CANCER SERVICES

ANNUAL REPORT 2025

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2025

CANCER COMMITTEE MEMBERS

Cancer Committee Chairperson - Venumadhav Kotla, MD

Cancer Liaison Physician - Nelson Royall, MD

Diagnostic Radiologist - Stuart Deaderick, MD; Joseph Whitlock, MD (alternate)

Medical Oncologist - Andre Kallab, MD; Andrew Johnson, MD (alternate)

Pathologist - Ezra Ellis, MD

Radiation Oncologist - Craig Baden, MD; Adnan Elhammali, MD (alternate)

Surgeon - Fernando Aycinena, MD; Emily Black, MD (alternate)

Cancer Program Administrator - Michele Fortner, MBA, MS, RT (R)(T), FACHE

Oncology Data Specialists - Teresa Horton, ODS-C; Sandra Oliver, ODS-C (alternate)

Oncology Nurse Representative - Kim Tyner, RN, OCN; Ashley Belfance, BSN, RN, OCN (alternate)

Social Worker - Donna Martin Moss, LCSW, GC-C, ACHP-SW

Cancer Conference Coordinator - Andrew Johnson, MD; Angie Caton, MSN, RN, OCN (alternate)

Quality Improvement Coordinator - Christina Saurel, MD; Geoff Weidner, MD (alternate)

Cancer Registry Coordinator - Ezra Ellis, MD; Teresa Horton, ODS-C (alternate)

Clinical Research Coordinator - Charles Nash, MD; Holly Jones, PhD

Psychosocial Services Coordinator - Alicia Harrison, BSN, RN; Donna Martin Moss, LCSW, GC-C, ACHP-SW (alternate)

Survivorship Program Coordinator - Angie Caton, MSN, RN, OCN, CHPN; Sandi Walraven, BSN, RN, OCN (alternate)

Genetics Professional - Jennifer Butler, FNP, OCN, AOCNP

Registered Dietitian/Nutritionist - Chrissy Williams, RD, LD

Oncology Accreditation Coordinator - Penny McCall, AA, PACE

American Cancer Society Representative - MaySarih Ndobe

ONCOLOGY

SERVICES DIRECTOR - 2025 REVIEW

Michele Fortner, MBA, MS, FACHE, RT(R)(T)
Director of Oncology Services, NGMC

The annual Cancer Services report provides an overview of the key activities and accomplishments achieved by our oncology team throughout the year. As you read through this report, we hope it becomes clear that our program delivers a comprehensive continuum of cancer care - from screening and diagnosis to treatment and survivorship.

In 2025, we continued progressing toward accreditation through the National Accreditation Program for Breast Centers (NAPBC). Significant strides were made this year, including reducing the time from diagnosis to treatment and refining our processes for managing high risk breast patients.

Early identification of cancer remains critical, and our screening programs play an essential role in this effort. In 2025, the lung cancer screening program identified 20 lung cancers and completed more than 2,500 screening scans. Because living in a rural area was identified as a barrier to lung cancer screening, we launched a targeted initiative that provided education to more than 150 patients, led to numerous scans and resulted in one additional cancer diagnosis.

Our high risk incidental lung nodule program also continued to grow, identifying 5,600 nodules and diagnosing 26 cancers since it was launched November 2024.

In this report, oncology team members share important updates on our support programs, including oncology navigation, nutrition services, rehabilitation and the lung cancer support program:

- **Oncology Navigation:** Led by Alicia Harrison, BSN, this team provides critical guidance and support throughout the patient's cancer journey. Their work makes a tremendous difference in the lives of those we serve.
- **Nutrition Services:** Chrissy Williams, RD, highlights a project focused on providing nutrition and diet education to breast cancer patients with elevated BMIs.
- **Rehabilitation Services:** Heather Wilsey, PT, DPT, MBA, offers an update on oncology prehabilitation and rehabilitation efforts. This team continues to excel in delivering essential supportive care.
- **Lung Cancer Support Group:** Sandi Clark and Kim Tyner share updates on the lung cancer support group, which has developed a dedicated membership that offers meaningful connection and understanding.

Our oncology research program, led by Holly Jones, PhD, also had a strong year. Holly and her team collaborate with physician champions to identify impactful clinical trials that offer the greatest benefit to our community.

Our goal is to provide opportunities close to home so that patients do not need to travel outside of the region to access cutting edge research. Holly outlines this important work in her article.

Our program delivers a **comprehensive continuum of cancer care** - from screening and diagnosis to treatment and survivorship

ONCOLOGY

MEDICAL DIRECTOR UPDATE

Andrew Johnson, MD
Medical Director of Oncology, NGMC

Northeast Georgia Medical Center's (NGMC) Cancer Services Program continued to meet the needs of our patients through significant growth in services, personnel and technology in 2025. As a truly multidisciplinary regional center, NGMC serves a large and diverse population across northeast Georgia.

Our Cancer Services team includes a broad group of dedicated professionals – radiologists, pathologists, radiation oncologists, surgeons, medical oncologists, research staff and many others – who collaborate to develop the best possible treatment plans for our patients. We firmly believe that a multidisciplinary approach provides tremendous benefit, ensuring consensus-driven recommendations informed by the expertise of multiple providers.

