The Cancer Program uses tomotherapy to treat cancer patients like Herschel Judd right here at CRMC.
THE CANCER PROGRAM AT COOKEVILLE REGIONAL MEDICAL CENTER is pleased to share our year in review with you. We have made many strides toward improving and growing our oncology care in a way that is meaningful to the most important person we serve, our patient.

The American College of Surgeons cancer program accreditation renewal occurred this year, and we earned commendation in many areas, showing the team’s commitment to not only meet these requirements, but exceed them. Throughout this process, I was reminded how multifaceted the care of the oncology patient is and the commitment and collaboration it takes from many diverse functions across the medical community to be successful in this endeavor. Our physicians and staff never disappoint – they stand ready to do what it takes to ensure oncology care at Cookeville Regional is second to none.

The lung cancer screening initiative has grown this year, and a lung cancer navigator was hired this summer. Both of these important aspects of lung cancer care will be vital as we seek ways to detect lung cancers at earlier stages when treatment can be most effective and to ensure patients diagnosed with this disease receive expedient care.

Our vision of “Exceptional Care to Every Patient, Every Day” remains our focus, and we look forward to providing comprehensive, compassionate oncology care close to home for the residents of the Upper Cumberland in the year ahead.

Lisa Bagci, BS, RHIA, CTR
DIRECTOR, CANCER CENTER
COOKEVILLE REGIONAL MEDICAL CENTER

“Be kind, for everyone you meet is fighting a hard battle.” — Plato

Breast tomosynthesis (3D mammography) technology was added this year as a way to increase diagnostic accuracy in breast imaging and adds another weapon in the arsenal of breast cancer detection.

The Cancer Program is fortunate to have strong community support. Our volunteers spend countless hours in The Cancer Center and across the medical center, giving their time and talents in many ways. The Cookeville Regional Charitable Foundation events, like the Summer Splash 5K, CRMC and Anne Cameron Golf Tournaments, Sip-Taste-Mingle and Pink Ribbon of Hope Gala, in concert with grants from Susan G. Komen, raise much-needed funds to provide assistance to our patients through the Cancer Care Fund and provide free screening mammograms for patients without insurance or with high deductibles. These unique aspects of our program set us apart as we seek to truly be there for patients walking the cancer journey and to assist in any way we can.
ACoS Accreditation

COOKEVILLE REGIONAL MEDICAL CENTER has once again earned accreditation by the American College of Surgeons’ Commission on Cancer for its comprehensive cancer program. The approval was granted after a physician surveyor for the Commission on Cancer completed an on-site evaluation based on 34 standards of excellence. Cookeville Regional has voluntarily participated in the Commission on Cancer’s accreditation process for 12 years to demonstrate its commitment to meet rigorous standards and improve the quality of care for patients with cancer.

3D Mammography

THE WOMEN’S CENTER AT COOKEVILLE REGIONAL now offers 3D mammography — the latest in imaging technology for breast cancer screening. 3D mammography produces a three-dimensional view of breast tissue that allows radiologists to identify and characterize individual breast structures by reducing the effect of overlapping tissues in the breast. All women who would undergo a standard mammogram are candidates for 3D mammograms.
TWENTY YEARS AGO, THE ADMINISTRATION AT COOKEVILLE REGIONAL sought to determine what our community and region needed most at that time in terms of health care. They discovered that the region was underserved in the area of cancer care, especially given the fact that the disease often requires frequent, ongoing treatments.

“The strain of having to drive 100 miles one way several times a week is an added burden when patients need to focus that energy on getting well instead,” said Paul Korth, CEO at Cookeville Regional. “To know that there’s a resource available in your hometown that can take care of what you need is extremely important, so we decided we needed to put in a comprehensive cancer program.”

Established in 1999, The Cancer Center at Cookeville Regional quickly grew. In 2009, it was moved to its current location in the North Tower, where it tripled in size and today continues to offer state-of-the-art technology, treatments and care all in one convenient, dedicated facility with its own entrance and parking area.

“We feel that it’s important to offer our patients high-quality care and to offer our physicians the types of resources, medications and equipment they need to provide this level of care, such as the state-of-the-art da Vinci robotics and surgery suite, the PET and CT scanners, clinical trials, the TomoTherapy® machine — the only one in the state — and much more, to help with everything from delivering the appropriate diagnosis to delivering the appropriate care,” said Korth.

