# Table of Contents

Directors Report ........................................................................................................ 2  
Cancer Committee & Leadership ............................................................................. 3  
Cancer Center Mission, Vision and Values ............................................................... 4  
Accreditations & Certifications ................................................................................ 5  
Operational Excellence .............................................................................................. 6  
Gynecologic Oncology ............................................................................................... 7  
Radiation Oncology .................................................................................................. 8  
Medical Oncology and Hematology ......................................................................... 9  
Stem Cell Research ................................................................................................... 10  
Infusion Services ....................................................................................................... 11  
Regional Outreach ..................................................................................................... 12  
Telemedicine ............................................................................................................ 12  
Cancer Research ....................................................................................................... 13  
CART ......................................................................................................................... 13  
Ten Year Anniversary ............................................................................................... 14  
Supportive Services ................................................................................................. 15 - 26  
  Oncology Dietitians ................................................................................................. 15  
  Patient Care Navigators ......................................................................................... 16  
  Financial Counseling ............................................................................................. 17  
  Genetic Counseling ................................................................................................ 17  
  Medication Assistance Program (MAP) ................................................................ 18  
  Nurse Informaticist ............................................................................................... 19  
  Integrative and Naturopathic Medicine ................................................................. 20  
  Oncology Lab ......................................................................................................... 21  
  Oncology Pharmacy .............................................................................................. 21  
  Lymphedema Program .......................................................................................... 22  
  Rehabilitation - Cancer Recovery Services .......................................................... 22  
  Supportive and Palliative Care Services ............................................................... 23  
  Oncology Social Work ......................................................................................... 24  
  Survivorship ......................................................................................................... 25  
Inpatient Cancer Care (ICC) ..................................................................................... 26  
Cancer Registry ......................................................................................................... 27  
Community Outreach ............................................................................................... 28  
2018 Primary Site Tables ......................................................................................... 29 - 30  
Top 5 Cancers for Men and Women ....................................................................... 31  
Certifications, Awards, Publications & Presentations ........................................... 32 - 36
Dear Friends and Colleagues,

This past year we celebrated a milestone of providing a decade of oncology services in our dedicated cancer center building. We are truly honored to have been chosen as the cancer care option for almost 25,000 patients over the past 10 years. Our team’s dedication and passion to provide high quality, compassionate and patient-centered cancer care is highlighted in this year’s report.

In 2019, we expanded our services with the addition of a Regional Outreach Liaison, an ERAS (Enhanced Recovery After Surgery) nurse in Gynecologic Oncology, two new physicians in Gynecologic Oncology, an additional provider and a certified medical assistant in Supportive and Palliative Care, a new medical physicist in Radiation Oncology, and a CIBMTR (Center for International Blood and Marrow Transplant Research) data manager. Additionally, we continued to demonstrate our commitment to high standards of oncology care by meeting and exceeding the requirements to renew our specialty accreditations including: Commission on Cancer (CoC), National Accreditation for Breast Centers (NAPBC) and the Center for International Bone and Marrow Transplant Research (CIBMTR).

Our cancer research team enrolled 150 patients into clinical trials in 2018, with projections to exceed that number by the end of 2019. Last year we shared that we would be participating in a CAR T-cell clinical trial. This clinical trial uses a patient’s own immune system by reprogramming T-cells to fight their cancer. To date, this trial has been successful, and we are excited to continue this journey for the next several years.

We would like to take this time and acknowledge that the accomplishments noted in this report could not have happened without the hard work, dedication and passion that our team put forth into making this another successful year. We are proud to share our work and welcome any questions you may have regarding this report and our Billings Clinic Cancer Center services.

Sincerely,

Rhonda Gradwohl, RN, MSN  
Administrative Director of Cancer Services, Research, Integrative Medicine, and Supportive/Palliative Care

John Schallenkamp, MD, MBA  
Medical Director of Cancer Services
Cancer Committee & Leadership

Cancer Committee

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Guinevere Ayers
Tara Bowman-Seitz, MD
Justin Bottsford-Miller, MD
Pace Brittain, MBA, RT(R)(T)
Malissa Carr, RN, MSN
Andrea Crawford, MSCG
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Karin Dolan, MD
Scott Dull, MD
Trent Dugger
Jesus Fabregas, MD
Jennifer Finn, MSW, LCSW, OSW-C
Rhonda Gradwohl, RN, MSN
Christopher Goulet, MD (cancer liaison physician)

Jennifer Haarr, PT
Steven Hammond, MD
Carla Hansen, RN, OCN®
Michael Hill, MD
Anna Howard, PharmD
Diane Jones, MSN, ACHPN, NP
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Michael Kidd, MD
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Inpatient Cancer Care Unit
Ronnie Restad, Interim ICC Manager

(L-R): Kathy Wilkinson, Rhonda Gradwohl, Pace Brittain, Kristin Klebe, Malissa Carr
Cancer Center Mission

To provide leading-edge care for patients and their families.

Cancer Center Vision

To be nationally recognized for premier cancer care and the first choice for patients, their families, and referring providers.

Cancer Center Core Values

Optimism
We believe in creating an environment of optimism and offering a welcoming atmosphere for our patients and their families.

Compassion and Respect
We show care for our patients and for each other and have a passion for the work that we do.

Multidisciplinary Collaboration
We believe the best care for patients is delivered by drawing on the expertise of professionals across many disciplines.

Integrity
We have an expectation of active professionalism in interactions among team members and in the care we provide.

Responsiveness
Because patient needs are our priority, we remain flexible in order to accommodate timely access to care.
We want to provide the best patient care possible because we care about taking excellent care of our patients and each other. Billings Clinic Cancer Center demonstrates our commitment to quality care by maintaining oncology accreditations and certifications that signify quality. This past year we renewed three specialty accreditations: Commission on Cancer (CoC) Accreditation, National Accreditation for Breast Centers (NAPBC) and the Center for International Bone and Marrow Transplant Research (CIBMTR).
Lean Six Sigma is a methodology that uses a collaborative team model to reduce inefficiencies and improve processes for our patients. The Billings Clinic Operational Excellence team helped guide cancer center team members in the completion of eight projects this past year.

**Cancer service projects completed in 2019**

**Medical Oncology Phone Calls**
The Medical Oncology team completed a project that reduced the amount of abandoned phone calls, and increased the percent of calls answered by the dedicated phone resource.

**Cancer Center Patient Flow**
Members of the Medical Oncology, Gynecologic Oncology, and Patient Access teams completed a cancer-center wide project that moved patient registration to each floor. The project reduced the percent of patients checking in at the wrong location from 28.8% to zero.

**ACS Role Realignment**
The Social Work team completed a project that identified processes left unowned by the elimination of the American Cancer Society Navigator position and put a plan in place to absorb and track these duties into their already existing work structure.

**Stem Cell Gold Standard Process**
The Stem Cell team completed a project to create and implement a consistent, standardized process for referring, authorizing, and enrolling patients into the Stem Cell program.

**Infusion Center Depart Process**
The Infusion team completed a project to create and implement a depart process for their patients. Whereas no process existed before, the Infusion Center now provides departure scheduling and information for over 90% of their patients.

**Genetic Counseling Scheduling**
The Genetic Counseling team completed a project to minimize the number of inappropriately scheduled patients they were receiving. They were able to reduce the percent of patients inappropriately scheduled from 18.4% to 1.1%.

**Cancer Center Research Archived Study Management**
The Research team completed a project that organized the archived study storage area. Via removing old charts, grouping like studies, and labeling all study boxes for ease of locating, they were able to greatly reduce the amount of time spent searching for charts and studies as well as the number of charts and studies that could not be located.

**Cancer Research Financial Tracking**
The Research team was able to complete a project to increase the amount of payments that were received without proper information regarding what the payment was for.
New to the team

Elizabeth Connor, MD, went to the University of Virginia for both her undergraduate and medical school. She studied biochemistry and played on the women’s ice hockey team, graduating in 2008. After receiving her medical degree at the University of Virginia in 2012 she completed a residency in Obstetrics and Gynecology at Brown University in 2016 and fellowship training in Gynecologic Oncology at Cleveland Clinic in 2019. Dr. Connor and her husband Troy have two daughters, Sloane and Sydney, and a friendly golden retriever named Baker. They love the outdoors, especially winter sports, and are very excited to live in the beautiful state of Montana.