Weekly tumor conferences remain a cornerstone of our collaborative practice. These include general tumor boards, as well as dedicated, tumor-specific conferences in breast, hepatobiliary surgery, thoracic oncology and pulmonary nodules.

In 2025, we continued to strengthen the NGMC Breast Program by establishing standards, policies, procedures and quality initiatives in preparation for National Accreditation Program for Breast Centers (NAPBC) accreditation. This designation will help ensure the highest quality of care for our patients.

There have also been meaningful advances in surgical, procedural and therapeutic care options. NGMC continues to develop innovative approaches for liver tumor management, including histotripsy, an ultrasound-based therapeutic option. We also advanced our program for administering Bispecific T Cell Engager (BiTE) therapies, which are approved for conditions such as small cell lung cancer and multiple myeloma. Our efforts in 2025 focused on expanding community access to this important form of treatment.

Our research program continues to offer cutting-edge clinical trials, and we expanded trial availability again in 2025. Our team remains committed to delivering high-quality, evidence-based therapy supported by the latest scientific data. As the landscape of cancer care continues to evolve rapidly, we remain unwavering in our dedication to offering the most up-to-date treatment options for our patients.

Our team remains **committed to delivering high-quality, evidence-based therapy** supported by the latest scientific data.

RADIATION ONCOLOGY

MEDICAL DIRECTOR UPDATE

Geoffrey Weidner, MD

Northeast Georgia Physicians Group Radiation Oncology
Radiation Oncology Medical Director, NGMC

Radiation Oncology at Northeast Georgia Medical Center (NGMC) continued to advance in 2025, expanding access to high quality, cutting edge radiation treatments while maintaining a strong commitment to individualized patient care. Our program remains recognized for excellence through the Accreditation Program for Excellence (APEx) from the American Society for Radiation Oncology. NGMC's radiation oncology clinics in Gainesville, Braselton and Toccoa continue to be the only centers outside the Atlanta area in Northeast Georgia to earn this distinction.

Advancements in Treatment

In early 2026, we will introduce Pluvicto, an innovative targeted radiopharmaceutical therapy. Pluvicto utilizes a molecule designed to bind to prostate cancer cells that express Prostate-Specific Membrane Antigen (PSMA). Once bound, the attached radioactive particle is internalized by the cancer cell, delivering a precise radiation dose that damages and often destroys the malignant cell. This treatment represents the first of several targeted injectable radiation agents we hope to offer in the future.

Brachytherapy

NGMC continues to be recognized regionally for its depth of expertise in brachytherapy, with radiation oncology centers across the region frequently referring patients to us for these highly specialized procedures. Brachytherapy involves placing a radioactive source directly within or adjacent to a tumor, allowing delivery of a highly targeted radiation dose while minimizing exposure to surrounding healthy tissues. Our program offers a comprehensive range of brachytherapy treatments, including high dose rate (HDR) temporary applications for prostate cancer, select gynecologic cancers and skin cancers; low dose rate (LDR) permanent seed implants; and GammaTile therapy, an intraoperatively placed brachytherapy option for patients with brain tumors.

Innovations to Reduce Treatment Toxicity

To further reduce side effects for prostate cancer patients receiving radiation therapy, our program uses dissolvable gels or balloons placed between the prostate and rectum. This technique effectively decreases radiation exposure to the rectum and can be applied with:

- External beam radiation
- Brachytherapy
- Combination radiation approaches

Shift Toward Hypofractionation

Radiation oncology continues to move toward hypofractionated treatment, which delivers fewer therapy sessions at higher doses per treatment. Several disease sites now benefit from highly specialized techniques that allow safe and effective hypofractionation.

Stereotactic Techniques

These methods rotate radiation beams around a small focal point and include:

- Stereotactic Radiosurgery (SRS)
- Stereotactic Radiation Therapy (SRT)
- Stereotactic Body Radiation Therapy (SBRT)

Stereotactic approaches deliver high-dose radiation to a small target while sparing nearby structures and are typically completed in 1 to 5 treatments. They are used for tumors in the brain and other body sites.

Radiation Therapy for Benign Conditions

Radiation therapy also plays a role in managing certain benign but potentially life threatening conditions. NGMC collaborates with Interventional Neuroradiology at NGMC Gainesville to treat arteriovenous malformations (AVMs) using SRS. Additional benign conditions treated include:

- Dupuytren's contracture
- Osteoarthritis

Looking Ahead

The Department of Radiation Oncology at NGMC remains committed to delivering cutting edge, high quality radiotherapy while keeping pace with technological advancement and the needs of our growing patient population. We look forward to continuing to serve the Northeast Georgia community with excellence in the years ahead.

