



2019 | **CANCER SERVICES ANNUAL REPORT**
NORTHEAST GEORGIA MEDICAL CENTER

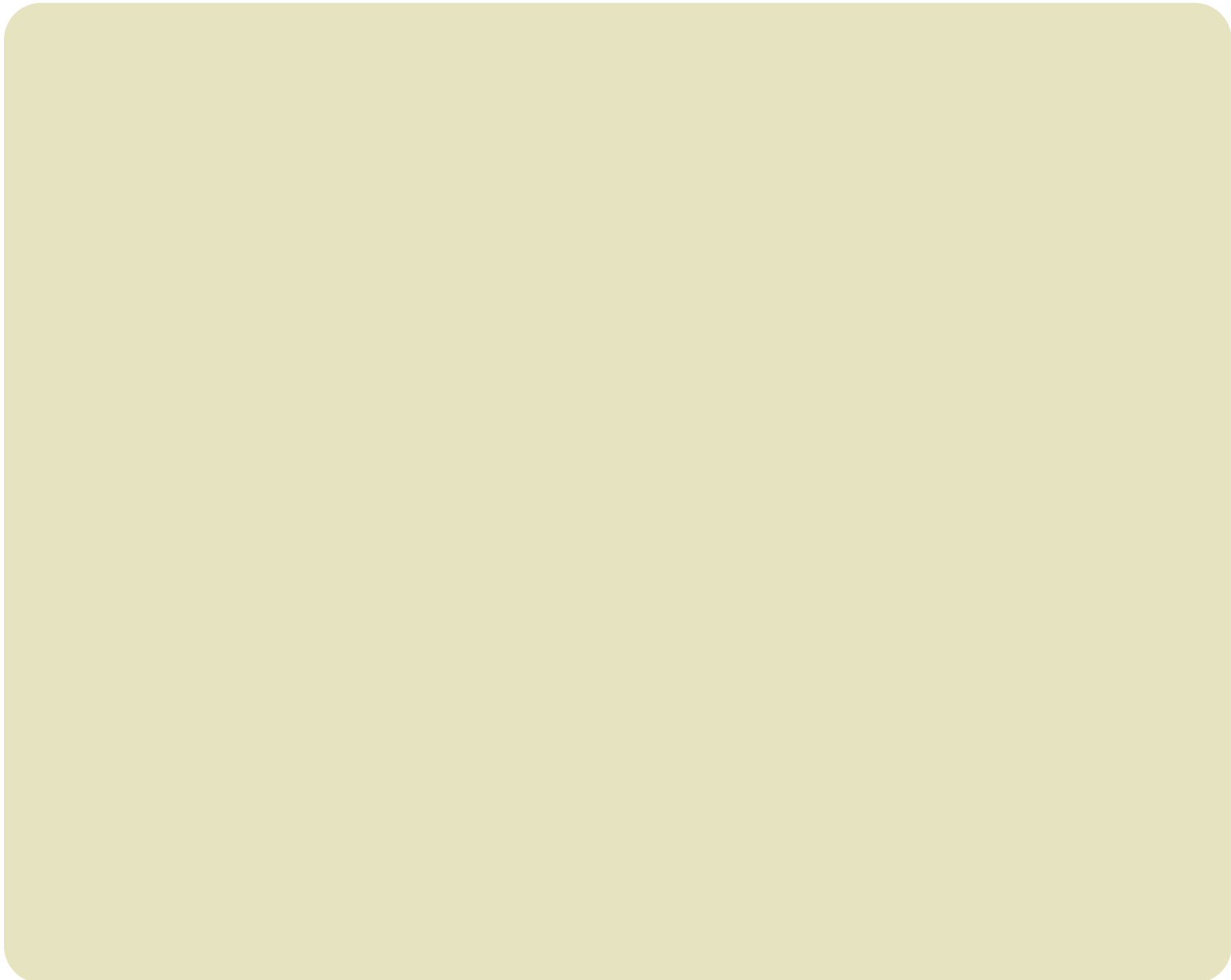


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Message from Oncology Administration

Jayme Carrico, MBA
Executive Director, Oncology Services
Northeast Georgia Medical Center

I'm pleased to present Northeast Georgia Medical Center's (NGMC) 2019 Cancer Services Annual Report. This report contains information on program activities in 2019 and presents data abstracted by our registry in 2017.

As you explore the information provided, you'll find NGMC's Cancer Services program offers a level of medical expertise and technology that rivals any metropolitan cancer center. At NGMC, we offer research-based cancer care and nationally approved treatment planning, which allows our patients the opportunity to stay local while receiving the latest cancer treatment options.

With a program centered around our community, it's the commitment and compassion of our staff and providers that our patients often mention. Being recognized by those we care for is extremely humbling and motivating.

I'm proud to see our Cancer Services recognized nationally as well. CareChex, an independent healthcare ratings organization, recently ranked NGMC within the top 10% of hospital cancer programs in the nation for its 2020 Quality Awards, based on medical excellence and patient safety.

Additionally, NGMC's program was surveyed by the American College of Surgeons Commission on Cancer (CoC) and awarded a Three-Year with Commendation Gold Level accreditation – the highest level possible – as well as the prestigious Outstanding Achievement Award. NGMC was the only program in Georgia and one of only 24 programs in the nation to receive this award for the most recent 2018 survey.

In October, NGMC joined the Winship Cancer Network as an affiliate of Winship Cancer Institute of Emory University. The Winship Cancer Network was formed to improve access to high quality cancer care, innovative research, and continuing patient and provider education for affiliate partners. Through a cancer affiliation which includes clinical research and education, NGMC and Winship will work together on cancer program development and initiatives, patient care and cancer care coordination. In addition, NGMC patients will have access to Winship's more than 275 existing therapeutic clinical trials and research projects led by some of the top clinical investigators in the country.

Each of these accomplishments highlights our goal of providing the highest quality cancer care possible for our patients throughout the area. While it's been an exciting year for us to look back on, we're already looking forward to what the future holds for our patients, community and collaborating physicians.