Alexis Hokenstad, MD, MS, was born and raised in Mandan, North Dakota. She graduated from the University of North Dakota in 2007 with a Bachelor of Science degree in Biology and Psychology. She then attended the University of North Dakota Medical School and graduated in 2011. She met her husband, Erik, on their first day of medical school, and they were married on New Year’s Eve in 2010. She completed her Obstetrics and Gynecology residency at Mayo Clinic in 2015 and was fortunate to stay at Mayo Clinic to complete fellowships in both Gynecologic Oncology and Palliative Medicine. She and her husband have three beautiful children, Lukas, Britta, and Emma, who keep them very busy. She enjoys spending time with her family and is looking forward to exploring Montana.

Heath Hines, PA, is originally from Texas. Graduating from the Rocky Mountain College PA program, he started with Billings Clinic in 2004 in the specialty areas of Urology and General Surgery. Heath joined our gynecologic oncology team in October 2019. Heath and his wife, Jackie have two boys. For fun, the family enjoys time at the lake, golfing and BBQs.

Meet our nurses

Team members (L to R): Jacque Thompson - Outreach Coordinator, CMA III, Kelsey Skogen, RN, BSN, OCN - ERAS RN, Shara Brookie, RN

Manager message

“It is an exciting and rewarding time to be a part of the Gynecologic Oncology team. We have grown by leaps and bounds and have been truly blessed to add such incredible people this year. The entire team truly follows our mission in taking the best care of our patients and taking the best care of each other. I humbled by and proud to be a part of this amazing group. I look forward to seeing what we will accomplish in the year to come. I am thankful for the patients and caregivers that entrust us with their care.”

-Kristin Klebe, Gynecologic Oncology Manager
New to the team

Alfonso Rodriguez, PhD, was born and raised in El Paso, Texas. He studied High Energy Physics at New Mexico State University and completed a Bachelor of Science with honors. He completed his Masters in Physics at the University of Texas in El Paso with emphasis on Monte Carlo simulations. He received his Ph.D. in the study of reconstruction methods for accurate quantitative CT and MRI of the lung at University of Wisconsin School of Medicine and Public Health. He then completed three years of Medical Physics Residency at UT Southwestern’s Department of Radiation Oncology in Dallas, Texas. Dr. Rodriguez is excited to embark on the next phase of his career as a medical physicist at Billings Clinic. Outside of the clinic, he enjoys hiking, Latin dancing, and movies.

Kearla Green, R.T., Kearla is from Billings and graduated from MSUB City College with an Associate of Applied Science. She obtained her ARRT Radiologic Technologist license and worked at Billings Clinic for the past two years as an x-ray technician. Kearla returned to school and graduated from Weber State in 2019 with an Associates of Science obtaining her ARRT Radiation Therapy license. Kearla started working in the Billings Clinic Cancer Center as a Radiation Therapist after graduation. In her free time, you will find Kearla outside fishing, hiking, hunting and traveling.

Stereotactic body radiation therapy (SBRT)

Billings Clinic Radiation Oncology has been performing stereotactic body radiation therapy (SBRT) for the past 10 years. In just the past five years, the number of patients treated with SBRT has doubled. This type of radiation treatment delivers extremely precise and intense doses of radiation to cancer cells using 3D image guidance. It is typically used to treat early-stage non-small cell lung cancer, pancreatic cancer and metastatic tumors of the lung, liver, spine and adrenal glands. The benefits of using SBRT is that the total dose can be delivered in 1 to 5 doses compared to conventional radiation therapy that can take several weeks of therapy. SBRT can also lead to better outcomes and fewer side effects compared to conventional radiation therapy.

Manager message

“I am grateful to our Radiation Oncology team for our successes this past year. We look forward to 2020 with the installation of the newest generation of linear accelerators, the Varian TrueBeam. We continue to improve on our Radiation Oncology services and are committed to another year of offering the best experience for our cancer patients. Thank you to our entire Radiation Oncology team for the dedication and compassion you bring to our cancer center each and every day”. -Pace Brittain, Radiation Oncology Manager.

"They look at you like a person, not a number. The receptionist knows who I am when I walk in the door. I love all my doctors, it’s all a great team. You know if I didn’t have this team, I probably wouldn’t be here." – Trisha, Survivor
Manager message

“I am grateful to be part of this wonderful caring team who is committed to our patients, their families, and each other. The dedication and commitment of the Hematology/Medical Oncology providers demonstrates how much they truly care. Our patients are fighting the biggest battles of their lives and we want them to know they are not alone. Our providers stay abreast of new treatment regimens, new technology, and research studies. We are passionate about providing the best care to our patients. We continue to increase access to care in Montana, Wyoming, and North Dakota. Our providers provide 32 days of outreach services in eight different communities each month and provide telemedicine services. I am excited to see where the next year will take us.” ~Malissa Carr, Medical Oncology Manager

Internal Medicine Residency (IMR) Collaboration

Our medical oncologists are actively involved in the Billings Clinic Internal Medical Residency Program. “Billings Clinic Internal Medicine Residency has three major goals: (1) to excel in medical education (2) to provide state-of-the-art health care to the citizens of Montana. (3) to service those in rural communities in need of medical care.” Our medical oncologists provide hands on learning opportunities through educational presentations and rotations throughout the year.

Community Education

In October our medical provider Diane Truchot, MSN, NP and genetic counselor Susan Landgren, MSCGC collaborated to present, “Breast Cancer: Why is Mine Different from Hers?” This presentation explained how gene mutations cause breast cancer and described genes that can predict risk for additional cancers in some families as well as targeted treatments that are used today that were not available a few years ago to extend both quality and length of life. They also covered targeted treatments that can predict risk for additional cancers in some families.

New Medical Oncology Nurses

Team members (L to R): Samantha Waddles, MA Heather Ellefson, LPN Heidi Hanson, LPN

New to the team

Jamie Salminen RN, BSN, OCN®, Clinical Coordinator. Jamie graduated from Montana State University in 2010. She began her nursing career at Billings Clinic and worked on the Inpatient Cancer Care unit from 2010-2015 until she moved to San Diego where she was a Nurse Care Manager and Charge Nurse for the Breast Medical Oncology team from 2015-2017 at UC San Diego’s Moore’s Cancer Center. She returned to Billings Clinic in 2017 as a Nurse Informaticist and joined our medical oncology team in October of 2019. Jamie has been an Oncology Certified Nurse since 2013 and is an active board member for the Big Sky Oncology Nursing Society chapter. Jamie and her husband Vince have two daughters, Brooklyn and Aspen. They love to spend time outdoors camping, fishing, and snowboarding together.
Billings Clinic Cancer Center started the Stem Cell Transplant Program in 1997. We are the only Stem Cell Transplant program in the state and region. In 2017, we received the internationally recognized accreditation from the Foundation for the Accreditation of Cellular Therapy (FACT) and maintain this accreditation. We continue to increase our number of autologous stem cell transplants for adults with hematologic malignancies, performing eight stem cell transplants in 2019.

In February, Dr. Silva, MD (Stem Cell Program Director), Christina Schye, RN, BSN, OCN (Stem Cell and Apheresis Coordinator), Melissa Heick (Clinical Research Specialist and CIBMTR Data Manager) and Nicole West, RN, BSN, OCN, BMTCN (Nurse Clinician and Clinical Collections Quality Manager) attended the Transplant and Cellular Therapy (TCT) meeting in Houston. This meeting combines the annual meetings for the American Society for Transplantation and Cellular Therapy (ASTCT) and the Center for International Blood and Marrow Transplant Research (CIBMTR). TCT brings together a diverse group of healthcare professionals and researchers to address current trends and issues in hematopoietic cell transplantation and cellular therapies.