It seems that CRMC made the right choice when it began the Cancer Program all those years ago, because the need for cancer care in the region is increasing.

“With the aging population of more and more people being over 65, and the fact that our population in this area is generally older than the national average, the demand for cancer care is going to be continually increasing over the next several years,” said Dr. Jason Nolan, pathologist/Chairman of CRMC Board.
To address the growing need, the CRMC Cancer Program continues to expand the resources it offers, adding equipment and staff as needed.

"At some point, I would like to see some outreach clinics, especially on the medical oncology side," said Korth. "We have two linear accelerators today, and we’ll probably need to add a third at some point in the future. We continue to recruit additional physicians for the program, and we have recently expanded our nurse navigator program to include a lung navigator in addition to the breast health navigator."

Whatever is needed, CRMC remains committed to continuing to offer the best possible care for residents of the Upper Cumberland now and in the future.

"Unfortunately, cancer is a growing diagnosis," said Korth. "More and more people are diagnosed with the disease each and every year, and until there’s a cure for that, we’ll try and do everything we can to help those individuals fight this terrible disease."

CANCER CAN CREATE PROBLEMS AND CONCERNS that even the best medicine cannot remedy and families cannot anticipate, and a diagnosis of cancer is stressful enough without the added burden of financial concerns and unmet needs.

That’s why the Cookeville Regional Charitable Foundation created the tax-deductible Cancer Care Fund. With zero overhead, 100 percent of each donation goes directly to patients and their families so patients can concentrate on healing and not worry about finding resources for basic necessities.

Over the years, the Cancer Care Fund — through generous donations from patients, employees, members of our community and businesses, along with proceeds from the annual CRMC Golf Classic — has been able to provide assistance to patients through gas vouchers, utility bill payments, lodging, house payments, groceries, insurance premiums, medicine and medical supplies.

Patients receiving treatment in The Cancer Center are screened by oncology social workers. If patients have needs that cannot be met by traditional means, the fund is called upon to help. You may even designate that your funds be used to help with specific needs, such as fuel cards for cancer patients.

We are grateful for donations made to the Cancer Care Fund. If you would like to donate to this worthy cause, please send your gift to Cookeville Regional Medical Center Cancer Care Fund, 1 Medical Center Boulevard, Cookeville, TN 38501. Or, you can donate online at cookevilleregionalcharity.org.

Donations made in honor of or in memory of someone will have acknowledgement cards mailed alerting them of the generous gift in their name.
DURING A ROUTINE ANNUAL SCREENING AT COOKEVILLE REGIONAL, Herschel Judd of Cookeville learned that he had a prostate-specific antigen (PSA) level of 12, a highly elevated reading that is considered a marker for possible cancer.

After a biopsy confirmed that Judd did, indeed, have cancer, he was referred to The Cancer Center where Dr. Jonas Sidrys discussed his options for radiation therapy — seed implants, proton therapy and tomotherapy.

Judd opted against the first two options because he didn’t want an invasive procedure, he didn’t want to travel, and he wanted to ensure that the treatment was successful in case his cancer had spread.

“Dr. Sidrys told me that if you have the other treatments and they don’t work, you come here and have tomotherapy after that,” said Judd. “So I sort of bypassed those other options and came here first.”

Cookeville Regional is the only facility in the state to offer tomotherapy. The TomoTherapy machine produces approximately 10,000 beams of targeted radiation that can be delivered at assigned energy levels from any point along a 360-degree track.

“The idea is that we’ve got multiple beams of different energies all converging towards the target, and where they intersect, that’s the area that gets the full dose,” said Dr. Sidrys. “It allows us to minimize the radiation dose to the surrounding tissue, but it also allows us to treat the surrounding tissue if needed. The ability to treat cancer cells that have traveled outside of the prostate is an advantage that some other treatment options don’t offer.”

Most patients receive daily, five-minute treatments for seven or eight weeks, often coming in for treatment before work or on their lunch breaks. After treatment is complete, patients have follow-up appointments every six months to check their PSA levels.

“I’ve seen patients’ PSA levels drop for up to three years after treatment,” said Dr. Sidrys. “We like to see the levels go down to about 1.”

