in good shape. Then doctors put in a colostomy bag, and that was something else to get used to. But eventually, I did get stronger and better, and doctors could get started with my treatment.”

Chemotherapy began in January 2013 and finished in May.

“I’m taking no drugs at this point, I’m feeling healthy and doctors aren’t seeing any cancer,” Benefield said. “I’m getting blood screenings every three months and yearly scans. Right now, all the markers look good.”

“Mr. Benefield has endured a lot to make it this far, but he knows it’s worth it,” said Brian Barden, MD, a board-certified surgeon with Carrollton Surgical Group and a member of the patient care team at Tanner Cancer Care. “His attitude has been as instrumental in how well he’s done as the treatment he received.”

Meanwhile, Benefield has some advice for anyone aged 50 and older: Get screened regularly. “It’s a no brainer,” he said. “Get it done. Had I gone for screening early on, I wouldn’t have had to go through colon cancer.”
Robert Garner battled hard to become a cancer survivor. After being diagnosed with colon cancer in 2000 and enduring surgery and chemotherapy, the cancer returned just two years later, this time in his liver. Then, cancer struck again in 2006 in his lungs.

“It was much harder to deal with the third time,” said Garner, 61, who was treated at Tanner Cancer Care, an American Cancer Society partner and supporter of the society’s Relay For Life in Carrollton. “My doctor decided to do surgery on both lungs then begin chemotherapy, but using a different regimen of drugs this time. It was difficult to recover the third time — much more difficult — but I came through.

“I’ve had good checkups since then, and am doing once-a-year checks now and getting scans every two years,” he added. “Things have looked good since 2006 and I thank God every day to still be here.”

Colon cancer is the third-leading cancer killer among men and women, with more than
136,000 Americans expected to be diagnosed with the disease this year and with 50,000 deaths, according to the American Cancer Society. A recent report by the society showed that colon cancer rates are down by 30 percent over the past decade, thanks to more people getting screened for colon cancer. But an estimated 23 million people aged 50 and older in the United States are not getting regular screening. The society has announced a new campaign to get 80 percent of men and women aged 50 and older to get regular screenings by 2018, which will save thousands of lives from the disease every year.

Garner, who lives in Muscadine, Ala., was first diagnosed with colon cancer 14 years ago when he was employed as golf course superintendent at a course in Carrollton.

“I noticed I had blood in my stool and went to the doctor,” he said. “A few days later, I learned that I had colon cancer. I had surgery, went through six months of chemo and checkups every three months. I thought that was it.”

But in 2002, he said, spots showed up in scans of his liver and his doctor decided that surgery was needed. Again, Garner had surgery to remove cancerous growths and six months of chemotherapy.

“I was lucky to be able to work through all of that,” he recalled. “I was working at Oak Mountain Golf Course, and my employer was very understanding about my treatment. I would work, then get treatment in the afternoon.”

He had regular checkups until 2006, when doctors found spots on both of his lungs. He was referred to a surgeon in Atlanta, where he had surgery and underwent another six months of treatment. He has been cancer-free since that time.

He retired from the golf course five years ago and he and his wife, Patricia, now have a farm with a herd of cows and four chicken houses. His advice to others is simple: Get screened for colon cancer.

“When my cancer was first found, it had spread to my lymph nodes,” he said. “That was certainly not a good thing. I had ignored symptoms. Screening is so important and so easy. It doesn’t take a lot of time, and it can save your life.”

Cancer diagnosis affects the entire family, not just the patient, and screening can save families from heartache.

He and his wife have encouraged their adult children to have colon cancer screening because of the history of the disease in the family, and the youngest, at age 29, is about to have the first screening.

“I have been fortunate to have my wife and family supporting me through the difficult times every step of the way,” Garner said. “I have two grandchildren and another on the way, and there was a time that I thought I wouldn’t be around to see any of this, that I would not live to see any of my grandchildren. It’s a blessing that I’m still here for it.”
# 2014 TANNER CANCER CARE STATISTICS

## 2013 STAGE REPORT — MOST COMMON SITES

<table>
<thead>
<tr>
<th>Stage</th>
<th>Lung</th>
<th>Breast</th>
<th>Prostate</th>
<th>Colon</th>
<th>Bladder</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1%</td>
<td>20%</td>
<td>0%</td>
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</tr>
<tr>
<td>I</td>
<td>18%</td>
<td>36%</td>
<td>30%</td>
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<tr>
<td>II</td>
<td>6%</td>
<td>26%</td>
<td>41%</td>
<td>11%</td>
<td>26%</td>
</tr>
<tr>
<td>III</td>
<td>18%</td>
<td>5%</td>
<td>1%</td>
<td>31%</td>
<td>0%</td>
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<tr>
<td>IV</td>
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<td>6%</td>
<td>15%</td>
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</tr>
<tr>
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<td>7%</td>
<td>13%</td>
<td>4%</td>
<td>6%</td>
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<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