In January, Melissa Heick, Clinical Research Specialist, joined the Stem Cell Program as a data manager. This position collects data for reporting to the Center for International Blood and Marrow Transplant Research (CIBMTR).

This past year our Stem Cell Program team completed a yellow belt project that assisted in the preparation for our second FACT accreditation inspection in November. The project outcome helped streamline the transplant process by creating a more precise definition of the care navigator and the apheresis coordinator roles, improved communication between the team and revised and updated educational materials for patients.
Our infusion center provides outpatient infusion services to oncology and non-oncology patients. We have a nursing team that is passionate about the care we provide and always striving to learn more to keep up with the advancing technologies and services that we provide. Ongoing education is a staple in the infusion center and our nursing staff takes every opportunity to learn more and provide the best care possible to our patients.

Our infusion center team identified a need to improve the patient discharge process. Through Lean Six Sigma methodology, a new discharge process was created last year. This process ensures that patients are scheduled for future infusion appointments prior to leaving our facility. Our infusion nursing team partnered with informatics and designed a new discharge documentation process and increased the information gathered at discharge to streamline patient care. The infusion center now has a dedicated infusion nurse to ensure future infusion appointments are not only scheduled but align with each patient’s physician ordered protocol.

Pam Berens RN, BSN, OCN Infusion Center Clinical Coordinator and Amanda Lanter, RN attended the ASFA (American Society for Apheresis) Conference held in Portland Oregon in May 2019. The ASFA annual meeting offers a focus on apheresis medicine around the world in the patient and donor settings. Here we were able to expand our knowledge in therapeutic apheresis and stem cell collections. It was a great networking experience and offered information on a variety of aspects from FACT and validations, instrumentation, coagulation, vascular access, a review of basic principles, neurological disorders, donor apheresis, best practices, challenging cases and CAR-T highlights. This was all valuable information for us to bring back and apply to patient care here at Billings Clinic where our apheresis program has been expanding over the years. We performed 96 TPE procedures in 2018 and are set to surpass that number in 2019 as we have done 89 procedures from January to mid-November 2019.

We have an amazing and talented group of nurses at the infusion center. Five additional nurses have trained to TPE in the past year and 6 nurses received training for CMNC (Continuous Mononuclear Cell Collection) to improve stem cell collections and collect cells for our CAR-T trial. We are currently working on a yellow belt project to help standardize our apheresis program and have been collaborating closely with the neurology department as well to streamline care for patients with neurological disorders.

New to the team (L to R): Laurie Wilson, RN, Darin Stricker, RN, Denae McClure, CMA
Regional Outreach Liaison

Trent Dugger, Regional Outreach Liaison.
Trent grew up in Billings, MT. He has a B.A. in Communication Studies and Business from Rocky Mountain College. He joined the Cancer Center team in June 2019 after spending the past three years as a member of the Billings Clinic Foundation. Trent enjoys the outdoors, golfing, playing tennis, winter sports, and spending time with family and friends.

Approximately 35-40% of our patients travel more than 100 miles to Billings Clinic for their care. This percentage is markedly higher than the national average and highlights the continued need for outreach services. In response to our growing outreach services, the Cancer Center created a Regional Outreach Liaison position. This position works collaboratively with the Cancer Center’s leadership team to enhance and expand oncology services offered in the region. It allows us to improve and sustain current relationships and establish new ones with various regional organizations. The Regional Outreach Liaison works collaboratively with each organization to identify opportunities to align with the Cancer Center’s capabilities and goals. Providing exceptional cancer care to people across the region is always our priority. As communities expand our outreach services will also work to grow to meet the need for oncology care across the region.

Telemedicine

Billings Clinic Cancer Center offers telemedicine to patients in our regional clinics. Our medical oncology and gynecologic oncology providers offer telemedicine services on scheduled days as well as on an as needed basis. This past year we also used telemedicine to reach our patients for supportive services such as oncology pharmacist consults and survivorship classes.

For the first time, our clinical social workers and palliative care team used telemedicine to present a six-week educational series, titled "Partner’s in Survivorship; Living Well After Cancer Treatment". This series was presented both locally and via telemedicine allowing participation from both local and rural communities.

"Having the services here in Cody, at the Billings Clinic, it has been wonderful both for my family and for me that we don’t have to travel so far." -Ann
CAR T

This past year, we were very excited to be able to open and enroll in a cutting-edge clinical trial using Chimeric Antigen Receptor (CAR) for patients with Multiple Myeloma. CAR’s are T cells that have been modified to attack tumor cells. Traditional CAR T Therapy uses DNA to modify the T cells and they are permanently altered leading to Cytokine Release Syndrome (CRS) and Neurotoxicity that may be life-threatening. The clinical trial we are participating in uses RNA to reprogram the T cells, so they have a defined half-life, reducing the risk of CRS and neurotoxicity.

This trial has truly been a multi-disciplinary team effort. Our team includes physicians, research nurses, infusion center nurses, the inpatient cancer center, the intensive care unit, the emergency department, pharmacists, a nurse clinician and a nurse informaticist. The team met weekly to develop education, policies, job aides and workflow design to assure patient safety and adherence to the protocol. This team developed learning modules for physicians, nurses, and pharmacists who would be involved in the care of the patients. Additionally, alerts were set up in the electronic medical record to keep everyone caring for the patient aware of restrictions, such as no steroids, as well as whom to notify if issues develop. We are pleased to announce that we enrolled our first patient and are continuing to screen for enrollment.
After providing several years of cancer care services to patients in our region, a vision was brought forth to provide comprehensive cancer services in one location. This vision opened the hearts of many to provide financial support and make the vision a reality. In August of 2009, Billings Clinic opened a beautifully designed Cancer Center. This year we celebrated 10 years of providing comprehensive oncology care in this building. Surrounded by cancer clinic donors, employees, current and former patients, and family members, we celebrated our successful journey together. The motivation of our dedicated team emanates from the amazing patients we have met over the past decade.

Opening remarks were provided by our leadership team. They expressed their thanks and gratitude by acknowledging the dedicated team members who made the past 10 years a success. Words from the medical director and Billings Clinic interim CEO were delivered by Dr. John Schallenkamp. He shared with the audience where our clinic has been, how far we have come and what our future holds. We are here 10 years strong because thousands of patients and their families have entrusted us to be part of their journey. We were honored to conclude the day with personal stories from two of our first patients that we treated in our center. Their stories filled the room with laughter, tears and above all hope.

A Decade of Delivery: Celebrating the Past Ten Years

Ten Year Timeline

2009 - Grand Opening
2010 - Interventional Oncology Added
2011 - Receive Quality Oncology Practice Initiative Certification.
2012 - Hoepp Family Center for Breast Health Opens on Second Floor
2013 - Reger Family Center for Breast Health Opens on Second Floor
2014 - Gamma Knife® Treatments Begin
2015 - Accredited by the American College of Radiology
2016 - Select as a National Partner for the LIVESTRONG Fertility Program
2017 - Stem Cell Program Receives Internationally Recognized FACT Accreditation
2018 - Selected as a National Partner for the LIVESTRONG Fertility Program
2019 - 10 Year Anniversary
2019 - 10 Year Anniversary
Oncology Dietitians

Proper nutrition is crucial for those diagnosed with cancer and should be optimized before, during, and after treatment. Billings Clinic Cancer Center has two Registered Dietitians that specialize in oncology and are part of our multi-disciplinary support team. This year we welcomed a new dietitian to the team. This team of two created new and innovative ways to expand educational opportunities for our patients as well as our staff.

2019 Patient and Staff Nutrition Focused Classes:

“Munch and Move” – Our oncology dietitians and physical therapist’s collaborative new patient course called “Munch & Move”. This six-part series focused on nutrition and fitness.

“The Taste of Fall” – Cancer Center staff nutrition class

On October 9th, 2019 our dietetic team presented “Nutrition and Breast Cancer: The Simple Truth behind the glamorous lies” at the hospital-wide, nursing grand rounds. This presentation focused on education about nutrition myths and the current evidence based recommendations on basic nutrition before, during, and after treatment for breast cancer.