Judd finished up his eight-week course of tomotherapy in November. Five weeks into his treatment, his PSA level was already down to 1.5.

“To my knowledge, since we started using the TomoTherapy machine in 2009, we’ve never had any local recurrences,” said Dr. Sidrys. “So, if the cancer is confined to the prostate gland, there’s a very high chance of cure with tomotherapy.”

Now, both Judd and his wife, Nancy — a six-year breast cancer survivor whose tumor was detected during an annual mammogram — are firm believers in annual screenings.

“My cancer was found on a routine screening, and his cancer was found on a routine screening,” said Nancy. “I feel very strongly about getting screenings because it’s impacted and probably saved not only my life, but also my husband’s.”
RYAN YANTZ, THE BUSY OWNER OF A HEATING AND COOLING COMPANY in Jamestown, had been avoiding getting his routine annual blood work done for at least two years when Dr. Chris Sewell, his family physician and also a close friend, finally persuaded him to have it done. The tests found that Yantz, only 45 at the time, had a PSA level of 4.8, considered high for someone in his 40s. He was referred to Upper Cumberland Urology Associates, where Dr. Quinton Cancel performed a biopsy. Seven of the 12 samples taken came back positive for a low-grade form of cancer.

"Based on what we knew at the time, he had an 83 percent chance of cure and a good chance that it was contained to his prostate," said Yantz.

Yantz had to make a choice between surgery and radiation for his treatment. "At my age, I wasn't planning to have any more children, and I didn't want to give it an opportunity to spread somewhere else or be outside of the prostate," said Yantz.

Dr. Cancel agreed with Yantz' decision and scheduled surgery. "I think the main benefit of surgery is just knowing the full extent of the cancer with tissue analysis," said Dr. Cancel. "And for people like Mr. Yantz, if the disease is confined to your prostate at the time of surgery, you're cured, and there's very, very little chance of it ever coming back."

Dr. Cancel performed robotic prostatectomy on Yantz using the da Vinci® surgical robot in May 2013. "I got to my room from surgery about 1:00 or 1:30 in the afternoon, and at 11:30 the next morning, I was home," said Yantz. "I never even had any discomfort to speak of. A week and a half later, I went back to work full time, and I haven't looked back since."

And, thanks to the precision the da Vinci robot allows a surgeon to achieve, Yantz regained all of his functions following surgery. "With the technology we have now, it's easier to be more precise in how we take the prostate out, how we spare the nerves for erection, how we preserve the bladder neck, how we support the urethra underneath, allowing us to have better outcomes than before," said Dr. Cancel.

Yantz returned to Dr. Cancel for follow-up visits every three months for two years, and now he only visits every six months. "I was told I need to be the poster boy for being checked early, because at 45, prostate cancer is not something that you hear of a lot, but it does happen," said Yantz.

Dr. Cancel recommends that all men get a baseline PSA reading at age 40 to determine what is normal for them and then to have annual screenings beginning at age 45. However, men in high-risk categories — African Americans and those with a first-degree relative who has had prostate cancer — should begin having annual screenings at age 40. "I'm a firm believer in catching things early," said Dr. Cancel, "because then you stand the greatest chance of cure."
A Common Bond

THE CANCER CENTER AT COOKEVILLE REGIONAL is proud to offer a support group for men who have experienced prostate cancer.

Started in 2013, the Prostate Cancer Support Group offers these men a place to be encouraged and refreshed in the prostate battle through hearing the experiences of others and realizing they are not alone in the journey. The group also regularly hosts guest speakers from the hospital who share information on different prostate-related topics.

The Prostate Cancer Support Group meets from 10-11 a.m., the second Wednesday of each month in The CRMC Cancer Center conference room. For more information or to sign up, call (931) 783-2026.

Know Your Prostate

DON’T BE FOOLED by rumors and misinformation about prostate cancer. Get the facts. Test your knowledge of six common beliefs about prostate cancer.