| Total number of cases | 115 | 104 | 69 | 55 | 35 |

## TOP FIVE DISEASE SITES

<table>
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<tr>
<th>Disease</th>
<th>Cases</th>
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<td>Lung</td>
<td>115</td>
</tr>
<tr>
<td>Breast</td>
<td>104</td>
</tr>
<tr>
<td>Prostate</td>
<td>69</td>
</tr>
<tr>
<td>Colon</td>
<td>55</td>
</tr>
<tr>
<td>Bladder</td>
<td>35</td>
</tr>
<tr>
<td>Total</td>
<td>378</td>
</tr>
<tr>
<td>Location</td>
<td>Count</td>
</tr>
<tr>
<td>-------------------------</td>
<td>-------</td>
</tr>
<tr>
<td>Carroll, GA</td>
<td>506</td>
</tr>
<tr>
<td>Haralson, GA</td>
<td>79</td>
</tr>
<tr>
<td>Douglas, GA</td>
<td>30</td>
</tr>
<tr>
<td>Other &amp; Outside State</td>
<td>26</td>
</tr>
<tr>
<td>Heard, GA</td>
<td>23</td>
</tr>
<tr>
<td>Randolph, AL</td>
<td>20</td>
</tr>
<tr>
<td>Paulding, GA</td>
<td>16</td>
</tr>
<tr>
<td>Cleburne, AL</td>
<td>13</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>713</td>
</tr>
</tbody>
</table>
TANNER MEDICAL CENTER — STAGE AT DIAGNOSIS 2013

<table>
<thead>
<tr>
<th>STG 0</th>
<th>STG I</th>
<th>STG II</th>
<th>STG III</th>
<th>STG IV</th>
<th>STG UNK</th>
<th>TOTAL</th>
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</thead>
<tbody>
<tr>
<td>COLON</td>
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<td>15</td>
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<td>17</td>
<td>14</td>
<td>2</td>
</tr>
<tr>
<td>RECTUM</td>
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<td>3</td>
<td>2</td>
<td>5</td>
<td>2</td>
<td>3</td>
</tr>
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<td>RECTOSIGMOID</td>
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<td>1</td>
<td>4</td>
<td>1</td>
<td>7</td>
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</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>20-29</td>
<td>30-39</td>
<td>40-49</td>
<td>50-59</td>
<td>60-69</td>
<td>70-79</td>
</tr>
<tr>
<td>----------</td>
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<td>-------</td>
<td>-------</td>
<td>-------</td>
<td>-------</td>
<td>-------</td>
</tr>
<tr>
<td>COLON</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>18</td>
<td>14</td>
<td>15</td>
</tr>
<tr>
<td>RECTUM</td>
<td>1</td>
<td>4</td>
<td>2</td>
<td>3</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>RECTOSIGMOID</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
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<td></td>
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</tr>
</tbody>
</table>
PRIMARY PAYER REPORT 2013

<table>
<thead>
<tr>
<th>PAYER</th>
<th>Cases</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Medicare</td>
<td>359</td>
<td>50.4%</td>
</tr>
<tr>
<td>Private</td>
<td>247</td>
<td>34.6%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>65</td>
<td>9.1%</td>
</tr>
<tr>
<td>Not Insured/Self Pay</td>
<td>42</td>
<td>5.9%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>713</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

2013 ANALYTIC AND NON-ANALYTIC CASES

<table>
<thead>
<tr>
<th>Year</th>
<th>Analytic</th>
<th>Non-Analytic</th>
<th>Total Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>559</td>
<td>120</td>
<td>679</td>
</tr>
<tr>
<td>2011</td>
<td>621</td>
<td>95</td>
<td>716</td>
</tr>
<tr>
<td>2012</td>
<td>606</td>
<td>90</td>
<td>696</td>
</tr>
<tr>
<td>2013</td>
<td>608</td>
<td>105</td>
<td>713</td>
</tr>
</tbody>
</table>
## COLON

Adjuvant chemotherapy is considered or administered within four months (120 days) of diagnosis for patients under the age of 80 with AJCC stage III (lymph node positive) colon cancer.

<table>
<thead>
<tr>
<th>Expected Performance Rate</th>
<th>Tanner Cancer Care</th>
<th>South Atlantic Hospitals</th>
<th>Community Cancer Programs</th>
<th>GA Hospitals</th>
<th>COC-approved Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>90%</td>
<td>100</td>
<td>83.6</td>
<td>79.7</td>
<td>84</td>
<td>81.6</td>
</tr>
</tbody>
</table>

At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer.

<table>
<thead>
<tr>
<th>Expected Performance Rate</th>
<th>Tanner Cancer Care</th>
<th>South Atlantic Hospitals</th>
<th>Community Cancer Programs</th>
<th>GA Hospitals</th>
<th>COC-approved Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>85%</td>
<td>90</td>
<td>87</td>
<td>84</td>
<td>85.8</td>
<td>87.8</td>
</tr>
</tbody>
</table>

## RECTUM

Radiation therapy is considered or administered within six months (180 days) of diagnosis for patients under the age of 80 with clinical or pathologic AJCC T4N0M0 or stage III receiving surgical resection for rectal cancer.

<table>
<thead>
<tr>
<th>Expected Performance Rate</th>
<th>Tanner Cancer Care</th>
<th>South Atlantic Hospitals</th>
<th>Community Cancer Programs</th>
<th>GA Hospitals</th>
<th>COC-approved Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>100</td>
<td>87.6</td>
<td>88.5</td>
<td>85.3</td>
<td>86.6</td>
</tr>
</tbody>
</table>

Expected Performance Rate = 100%
BREAST

Breast conservation surgery rate for women with AJCC clinical stage 0, I, or II breast cancer.