New to our team

Hannah Wolf is a Registered Dietitian who has been working at Billings Clinic for the past two years. She began working as an inpatient dietitian and transitioned to her current role as an outpatient dietitian in the Cancer Center in January 2019. She graduated with a degree in Dietetics with a dual major in Ecogastronomy from the University of New Hampshire before moving to Montana to complete her dietetic internship at MSU Bozeman. Hannah was born and raised in the Boston area and loves spending time outdoors running and hiking.
Care Navigation

We believe that the essential role of the oncology care navigator is to provide skilled, coordinated direction for patients and their families as they start their treatment journey. With approximately 35-40% of our patients traveling more than 100 miles to Billings Clinic for their care, coordination of care is a necessity in providing the best possible care to our patients.

Our care navigators are disease, site-specific registered nurses. They have become experts in their areas to provide individualized care navigation to each patient’s diagnosis. Care navigators coordinate initial appointments, attend specialist appointments with patients and can help patients and families understand complex information. They also attend tumor boards and work closely with our multidisciplinary team to coordinate cares and make appropriate referrals to our supportive services.

Care navigation plays an essential role in our accreditation for Commission on Cancer (CoC), the National Accreditation Program for Breast Cancer (NAPBC), Quality Oncology Practice Initiative (QOPI), and the Foundation for Accreditation for Cellular Therapy (FACT).

Our oncology navigator team makes up the largest team of on-site patient navigators in the state. This November we welcomed Terri Polesky, RN, BSN, OCN to the team and hope to welcome another navigator early in the coming year. Terri will be specializing in hematology. She has been with Billings Clinic for the past 10 years working in the inpatient cancer care unit and pre-admission testing. Terri is excited to be part of this team and is looking forward to an opportunity to focus on patient education and navigation.
Financial Counseling

Our financial advocate team is a liaison between our patients and the cancer care team. They obtain prior authorizations and can provide 1:1 financial related support for our patients. This team is located within the Billings Clinic Cancer Center building allowing increased opportunity for collaboration with multiple areas to best support our patients.

This past year this team created new level-based job descriptions to allow for potential growth within their department.

They also completed a Yellow-Belt project called the "Patient Financial Journey". This project created a process to initiate an insurance review for new patients. The information gathered assists our financial advocates to identify patients who may need financial assistance or financial guidance. The team also worked with the IT department to build an electronic notification and queue system that increases patient’s prior authorization process time and reduced departmental paper waste.

Genetic Counseling

Billings Clinic Cancer Center’s Genetic Counselors see patients diagnosed with cancer or individuals who have a personal and/or strong family history of cancer. This past year our genetic counseling team implemented two new improvements for patient care.

We started using a new software program called "Cancer Gene Connect". This program allows our patients to collect and share their family histories of cancers electronically with the genetic counselors before their appointments. Using this program saves time during the genetic counseling appointments and allows patients to get accurate information about cancers in their families. The program also features several cancer risk assessment tools, which allows our genetic counselors to explain the patient’s cancer risks during the appointment.

This means that prior authorizations will not need to be obtained to have a genetic counseling appointment. Being a Billings Clinic service also means that patients will not receive a bill for genetic counseling appointments.

This team has also been working towards increasing access to genetic counseling for all patients. Genetic counseling is now included as a Billings Clinic service.

Team members (L to R): Andrea Crawford, MSCG, Susan Landgren, MSCGC
Medication Assistance Program (MAP)

Billings Clinic provides a variety of Medication Assistance Programs (MAP) to help patients who are uninsured, underinsured, or otherwise unable to pay for necessary medications based on their individual situation. Our Cancer Center is fortunate to have a dedicated MAP personnel to assist our patients in completing free drug applications for high-cost medications.

When our cancer center building opened 10 years ago the medication assistance program (MAP) saved our patients over 1 million dollars. With changes in insurance, newly available pharmaceuticals and increased collaboration between Paula and our oncology financial advocates, we saved our patients over 2.5 million dollars last year.

How does M.A.P. work?

Medication Assistance Programs are based on financial determinations, insurance and the type of medications prescribed. When a patient comes into our clinic who has been identified as un-insured, under-insured, or commercially insured Paula obtains necessary physician signatures and compiles all financial information required to complete the process. In the case of an insurance denial, our MAP personnel will work directly with the involved departments to submit the denial documentation required to apply for drug replacement on the patients' behalf.

3 Distinctive Highlights of our Medication Assistance Program

Dedicated MAP Personnel - Other clinics have multiple individuals submitting applications, renewals and providing documentation. Having a dedicated MAP personnel provides consistency in the process and increases efficiency by eliminating unnecessary duplications of submissions.

Cancer Repository – We are the only cancer repository in the state of Montana. This program allows patients to donate original packaged, non-opened cancer medications so that other patients can have access to free medications while they are waiting for prior authorizations or medication assistance applications to be processed. Thus, allowing reduced lapse in pharmaceutical therapies for our patients.

Collaborative Pharmaceutical System – Our clinic works through a collaborative drug usage database to ensure the likelihood of duplication of patient applications and medication requests.

![Paula Borer - Lead Certified Pharmacy Technician for M.A.P.](image-url)
Brianna King, BSN, RN, OCN obtained her nursing degree with MSU Bozeman and has been with Billings Clinic since 2008. She started in the role as nurse informaticist in May of 2016. Brianna specializes in oncology and infusion services and supports the Cancer Center, the Inpatient Cancer Care unit, as well as the branch and outreach infusion facilities in our rural Montana community. Outside of work she is the treasurer of the Big Sky Oncology Nursing Society Chapter and enjoys skiing, spending time in the outdoors and traveling.

As a nurse informaticist, Brianna works with providers, nurses and the leadership to build and maintain the electronic medical record and documentation within the outpatient and inpatient departments. She engages in department projects to improve workflow and process, supports evidence-based practice changes with the use of technology, updates and maintains all electronic chemotherapy and infusion order sets. She is responsible for providing physician, advanced practitioners and nursing education on all oncology-related documentation. She also led the implementation and training for CPOE of chemotherapy and infusions in Cody, Miles City, and North Big Horn Hospital.

Cancer Services Projects Completed in 2019

- Built and implemented new Stem Cell Transplant Mobilization Order Set, as well as multiple new oncology & infusion medication power plans
- Designed electronic order alerts and workflows for the CAR T-Cell Therapy Clinical Trial
- Lung Cancer Screening Project: designed health maintenance tool for primary care departments and a separate oncology nursing screening tool (to roll out Dec 2020)
- Stem Cell Gold Standard Team Project: built new HSCT – Mobilization orders et
- Genetic Counseling Scheduling Project: updated referral order to genetic Counseling
- Infusion Center Depart Process: built infusion Center Depart Form and trained staff on depart process
- ICC Chemo Ordering Project: helped with a process map of workflow and delay identification
- Specialty Pharmacy Injectable Medication to Infusion Center Project: designed workflow and created order set for specialty pharmacy to use for medications given in Infusion Center
- Updated and standardized regional infusion nursing documentation forms
- Designed Chemotherapy Consent Tracking power form and ONC Oral Chemo Monitoring Orders order set for Oral Oncology pharmacist
- Updated all biosimilar and immunotherapy infusion order sets to standardized build and design
- Actively involved in the design, implementation, and training of infusion staff at Central Montana Medical Center in Lewistown in preparation for their Cerner Integration in February 2020
- Assisted in integration and validation of Cerner Code Upgrade
- Attended ONS Congress 2019 in Anaheim California
Support Services (continued)

Integrative and Naturopathic Medicine

Integrative oncology at Billings Clinic involves a multi-disciplinary team approach. A naturopathic physician’s role is to meet with people who have received a diagnosis of cancer and help them to understand the treatment options available to them and to formulate a treatment plan using lifestyle modifications along with evidence-based or evidence-informed strategies such as diet, exercise, vitamins, supplements, botanical or herbal medicine.

Roberta Bourgon, ND celebrated 15 years in her position at Billings Clinic. Integrative and Naturopathic Medicine has become an increasingly requested supportive resource and referral request for many oncology patients. Dr. Bourgon ranks exceptionally high in the Press Ganey domain of physician communication. Currently she is in the top 10% in the nation.