Respectfully submitted,



Emory Winship Cancer Institute Network Affiliates collaborate with Emory on quality and safety initiatives to improve care locally.

2019 Cancer Committee Members

Cancer Committee Chairman	Geoff Weidner, MD
Cancer Liaison Physician	Craig Baden, MD
Diagnostic Radiologist	Scott Stephen, MD; Julie Presley, MD (alternate)
Medical Oncologist	Charles Nash, MD; Andrew Johnson, MD (alternate)
Pathologist /Cancer Registry Coordinator	Ezra Ellis, MD; Sumi So, MD (alternate)
Radiation Oncologist	Frank Lake, MD; Jaymin Jhaveri, MD (alternate)
Surgeon	Ken Dixon, MD; Brad Auffarth, MD (alternate)
Cancer Conference Coordinator	Saloni Tanna, MD
Cancer Program Administrator	Jayne Carrico, MBA
Case Manager Representative	Laura Johnson, RN (alternate)
Certified Tumor Registrar	Dianne Kosmala, CTR; Cheryl Gantt, CTR (alternate)
Clinical Research Coordinator	Andre Kallab, MD; Holly Jones, Ph.D. (alternate)
Clinical Research Representative	Trena Davis, BSN
Community Outreach Coordinator	Andria Caton, BSN, Alicia Harrison, RN (alternate)
Oncology Nurse Representation	Kim Tyner-Meeks, RN; Alison Evans, RN (alternate)
Palliative Care Team Member	Zameer Gill, MD; Ashley Deringer, NP (alternate)
Quality Improvement Coordinator	Christina Saurel, MD
Outpatient Infusion Coordinator	Kim Tyner-Meeks, RN
Performance Improvement Representative	Nancy Linto, RN; Bridget Schultz (alternate)
Psychosocial Services Coordinator	Trisha Ziem, LcSW; Adam Raulerson (alternate)
Hospice	Pamela Allen, RN; Von Stephens (alternate)
Nutritional Services	Debbie Walls, RD; Kelsey Higgins, RD (alternate)
Pastoral Care	Jeff Thompson
Pharmacy	Melissa Frank; Jason VanLandingham (alternate)
Regional Network Development	Kathy Williamson, RN
Community Health Improvement	Christy Moore
Public Relations	Kristin Grace
Oncology Services	Penny McCall





Cancer Care in 2019

Charles Nash III, MD, FACP
Longstreet Clinic – Department of Medical Oncology & Hematology
Medical Director, NGMC's Cancer Services

The Cancer Services program at Northeast Georgia Medical Center (NGMC) continued to experience vibrant growth in 2019, both in the number of patients served and in the breadth of services provided. Our patients continue to choose NGMC for the advanced, yet personalized care which we continually strive to provide.

Following the elite recognition Jayme mentioned earlier by the American College of Surgeons, our Cancer Services has continued to make strides in program advancements. Thanks to our new affiliation with Winship Cancer Institute of Emory University, which was announced in October 2019, our patients now have access to more clinical research opportunities, along with an expanded oncologic subspecialist consultation network.

With growth comes the need to recruit additional oncologic specialists; our program remains dedicated to recruiting the highest quality physicians available. Medical and surgical oncologic subspecialists are being recruited to meet the growing need of our patient population.

We continue to explore new opportunities for patient care and treatment options, including a new infusion suite on campus at NGMC Braselton, which will lead to the development of a comprehensive cancer facility. We look forward to the benefits this and other new opportunities will bring for our patients and staff.

Our future is bright, and we remain committed to our core principles to guide us through the exciting year to come.





Clinical Research at Northeast Georgia Medical Center

Holly Jones, Ph.D.
Director, Department of Research Administration

At Northeast Georgia Medical Center (NGMC), we believe our work in research provides new options in the diagnosis and treatment for cancer patients in our community. Our patients have the opportunity to participate in clinical trials that provide some of the most promising, cutting-edge new therapies.

NGMC participates in approximately 40 national and international clinical research trials per year to provide patients in our local community access to innovative and breakthrough treatment options using state-of-the-art technology and resources. Our expert physician specialists offer leading trials in chemotherapy, radiation therapy and surgery for virtually all tumor sites including breast, lung and prostate cancers – three of the cancer types most often diagnosed at NGMC. The Department of Research Administration builds infrastructure to support research operations, promotes growth of the institutional research program and provides support for research and scholarly activities within NGMC's Graduate Medical Education (GME) program.

It's important to note that the majority of our research studies are supported by funding from the National Cancer Institute and top industry sponsors. Furthermore, NGMC is proud to be designated a Research Network Member of the GA NCORP, Georgia's National Cancer Institute (NCI) Community Oncology Research Program. As one of only 34 NCI national, community-based research programs, the GA NCORP research network provides Georgians in urban and rural areas access to state-of-the-art cancer prevention, screening, control, treatment and post-treatment trials.

In addition, NGMC has joined the Winship Cancer network as an affiliate of Winship Cancer Institute of Emory University. As a network affiliate, NGMC will be working with a world-class, internationally recognized cancer program to implement new clinical trial options for our patients and outstanding educational opportunities for patients, physicians and our research staff. Winship at Emory is the state of Georgia's only NCI-designated comprehensive cancer center and alignment of our cancer care services and innovative research programs offers our patients and our community access through Winship at Emory to over 275 clinical trials and studies led by nationally recognized physician investigators.

We are thrilled to continue providing cancer care and research opportunities of the highest quality in our community, and we look forward to the year ahead.





Interventional Radiology Offers New Cancer Treatment Options

Steven Black, MD
Gainesville Radiology Group

Diagnostic imaging and interventional procedures have long played an integral part in a patient's cancer journey from the time of diagnosis throughout the treatment process to the time of palliative management. Interventional oncology is an evolving branch of interventional radiology that uses targeted, minimally invasive procedures – performed with the help of image guidance – to diagnose, treat and/or relieve the symptoms of cancer. Interventional oncology represents one of the fastest growing areas of interventional medicine and has become an essential element of comprehensive cancer care.