Expected Performance Rate ≥ 50%

Image or palpation-guided needle biopsy (core or FNA) is performed to establish diagnosis of breast cancer.

Expected Performance Rate = 80%

Radiation therapy is considered or administered following any mastectomy within one year (365 days) of diagnosis of breast cancer for women with ≥ 4 positive regional lymph nodes.

Expected Performance Rate = 90%
Radiation therapy is considered or administered within one year (365 days) of diagnosis for women under the age of 70 receiving breast conservation surgery for breast.

Expected Performance Rate = 90%

Combination chemotherapy is considered or administered within four months (120 days) of diagnosis for women under 70 with AJCC T1cNO, or stage IB-III hormone receptor negative breast cancer.

Expected Performance Rate = 90%

Tamoxifen or third generation aromatase inhibitor is considered or administered within one year (365 days) of diagnosis for women with AJCC T1c or stage IB-III hormone receptor positive breast cancer.

Expected Performance Rate = 90%
“I’m not the one that made that van possible,” said Jim Weaver. “Sandy made that van possible. All the credit goes to her.”
WHERE THE RUBBER MEETS THE ROAD

Lots of people want to make a difference in the fight for cancer. Good news — there are many ways to pitch in. Some people are able to donate money. Some are able to donate time. Jim Weaver decided that he wanted to make his donation “where the rubber meets the road.” So he donated his van.

Weaver’s wife passed away from breast cancer. In honor of her battle, he decided he wanted to give other cancer patients a way to get to Tanner for treatment. Sometimes, patients don’t have reliable transportation. Treatment is often during business hours, and if their friends and families work, they can’t necessarily depend on them for transportation. By giving patients a dependable ride, the van takes pressure off those patients, allowing them to focus more on keeping a positive attitude of healing.

At a point in her illness, it became necessary for Weaver’s wife, Sandy, to use a wheelchair when she went in for treatment. But Weaver couldn’t find an ambulance company that transported patients in wheelchairs. Medicare patients could get wheelchair transport, but because Sandy wasn’t on Medicare, she couldn’t get a ride.

“I decided to buy her a van, even if I had to pay for it out of my own pocket,” Weaver said.

Sandy was able to use her van only three times before she died, but Weaver said he had no regrets about buying her the van. “It was worth every penny for those three trips.”

After Sandy’s death, Weaver considered selling the van, but then he remembered how difficult it had been for his wife before he bought the vehicle.

“I decided that I should donate it to Tanner,” said Weaver. “They can use the van to pick up patients in wheelchairs or just regular people who need a ride to the doctor’s office.”

“When Jane Baker, our breast health nurse navigator, first told me that Mr. Weaver wanted to donate his wife Sandy’s van, it was like the answer to a prayer,” said Shellie Sherrod, director of Tanner Cancer Care. “We were overwhelmed at this amazing gift given to us by Mr. Weaver and his family in honor of Sandy.”

The van became an integral part of Tanner’s program to provide transportation assistance to cancer patients, a need which is often invisible to others.

“We can never thank the Weaver family enough for helping so many cancer patients,” said Sherrod. “Our hope is for continued generous support from our community for this program through Tanner Medical Foundation’s fundraising efforts.”

The gift was proof that charity and generosity don’t require large sums of money. Sometimes, the most meaningful gift is as simple as a second-hand minivan.

“Donate what you can,” said Weaver. “Even if you’ve just got a couple of dollars or a little time. Every little bit helps. Just do what you can do.”

Weaver said people who have energy and resources to give in the fight against cancer had an opportunity to support a worthy cause.

“I really wish people would get behind this effort,” said Weaver. “It’s like the disease isn’t there today and then tomorrow it is. Cancer can happen to any of us. This fight belongs to all of us.”

Most families are impacted by cancer in one way or another. The good news is, there are ways everyone can pitch in to help battle this disease. Individuals can buy a ticket or volunteer for fundraising events like Hoops for Hope. Businesses can sponsor money-raising events like Choirs for Cancer. Clubs like the Carrollton Civic Woman’s Club sell handcrafted items and hold garage sales.

For Weaver, the gift he gave, he said, wasn’t even necessarily a gift from him.

To donate time or other resources, call Tanner Medical Foundation at 770.812.GIFT (4438) or make an online donation at www.TannerMedicalFoundation.org.
‘MEET CIGGY HAVEASMOKE’ TEACHES MIDDLE SCHOOLERS ABOUT TOBACCO

Middle school students are especially vulnerable to trying — and becoming addicted to — tobacco. Studies show the most common years for smoking a first cigarette are sixth and seventh grades, and nearly nine out of 10 smokers establish a daily habit by age 18. The majority of those teens go on to develop a lifelong tobacco addiction.

That’s why a new play from Tanner is reaching out to young people to encourage them to avoid tobacco.

“Meet Ciggy Haveasmoke” is an original production developed by Tanner Health System’s Get Healthy, Live Well initiative with funding from the Centers for Disease Control and Prevention (CDC). The play educates youth about the importance of living tobacco-free and explores the dangers of smoking, while emphasizing that tobacco has a negative effect on a young person’s reputation and appearance.

The play, offered through five regional county and city school systems in Carroll, Haralson and Heard counties, has reached more than 1,000 students. The first performances took place at Bowdon Middle School, Villa Rica Middle School and Bremen Middle School.