ONCOLOGY
RESEARCH UPDATE

Holly Jones, PhD
Director of Research Administration, NGMC

Charles Nash III, MD, FACP
Director of Oncology Research, NGMC

Throughout 2025, the Northeast Georgia Medical Center (NGMC) Oncology Research Team achieved several significant milestones, reflecting our ongoing commitment to providing exceptional care and advancing innovative cancer therapies within our community. NGHS continued to lead the state in offering Histotripsy as a breakthrough treatment option, and NGMC Gainesville's Oncology Research team earned and maintained the distinction of being the #1 enrolling site in the United States for the HistoSonics BOOMBOX clinical trial. This observational study follows histotripsy patients for up to five years to evaluate long term outcomes after treatment for liver cancer and cancers that have metastasized to the liver.

Expanding Access to Breakthrough Therapies

In 2025, our research efforts continued to bring hope and new treatment options to patients and caregivers in their fight against cancer. Participation in clinical trials connects our team to an international network of oncology experts, enabling us to incorporate the newest advances, techniques and scientific discoveries into patient care-benefiting those we serve today and for others in the years ahead.

Over the past year, patients had the opportunity to participate in more than 21 clinical trials, many involving some of the most promising and innovative therapies in modern oncology. Our physician specialists across medical, surgical, radiation and gynecologic oncology led trials investigating new pharmaceutical agents and treatment approaches for a wide range of tumor types, including breast, lung and prostate cancers - three of the most commonly diagnosed cancers.

We also expanded our clinical trial portfolio to include new studies focused on breast, lung and colorectal cancers, as well as a novel drug trial for ovarian cancer. Additionally, we enrolled patients in two studies collecting blood and tissue samples from individuals with and without cancer to support the development of laboratory based early detection tests.

Exceeding National Research Standards

The Oncology Research Team met and exceeded the requirements of the American College of Surgeons Commission on Cancer (CoC) accreditation standards.

Looking ahead, our clinical trial portfolio is expected to grow further over the next six months, with a focus on opening new drug treatment trials that address outcomes in breast cancer therapies.

We also plan to expand participation in National Cancer Institute (NCI) sponsored Cancer Care Delivery Research (CCDR) studies. These studies aim to improve clinical outcomes and patient well being by identifying and addressing patient, clinician and system level factors that influence care delivery. For example, in 2025, we launched the SWOG S2417CD trial, which evaluates whether an educational website-Current Together After Cancer (CTAC)-improves follow up care for colorectal cancer survivors.

NCI and Statewide Research Partnerships

Most of our research portfolio is supported through funding from the National Cancer Institute (NCI) and leading pharmaceutical sponsors. NGMC is also proud to serve as a Research Network Member of both GA CORE and GA NCORP, Georgia's NCI Community Oncology Research Program. As one of only 34 NCORP networks nationwide, GA NCORP provides access to state of the art clinical trials in cancer prevention, screening, treatment, control and survivorship for patients across both urban and rural communities in Georgia.

Our research efforts continued to bring **hope and new treatment options** to patients and caregivers in **their fight against cancer**.

ONCOLOGY REHABILITATION PROGRAM UPDATE SUPPORTING SURVIVORS IN 2025

As cancer survival rates continue to rise, so does the need for comprehensive support before, during and after treatment. Survivors often experience a range of physical challenges – including swelling, swallowing difficulties, decreased strength and energy, reduced mobility and overall limitations in daily functioning-based on tumor type, location and the interventions they undergo.

Heather Wilsey, PT, DPT, MBA
Outpatient Rehabilitation Manager, NGMC

THE GOOD NEWS: Specialized prehabilitation and rehabilitation services can significantly improve these outcomes. NGMC's Physical, Occupational and Speech Therapy teams remain dedicated to helping survivors move, feel and live better at every stage of their journey.

2025 Highlights at a Glance

Growing Access to Specialized Therapy Care

- Expanded Cancer Rehabilitation services in Braselton to five days per week.
- Launched Male Pelvic Floor appointments at the Gainesville location.
- Increased therapy support for head and neck cancer patients, improving and maintaining swallowing function, with a 13% increase in services delivered.
- Oncology physical therapy served 47% more patients in 2025.
- Earned recognition as a Physiological Oncology Rehabilitation Insititute (PORi) Center of Excellence, reflecting a commitment to evidence based, high quality care.

Specialized Services Offered

- Prehabilitation ("Prehab") prior to surgery or treatment
- Lymphedema therapy
- Head and neck cancer rehabilitation
- Pelvic Floor therapy
- Rehabilitation Navigation Services

Investing in the Future

- Ongoing specialized training, education and certification for therapy staff.
- Served as a clinical education site for students from:
    - Philadelphia College of Osteopathic Medicine
    - Georgia State University
    - Augusta University College of Allied Health Sciences
- Therapy leadership guided a graduate research group focused on developing prehabilitation protocols.
- Achieved national recognition with selection to present at the American Physical Therapy Association Annual Meeting in early 2026.

Strengthening Community Connections

- Facilitated support groups through Longstreet Cancer Support.
- Partnered with the YMCA Livestrong fitness program.
- Expanded access to massage therapy and restorative yoga.
- Helped patients navigate support for financial needs, transportation, and durable medical equipment.

Why Oncology Rehabilitation Matters

OUR MISSION IS CLEAR: To deliver the right care, in the right place, at the right time-empowering survivors to maintain and improve their quality of life throughout and beyond their cancer experience.