Interventional techniques have gained wider acceptance because of the need for higher quality treatments and more flexibility when managing complex patients. Our Interventional Radiology Services – a specialty within Northeast Georgia Medical Center's (NGMC) Imaging Services – is an engaged and integrated partner with NGMC's Cancer Program. Our interventional procedures are minimally invasive and typically offer faster recovery times, less side effects, shorter hospital stays and reduced morbidity.

Continuing the commitment of making advanced cancer treatments available close to home, members of the Interventional Radiology team and NGMC are now providing more interventional services as treatment alternatives and complements to medical, surgical and radiation oncology. Microwave ablation and water-cooled radiofrequency ablation are two of the new procedures we began offering this year.

Microwave ablation is a procedure where a microwave antenna is advanced directly into a tumor using image guidance. The ablation antenna uses microwave energy to cause rapid rotation and agitation of water molecules to create friction and heat, which causes tumor death. Compared to other thermoablative devices, microwave ablation can create a larger ablation zone in a shorter period. It can be used to treat primary and metastatic liver cancers, kidney and adrenal tumors, primary and secondary lung malignancies and bone metastases. This procedure is helpful in relieving symptoms and extending survival. It has been shown to be an effective tool when used in conjunction with other cancer therapies such as chemotherapy, interventional radioembolization and surgical resection.

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Water-cooled radiofrequency ablation, known as OsteoCool, delivers radiofrequency energy to the site while the active tip of the ablation probe is internally cooled with circulating water. This combination allows larger volume lesions to be treated without excessive heating of the tip, reducing the risk of potential thermal damage to adjacent tissue. Bone metastases present in 60 to 80% of patients with metastatic disease. Bone metastases can impact quality of life with pain, fractures and decreased mobility. In addition to these symptoms, they can cause mood changes such as depression and anxiety. Up to 30% of patients with spinal metastases do not respond to treatment with radiation, chemotherapy or surgery. OsteoCool can be utilized to treat patients' bone tumors when conventional therapies aren't effective, are too slow-acting or cause unacceptable side effects. The procedure not only ablates the tumor but allows for mechanical stabilization with bone cement kyphoplasty. The speed of patient response in patients treated with radiofrequency ablation and kyphoplasty has proven extremely beneficial. After just one week, 74% of patients saw benefits, particularly noting a significant pain score reduction from their worst pain.

Interventional radiology physicians play a critical role in the multidisciplinary team approach for cancer treatment. Interventional oncology is a rapidly evolving field where innovative techniques for diagnosing and treating cancer results in prolonged survival for patients as well as improved quality of life. With NGMC's multidisciplinary tumor board, we optimize patient care through identification of locally available treatment options, offering collaborative approaches to therapy and delivering expedient referrals with the goal of making a difference in quality of life and survivability for our patients.





Managing Side Effects of Immunotherapy

Christina Saurel, MD
Northeast Georgia Diagnostic Clinic
Department of Hematology & Oncology

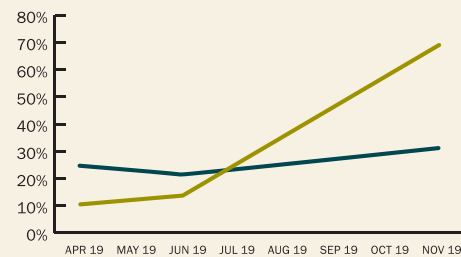
The use of immune checkpoint inhibitors to treat many different types of cancers has increased dramatically over the last several years. Unlike more traditional chemotherapeutic agents, immune checkpoint inhibitors have very different side effect profiles. Additionally, the side effects or immune-related adverse events from immune checkpoint inhibitors are managed much differently than the side effects of traditional chemotherapy. Recognizing the opportunity for improvement in managing patients receiving immune checkpoint inhibitors, our cancer committee monitored the adherence to the National Comprehensive Cancer Network's (NCCN) guidelines for Management of Immune Checkpoint Inhibitor-Related Toxicities. A total of thirty people receiving immune checkpoint inhibitor therapies for lung cancer in the outpatient infusion department were monitored in April, June and November for adherence to the NCCN guidelines.

Initial monitoring in April and June of patients receiving immune checkpoint inhibitors indicated that adherence to the baseline and routine monitoring was much lower than expected. Working together with physicians, nursing, information technology and pharmacy, we implemented the following interventions in August 2019:

1. Updated electronic order sets in EPIC to include NCCN recommended baseline and routine monitoring.
2. Added immune checkpoint inhibitor to education required learning for outpatient infusion nursing staff and chemotherapy certified nurses.
3. Staff and providers attended an Immune Checkpoint Inhibitor CME Education Program, held in conjunction with the Association of Community Cancer Centers and Dr. Andre Kallab.
4. Instituted standard practice of providing immunotherapy wallet cards for patients receiving immune checkpoint inhibitors at infusion clinics.

In November 2019, we monitored this same patient population to test the effectiveness of our new intervention methods. We experienced significant increases in the adherence to ongoing monitoring, as well as modest increases in the adherence to completed baseline assessments.

Future work of the cancer committee includes continuous monitoring of adherence to NCCN guidelines, assessing community provider knowledge of immunotherapy, and providing additional educational opportunities for patients, providers.



APR 19	JUN 19	NOV 19
10%	13%	69%
24%	21%	31%

ONGOING MONITORING COMPLETE
BASELINE ASSESSMENTS COMPLETE



2019 Community Outreach and Educational Activities

As compared to previous years, NGMC showed an increased focus on educating our community about cervical cancer prevention, human papilloma virus (HPV) vaccination, lung cancer screening and youth tobacco use and prevention in 2019. With the help of our Oncology Services team, organizational volunteers and community partners, many outreach and education events were held to support cancer survivors, inform healthcare providers and promote early detection, screening and prevention of cancer for members in our service area.