The original script was written by Duane Sohl, a resident of Villa Rica who works in radio sales for Gradick Communications and serves on the Get Healthy, Live Well Anti-Tobacco Task Force. The play features three young local actors — Ginna Blair, Chayse Pannell and Sam Martin — who have extensive experience in community theater.

Sohl knows that teens are especially at risk for tobacco addiction.

“Cigarettes took my mom and my uncle, and I’ve always thought if they had only not started smoking when they were kids, things would have been completely different,” Sohl said. “I wrote the play in hope that if I could get even one kid not to ever start smoking, it would be worth it.”

The play features a dying smoker in the hospital who takes a walk down memory lane to see what smoking has done to him during his life — from middle school when he starts smoking to adulthood when he can’t keep up with his children at Walt Disney World.

An interactive presentation after the play invites questions from the audience and provides more detailed information about the dangers of using tobacco.

The Get Healthy, Live Well staff also speak with students about Tanner Health System’s free resources to help people quit, like Fresh Start tobacco cessation classes. Students also receive a gift bag to bring home with more information.

‘DON’T BE A BONEHEAD’ LOOKS TO KEEP KIDS OFF TOBACCO

Tobacco is a killer — especially when smokers start young. Get Healthy, Live Well uses an arsenal of tools to combat teenage tobacco use.

Research shows that the earlier a teen first tries smoking, the more likely he or she is to become a regular smoker and the less likely he or she is to quit, according to the Campaign for Tobacco-Free Kids.

In fact, about 80 percent of all adult smokers begin smoking before the age of 18, according to the 2011 National Survey on Drug Use and Health. So it’s critical to prevent and reduce teenage tobacco use.
“If you start before you are 20, it is harder to quit and you are less likely to quit later in life, so it’s really important to reach out to kids now,” said Phyllis Head, community outreach coordinator at Tanner Health System.

The “Don’t Be a Bonehead” campaign brings the anti-tobacco message to a variety of events, and has reached more than 35,000 residents during the past year. The campaign features a humorous but gross video that illustrates the “ick” factor in teen tobacco use. The video, which was uploaded to YouTube, posted on the campaign’s Web site and shared in social media, was created to spread the tobacco-free message — especially to teens in Carroll, Haralson and Heard counties. Check out the video and like the Facebook page at www.facebook.com/dontbeabonehead.

TANNER RECEIVES CVS HEALTH COMMUNITY GRANT TO COMBAT TOBACCO USE IN WEST GEORGIA

Tanner Health System received a $6,000 CVS Health Community Grant to help support tobacco cessation and prevention efforts in west Georgia.

The Community Grants Program was created by CVS Health as part of its commitment to help people achieve their best health by providing financial assistance to programs that are focused on smoking cessation and prevention. The support from CVS Health will help Tanner provide nicotine replacement therapies — including patches and gum — to participants in Get Healthy, Live Well’s Fresh Start smoking cessation program.

Rates of adult tobacco use for Carroll (22 percent) and Haralson (30 percent) counties highly exceed the state’s rate of 18 percent. Statistics on tobacco use for Heard County are not available.

To address these disparities and target high-risk populations who use tobacco, the Fresh Start program is offered at a variety of locations, incorporating evidence-based guidelines for tobacco cessation support into four, one-hour group sessions over a four-week period. The program teaches participants effective ways to overcome nicotine dependence, with participants choosing a combination of techniques and cessation treatments to help them quit.

“We’ve had tremendous success with Fresh Start, and we’re excited to have this opportunity to make these additional resources available to those in our region who are trying to quit tobacco,” said Denise Taylor, senior vice president and chief community health, strategy and brand officer for Tanner Health System.

The CVS Health Community Grant will provide about 120 Fresh Start participants with tobacco cessation products.

“As a pharmacy innovation company, we are committed to building healthier communities and we believe that providing smoking cessation programs is one of the most effective ways to help people quit smoking and lead tobacco-free lives,” said Eileen Howard Boone, senior vice president, corporate social responsibility and philanthropy for CVS Health. “We are pleased to support the work that Tanner does in the community and we look forward to working with them in fulfilling their program’s mission.”

Get Healthy, Live Well’s Fresh Start is a tobacco cessation counseling program that was designed by the American Cancer Society. The free classes support tobacco users through the first few days when quitting is the hardest and then teach them how to master obstacles that may come later. Participants learn the lifelong benefits of quitting tobacco and how to avoid a relapse. All materials are provided. Classes meet for an hour a week for four weeks.

Tanner was selected to receive a grant through the CVS Health Community Grants 2014 application process. This year, grants were specifically awarded to smoking cessation programs offered in a community setting that are helping people lead tobacco-free lives and are reducing the prevalence of smoking.

A schedule of upcoming Fresh Start classes and registration is available online at www.GetHealthyLiveWell.org or by calling 770.214.CARE (2273).
AN ADVOCATE FOR EARLY DETECTION

GARLAND ROBINSON CREDITS SCREENING FOR HELPING HIM OVERCOME PROSTATE CANCER

Garland Robinson relishes saving things from the forgotten recesses of time.