1. MEN OF ANY AGE CAN GET PROSTATE CANCER.
   - True
   - False

2. PROSTATE PROBLEMS OFTEN CAUSE MEN TO HAVE TROUBLE PASSING URINE.
   - True
   - False

3. PROSTATE CANCER IS VERY COMMON IN THE U.S.
   - True
   - False

4. MEN WITH PROSTATE CANCER NEED TO GET TREATMENT RIGHT AWAY.
   - True
   - False

5. ALL MEN SHOULD BE TESTED FOR PROSTATE CANCER.
   - True
   - False

6. THERE’S NOTHING THAT CAN BE DONE TO LOWER THE CHANCES OF GETTING PROSTATE CANCER.
   - True
   - False

QUIZ ANSWERS

1. True. Prostate cancer can be found in men younger than 40, but it’s very rare in this age group. The risk of prostate cancer rises rapidly after age 50 – about six in 10 cases of prostate cancer are found in men over the age of 65.

2. False. Early prostate cancer usually doesn’t cause symptoms, but as it grows, the cancer can cause things like problems passing urine or having to go a lot, especially at night; blood in the urine; erection problems; or weakness and bone pain. It’s important to see a doctor if you have any of these problems so that the cause can be found and treated, if needed.

3. True. Other than skin cancer, prostate cancer is the most common cancer in U.S. men. Each year, more than 230,000 men are diagnosed with prostate cancer in the U.S., and it’s the second leading cause of cancer death in U.S. men, behind only lung cancer.

4. False. Most men are diagnosed with prostate cancer when it’s still at an early stage. There are many factors to take into account before deciding on a treatment, such as your age, your health and the possible side effects of treatment.

5. False. The American Cancer Society recommends that men have a chance to make an informed decision with their health care provider about whether to be checked for prostate cancer based on their age and risk factors.

6. False. We don’t know the cause of most cases of prostate cancer, so we don’t know how to prevent it. But there are things you can do to help decrease your chances of getting prostate cancer and many other types of cancer. Check out the American Cancer Society’s Guidelines on Nutrition and Physical Activity for Cancer Prevention (at www.cancer.org) to learn more.

2016 Prostate Screening Dates

Cookeville Regional Community Fitness Fairs
February 13 and August 27, 7-10 a.m. CRMC Education Center
Fairfield Glade Community Health Fair
March 9, 7-10 a.m. Fairfield Glade Conference Center
For information, call (931) 783-2743 or visit www.crmchealth.org/healthfair.

Members of the Prostate Cancer Support Group, from left, are Peter Bratjan, Steve Officer, John Howard, Stuart Mills and facilitator David Graham.
Doing What She Can to Fight Breast Cancer

FOR BRENDA FLOETER, raising funds to fight breast cancer is personal. First, she went through the breast cancer journey with her mother, who ultimately lost her battle to the disease in 2005.

Then, in the midst of her mother’s ordeal, Floeter discovered a lump in her own breast. She immediately scheduled a mammogram, which located and confirmed the lump. She was scheduled for a lumpectomy, and, fortunately, a biopsy proved it was benign.

“I am absolutely certain that early detection in finding my lump was the reason I had such a positive outcome and perhaps saved my life,” said Floeter.

Because of these experiences and those of many of her and her daughters’ friends, Floeter became determined to find a way to help.

While serving on the CRMC Foundation board, she became aware of the Pink Gala and volunteered to serve on the planning committee. Soon she was placed in charge of the decorations for the event, a task she has gladly performed for the past six years.

“I marvel when I think over the years of the thousands of pink roses, generously donated to help defray the cost by Abel Gardens and Gunnels Florist, and the hundreds of pink tapered candles, not to mention an influx of pink and white feathers, which went into the theme of the evening for each Pink Gala,” said Floeter.

She loves the fact that all of the funds raised at the Pink Gala stay in the Upper Cumberland area and that every dime is used to fund mammograms for uninsured women.

“Many women in our community do not have the funds available for the initial testing,” said Floeter. “Because of these efforts, breast cancer has been caught early and lives have been saved.”

Floeter’s dedication to the cause was recently recognized when she was presented with the Cookeville Regional Charitable Foundation’s Volunteer of the Year Award. And she has no plans to rest in her efforts toward helping defeat breast cancer anytime soon.

“I would like to see breast cancer eradicated in my lifetime.”

Brenda Floeter
Volunteer of the Year Award Winner

Floeter’s dedication to the cause was recently recognized when she was presented with the Cookeville Regional Charitable Foundation’s Volunteer of the Year Award. And she has no plans to rest in her efforts toward helping defeat breast cancer anytime soon.