ONCOLOGY
NAVIGATION UPDATE

Alicia Harrison, BSN, RN
Navigation & Radiation Therapy Supervisor, NGMC

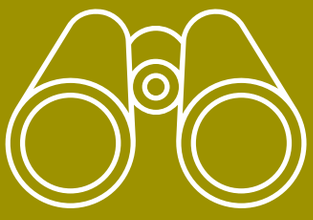
A cancer diagnosis is often a frightening and overwhelming experience. In 2025, the oncology navigation team at Northeast Georgia Medical Center (NGMC) continued its mission to ease this burden by guiding patients through every stage of their cancer journey - from diagnosis through treatment and survivorship. Our navigators provide emotional support, help patients overcome barriers to care and ensure they stay connected to the resources needed to move forward with confidence.

Supporting Patients Facing Financial Hardship

Throughout 2025, we observed a notable rise in financial strain among cancer patients, driven by increased costs of living and associated treatment expenses. The navigation team supported more than 3,500 new patients, many of whom required assistance addressing financial needs. By collaborating with local foundations and community partners, the team helped lessen the financial burdens patients were experiencing, allowing them to focus on their treatment and well being. This support plays a crucial role in reducing anxiety and ensuring patients can access and complete necessary care.

Promoting Cancer Prevention and Early Detection

NGMC further strengthened its commitment to cancer prevention through the continued development of the Incidental Lung Nodule Program, launched in collaboration with the navigation team.
The oncology navigator works closely with pulmonologists to identify and contact patients found to have incidental lung nodules during emergency room visits for unrelated concerns. This proactive outreach aims to facilitate early detection of lung cancer, which is closely associated with improved patient outcomes. In 2025, the program identified more than 1,000 patients with incidental lung nodules requiring follow-up, underscoring the significant role navigation plays in early diagnosis efforts.



Looking Ahead

With the ongoing support of NGMC, the oncology navigation team will continue to expand its efforts to guide, advocate for and empower patients throughout their cancer journey. Our goal remains clear: to improve access, enhance patient experience and ultimately support better outcomes for every individual we serve.

ONCOLOGY
DIETICIAN UPDATE

Chrissy Williams, RD, LD
Oncology Dietician, NGMC

As a dietitian working within the cancer community, I regularly emphasize to patients that diet, lifestyle and overall health play a meaningful role in their journey following a cancer diagnosis. In 2025, we took a deeper look at how these factors affect our breast cancer population, particularly those with hormone receptor–positive (HR+) disease.

A growing body of evidence continues to underscore obesity as a significant and modifiable risk factor affecting breast cancer outcomes. A literature review of PubMed studies published between 2020 and 2025 found that obesity is an independent poor prognostic indicator, associated with higher breast cancer incidence, recurrence and mortality. Weight changes after diagnosis also influence outcomes; weight gain exceeding 10% of baseline body weight has been linked to increased all cause mortality. Additionally, obesity may impact both the effectiveness and toxicity of systemic therapies, adding complexity to treatment and survivorship.

These findings highlight the critical need for nutrition-focused interventions and accessible community resources to support healthy weight management and lifestyle changes among HR+ breast cancer patients. In response, we launched a nutrition centered project designed to better meet the needs of this patient population at Northeast Georgia Health System (NGHS). Eligible patients - those diagnosed with HR+ breast cancer who met BMI criteria - were provided with an educational packet outlining foundational guidance on healthy diet and lifestyle practices. Each patient was also contacted by a dietitian and offered an optional consultation for personalized nutrition counseling and support.

As one of the dietitians involved in this initiative, I am honored to support our breast cancer community. We recognize that making lifestyle changes during active treatment can be extremely challenging, especially while managing hormonal changes and treatment-related side effects. Having access to a knowledgeable professional resource can make a meaningful difference in a patient's path toward survivorship - an impact we are committed to continuing in the years ahead.

ONCOLOGY
REGISTRY UPDATE

Teresa Horton, ODS-C
Oncology Data Specialist, NGMC

In 2025, the Oncology Registry experienced several transitions as team members moved to new opportunities or reduced their work schedules. Recruitment efforts continue amid a competitive job market and a limited pool of qualified candidates. Despite these challenges, the registry team made meaningful progress in strengthening operations and modernizing workflows.