He’s rescued thousands of Bremen’s historical photos from shoe boxes and attics, which he’s added to his own photography as he documents parts of the city that are fading away to history. Along with a red Corvette convertible, he’s preserved a ’34 Ford Coupe that’s “all hotrod” and a ’57 Chevy Bel Air with a deep, mean rumble that he takes to car shows around the area.

“It just fascinates me how seeing an old photograph or an old home movie can make something real,” said Robinson.

And, with a simple blood test, he saved himself.

About a decade ago, Robinson’s doctor performed a screening called a PSA test. PSA, or prostate-specific antigen, is a protein created by the prostate gland. High levels of PSA in the blood can often indicate prostate cancer. Robinson’s was, as he said, “sky high.”

But a biopsy at the time came back negative, so Robinson and his doctor continued to perform routine PSA tests and watch for changes. Ten years on, it was time for another biopsy. Kevin McLaughlin, MD, a board-certified urologist with West Georgia Urology and a member of the patient care team at Tanner Cancer Care, performed the biopsy in his office.

Dr. McLaughlin took 11 samples. Three came back positive for cancer.

“When Dr. McLaughlin came in the room, the look on his face told the story,” said Robinson. “He sat down next to me, put his hand on mine and said, ‘Mr. Robinson, I’m sorry, but you have prostate cancer.’"

The news was startling, but Robinson didn’t spend a lot of time dwelling on it. He was ready to move forward with his treatment and pursue his life after cancer.

“I’d known other people who had prostate cancer, and I hadn’t known any of them to die from it,” said Robinson. “Knowing that was something we were looking out for, I’d read up on it. I knew I’d probably beat it if we caught it early — and we did.”

Prostate cancer was one of several screenings offered at Tanner Cancer Care’s Cancer Answers Screenathons, which were held in Carrollton, Villa Rica, Bremen and Wedowee in November. More than 120 cancer screenings were conducted, including skin cancer screenings and mammograms. Experts from Tanner Cancer Care were available to discuss breast cancer, colon cancer, cervical cancer and lung cancer.

Robinson, who was born in Carrollton and now lives in Bremen since retiring as an AT&T technician, is quick to encourage people to take advantage of the screenings.

“I am a proponent for screenings,” said Robinson. “I’m a one-man walking, talking advertisement for screenings. I know a lot of people avoid them because they’re afraid it’ll hurt, or sometimes because they’re afraid of what the results might be. I understand; I’ve been there. I didn’t really want to have a biopsy because I knew it’d hurt and because I was afraid of finding out that I could have cancer. But I’m glad I did it, I’m glad I’m doing so much better today and I think everyone who’s been putting it off needs to get their screenings taken care of. It’s important and it can save your life.”

Robinson doesn’t mince words about his treatment. The hormone shots were painful, and the hot flashes they caused weren’t pleasant, either. He also underwent 44 radiation treatments at Tanner’s Roy Richards, Sr. Cancer Center. He declined to take medications that could help with the side effects of treatment, figuring that the fewer medications he took, the better.
“Dr. McLaughlin kept telling me not to be a hero,” he said. “But he always reminded me that he was there if I needed him to prescribe something.”

Nonetheless, the treatment, he said, was “textbook.”

“One thing I can say is that they definitely had the right people at Tanner doing that job,” said Robinson. “Everybody was so nice and supportive. Even on the bad days, they kept me focused on getting through it.”

Robinson received his last radiation treatment in July 2014. He won’t be officially declared cancer-free until it’s been two years since his treatments, but he’s optimistic.

Among Garland Robinson’s hobbies are restoring hot rods, collecting historical photos from Bremen’s past — and encouraging every man he knows to get screened for prostate cancer.
TANNER AMONG TRUVEN’S 15 TOP HEALTH SYSTEMS IN THE NATION

For the second time in three years, Carrollton, Ga.-based Tanner Health System stood among the top health systems in the nation for quality, according to a report by Truven Health Analytics.

Truven — formerly Thomson Reuters — compiles an annual list of the nation’s top 15 health systems, choosing five large, medium and small health systems for its list. Tanner placed among the top five small health systems for 2012 and again for 2014. Tanner was the only health system in Georgia among the top 15 this year.

In determining the 15 Top Health Systems in the nation, Truven researched all U.S. health systems with two or more short-term, general, nonfederal hospitals; cardiac, orthopedic and women’s hospitals; and critical-access hospitals.

Researchers looked at eight metrics that gauge clinical quality and efficiency: mortality, medical complications, patient safety, average length of stay, 30-day mortality rates, 30-day readmission rates, adherence to clinical standards of care (evidence-based core measures published by the Centers for Medicare and Medicaid Services, or CMS), and Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) patient survey scores.

The study relied on public data from the 2011 and 2012 Medicare Provider Analysis and Review (MedPAR) data and the CMS Hospital Compare datasets.

The study from Truven found that the 15 Top Health Systems experienced 2 percent fewer deaths than non-winning peer-group hospitals. They also had lower 30-day mortality rates, with smaller health systems like Tanner outperforming their peers by the widest margin. Patients at the top-performing hospitals also had 3 percent fewer complications, a shorter median average length of stay and 8 percent fewer adverse patient safety events than expected due to better adherence to core measures of care than their peers.
TANNER MEDICAL CENTER/VILLA RICA NAMED TO ‘100 GREAT COMMUNITY HOSPITALS’ AND ‘100 BEST HOSPITALS FOR PATIENT ENGAGEMENT’ LISTS

Becker’s Hospital Review named Tanner Medical Center/Villa Rica to its 2014 edition of “100 Great Community Hospitals,” a list based on community hospitals’ accolades, quality and service to their communities, as well as its inaugural list of “100 Best Hospitals for Patient Engagement.”