“I would like to see breast cancer eradicated in my lifetime,” said Floeter. “If I can do something toward stopping this from taking someone’s life, I’m going to do it.”
LUNG CANCER IS THE NO. 1 CANCER KILLER for both men and women in the United States, and the Upper Cumberland is no exception. To help patients diagnosed with lung cancer, Cookeville Regional Medical Center now provides the services of a nurse navigator who will be a personal resource for both the patient and the family.

With eight years’ experience working with oncology patients, Beth Slatten, RN, is Cookeville Regional’s new lung nurse navigator. She graduated with her nursing degree in 1997 and came to Cookeville Regional in 2001 to work in the intensive care unit. She then transitioned to The Cardiac and Pulmonary Rehabilitation Center, where she spent four years before going to work in The Cancer Center for the past eight years.

“A diagnosis of lung cancer can be overwhelming,” said Slatten. “In my new role, I’m available to help patients who have been recently diagnosed, are already living with lung cancer or have had a recurrence of the disease. I want to help make their journey as easy as possible.”

A lung nurse navigator helps patients cope with the anxiety associated with lung cancer, decreases barriers to services, helps to expedite access to care and provides information and resources to help the patient and his or her family.

Cookeville Regional began its nurse navigator program eight years ago with breast cancer patients.

“The nurse navigator program has been so successful with our breast cancer patients,” stated Lisa Bagci, director of The Cancer Center at Cookeville Regional. “It was a natural progression for us to expand the program to our lung cancer patients. Lung cancer is a complex disease with so many treatment options available and is often confusing for our patients. It just makes sense to have a navigator to help them and their families through the process.”

The Cancer Center at Cookeville Regional is accredited by the American College of Surgeons’ Commission on Cancer and has brought an advanced level of cancer care to patients in the region. The center offers medical and radiation oncology services as well as clinical trials research and various supportive services for cancer patients and their families — all in one convenient location at CRMC.
CRMC Offers Lung Cancer Screenings

IN AN EFFORT TO PROVIDE access to screening for people at high risk for developing lung cancer, CRMC offers low-dose CT (or CAT) scan lung screenings. “Without screening, lung cancer is usually not found until a person develops symptoms,” said Beth Slatten, RN, lung nurse navigator at Cookeville Regional. “At that time, the cancer is much harder to treat.”

The screening is quick and easy and results in a minimal amount of radiation exposure. The exam takes less than 10 seconds; no medications are given and no needles are used.

The cost is $99.

To see if you qualify for a lung screening at Cookeville Regional, visit crmchealth.org/lungscreening. If you think you meet the criteria, call the CRMC lung navigator office at (931) 783-4996 for more information or to schedule a screening.
IN THE COMMUNITY

CRMC, its staff and community partners sponsor and help support many events each year to fund research and benefit cancer patients.

GOLF CLASSIC

The 2015 Golf Classic benefits patient assistance funds through the Cookeville Regional Charitable Foundation.

PINK GALA

The 2015 Pink Gala benefits the CRMC Pink Ribbon of Hope Project.

SUMMER SPLASH

Held July 25, 2015, at the Dogwood Park Pavilion, the Summer Splash (Sarah Alice Bagci Memorial) 5K raises funds for the Cookeville Regional Charitable Foundation Cancer Care Fund.

KOMEN RACE FOR THE CURE

Hospital staff and family show their support at Susan G. Komen Upper Cumberland’s Race for the Cure.

Visit crmchealth.org/news-releases for more photos, stories and videos about CRMC.
The CRMC Cancer Program’s dedication to the most advanced treatment, our level of patient care and the recognition our program receives are of great interest to the communities we serve.
### Breast