Date	Event	Targeted Audience	Number of participants
2.5.2019	Oncology and End of Life Lecture	Nursing students – Lanier Technical College	20
2.6.2019	Oncology and End of Life Lecture	Nurses – Hall County	20
2.9.2019	HPV, Cervical Cancer Screening and Awareness	Hall County Good News Clinic	14
2.21.2019	Cervical Cancer Prevention and HPV Vaccination Awareness	Spanish speaking women – Good News Clinic	10
3.11.2019	Oncology Nursing Careers	Brenau healthcare students	41
4.3.2019	Hall County Relay for Life	General public	>200
4.16.2019	National Healthcare Decision Day Campaign	General public	>150
5.9.2019	Thyroid Cancer Screening and Awareness	Johnson & Johnson retirees	33
5.16.2019	Senior Expo – Colon and Lung Cancer Screening Education	Seniors – Stephens County	>100
5.17.2019	White County Relay for Life	White County	>100
5.25.2019	HPV and Cervical Cancer Screening and Awareness	Hall County Good News Clinic	28
6.3.2019	Cancer Survivor Day – Gainesville	General public	>50
6.4.2019	Cancer Survivor Day – Braselton	General public	>50
6.5.2019	Cancer Survivor Day – Barrow	General public	25
6.20.2019	Cervical Cancer Prevention and HPV Vaccination Awareness	Good News Clinic	8
8.2.2019	Gainesville Middle School – Vaping Awareness	Parents, 5th - 8th grade students – Hall County	>100
8.15.2019	Riverside Middle School Teacher Open House – Educational Programs	Hall County teachers	50
8.17.2019	Cervical Cancer Prevention and HPV Vaccination Awareness	Hall County Good News Clinic	30
8.30.2019	HPV Awareness Program	Community healthcare providers	100
9.19.2019	Cervical Cancer Prevention and HPV Vaccination Awareness	Spanish speaking women – Good News Clinic	10
9.24.2019	Tobacco Use Prevention – TAR WARS Program	Barrow County School Nurses	8
9.25.2019	Lung Cancer Screening and Breast Cancer Awareness Education	Senior Expo on Aging – General public	>250
9.28.2019	Lung Cancer Screening and Breast Cancer Awareness Education	General public – Barrow County	50
10.3.2019	End of Life Education	Nurse Residents – Hall County	25
10.5.2019	Skin Cancer Prevention	General public – Braselton Community	100
10.10.2019	Partnership for Drug Free – Vaping Prevention	General public – Hall County	50
10.17.2019	HPV Education and Awareness Program	Nurses, nursing students, general public	25
10.21 – 11.1.2019	TAR WARS Program – Youth Tobacco Use Prevention	Barrow County 4th and 5th grade students	>700
10.24.2019	Tobacco Use/Vaping Prevention	Parents and students of New Holland Elementary School – Hall County	100
10.26.2019	Tobacco Use/Vaping Prevention – Opioid Awareness Day	General public, North Georgia counties	>500
11.4.2019	Oncology and End of Life Lecture	Nursing students – Lanier Technical College	10



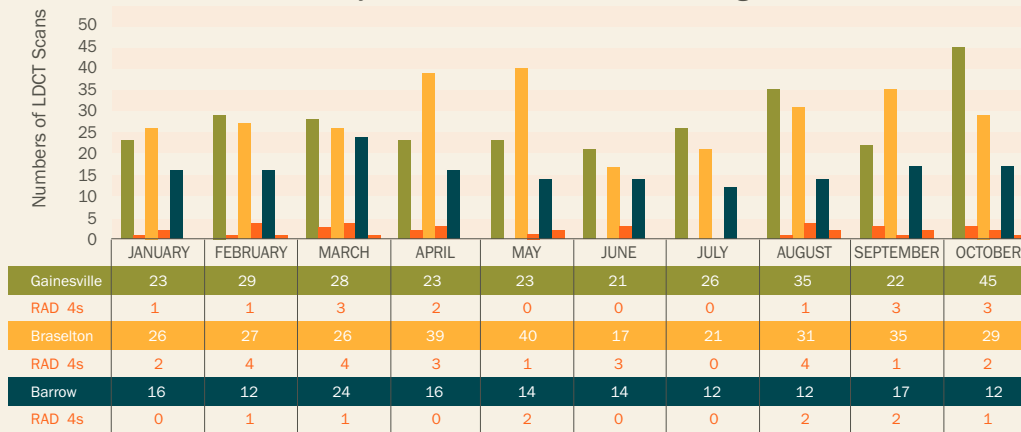


Lung Cancer Screening Program Continues Growth

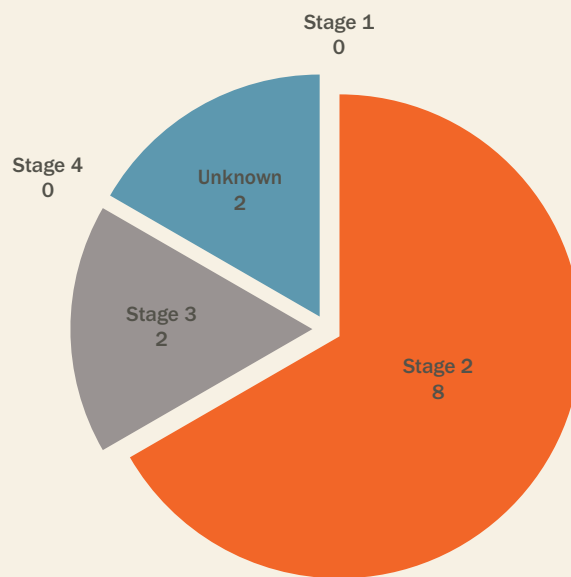
Andria Caton, MSN, RN, OCN, CHPN
Oncology Services Administration

During 2019, Northeast Georgia Medical Center's (NGMC) Low Dose Computed Tomography (LDCT) lung cancer screening program experienced increased growth from previous years. From January 2019 to October 2019, more than 715 LDCT lung cancer screenings were performed across three sites. Of those, 12 lung cancers were diagnosed.

January - October 2019 LDCT Screenings



Cancer Stage at Diagnosis



Based on information collected and examined from previous years, our program identified that uninsured and minority populations were not receiving LDCT lung cancer screening examinations at the same frequency as insured populations. We pursued – and were awarded – a grant opportunity through the American Cancer Society (ACS) to help reduce disparities in lung cancer screenings in our community.