Tanner Medical Center/Villa Rica was the only Georgia hospital on Becker’s annual “100 Great Hospitals” list, which was based on rankings and awards from iVantage Health Analytics, Truven Health Analytics, CareChex and the American Hospital Association.

The hospitals on this list had fewer than 550 beds and minimal teaching programs. Some are located in suburban areas, but many are found in rural areas and serve as the only hospitals in their communities.

Tanner Medical Center/Villa Rica also is ranked 46th on Becker’s new annual list of “100 Best Hospitals for Patient Engagement.” The national ranking evaluated all 3,077 U.S. hospitals’ engagement efforts based on an analysis of publicly available data, including readmissions, patient satisfaction and the extent to which organizations offered online information and tools that help engage patients in self care. The hospital received a score of 78 points out of 100. The hospital ranked No. 1 on the list — Mayo Clinic Health System in Eau Claire, Wis. — received a score of only 89.6 points. Only two other Georgia hospitals made the list and were ranked in the 64th and 89th positions.

TANNER MEDICAL CENTER/ CARROLLTON, TANNER MEDICAL CENTER/VILLA RICA NAMED 2014 HEALTHSTRONG HOSPITALS

Tanner Medical Center/Carrollton and Tanner Medical Center/Villa Rica are among the highest-performing hospitals in the nation, according to iVantage Health Analytics.

Both hospitals were among 547 hospitals nationally — and 14 hospitals in Georgia — on the analytic service’s 2014 index of HEALTHSTRONG Hospitals.

The 2014 HEALTHSTRONG Hospitals highlight top performing hospitals rated as part of iVantage’s Hospital Strength INDEX (a comprehensive rating system of hospitals). The results recognize the top-performing hospitals measured across 66 different performance metrics, including quality, outcomes, patient perspective, affordability and efficiency.
TRUVEN: TANNER MEDICAL CENTER/VILLA RICA AMONG NATION’S TOP 100 HOSPITALS

Tanner Medical Center/Villa Rica is one of the nation’s top destinations for care, according to Truven Health Analytics.

Truven — formerly the healthcare arm of research firm Thompson Reuters — named the acute care hospital to its Truven Health 100 Top Hospitals list. The hospital was also among only 16 hospitals in the nation to earn Truven’s Everest Award for delivering the greatest rate of improvement during the past five years.

The annual study from Truven evaluates performance in 10 key areas of quality: mortality; medical complications; patient safety; average patient stay; expenses; profitability; patient satisfaction; adherence to clinical standards of care; and post-discharge mortality and readmission rates for heart attack, heart failure and pneumonia. Truven has released its study annually for 20 years, beginning in 1993.

Only one other hospital in Georgia — Northeast Georgia Medical Center in Gainesville — was named to Truven’s Top 100 Hospitals, and no other hospital in the state earned an Everest Award.

ATLANTA MAGAZINE: TANNER HOSPITALS AMONG METRO’S BEST

A magazine focused on Atlanta had some kind words in its 2014 “Health” issue for Carroll County.

Atlanta magazine featured Tanner Medical Center/Carrollton and Tanner Medical Center/ Villa Rica among its top-performing hospitals in metro Atlanta.

In determining the top performing hospitals in the metro area, Atlanta magazine relied on clinical ratings firm Healthgrades, which rates hospital quality based solely on objective measures of performance, including mortality and complication rates. Tanner Medical Center/Carrollton was noted especially for its quality of pacemaker procedures, pneumonia treatment, total knee replacement and spinal fusion procedures. Tanner Medical Center/ Villa Rica was noted for its care of pneumonia and sepsis.

TANNER EARNs HONORS FROM GEORGIA HOSPITAL ASSOCIATION

Tanner Health System earned the Georgia Hospital Association’s (GHA) Community Leadership Award for its Get Healthy, Live Well initiative. The award recognizes a GHA-member hospital that has made exemplary contributions to the health and well-being of the people of Georgia through leadership in the area of community health improvement.

The Get Healthy, Live Well initiative is working to promote a healthy lifestyle and prevent chronic disease for residents of
Carroll, Haralson and Heard counties. After receiving initial funding from the Community Foundation of West Georgia, Tanner was awarded a $1.2 million Community Transformation Grant from the Centers for Disease Control and Prevention (CDC) to address the critical health issues in west Georgia.

Get Healthy, Live Well includes 21 initiatives involving more than 500 volunteers and dozens of community partners in a variety of projects from diabetes prevention, weight loss and tobacco prevention to youth wellness and community gardens.

Tanner previously earned the Community Leadership Award in 2010 for establishing Willowbrooke at Tanner and its extensive inpatient and outpatient behavioral health program.


**TANNER AMONG ATLANTA’S BEST PLACES TO WORK**

Tanner Health System earned numerous distinctions in recent years as a great place to receive care, but the health system has earned laurels as a great place to work, too.