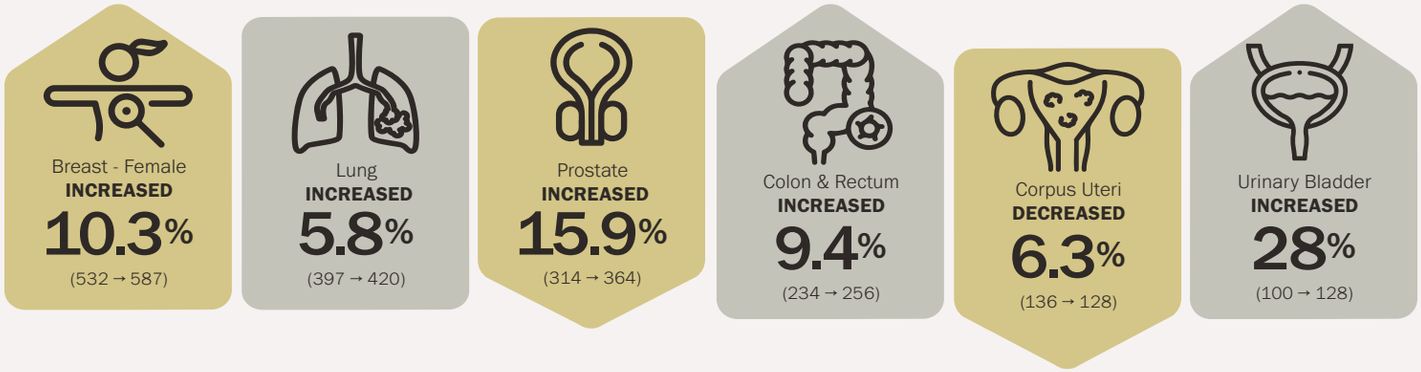
A major accomplishment this year was the complete elimination of paper-based processes, paired with ongoing enhancements to support the fully remote nature of registry work. The registry application was successfully migrated to the cloud through our software provider, improving accessibility, stability and efficiency. Additional process streamlining took place throughout the year, and these modernization initiatives will continue into 2026.

Registry Activity and Case Volumes

Registry follow-up activity averaged 1,350 cases per month, an increase of 150 cases per month compared to 2024. In 2023, the cancer services program documented 3,144 analytic cancer cases, reflecting an 11% increase over 2022. Four of the top five cancer sites experienced growth, and urinary bladder cancer emerged as a new addition to the top five.

The registry supported 150 cancer conferences in 2025, during which 835 cases were presented to interdisciplinary teams - an increase of 10.6% over the prior year. Attendance, engagement, and collaborative discussion across all cancer conferences remained strong. We extend our gratitude to all participants, presenters and team members whose dedication ensures our patients receive the highest quality care.

CHANGES IN TOP CANCER SITES
(2023 VS. 2022)



QUALITY IMPROVEMENT
SURGICAL SYNOPTIC RECORDING

Penny McCall
Oncology Accreditation Coordinator, NGMC

In 2023, the Cancer Program at Northeast Georgia Medical Center (NGMC) successfully began the implementation of Synoptic Operative Reporting. Synoptic operative reporting standardizes the documentation of key surgical elements using structured data fields rather than free-text narratives. Implementation has been shown to improve completeness, accuracy, data abstraction and multidisciplinary communication - particularly in oncologic surgery.

Operative reports are foundational to patient care, cancer staging, adjuvant treatment decisions, quality reporting and accreditation compliance. Traditional narrative operative notes vary widely in structure and completeness, often omitting critical data elements required for cancer registry abstraction and evidence-based care.

The implementation began with surgery for breast, colorectal, lung and melanoma sites. Surgeons and key stakeholders were engaged early in the process to support template design and workflow integration. Education was provided to ensure consistent use and understanding of required elements.

In 2025, our cancer program achieved an overall 90% compliance rate for Synoptic Operative Reporting. Ongoing monitoring includes review of utilization rates, data completeness and cancer registry feedback. Synoptic operative reporting has improved documentation consistency, reduced clarification queries, and enhanced multidisciplinary communication, supporting quality improvement and Commission on Cancer (CoC) standards.

QUALITY IMPROVEMENT

LUNG CANCER NODAL EVALUATION

Nelson A. Royall, MD, FACS
Hepato-Pancreato-Biliary Surgery,
NGMC Northeast Georgia Physicians
Group Surgical Associates

Deepak Vivekanandan, MD, MBBS, PGY-4
General Surgery Resident, NGMC
Graduate Medical Education

Following the successful completion of last year's Lung Cancer Quality Improvement initiative - which achieved compliance with national lung cancer nodal evaluation guidelines - the Northeast Georgia Medical Center (NGMC) Cancer Committee re-enrolled in **Year 2 of the American College of Surgeons (ACS) Commission on Cancer (CoC) Quality Improvement Project**. Ongoing monitoring was conducted to ensure sustainability and long-term adherence to established standards of care.

The primary goal for this year was to maintain compliance above the ACS-required benchmark of 80%, while reinforcing best practices through continued communication and engagement with the surgical team.

Ongoing Oversight and Communication

Throughout the reporting period, the Cancer Committee remained in regular communication with the thoracic surgery teams. Surgeons were periodically updated on institutional compliance data, reinforcing awareness of continued strong performance and the importance of maintaining guideline-concordant lymph node evaluation and documentation. No major workflow changes or corrective interventions were required, as processes implemented during the prior year remained effective and well-integrated into routine clinical practice.