Through a partnership with Good News Clinic, we were able to provide 20 LDCT screenings to some of the underserved and uninsured residents of Hall County. Qualified clients were identified and recruited by Good News Clinic clinical staff. To help reduce any additional barriers of obtaining the screening, small monetary incentives were provided to participants that completed a LDCT lung cancer screening. Money from the ACS grant helped provide rehabilitation services and transportation funds for clients diagnosed with lung cancer through the program.

We performed 13 scans at Good News Clinic from February through November 2019 with no lung cancers detected. Given the positive impact, the American Cancer Society extended the grant through February 2020.

Additionally, our program expanded its existing Chest Tumor Board conferences to meet twice a month to help accommodate the increase in screenings presenting a cancer diagnosis that required monitoring.





Community Outreach Focus on Cervical Cancer and HPV Education

Andrew Green, MD
Northeast Georgia Physicians Group Gynecologic Oncology

The Centers for Disease Control and Prevention estimates that more than 44,000 Human Papillomavirus (HPV) related cancers occur each year in the United States (CDC, 2019). Specifically, the presence of HPV is attributable to more than 90% of all anal and cervical cancers. In efforts to help decrease these numbers, Northeast Georgia Medical Center (NGMC) engaged in the following state-wide efforts to:

1. Increase overall knowledge about HPV in at-risk populations
2. Encourage providers to promote HPV vaccinations
3. Increase community awareness about cancers related to the HPV infection

Recognizing our dedication and efforts to provide education and screenings, the American Cancer Society awarded NGMC a small grant to help support funding. In total, were able to educate more than 105 community providers and nurses on the importance of HPV vaccinations and cervical cancer. Additionally, our oncology staff, clinical nurses and pathology department worked with Good News Clinic and nursing instructors at the University of North Georgia to provide 72 cervical cancer screenings, three HPV educational programs serving 26 Good News Clinic clients and a community screening of the documentary “Someone You Love: The HPV Epidemic.”

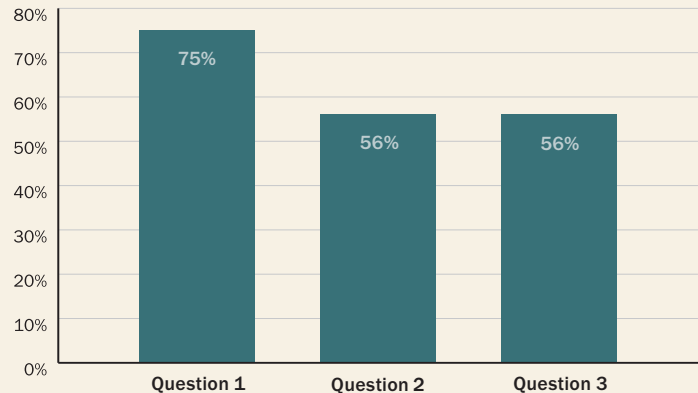
HPV Education – Percentage of Knowledge Gain

Summary:

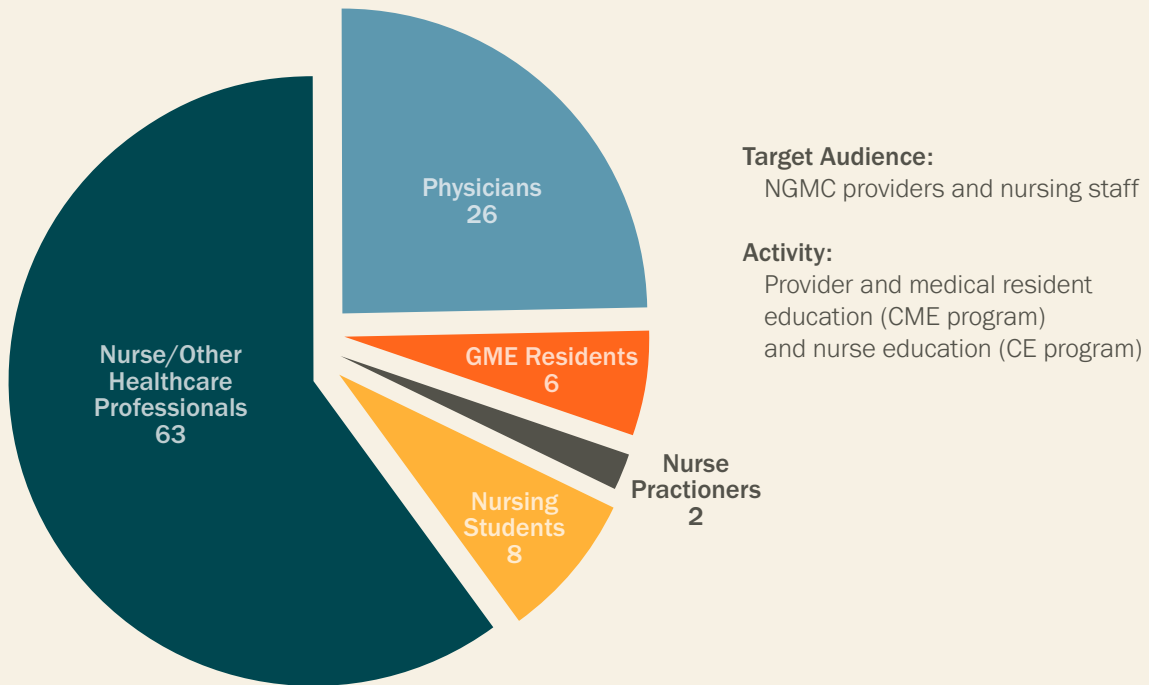
Three HPV prevention and education programs were offered to women who participated in the cervical cancer screenings (2 classes in Spanish and 1 class in English). Of the 26 at-risk participants, 19 were Hispanic and 7 were Caucasian.