<table>
<thead>
<tr>
<th>TRIAL CATEGORY</th>
<th>Registry</th>
<th>Treatment</th>
<th>Treatment/Adjuvant</th>
<th>Treatment/Adjuvant</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROTOCOL/PI</td>
<td>PROMIS</td>
<td>SPI-GCF-301</td>
<td>S1207</td>
<td>ACRIN A011104</td>
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<tr>
<td>ELIGIBILITY</td>
<td>Women with Oncotype DX Intermediate RS(18-31)</td>
<td>Randomized Trial of SPI-2012 Versus Pegfilgrastim in the Management of Chemotherapy Induced Neutropenia in Breast Cancer Patients Receiving Docetaxel and Cyclophosphamide (TC)</td>
<td>Completion of adjuvant chemotherapy and pathologically negative lymph nodes, and a tumor measuring 2 cm in greatest diameter, and an Oncotype DX® Recurrence Score &gt; 25 (completed as standard of care) / Completion of adjuvant chemotherapy, and pathologically 1-3 positive lymph nodes, and an Oncotype DX® Recurrence Score &gt; 25 (screened via S1007 or otherwise).</td>
<td>Female only, pathologically confirmed dx of breast cancer-needle biopsy only no surgical excisions, clinical Stage I-Ill, Triple negative or Hormone Receptor negative with HER2 positive. No previous invasive or DCIS, no bilateral BC, no known BRCA positive pts</td>
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### Lung

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<tr>
<th>TRIAL CATEGORY</th>
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<tbody>
<tr>
<td>PROTOCOL/PI</td>
<td>EMR 100070-005</td>
<td>S1400 Lung Map</td>
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<tr>
<td>ELIGIBILITY</td>
<td>Stage III, open-label, multicenter trial ofavelumab (MSB0010718C) versus palmitum-based doublet as a first-line treatment or Stage IV PD-L1+ non-small cell lung cancer</td>
<td>Must have pathologically proven squamous cell NSCLC confirmed. Stage IIIIB or IV NSCLC, must have received one front line platinum containing metastatic chemo regimen and evidence of disease progression.</td>
<td>Effects of pre-operative breast MRI on surgical outcomes, costs, and QOL of women with breast cancer. Stage I-II breast cancer eligible for Breast Conserving Therapy</td>
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### Multiple Myeloma

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<tr>
<td>PROTOCOL/PI</td>
<td>Millennium C16014</td>
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<td></td>
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<tr>
<td>ELIGIBILITY</td>
<td>Newly diagnosed, ineligible for stem cell transplant, 'pre-screening consent prior to bone marrow bx' measurable disease, ECOG PS 0-2, able to take prophylactic aspirin</td>
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### Head and Neck

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<td>SCMP-8811-202</td>
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<tr>
<td>ELIGIBILITY</td>
<td>Newly diagnosed, histologically-documented, non-metastatic squamous cell carcinoma of the oral cavity and/or oropharynx amenable to radiotherapy with concurrent chemotherapy as the treatment modality,</td>
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### Prostate

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<td>Astellas ONC-MA-1004</td>
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<td>ELIGIBILITY</td>
<td>Confirmed diagnosis of CRPC(defined by a minimum of 2 rising PSA levels/7 days apart) or with new evidence of metastatic disease by investigating physician</td>
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### Observational

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<tr>
<td>PROTOCOL/PI</td>
<td>A Prospective Observational Cohort Study of Patients with Castration-Resistant Prostate Cancer (CRPC)</td>
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Brandi Dietz, RN, works in the clinical trials lab.
FOR THE CALENDAR YEAR 2014, Cookeville Regional Medical Center hosted a number of programs for business, industry and the community. Prevention, screening and education were the methods used to reach the public.

Based on the 2013 cancer cases at CRMC, emphasis was placed on the following:

Respiratory System
One hundred ninety-seven cases were reported, with 183 of those being placed on the following:

Breast Cancer
One hundred forty-five cases were reported, with only 28 of those being stage 3 or 4. CRMC provided free mammogram events throughout the year for women with no health insurance or with high deductibles. The Cancer Program also offered mammogram days for a couple of area businesses, which allowed their employees to come during certain times without penalty at work and without having to wait. The charges for these services were covered by the business or the employee and/or their insurance. At each health fair hosted, information on breast cancer and the importance of early detection was provided by The Women's Center. Follow-up for each mammogram was also provided by The Women's Center.

Prostate Cancer
At each of the health fair events, CRMC offered prostate-specific antigen (PSA) screenings. Individual results were reviewed, and if significant changes were found over prior PSA levels, the client was notified of the need to follow up with his physician or urologist. Results of prior testing were reviewed, if available, and if results were equal to or greater than 0.75mg/dl per year detected (even if within normal parameters), the client was strongly encouraged to see his physician. *

Colorectal Cancer
Eighty-one cases were reported, with 47 percent (38) of them not detected until late stages of 3 or 4. CRMC provided free mammogram events throughout the year for women with no health insurance or with high deductibles. At each health fair hosted, information on breast cancer and the importance of early detection was provided by The Women's Center. Follow-up for each mammogram was also provided by The Women's Center.