Compliance Results

Institutional compliance remained consistently high across all reporting intervals:

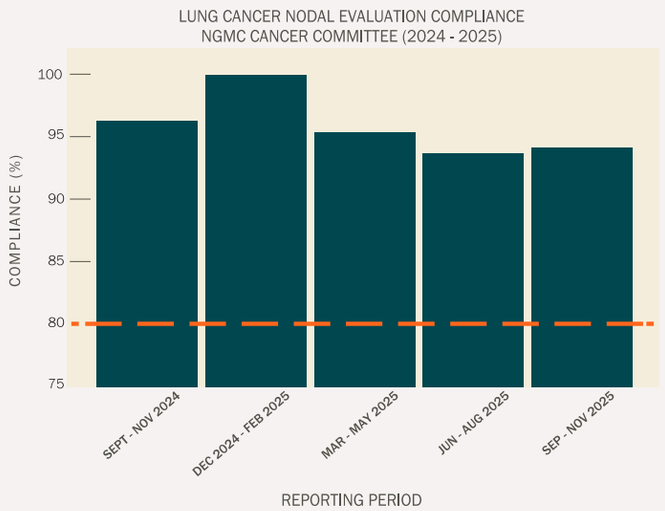
September 2024 to November 2024	December 2024 to February 2025	March 2025 to May 2025	June 2025 to August 2025	September 2025 to November 2025
96.2%	100%	95.2%	93.7%	94.1%

All reporting periods exceeded the required compliance threshold of 80%, demonstrating sustained success well above national benchmarks.

Summary and Future Direction

This year's results confirm that the multidisciplinary interventions and educational efforts implemented during the initial quality improvement phase have led to durable practice change. Sustained high compliance reflects strong engagement from the surgical, pathology and peri-operative teams, as well as effective communication and oversight by the Cancer Committee.

Moving forward, the committee will continue routine monitoring and feedback to ensure ongoing adherence, with a focus on maintaining consistency rather than introducing new interventions. The NGMC Cancer Committee remains committed to delivering high-quality, evidence-based lung cancer care to our community.



LUNG CANCER SUPPORT
GROUP UPDATE

Kimberly Tyner-Meeks, RN, OCN
Outpatient Infusion Coordinator, NGMC

Sandi Walraven, BSN, RN, OCN
Oncology Infusion Specialist, NGMC

Northeast Georgia Medical Center (NGMC)'s Cancer Services Program remains deeply committed to supporting cancer survivors and their caregivers. One of the cornerstones of this commitment is the Lung Cancer Support Group, which has continued to provide community, education and encouragement for survivors throughout 2025.

Established in 2016 through a grant from the Lung Cancer Alliance, the group was created to address the unique emotional and practical needs of individuals living with and beyond lung cancer. The program is led by Sandi Walraven, BSN, RN, OCN, who received specialized training in Washington, D.C., to guide and support this community.

The group has a dedicated core of six long standing members-several of whom have participated since its inception. Meetings are held on the second Monday of each month from Noon to 2 p.m., with lunch provided. Sessions offer a comfortable, welcoming environment where survivors and caregivers can reconnect, share updates about treatment and follow up care and support one another.

In addition to discussion and peer connection, the group incorporates engaging and enriching activities. Members participate in games (with prizes for everyone), basic CPR demonstrations, chair yoga, arts and crafts and guest presentations focused on mindfulness and guided imagery. These activities are designed to promote physical well being, emotional resilience and social connection.

Since its founding, the group has met at NGHS Barrow, but beginning in 2026, meetings will transition to the NGHS Braselton location to better serve the growing survivor community.

LUNG CANCER SCREENING
PROGRAM UPDATE

Rami Arfoosh, MD
Pulmonary and Sleep Specialists of
Northeast Georgia
Chest Board Chair, NGMC

In 2025, the lung cancer screening program continued to expand significantly, marking another year of sustained growth and improved patient engagement. A total of 2,515 low dose CT (LDCT) scans were completed-an 18% increase over 2024 and a 32% increase over 2023.

By year-end, the program identified 21 lung cancers and 4 incidental malignancies involving the liver, colon, spine, and lymphoma.

Lung Cancer Staging Distribution

STAGE	STAGE I	STAGE II	STAGE III	STAGE IV
NUMBER OF CASES	10	4	4	3

Lung Cancer Histology

HISTOLOGIC TYPE	SMALL CELL	NEUROENDOCRINE	ADENOCARCINOMA	SQUAMOUS CELL
NUMBER OF CASES	2	1	6	12

Key Contributors to 2025 Program Success

- Several initiatives and partnerships supported the continued growth of the lung cancer screening program:
- 22 scheduled interdisciplinary Chest Board Conferences held throughout the year.
- 299 cases reviewed at Chest Board in 2025.
- Strong clinical leadership from Dr. Rami Arfoosh in guiding multidisciplinary case discussions.
- Increased regional primary care engagement focused on improving lung screening awareness.
- Successful implementation of the Primary Care Physician Lung Cancer Screening Project.
- Active participation in statewide initiatives through the Georgia Lung Cancer Roundtable.
- Continued progress supported by the American Cancer Society Lung Cancer Partnership Grant.