Following the educational program, we tested the participants’ knowledge gains with three questions:

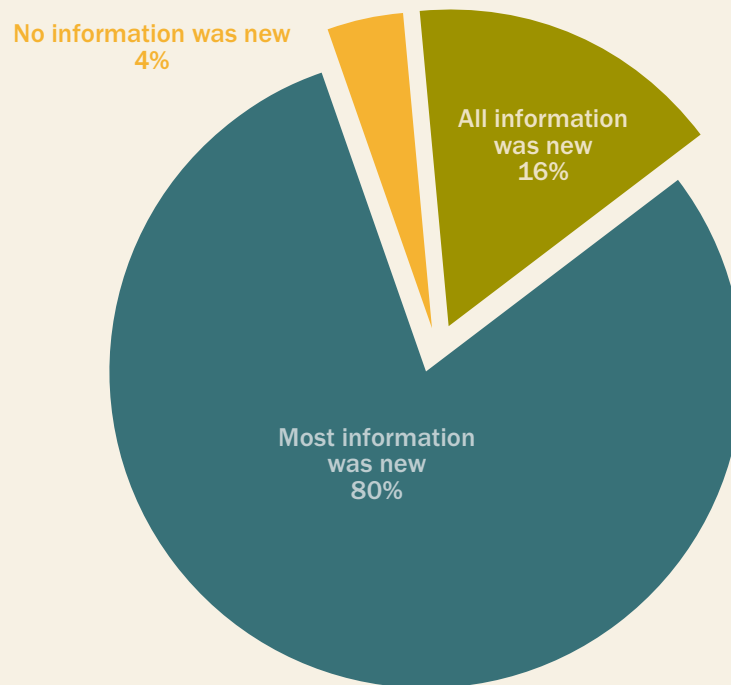
1. There is a vaccine available against HPV to help prevent cervical cancer – 75% gain
2. The HPV vaccine does not protect against other sexually transmitted infections – 56% gain
3. Men and women nine to 26 years of age can get vaccinated against HPV to prevent genital warts – 56% gain.



2019 HPV CME-CE Education Program Attendance

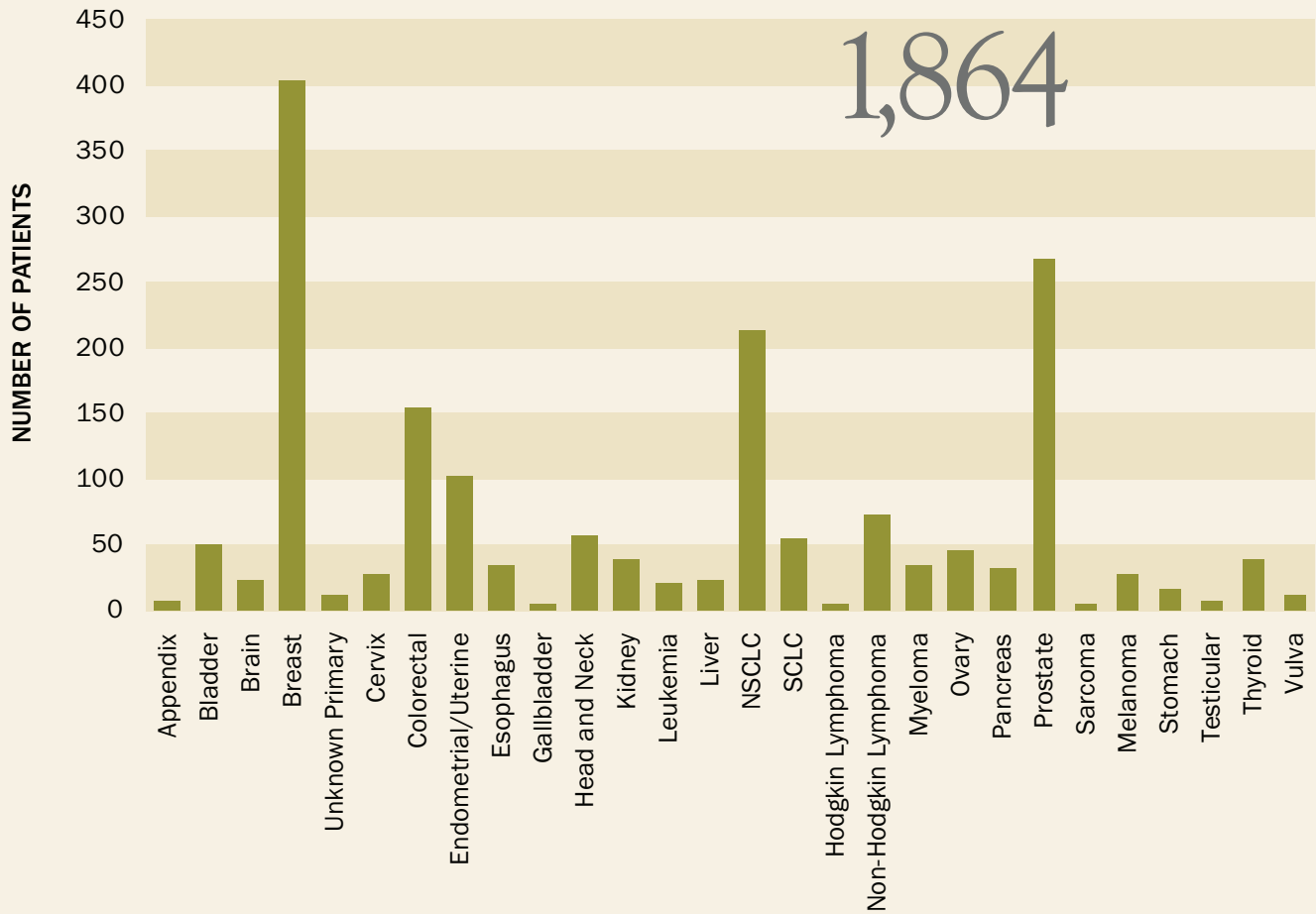


Information New to Participants



Cancers Seen by Oncology Navigation Team in 2019

Types of Cancers Navigated by Oncology Navigators
1.1.2019 - 10.31.2019



1,864

TYPES OF CANCER

Cancers with less than 5 not included
Non-melanoma skin cancers not included
1796 patients included in graph
1864 total patients navigated