Oncology Lab

Billings Clinic Cancer Center is fortunate to have an in-house oncology lab that contains state of the art equipment to prepare, process and result labs. Our highly skilled team also works collaboratively with the research team and can prepare and process labs that follow strict guidelines and protocols for clinical trials. Our team includes a medical laboratory scientist, research support lead and a phlebotomist.
Oncology Pharmacy

The Billings Clinic Infusion Center Pharmacy provides clinical medication review and compounding services for all Infusion Center patients at the Billings Clinic Cancer Center, as well as outreach patients at Miles City Infusion, Cody Infusion and North Big Horn Infusion.

Oral Oncology Management Program

This program provides a variety of services for our patients receiving cancer treatment with an oral agent to ensure proper education, safety, and management of treatment.

Highlights

- Implementation of CAR-T including inpatient and outpatient pharmacy education and planning
- In the process of implementing Heated Intraperitoneal Chemotherapy (HIPEC) in collaboration with Gynecologic Oncology for intraoperative chemotherapy administration
- Remodel of pharmacy and nurse medication room
- Biosimilar initiatives: cost savings with no difference in efficacy (like a generic drug but for larger molecules) Udenyca for pegfilgrastim (new this year), Zarxio for filgrastim. Looking into others currently
- Clinical Pharmacist Practitioner (CPP) in the state of Montana
- Chosen by ACCC for a Chronic Lymphocytic Leukemia Quality Improvement Workshop at Billings Clinic

Team members (L to R): Marie Sirek, PharmD, BCACP, Anna Howard, PharmD, BCOP
Support Services (continued)

Cancer Recovery Services and Rehabilitation

Cancer treatments can be very difficult and often cause significant pain, fatigue and disability for patients. Billings Clinic Cancer Center offers in-house rehabilitation and recovery services with oncology certified rehabilitation therapists. This team implements research-based protocols that have been proven to help patients with a diagnosis of cancer going through treatment, and helping survivors optimally heal and function.

Oncology Rehabilitation Partners state that 90% of cancer patients would benefit from cancer rehabilitation. Our physical therapists work closely with our nursing teams to assess patients on a regular basis throughout their treatment. Assessments are completed approximately every 60 days and identify patients who would benefit from rehabilitative services. Individualized treatment goals focus on increasing strength and energy, managing pain and improving functioning that impacts quality of life. Post-treatment our patients also can be referred to the LIVESTRONG program at the local YMCA to continue their rehabilitation goals and maintain their physical health and overall well-being.

This year our physical therapists collaborated with our dietitians on a new class series called, "Munch and Move". This six-part series provided interactive opportunities focused on nutrition and fitness.

Lymphedema Program

Patients with a diagnosis of cancers are at a risk for lymphedema if they have had lymph nodes removed or radiation delivered to regional lymph nodes. Lymphedema is a buildup of protein-rich fluid that does not drain and causes swelling. Lymphedema is considered a chronic and slowly progressive disease. If left untreated, it can cause infection, wounds, and possible loss of function in the affected limb.

Billings Clinic Cancer Center has two certified lymphedema physical therapists. They work closely with our oncologists and our care navigation team to ensure that appropriate patient referrals are made. This team treats primary lymphedema (hereditary) and secondary lymphedema (lymphedema that develops because of lymph node removal, radiation, trauma, etc.) in the upper and lower extremities as well as trunk, face/neck, as well as genital lymphedema.

Lymphedema treatment sessions include one or more of the following: lymphedema prevention education, fitting for compression garments, manual therapy and therapeutic exercise (range of motion and strengthening). This team also performs components of Complete Decongestive Therapy (CDT).
Supportive and Palliative Care Services

Supportive and palliative care services focus on improving the quality of life for you and your family by reducing the physical and emotional burden of illness, through the expert use of symptom management, supportive counseling and advanced care planning.

In October, the palliative and supportive care team traveled to the Mayo Clinic for a Palliative Care Collaboration conference in Rochester, MN. This team had the opportunity to collaborate with 15 other hospitals from across the United States. Throughout the next year our team will have access to coaching calls and webinars with the Mayo Clinic focusing on goals to increase access to patients and develop new screening tools and workflow processes.

We also welcome new additions to our team this year. Dr. William George, MD became the newly appointed department chair for the Supportive and Palliative Care team and Kristin Lande, PhardD, BCPS, an acute pain pharmacist, started working with our team as a collaborative resource. She provides recommendations with the palliative care providers for our patients.

Anna Weber, NP, recently graduated with her Doctorate of Nursing Practice from Montana State University, where she also completed her undergraduate degree. She is thrilled to have started working with the Supportive and Palliative Care team in October as a Nurse Practitioner. Anna has been with Billings Clinic for 9 years, starting as a certified nurse’s aid and then a registered nurse on the Inpatient Cancer Care unit. The Inpatient Cancer Care unit is truly a second family to Anna and she is honored to take all that she has learned from them into this new position. When she is not at work, Anna enjoys spending time with her husband, Peter, and their new daughter, Paige. They enjoy the beautiful state of Montana by camping, hiking, snowboarding or walking their black lab, Noah. Anna is excited to continue her career at Billings Clinic and serve people in her new role.

Kathy Bennett, CMA, joined the supportive and palliative care team after working in the radiation oncology department for the past four years. “I am excited to be part of this team. We make a big difference in our patients and their family’s lives.”

“Having worked alongside the palliative care team for years and seeing the clarity and comfort that you guys brought other people's families, it was a no brainer that MY family needed the support and comfort only your team can offer.” - Hannah
Support Services

Oncology Social Work

The Billings Clinic Cancer Center’s oncology social work team oversees the psychosocial needs of our patients. They also provide professional counseling services, conduct mental health assessments, provide community resources, assist with extended lodging and travel expenses and facilitate supportive and wellness programs. Our cancer center includes the only certified oncology social workers (OSW-C) in Eastern Montana.

This past year our social work team assisted patients with lodging for extended treatments and additional support.

- 289 nights of lodging were provided at the Battleground House through a community partnership with the owners of Battleground Fitness
- Through a generous donation from the owners of the Riversage Billings Inn, 227 nights of lodging were provided for free or at a greatly reduced cost
- 61 patients were assisted with applying for charitable grants for practical needs such as basic living expenses, travel, etc.

We would like to recognize Jennifer Finn, LCSW, OSW-C for volunteering to serve as a board member on the National Board of Oncology Social Work Certification (BOSWC) and as a state representative for the National Association of Oncology Social Work (AOSW).
Support Services (continued)

Survivorship

Billings Clinic Cancer Center offers continued support for our post-treatment patients and their families through our wellness support programs. These programs include counseling services, grief support services and groups that focus on the mind, body and spirit. We also maintain a Facebook group called PATHWAYS (Programs Aimed Toward Healing, Wellness and Your Survivorship). This page connects us with our patients and shares educational and support classes, events and Billings Clinic Cancer Center information.

This past year our team provided new collaborative educational classes that focused on survivorship and whole-person well-being.

“Here and Now” is one of our wellness support classes that is geared towards our female patients. This year we had an evening that our social workers collaborated with our dietitians to provide a class that discussed the importance of maintaining healthy nutrition post-treatment.

Our clinical social workers and palliative care team collaborated to present a six-week educational series titled, “Partner’s in Survivorship; Living Well After Cancer Treatment”. This series was presented both locally and via telemedicine allowing participation from local and rural communities to participate together.

National Cancer Survivor’s Day Picnic

National Cancer Survivors Day ® is an annual, worldwide celebration of life. Every June we join in celebration by holding an annual survivor’s picnic in Billings. This past June we held our picnic at Zoo MT. We had approximately 200 people join us for this fun-filled, family event.