Future Directions for 2026

As screening volume continues to rise, several enhancements are under consideration to support program growth and improve early detection:

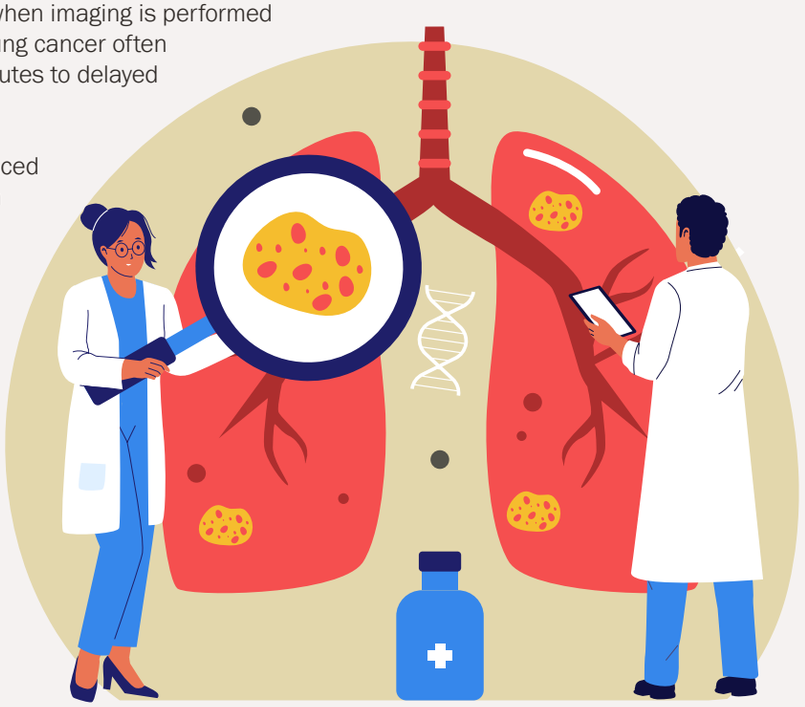
- Increasing the frequency of Chest Board conferences each month.
- Establishing a standardized, reliable method for identifying qualified but never screened individuals.
- Sustained outreach and education efforts with primary care practices.
- Developing new and innovative community outreach strategies, particularly focused on rural and underserved populations.

LUNG CANCER
PROGRAM UPDATE

April P. McDonald, MD
Northeast Georgia Physicians Group
Interventional Pulmonology Medical Director, NGMC

Lung cancer remains the leading cause of cancer-related deaths in the United States. Georgia ranks among the states with the highest incidence rates of new lung cancer diagnoses, and Northeast Georgia Health System (NGHS) provides care to patients living in counties with some of the highest rates in the state. What we know unequivocally is that early diagnosis is critical to improving lung cancer outcomes. When lung cancer is identified in its earliest stages, curative-intent treatment can be offered - significantly improving survival and reducing mortality.

For nearly a decade, NGHS has convened a multidisciplinary Chest Board Conference to review imaging for high-risk individuals undergoing annual lung cancer screening with low-dose CT scans. Despite clear national guidelines and proven mortality benefit, only approximately 6% of eligible Americans undergo recommended lung cancer screening. As a result, the majority of lung cancers are detected incidentally - discovered when imaging is performed for unrelated reasons. Combined with the fact that lung cancer often remains asymptomatic until later stages, this contributes to delayed diagnoses and fewer curative treatment options.



Recognizing this gap, NGHS has implemented enhanced system-level strategies to improve early identification and timely evaluation of concerning pulmonary nodules, including Epic Actionable Findings alerts that flag suspicious nodules in real time.

Since mid-2023, the system has further strengthened its diagnostic capabilities through the adoption of the Ion Endoluminal System robotic bronchoscopy platform — a cutting-edge technology that enables proceduralists to navigate to all regions of the lung and biopsy nodules of varying sizes with precision. Pulmonologists within the system performing this procedure at both the Gainesville and Braselton campuses have impacted more than 700 lives, providing patients with accurate and timely diagnoses regarding their lung nodules.

While not all nodules represent lung cancer, for those that do, having a clearly defined and efficient pathway from identification to diagnosis to treatment is paramount. What we have witnessed is that a coordinated, system-wide approach to lung nodule management - supported by a dedicated thoracic oncology team - leads to meaningful stage shifting, with more cancers being identified at earlier, more treatable stages. Since the program's inception, there has been an 8% increase in the diagnosis of Stage I lung cancers and an 8% decrease in Stage III lung cancers - a measurable shift that reflects earlier detection and intervention.

Through continued innovation, multidisciplinary collaboration and commitment to community health, NGHS is actively transforming the lung cancer narrative in the region it serves.

ADDRESSING BARRIERS TO CARE: PARTNERSHIPS WITH INTERNAL MEDICINE PRACTICES TO INCREASE LUNG CANCER SCREENINGS

Angie Caton, MSN, RN, OCN, CHPN

Assistant Nurse Manager, Oncology Services, NGMC

In 2025, we continued our efforts to address persistent barriers to lung cancer screening by examining the characteristics of patients diagnosed with lung cancer in 2023. Using these insights, we partnered with three physicians across two internal medicine practices serving a predominantly rural population of tobacco users within our service area.