Melanoma
There were 10 cases reported. One of those was a stage 3 and four were a stage 4 when detected. Information was provided at several of the Cancer Program's health fair events to encourage sunscreen use and to help participants recognize the symptoms of melanoma.

* Both prostate cancer and melanoma are often diagnosed and treated in the physician’s office, so the numbers provided here are only cases seen in the hospital and not a true representation of the total cases diagnosed in our area.

Number of cases excluded: 0
This report EXCLUDES CA in-situ cervix cases, squamous and basal cell skin cases, and intraepithelial neoplasia cases.

<table>
<thead>
<tr>
<th>Primary Site</th>
<th>Total</th>
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<td></td>
<td>M/F</td>
<td>I</td>
<td>II</td>
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<tr>
<td>ALL SITES</td>
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Number of cases excluded: 0
This report EXCLUDES CA in-situ cervix cases, squamous and basal cell skin cases, and intraepithelial neoplasia cases.
RESOURCES contact information

- Cookeville Regional Medical Center
  (931) 528-2541 • crmchealth.org
- Cookeville Regional Cancer Center
  1-866-258-5416 • (931) 783-2497
- Breast Health Nurse Navigator
  (931) 783-2922
- Lung Health Nurse Navigator
  (931) 783-4996
- Cancer Support Groups
  Oncology Social Work Staff
  (931) 783-2026
- Clinical Trials
  (931) 783-2476
- American Cancer Society
  Upper Cumberland Office
  (931) 520-7757 • cancer.org
  National Office
  (800) 227-2345 • cancer.gov
- Susan G. Komen for the Cure
  Upper Cumberland Chapter
  (931) 303-0096 • komenuppercumberland.org
  National Office
  (877) 465-6636 • komen.org
- National Cancer Institute
  (800) 422-6237 • cancer.gov
- Cookeville Regional Tumor Registry
  (931) 783-2292

SUPPORTIVE services offered

AFTER DIAGNOSIS AND TREATMENT, sometimes a patient needs support from others who are knowledgeable of their needs and can answer questions and give guidance. CRMC offers a wide range of support groups and employs a full-time breast health nurse navigator, lung navigator, social workers and a registered dietitian dedicated to patients in The Cancer Center.

Breast Health Nurse Navigator
Lung Health Navigator
Oncology Dietitian
Oncology Social Workers
Pastoral Services
Reference Library
Hospice
Susan G. Komen for the Cure
A nonprofit that provides education and support for patients diagnosed with breast cancer.

Women’s Wednesday Programs offered by the Community Wellness Department that discuss cancer and a variety of topics relevant to the Upper Cumberland.

Breast Cancer Support Group
A support group that helps local prostate cancer patients and their caregivers.

Look Good...Feel Better
A program sponsored by the American Cancer Society and other agencies that focuses on appearance-related changes due to cancer treatment.

Health Fairs
Cancer screening and prevention programs offered at several health fairs each year.

Circle of Hope
A support group for patients who are diagnosed with any type of cancer, and their families.

Reach to Recovery
A program that helps patients cope with breast cancer by arranging visits between survivors and newly diagnosed patients.

Breast Cancer Support Group
An emotional and educational support group for women with breast cancer.

Journey™ to Breast Health
A program to help women navigate the path to health and healing.

Quit 4 Life
Free smoking-cessation classes that meet weekly and are highly successful at helping people quit smoking.

Workplace Wellness Smoking Cessation Classes
Classes offered through the workplace to help employees who want to break the habit.

Let’s Quit
Classes for adolescents that discuss the importance of not smoking and the dangers of secondhand smoke.

Multiple Myeloma Support Group
A monthly support group for patients with multiple myeloma.

Grief Share Support Group
A group for adults hurting from the death of a loved one.

GO PINK
A program, offered by the Putnam County and White County YMCAs, that provides exercise, nutrition information and lymphedema education, as well as encouragement and support for breast cancer survivors.

myCRMHealth
CRMC’s free online tool that allows you to have access to your personal health records – secure and convenient! Sign up by visiting myCRMHealth.org.