Volunteers, family, and friends come out to Billings Clinic’s National Cancer Survivor’s Day BBQ. Photo property of Amy Nelson, Billings Gazette

Cancer survivor Cinda Paynter praises the doctors and nurses of the Billings Clinic for their hard work at the 2019 Cancer Survivor’s Day Picnic. She has battled cancer three times over the past 30 years including Hodgkin’s lymphoma and metastatic breast cancer. Photo property of Amy Nelson, Billings Gazette
The ICC provides comprehensive oncology care. This 26-bed unit works closely with our outpatient Cancer Center to provide continuity of care to our patients. In 2017, the ICC started a belt project to focus on Central Line Associated Blood Stream Infections (CLASBI). Their prevention efforts have remained consistent and have allowed them to remain CLASBI free since December of 2017. This past year the ICC has been working on several new projects.

- **CAR-T Cell Education** – In collaboration with Kim Bosket RN, Cancer Research, Dr. Fabregas and Dr. Silva, plans of care and job aids for the inpatient care of CAR-T Cell patients were created. Our cellular therapy trained registered nurses met with the inpatient clinician for small group discussion, learning, and practice of the required neurological assessment.

- **TSAM – A Tiered Skills Acquisition Model (TSAM)** for orientation was written and adapted on ICC following Mayo Clinic’s lead for their oncology units. This model of orientation allows for complete individualization of orientation for each new staff member. The staff member gains a strong foundation in which all other skills and learning is based. This program increased the continuity between preceptors as each tier of the orientation builds on the previous and had clear objectives for each step. The orientee was empowered to be proactive in knowing their own orientation needs for the shift.

- **ONCC Free-Take** – To better attain Billings Clinic’s goal of increasing the percentage certification in the eligible nurses at Billings Clinic and improve employee satisfaction, a contract was created with the ONCC to improve our nursing staff’s ability to obtain their certifications. This allows nurses who meet eligibility for certifications offered through the ONCC for cancer care to take the test up to 2 times in a 12-month period without paying for the exam. When the nurse passes the exam, Billings Clinic pays for the test reducing the initial financial burden for our nurses. Currently the ICC has seven OCN certified nurses.

Chrystal Martin RN, OCN has been with the Inpatient Cancer Unit for the many years. We are happy to announce that this past March she accepted the ICC nurse clinician role.

Kelly Bonilla, RN, BSN was invited to and participated in a workshop at the ONCC office in Pittsburgh, PA to assist in the writing of the Oncology Certified Nurse (OCN) future test questions.

**New to the team**

Shaun Bare, RN, BSN
Lyndsey Christian, RN, BSN
Katie Quesenberry, RN
Shae Sager, RN, BSN
Somer Erdman, RN, BSN
Holly Cooper, CNA
Caeli Wells, CNA
Lindsey Junkert, CNA
Tasha Stephens, CNA
Jahna Anderson, CNA
Jennifer Layboult, CNA
Natalie Petersen, CNA

**New chemotherapy trained nurses this year**

Tiffany Wooten, RN
Adam Hertig, RN, BSN
Rachelle Darragh, RN
Saije Pollard, RN
Sarah Dietz, RN, BSN
Hannah Blodgett, RN
Brittany Hansen, RN, BSN
Navigating the changes brought on by the newly released 8th Edition of the AJCC Cancer Staging Manual has been a challenge to registries on a national level, but Billings Clinic Registrars have been ahead of the curve in learning about and implementing these updates while maintaining stellar levels of accuracy and efficiency.

This past May our Cancer Registrar team had the opportunity to attend the National Cancer Registry Association (NCRA) Annual Educational Conference in Denver, Colorado. The theme, “Navigating the Mountains of Change,” was very appropriate given the myriad changes that came with AJCC 8th Edition. There were many helpful sessions about navigating the 2018 updates as well as a symposium specific to hospital registries on high-volume disease sites. Jennifer Williams was recognized as a new CTR in the “class of 2018” at the Awards, Installation & Recognition Luncheon.

Our registrars also attended the annual spring workshop held by the Montana Cancer Registry Association (MCRA) in Bozeman. In addition to connecting with colleagues from across the state, they attended informational sessions on AJCC 8th Edition staging, biology, and treatment of breast cancer. They also heard the latest epidemiology news from the Montana Central Tumor Registry.

Cancer Registrars are difficult to recruit. The National Cancer Registrars Association was founded 35 years ago. Since the association’s induction, only 4,500 Americans have received a CTR certification. Registry’s work influences cancer care at local, state, and national levels. The registry department is necessary for accreditation from the Commission on Cancer (CoC) and National Accreditation Program for Breast Cancer (NAPBC). This past year, our registrar team developed a leveling system for their position to assist in recruitment and retention of this valuable role. We are excited to welcome Maggie Hirsch to our registrar team. This November, she started her journey toward becoming a Certified Tumor Registrar.

We would like to recognize Marcia Tostengard. Marcia is the Billings Clinic Cancer Center’s representative at the MT Cancer Coalition (MTCC). This year she was also nominated as 1 of 2 representatives for the western region of the National Cancer Registry Association (NCRA). This organization is the accrediting body for CTR’s.

Team members (L to R): Jennifer Williams, Maggie Hirsch, Marcia Tostengard, Lee Ann Carranco
Community Outreach

Free cancer screenings

Our annual Head & Neck Screening took place this year on April 13th at Albertsons Quick Care Clinic.

We screen approximately 20-40 people at each event. We hope to continue this screen and add new screening dates and venues in the coming year.

Montana Women’s Run

This year the 38th annual Women’s Run had almost 5,300 participants. The run has been supporting local organizations that contribute to the health and wellness of women in our community.

Vue and Brew

On April 1st, Vue and Brew in Laurel hosted its fifth consecutive fundraiser benefitting the Battle Ground House. This year’s viewing was the live-action reimaging of Walt Disney’s Dumbo. The event brought in $785 for lodging funds.

Out of Darkness Walk

Suicide prevention Coalition of Yellowstone Valley held their Out of the Darkness Community Walk on September 15th. This year the event raised $147,661. The walk raises awareness and funds that allow the American Foundation for Suicide Prevention (AFSP) to invest in new research, create educational programs, advocate for public policy, and support survivors of suicide loss.

Relay For Life of Yellowstone

Relay for Life of Yellowstone County took place on Friday, July 12. This year’s event raised over $600,000. The money supports the American Cancer Society’s efforts towards cancer research, education, prevention and support.

Ulman Foundation’s 4K for Cancer

On July 17th we welcomed Team Seattle from the Ulman Foundation’s 4K for Cancer program. This inspiring young group of 30 cyclists traveled from Baltimore, Maryland to Seattle, Washington raising funds for young adults with cancer. For the 4th year they visited the Billings Clinic Cancer Center to visit our patients and give them comfort bags.
### 2018 Primary Site Tables