Data obtained from Equicare Navigation Activations



Cancer Diagnosis by County

County	State	% Frequency	Total
Hall	GA	33.68200837	805
Jackson	GA	10.46025105	250
Habersham	GA	8.661087866	207
Gwinnett	GA	7.071129707	169
White	GA	6.945606695	166
Barrow	GA	5.857740586	140
Stephens	GA	4.309623431	103
Lumpkin	GA	3.933054393	94
Rabun	GA	2.761506276	66
Banks	GA	2.30125523	55
Dawson	GA	2.175732218	52
Union	GA	1.589958159	38
Towns	GA	1.506276151	36
Franklin	GA	1.380753138	33
Forsyth	GA	1.0041841	24
Hart	GA	0.794979079	19
Clay	NC	0.669456067	16
Clarke	GA	0.585774059	14
Madison	GA	0.418410042	10
Walton	GA	0.376569038	9
Cherokee	NC	0.334728033	8
Fannin	GA	0.334728033	8
Macon	NC	0.334728033	8
Oconee	GA	0.334728033	8
Fulton	GA	0.292887029	7
Pickens	GA	0.209205021	5
Cobb	GA	0.125523013	3
Elbert	GA	0.125523013	3

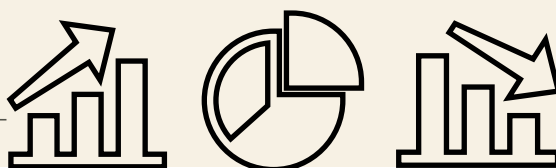
County	State	% Frequency	Total
Cherokee	GA	0.083682008	2
DeKalb	GA	0.083682008	2
Gilmer	GA	0.083682008	2
Henry	GA	0.083682008	2
Newton	GA	0.083682008	2
Oglethorpe	GA	0.083682008	2
Aiken	SC	0.041841004	1
Bulloch	GA	0.041841004	1
Carroll	GA	0.041841004	1
Chatham	GA	0.041841004	1
Clayton	GA	0.041841004	1
Coffee	GA	0.041841004	1
Greene	GA	0.041841004	1
Hillsborough	FL	0.041841004	1
Lancaster	PA	0.041841004	1
McDuffie	GA	0.041841004	1
Miami-Dade	FL	0.041841004	1
Morgan	GA	0.041841004	1
Oconee	SC	0.041841004	1
Okaloosa	FL	0.041841004	1
Okeechobee	FL	0.041841004	1
Perry	KY	0.041841004	1
Polk	FL	0.041841004	1
Polk	TN	0.041841004	1
Putnam	FL	0.041841004	1
Putnam	GA	0.041841004	1
Richmond	GA	0.041841004	1
Santa Rosa	FL	0.041841004	1



2017 Cancer Registry Data

Site	Analytic	Non-Analytic	Male	Female	AJCC Stage					Totals
					0	I	II	III	IV	
ORAL CAVITY, PHARYNX	48	25	54	19	0	8	3	4	29	73
--Tongue	19	5	19	5	0	2	0	4	12	24
--Tonsil	13	6	17	2	0	3	0	0	8	19
DIGESTIVE SYSTEM	380	95	287	188	10	49	71	85	109	475
--Esophagus	29	9	30	8	0	1	1	11	7	38
--Stomach	20	6	16	10	0	2	4	1	7	26
--Small Intestine	18	3	18	3	0	1	3	4	5	21
--Colon, Rectum, Anus	221	39	148	112	10	40	48	58	48	260
----Colon Excluding Rectum	149	24	99	74	8	29	27	39	32	173
-----Rectosigmoid Junction	16	2	10	8	0	3	5	3	5	18
-----Rectum	41	11	34	18	2	5	12	10	10	52
-----Anus, Anal Canal, Anorectum	15	2	5	12	0	3	4	6	1	17
--Liver, Gallbladder, Intrahep Bile Duct	39	27	49	17	0	1	5	7	16	66
----Liver	23	20	34	9	0	0	3	5	9	43
----Gallbladder	6	0	2	4	0	0	2	2	2	6
----Intrahepatic Bile Duct	5	5	8	2	0	0	0	0	3	10
----Other Biliary	5	2	5	2	0	1	0	0	2	7
--Pancreas	45	9	23	31	0	3	10	2	23	54
--Peritoneum, Omentum, Mesentery	5	0	0	5	0	0	0	1	3	5
RESPIRATORY SYSTEM	409	68	259	218	2	115	18	75	168	477
--Larynx	19	9	21	7	1	8	2	2	5	28
--Lung and Bronchus	386	59	234	211	1	105	16	73	162	445
----Non-Small Cell	303	30	181	152	1	93	14	59	115	333
----Small Cell	54	9	31	32	0	0	1	13	36	63
----Other Lung	29	20	22	27	0	12	1	1	11	49
SOFT TISSUE INCLUDING HEART	14	5	11	8	0	4	1	1	3	19
SKIN	46	24	40	30	5	11	5	5	3	70
--Skin: Melanoma	43	22	35	30	5	11	4	5	3	65
--Skin: Other Non-Epithelial	3	2	5	0	0	0	1	0	0	5