Baseline Assessment

Baseline data for each physician were obtained through the electronic medical record (EMR) and focused on patients eligible for lung cancer screening based on age and tobacco history. Data were reviewed for inaccuracies in tobacco history and for screening orders, scheduled scans, and completed examinations.

Baseline Eligible Patient Data, 2025

PHYSICIAN	TOTAL QUALIFIED PATIENTS	PRIOR SCREENINGS COMPLETED	QUALIFIED PATIENTS NOT SCREENED	MALE	FEMALE	AVERAGE AGE	CURRENT SMOKERS	FORMER SMOKERS	AVERAGE PACK YEAR HISTORY
PATNI	90	15	35	21	14	62	22	13	44
SCHUTTE	96	17	55	19	36	61	30	15	35
BOHN	114	15	74	62	12	64	34	40	39

Interventions

To support improved screening rates, a series of coordinated interventions were implemented throughout 2025:

- Conducted in person visits with each practice to discuss participation and confirm guideline based screening recommendations.
- Reviewed each practice's list of qualified patients and corrected errors related to tobacco history or screening eligibility.
- Communicated baseline findings directly to physicians and their care teams.
- Prioritized outreach by pack year history, beginning with the highest-risk patients.
- Initiated patient outreach:
    - 140 EMR patient portal messages
    - 20 mailed letters
- Responded daily to patient portal questions and requests for clarification.
- Reassessed each practice's lists every 6–8 weeks to capture newly ordered, scheduled, or completed screenings.
- Presented all LRAD 3 and LRAD 4 findings at multidisciplinary Chest Board.
- Invited participating practice physicians when their patients were discussed or shared recommendations afterward.
- Hosted Lung Cancer Screening Day on Saturday, November 11, providing extended imaging hours; three participants from partner practices attended.
- Provided ongoing updates to the Cancer Committee, with a final report delivered in January 2026.

Impact and Outcomes

A total of 155 previously unscreened eligible individuals received direct education about lung cancer screening.

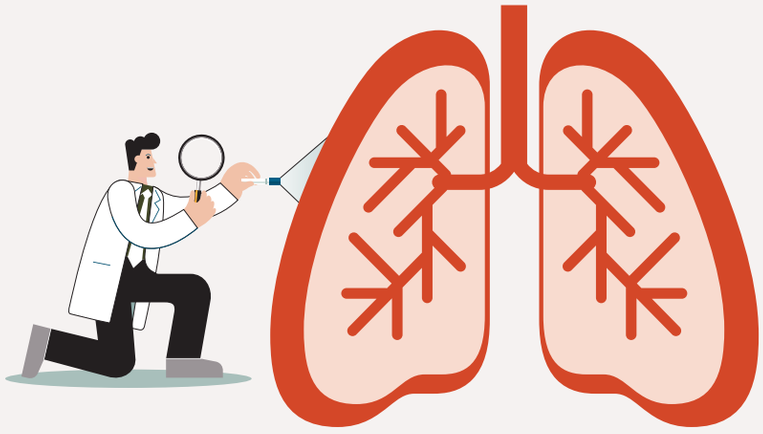
Of these:

- 26 completed low dose CT scans
- 24 had scans ordered but not yet scheduled
- 1 had a scheduled scan not yet completed

Importantly, one patient was diagnosed with Stage I non–small cell lung cancer following screening. The patient is currently determining the most appropriate treatment plan.

Project Summary

MEASURE	TOTAL
ELIGIBLE PATIENTS IDENTIFIED	155
SCANS COMPLETED	26
SCANS ORDERED, NOT SCHEDULED	24
SCANS SCHEDULED, NOT COMPLETED	1
LRAD 1 RESULTS	16
LRAD 2 RESULTS	5
LRAD 3 RESULTS	4
LRAD 4 RESULTS	1
DECLINATIONS	2
PATIENTS CONTACTED THROUGH MYCHART	140
PATIENTS CONTACTED BY MAIL	20
CANCERS DIAGNOSED	1



ONCOLOGY

REGISTRY PRIMARY SITE TABLE
CALENDAR YEAR 2023

	TOTALS	
NCI DIAGNOSIS GROUP	**TOTAL**	**%**
ORAL CAVITY, PHARYNX	65	2.01
DIGESTIVE SYSTEM	563	17.40
RESPIRATORY SYSTEM	432	13.35
BONES, JOINTS	4	0.12
SOFT TISSUE INCLUDING HEART	11	0.34
SKIN	52	1.61
BREAST	602	18.60
FEMALE GENITAL SYSTEM	249	7.69
MALE GENITAL SYSTEM	407	12.58
URINARY SYSTEM	235	7.26
EYE, ORBIT	0	0.00
BRAIN, OTHER NERVOUS SYSTEM	127	3.92
ENDOCRINE SYSTEM	154	4.76
LYMPHOMA	97	3.00
MYELOMA	41	1.27
LEUKEMIA	68	2.10
MESOTHELIOMA	1	0.03
KAPOSI SARCOMA	1	0.03
MISCELLANEOUS	127	3.92
TOTALS	**3236**	**100.00**

Northeast Georgia Medical Center