Placement on the list was based on nominations the paper received from readers. Quantum Workplace, a workplace culture assessment company, then conducted surveys at the nominated companies. This year, more than 200 companies were nominated and 18,000 metro Atlanta employees completed confidential surveys to provide a candid look at workplace satisfaction.

The large employer category featured companies with 501 or more employees working in the metro area. No. 1 on the list of large employers was Jackson Healthcare LLC, a healthcare staffing company, followed by professional service firm PwC, InterContinental Hotels Group and EY, a tax, transaction and advisory service.

Among the innovative programs for employees spotlighted by the Atlanta Business
Chronicle was Tanner University, which teaches leadership skills to employees eager to move up within the organization, and the recent partnership with the University of West Georgia that expands faculty and student opportunities at the Tanner Health System School of Nursing, increasing opportunities for employees interested in a career in nursing and allowing current nurses to stay on the leading edge of healthcare innovation through the university’s advanced simulation labs.

Tanner has also embarked on a major expansion of its internal wellness efforts for employees, including establishing a health coaching program with fitness experts and dietitians, and has partnered with other community organizations to offer discounted child care and other benefits based on feedback gained from surveys like the one conducted by Quantum for the Atlanta Business Chronicle.

Along with the Atlanta Business Chronicle honors, Tanner previously received accolades as a best place to work in Georgia from Georgia Trend in 2006 and 2011 and as one of the 100 Best Places to Work in Healthcare from Modern Healthcare in 2008.

**TANNER MEDICAL CENTER/ CARROLLTON EARN HOSPITAL OF THE YEAR HONORS FROM GEORGIA ALLIANCE OF COMMUNITY HOSPITALS**

Tanner Medical Center/Carrollton was honored as the 2014 Large Hospital of the Year by the Georgia Alliance of Community Hospitals (GACH).

The hospital was recognized for its continued commitment to reduce the risk and prevalence of chronic disease in west Georgia’s predominately rural population through the Get Healthy, Live Well coalition.

Tanner established Get Healthy, Live Well in 2012 to serve as a multi-sector coalition to develop and implement a variety of evidence-based interventions to reduce chronic disease risks among residents in Carroll, Haralson and Heard counties.

The Georgia Alliance of Community Hospital’s “Hospital of the Year” is an annual competition that spotlights the important value of Georgia’s community hospitals. Hospital submissions were evaluated by a panel of judges from public relations agency Porter Novelli, focusing on initiatives that support direct patient access, improved access to underserved populations, major economic development initiatives, major quality-of-life initiatives and extraordinary community benefits.

The Georgia Alliance of Community Hospitals has been working for the best interests of community not-for-profit hospitals and
Georgia’s healthcare consumers since its founding in 1983. The alliance works to foster goodwill among community healthcare professionals; to advocate the enactment of sound laws, rules and regulations affecting community hospitals; to conduct and disseminate research and to share ideas that improve the healthcare delivery system in Georgia.

GEORGIA TREND: TANNER HOSPITALS AGAIN AMONG STATE’S BEST

Georgia Trend, the state’s leading magazine on business and economic development, published its annual list of the best-performing hospitals in Georgia, and all three of Tanner Health System’s inpatient hospitals — Tanner Medical Center/Carrollton, Tanner Medical Center/Villa Rica and Higgins General Hospital in Bremen — were again represented on the list.

Higgins General Hospital, a 25-bed critical access hospital, is the No. 1 critical access hospital in Georgia for the third consecutive year, according to the magazine’s report. Tanner Medical Center/Villa Rica earned the No. 6 spot among small hospitals and Tanner Medical Center/Carrollton was No. 8 among medium-sized hospitals.

The Georgia Trend list is based on publicly-reported quality and patient satisfaction data. The rankings are intended to help residents make a more informed choice on where to turn for care.

TANNER HOSPITALS EARN ‘TOP PERFORMER ON KEY QUALITY MEASURES’ RECOGNITION FROM THE JOINT COMMISSION

All three of Tanner’s inpatient acute and critical access hospitals were named among the nation’s “Top Performers on Key Quality Measures” by The Joint Commission, the leading accreditor of healthcare organizations in America.

The Joint Commission recognized Tanner Health System’s facilities for exemplary performance in using evidence-based clinical processes that have been shown to improve care for certain conditions, including heart attack, heart failure, pneumonia and surgical care.

The acute care Tanner Medical Center/Carrollton and Tanner Medical Center/Villa Rica, as well as the critical access Higgins General Hospital in Bremen, were among only 33 Georgia hospitals — 1,224 hospitals nationally — named to this year’s list of top performers by The Joint Commission.

The Top Performer program recognizes hospitals for improving performance on evidence-based interventions that increase the chances of healthy outcomes for patients.
with certain conditions, including heart attack, heart failure, pneumonia, surgical care, stroke, venous thromboembolism and perinatal care.

Tanner Medical Center/Villa Rica and Higgins General Hospital are among only 147 hospitals nationally that earned the "Top Performer" distinction for four years in a row. All three of Tanner’s hospitals are among the 314 hospitals that have received the distinction for the last three years. This is the fourth year that The Joint Commission has compiled its list of top performers.

Tanner Medical Center/Carrollton was recognized as a top performer for treating heart attack, heart failure, pneumonia, and for its surgical care. Tanner Medical Center/Villa Rica was recognized for its treatment of heart attack, pneumonia and for its surgical care, and Higgins General Hospital was recognized for its treatment of pneumonia.