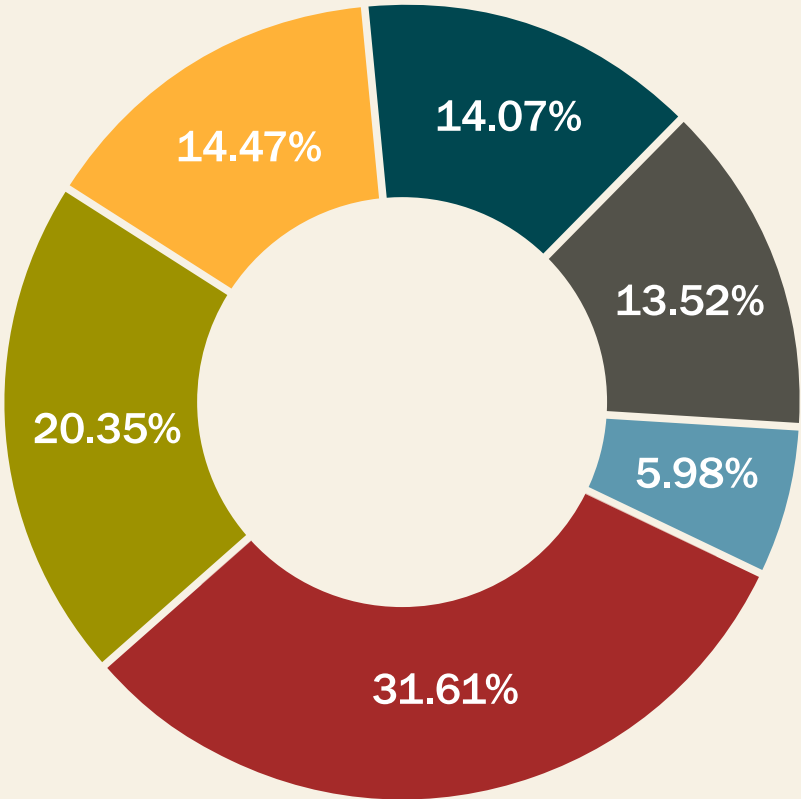
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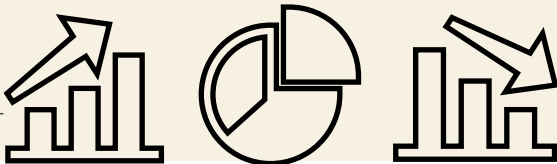
BREAST	409	87	2	494	61	163	116	33	16	496
---Female Breast	407	87	0	494	61	162	116	33	16	494
FEMALE GENITAL SYSTEM	167	51	0	218	3	95	11	39	13	218
---Cervix Uteri	24	7	0	31	0	15	3	3	3	31
---Corpus, Uterus: NOS	86	14	0	100	0	61	6	14	4	100
----Corpus Uteri	86	14	0	100	0	61	6	14	4	100
---Ovary	40	9	0	49	0	15	1	17	5	49
--Vulva	10	18	0	28	3	3	0	2	0	28
---Other Female Genital Organs	5	0	0	5	0	0	0	3	1	5
MALE GENITAL SYSTEM	277	121	398	0	1	54	161	32	16	398
---Prostate	259	116	375	0	0	49	158	30	16	375
---Testis	16	2	18	0	0	5	2	2	0	18
URINARY SYSTEM	168	44	152	60	38	68	21	6	14	212
---Urinary Bladder	92	26	92	26	36	27	12	2	5	118
---Kidney	64	17	52	29	0	38	8	3	8	81
---Renal Pelvis	9	0	5	4	2	1	1	1	1	9
BRAIN, OTHER NERVOUS SYSTEM	86	30	46	70	0	0	0	0	0	116
---Brain: Malignant	26	4	21	9	0	0	0	0	0	30
---Brain-CNS: Benign, Borderline	58	25	23	60	0	0	0	0	0	83
ENDOCRINE SYSTEM	146	23	41	128	0	79	15	8	8	169
---Thyroid	125	13	26	112	0	79	15	8	8	138
---Endocrine: Benign, Borderline	16	10	12	14	0	0	0	0	0	26
LYMPHOMA	103	34	92	45	0	21	14	25	33	137
---Hodgkin Lymphoma	14	1	11	4	0	1	4	4	5	15
---Non-Hodgkin Lymphoma	89	33	81	41	0	20	10	21	28	122
MYELOMA	21	21	19	23	0	0	0	0	0	42
LEUKEMIA	35	42	37	40	0	0	0	0	0	77
Unknown Primary	77	77	81	73	0	0	0	0	0	154
TOTALS	2390	755	1525	1620	120	668	436	313	413	3145



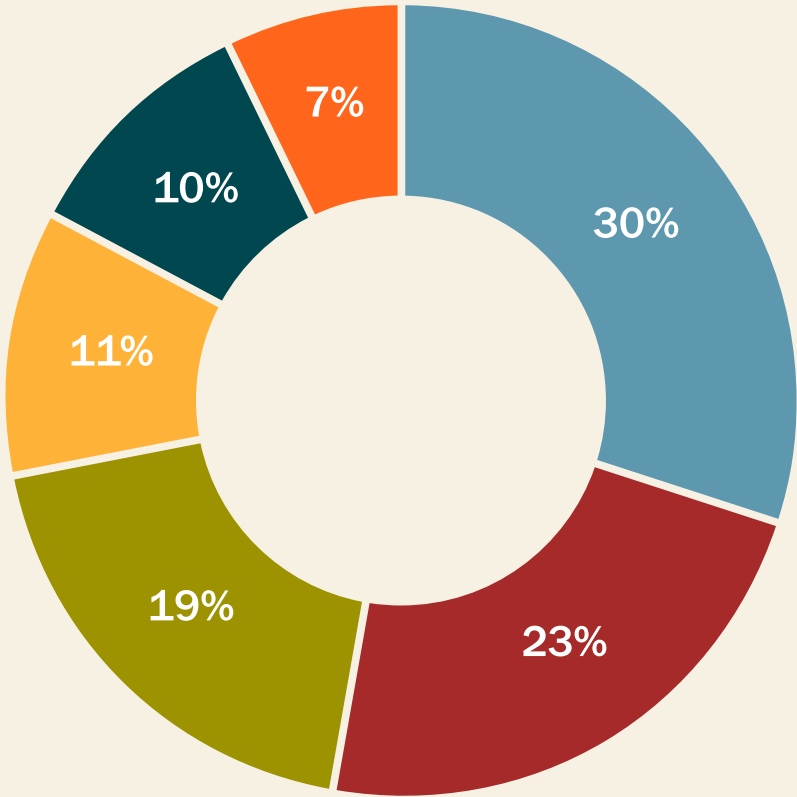
Cancer Stage at Diagnosis



- Stage 0
- Stage 1
- Stage 2
- Stage 3
- Stage 4
- Stage 9



NGMC's Top Six Cancer Sites for 2017



- Breast (female)
- Lung
- Prostate
- Colon
- Thyroid
- Urinary Bladder





Northeast Georgia Medical Center