#### Primary Site Total (%) M F Analy NA Alive Exp Stg 0 Stg I Stg II Stg III Stg IV 88 Unk Blank/Inv

<table>
<thead>
<tr>
<th>Primary Site</th>
<th>Total (%)</th>
<th>Sex</th>
<th>Class of Case</th>
<th>Status</th>
<th>Stage Distribution</th>
<th>Analytic Cases Only</th>
</tr>
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<tr>
<td><strong>ORAL CAVITY &amp; PHARYNX</strong></td>
<td>30 (1.7%)</td>
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<tr>
<td>Lip</td>
<td>4 (0.2%)</td>
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<td>Tongue</td>
<td>9 (0.5%)</td>
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<tr>
<td>Salivary Glands</td>
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<tr>
<td>Floor of Mouth</td>
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<tr>
<td>Gum &amp; Other Mouth</td>
<td>2 (0.1%)</td>
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</tr>
<tr>
<td>Tongue</td>
<td>3 (0.2%)</td>
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<td>0</td>
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<td>0</td>
<td>0</td>
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<tr>
<td>Oral Cavity</td>
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<td>0</td>
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<tr>
<td>Hypopharynx</td>
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<td>1</td>
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<tr>
<td><strong>DIGESTIVE SYSTEM</strong></td>
<td>211 (12.2%)</td>
<td></td>
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<td>Esophagus</td>
<td>12 (0.7%)</td>
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<td>12</td>
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<tr>
<td>Stomach</td>
<td>13 (0.8%)</td>
<td>9</td>
<td>4</td>
<td>12</td>
<td>0</td>
<td>9</td>
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<tr>
<td>Small Intestine</td>
<td>12 (0.7%)</td>
<td>5</td>
<td>7</td>
<td>0</td>
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<td>1</td>
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<tr>
<td>Colon Excluding Rectum</td>
<td>61 (3.5%)</td>
<td>36</td>
<td>25</td>
<td>59</td>
<td>2</td>
<td>51</td>
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<tr>
<td>Cecum</td>
<td>15</td>
<td>6</td>
<td>9</td>
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<td>Appendix</td>
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<td>4</td>
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<td>0</td>
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<td>Ascending Colon</td>
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<td>8</td>
<td>3</td>
<td>11</td>
<td>0</td>
<td>10</td>
</tr>
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<td>Transverse Colon</td>
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<td>Splenic Flexure</td>
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<td>4</td>
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<td>4</td>
<td>0</td>
<td>3</td>
</tr>
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<td>Descending Colon</td>
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<td>3</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>0</td>
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<td>Sigmoid Colony</td>
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<td>9</td>
<td>2</td>
<td>10</td>
<td>1</td>
<td>8</td>
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<td>Large Intestine, NOS</td>
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<td>2</td>
<td>5</td>
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<td>4</td>
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<td>Rectum</td>
<td>20</td>
<td>14</td>
<td>6</td>
<td>20</td>
<td>0</td>
<td>18</td>
</tr>
<tr>
<td>Amus, Anal Canal &amp; Anorectum</td>
<td>10 (0.6%)</td>
<td>4</td>
<td>6</td>
<td>4</td>
<td>6</td>
<td>0</td>
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<tr>
<td>Liver &amp; Intrahepatic Bile Duct</td>
<td>18 (1.0%)</td>
<td>15</td>
<td>3</td>
<td>17</td>
<td>1</td>
<td>7</td>
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<tr>
<td>Liver</td>
<td>14</td>
<td>12</td>
<td>2</td>
<td>13</td>
<td>1</td>
<td>7</td>
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<tr>
<td>Intrahepatic Bile Duct</td>
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<td>3</td>
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<tr>
<td>Gallbladder</td>
<td>2 (0.1%)</td>
<td>0</td>
<td>2</td>
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<td>1</td>
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<tr>
<td>Other Biliary</td>
<td>8 (0.5%)</td>
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<td>4</td>
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<td>4</td>
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<tr>
<td>Pancreas</td>
<td>51 (2.9%)</td>
<td>26</td>
<td>25</td>
<td>46</td>
<td>5</td>
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<tr>
<td>Retropertitoneum</td>
<td>2 (0.1%)</td>
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<td>2</td>
</tr>
<tr>
<td>Penile, Omentum, Mesentery</td>
<td>3 (0.2%)</td>
<td>3</td>
<td>3</td>
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<tr>
<td><strong>RESPIRATORY SYSTEM</strong></td>
<td>173 (10.0%)</td>
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</tr>
<tr>
<td>Nasal Cavity &amp; Middle Ear</td>
<td>7 (0.4%)</td>
<td>5</td>
<td>2</td>
<td>7</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Larynx</td>
<td>10 (0.6%)</td>
<td>7</td>
<td>3</td>
<td>9</td>
<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Lung &amp; Bronchus</td>
<td>155 (9.0%)</td>
<td>71</td>
<td>84</td>
<td>148</td>
<td>7</td>
<td>97</td>
</tr>
<tr>
<td>Pleura</td>
<td>1 (0.1%)</td>
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<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Trachea, Mediastinum &amp; Other Respiratory Organs</td>
<td>2 (0.1%)</td>
<td>1</td>
<td>1</td>
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<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>SKIN</strong></td>
<td>14 (0.8%)</td>
<td>10</td>
<td>4</td>
<td>5</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Soft Tissue (including Heart)</td>
<td>6 (0.3%)</td>
<td>5</td>
<td>1</td>
<td>5</td>
<td>1</td>
<td>0</td>
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<tr>
<td><strong>SKELETAL SYSTEM</strong></td>
<td>169 (9.8%)</td>
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<tr>
<td>Melanoma - Skin</td>
<td>144 (8.3%)</td>
<td>86</td>
<td>58</td>
<td>143</td>
<td>1</td>
<td>140</td>
</tr>
<tr>
<td>Other Non-Epithelial Skin</td>
<td>23 (1.4%)</td>
<td>14</td>
<td>11</td>
<td>24</td>
<td>1</td>
<td>25</td>
</tr>
<tr>
<td><strong>MUSCULAR SYSTEM</strong></td>
<td>231 (13.8%)</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Breast</td>
<td>313 (18.3%)</td>
<td>212</td>
<td>202</td>
<td>5</td>
<td>205</td>
<td>8</td>
</tr>
<tr>
<td><strong>FEMALE GENITAL SYSTEM</strong></td>
<td>256 (14.8%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cervix Uteri</td>
<td>59 (3.4%)</td>
<td>59</td>
<td>22</td>
<td>37</td>
<td>38</td>
<td>1</td>
</tr>
<tr>
<td>Corpus Uteri</td>
<td>116 (6.7%)</td>
<td>116</td>
<td>113</td>
<td>3</td>
<td>110</td>
<td>6</td>
</tr>
<tr>
<td>Corpus Uteri</td>
<td>171 (10.2%)</td>
<td>171</td>
<td>109</td>
<td>2</td>
<td>108</td>
<td>3</td>
</tr>
<tr>
<td>Uterus, NOS</td>
<td>5</td>
<td>5</td>
<td>4</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Ovary</td>
<td>30 (1.7%)</td>
<td>30</td>
<td>29</td>
<td>1</td>
<td>25</td>
<td>5</td>
</tr>
<tr>
<td>Vagina</td>
<td>5 (0.3%)</td>
<td>5</td>
<td>3</td>
<td>2</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Vulva</td>
<td>26 (1.5%)</td>
<td>26</td>
<td>10</td>
<td>16</td>
<td>24</td>
<td>2</td>
</tr>
<tr>
<td>Other Female Genital Organs</td>
<td>30 (1.8%)</td>
<td>30</td>
<td>20</td>
<td>10</td>
<td>17</td>
<td>3</td>
</tr>
<tr>
<td><strong>MALE GENITAL SYSTEM</strong></td>
<td>299 (17.3%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prostate</td>
<td>288 (16.7%)</td>
<td>288</td>
<td>0</td>
<td>259</td>
<td>278</td>
<td>10</td>
</tr>
<tr>
<td>Testis</td>
<td>7 (0.4%)</td>
<td>7</td>
<td>0</td>
<td>7</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Penis</td>
<td>2 (0.1%)</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other Male Genital Organs</td>
<td>3 (0.2%)</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>URETANARY SYSTEM</strong></td>
<td>115 (6.7%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urinary Bladder</td>
<td>51 (2.9%)</td>
<td>38</td>
<td>13</td>
<td>49</td>
<td>2</td>
<td>41</td>
</tr>
<tr>
<td>Kidney &amp; Renal Pelvis</td>
<td>63 (3.6%)</td>
<td>43</td>
<td>20</td>
<td>60</td>
<td>3</td>
<td>60</td>
</tr>
<tr>
<td>Other Uretic Organs</td>
<td>1 (0.1%)</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>EYE &amp; ORBIT</strong></td>
<td>1 (0.1%)</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>BRAIN &amp; OTHER NERVOUS SYSTEM</strong></td>
<td>34 (2.0%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brain</td>
<td>12 (0.7%)</td>
<td>6</td>
<td>6</td>
<td>10</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>Cerebral Nerves Other Nervous System</td>
<td>22 (1.3%)</td>
<td>5</td>
<td>17</td>
<td>21</td>
<td>1</td>
<td>19</td>
</tr>
<tr>
<td>Primary Site</td>
<td>Total (%)</td>
<td>M</td>
<td>F</td>
<td>Class of Case</td>
<td>Analy</td>
<td>NA</td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>-----------</td>
<td>----</td>
<td>----</td>
<td>---------------</td>
<td>-------</td>
<td>----</td>
</tr>
<tr>
<td><strong>ENDOCRINE SYSTEM</strong></td>
<td>48 (2.8%)</td>
<td>20</td>
<td>28</td>
<td>45</td>
<td>3</td>
<td>47</td>
</tr>
<tr>
<td>Thyroid</td>
<td>41 (2.4%)</td>
<td>15</td>
<td>26</td>
<td>38</td>
<td>3</td>
<td>41</td>
</tr>
<tr>
<td>Other Endocrine including Thymus</td>
<td>7 (0.4%)</td>
<td>2</td>
<td>5</td>
<td>7</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td><strong>LYMPHOMA</strong></td>
<td>58 (3.4%)</td>
<td>35</td>
<td>23</td>
<td>53</td>
<td>5</td>
<td>49</td>
</tr>
<tr>
<td>Hodgkin Lymphoma</td>
<td>2 (0.1%)</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Non-Hodgkin Lymphoma</td>
<td>56 (3.2%)</td>
<td>34</td>
<td>22</td>
<td>51</td>
<td>5</td>
<td>47</td>
</tr>
<tr>
<td>NHL - Nodal</td>
<td>28</td>
<td>19</td>
<td>9</td>
<td>25</td>
<td>3</td>
<td>24</td>
</tr>
<tr>
<td>NHL - Extranodal</td>
<td>28</td>
<td>15</td>
<td>13</td>
<td>26</td>
<td>2</td>
<td>23</td>
</tr>
<tr>
<td><strong>MYELOMA</strong></td>
<td>26 (1.5%)</td>
<td>17</td>
<td>9</td>
<td>24</td>
<td>2</td>
<td>22</td>
</tr>
<tr>
<td>Myeloma</td>
<td>26 (1.5%)</td>
<td>17</td>
<td>9</td>
<td>24</td>
<td>2</td>
<td>22</td>
</tr>
<tr>
<td><strong>LEUKEMIA</strong></td>
<td>47 (2.7%)</td>
<td>22</td>
<td>25</td>
<td>55</td>
<td>2</td>
<td>35</td>
</tr>
<tr>
<td>Lymphocytic Leukemia</td>
<td>18 (1.0%)</td>
<td>11</td>
<td>7</td>
<td>16</td>
<td>2</td>
<td>18</td>
</tr>
<tr>
<td>Acute Lymphocytic Leukemia</td>
<td>5</td>
<td>4</td>
<td>1</td>
<td>5</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Chronic Lymphocytic Leukemia</td>
<td>12</td>
<td>6</td>
<td>6</td>
<td>10</td>
<td>2</td>
<td>12</td>
</tr>
<tr>
<td>Other Lymphocytic Leukemia</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Myeloid &amp; Monocytic Leukemia</td>
<td>25 (1.4%)</td>
<td>14</td>
<td>11</td>
<td>25</td>
<td>0</td>
<td>14</td>
</tr>
<tr>
<td>Acute Myeloid Leukemia</td>
<td>15</td>
<td>9</td>
<td>6</td>
<td>15</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>Chronic Myeloid Leukemia</td>
<td>10</td>
<td>5</td>
<td>5</td>
<td>10</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>Other Leukemia</td>
<td>4 (0.2%)</td>
<td>2</td>
<td>2</td>
<td>4</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Other Acute Leukemia</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Autelemic, Subleukemic &amp; NOS</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td><strong>MESOTHELIOMA</strong></td>
<td>2 (0.1%)</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Mesothelioma</td>
<td>2 (0.1%)</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td><strong>MISCELLANEOUS</strong></td>
<td>43 (2.5%)</td>
<td>17</td>
<td>26</td>
<td>40</td>
<td>3</td>
<td>24</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>43 (2.5%)</td>
<td>17</td>
<td>26</td>
<td>40</td>
<td>3</td>
<td>24</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>1,729</td>
<td>843</td>
<td>884</td>
<td>1,533</td>
<td>149</td>
<td>1,488</td>
</tr>
</tbody>
</table>