To be a 2013 Top Performer, hospitals had to meet three performance criteria based on 2013 accountability measure data, including: achieving cumulative performance of 95 percent or above across all reported accountability measures; achieving performance of 95 percent or above on each and every reported accountability measure where there were at least 30 denominator cases; and having at least one core measure set that had a composite rate of 95 percent or above, and — within that measure set — all applicable individual accountability measures had a performance rate of 95 percent or above.

The Top Performer on Key Quality Measures distinction is the most recent for Tanner, which earlier this year was cited by Truven Health Analytics as among the 15 Top Health Systems in the nation for 2014 — the second time in three years Tanner has earned that title.

TANNER MEDICAL CENTER/ CARROLLTON EARN NATIONAL RECOGNITION FOR PATIENT EXPERIENCE

Tanner Medical Center/Carrollton earned its second consecutive Guardian of Excellence Award for achieving patient experience scores that rank in the 95th percentile, and a Beacon of Excellence Award for doing so consistently during the past three years.

The awards were presented by Press Ganey Associates, one of the nation’s leading patient experience firms. Tanner Medical Center/Carrollton was recognized for its high scores in inpatient care, ambulatory surgery and medical practice.

The Press Ganey Guardian of Excellence Award is a nationally-recognized symbol of achievement in health care. Presented annually, the award honors clients who consistently sustained performance in the top 5 percent of all Press Ganey clients for each reporting period during the course of one year.
The Beacon of Excellence award is given annually to the top performing organizations on the basis of extraordinary achievement. The award recognizes clients who have maintained consistently high levels of excellence in patient experience and clinical quality performance.

Press Ganey partners with more than 11,000 healthcare facilities, including more than half of all U.S. hospitals, to reduce suffering and improve the patient experience.

**TANNER MEDICAL CENTER/CARROLLTON GETS ‘A’ FOR PATIENT SAFETY**

When it comes to keeping patients safe, Tanner Medical Center/Carrollton has been doing its homework.

The hospital was among only 17 in Georgia to earn an ‘A’ rating for patient safety on the annual Hospital Safety Score.

The Leapfrog Group, which publishes the Hospital Safety Score, analyzed more than 2,500 hospitals from across the country to develop the score, providing each with a letter grade based on how each scored on 28 measures of hospital safety. Those measures include preventing infections, errors, injuries and medication mix-ups. The firm used data from its own survey, as well as the Centers for Disease Control and Prevention (CDC), the Centers for Medicare and Medicaid Services (CMS), the Agency for Healthcare Research and Quality and the annual survey of the American Hospital Association.

Throughout Georgia, 14 hospitals earned B ratings, 29 earned C ratings, four earned D ratings and one earned an F rating. Sixty-six Georgia hospitals were included in the Leapfrog Group’s scoring.

The Leapfrog Group’s hospital safety scores grade general acute care hospitals on a range of criteria that determine how safe the hospitals are for patients. The scores provide a single, consumer-friendly composite score that is published as a letter grade.

Tanner Medical Center/Carrollton was the only one of the health system’s hospitals evaluated by the Leapfrog Group. The firm did not calculate grades for critical access hospitals, such as Tanner’s Higgins General Hospital in Bremen, or behavioral health hospitals like Willowbrooke at Tanner in Villa Rica. Tanner Medical Center/Villa Rica also was not included, as the facility lacked the volume to report sufficient data for the Leapfrog Group’s evaluation.
Approximately 1 in 8 U.S. women will develop breast cancer during the course of her lifetime. Fortunately, the number of breast cancer survivors has been increasing since 1989 — the result of increased awareness, earlier detection with screening mammograms and treatment advances. There are now more than 2.8 million women with a history of breast cancer living in the U.S., including women currently being treated and women who have finished treatment.

The employee-led Tanner Health System Activities Committee, which was chartered to celebrate employee successes, has found a way to make a powerful difference. The committee has sold T-shirts each fall since 2007, with the proceeds benefiting some aspect of cancer care or cancer patient transportation.

The latest T-shirt — “Rally for a Cause,” sold online in September through November 2014 — set a sales record, enabling the committee to donate $30,298.92 in early 2015 to the mammogram assistance fund at Tanner Medical Foundation. This fund helps women of all ages in our community afford the annual screening mammograms that offer them the best chance for early detection and survival of breast cancer.

This latest donation means that in only eight years of annual T-shirt sales, the committee has donated more than $100,000 to assist local cancer patients.

“We are so excited and also humbled by the results of this year’s T-shirt sale. The members of our community and Tanner employees are just amazing with the incredible support that they are willing to show for a worthy cause,” said Janet Daniels, RN, chairman of the Tanner Activities Committee at Tanner Health System. “We believe that every T-shirt sold brings hope, and every time a T-shirt is worn by someone, it raises awareness for the cause. And we do see them being worn, whether on Tanner’s hospital campuses and offices, at the grocery store or on the Carrollton GreenBelt. People are proud to wear a T-shirt that shows they’ve helped cancer patients right here at home.”

To learn more about Tanner Medical Foundation, visit www.TannerMedicalFoundation.org. To learn more about Tanner Health System, visit www.tanner.org.
## ADMINISTRATIVE REPORT 2013

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