2018 Primary Site Tables (continued)
Top 5 Cancers for Men & Women*

**Women**

- Breast: 212 cases
- Colon & Rectum: 58 cases
- Lung: 31 cases
- Melanoma: 84 cases
- Uterine Corpus: 116 cases

**Men**

- Prostate: 288 cases
- Colon & Rectum: 86 cases
- Lung: 54 cases
- Melanoma: 71 cases
- Kidney & Renal Pelvis: 43 cases

*by number of cases
Certifications

Case, V. - Lean Six Sigma Yellow Belt Certification
Crawford, A. - Lean Six Sigma Yellow Belt Certification
Davis, M. - Lean Six Sigma Yellow Belt Certification
Edwards, J. - Lean Six Sigma Yellow Belt Certification
Finn, J. - Lean Six Sigma Yellow Belt Certification
Glasgow, R. - Lean Six Sigma Yellow Belt Certification
Heick, M. - Lean Six Sigma White Belt Certification
Heick, M. - Lean Six Sigma Yellow Belt Certification
Highland-Fritz, C. - Lean Six Sigma Yellow Belt Certification
Hirsch, M. – Lean Six Sigma Yellow Belt Certification
Jones, D. - Advanced Certified Hospice and Palliative Nurse Certification (1 of 8 in MT)
Kapsner, J. - Lean Six Sigma Yellow Belt Certification
Kerchal, R. - Lean Six Sigma Yellow Belt Certification
King, J. - Lean Six Sigma Yellow Belt Certification
Krumm, L. – OCN Certification
Licht, S. - Lean Six Sigma Yellow Belt Certification
Peterson, M. - Board Certification for Gynecologic Oncology – April 2019
Raymond, M. - Lean Six Sigma Yellow Belt Certification
Robinette, T. - Lean Six Sigma Yellow Belt Certification
Roring, J. – ABR Certification
Roring, J. – Gamma Knife Licensed authorized medical physicist
Slavin, L. - Lean Six Sigma Yellow Belt Certification
Thielen, J. - Lean Six Sigma White Belt Certification
Thielen, J. - Lean Six Sigma Yellow Belt Certification
Wells, E. - Lean Six Sigma Yellow Belt Certification

Awards

Brant, J. – Oncology Nursing Foundation Connie Henke Yarbo Excellence in Cancer Nursing Mentorship Award, Oncology Nursing Foundation
Brant, J. - Heart of Healthcare Nursing Award, Billings Gazette
Howard, A. – Top 10 nominee for the NCODA living the mission award
Jones, D. - Heart of Healthcare Nursing Award, Billings Gazette
Jones, D. and Bell, K. - Advanced Practice Provider (APP) Excellence awards, 1st annual Billings Clinic APP award ceremony

Team members (L to R)
Diane Jones, MSN,NP; Kristin Bell, PA
Publications


Books or Book Chapters


Team members (L to R)
Roberta Bourgon, ND, Tricia Montgomery, RN, Jeannine Brant, RN Kathy Waitman, NP, Anna Howard

Books or Book Chapters


Presentations


Brant, J.M. (October 2019). Pain Management in Older Adults Palliative Care Plenary Session. ONS UAE Nursing Day. United Arab Emirates Cancer Congress. Dubai, UAE

Brant, J.M. (October 2019). Palliative Care Immersion. JadPRO Live Seattle, WA


Brant, J.M. (September 2019). Controversies and Conundrums in the Use of Opioids in AYAs with Cancer. APON Annual Meeting. San Jose, CA


Crawford, A. (October 2019). Sometimes when you hear hoofbeats, it really is a zebra. Big Sky ONS annual conference. Billings, MT

Finn, J. (September 2019). Stress. Billings Clinic Survivorship class Partners in Survivorship; Living well after cancer treatment. Billings, MT.

Finn, J. (September 2019). The emotional experience. Billings Clinic survivorship class Partners in survivorship; Living well after cancer treatment. Billings, MT.


Jones, D. (June 2019). What is Supportive and Palliative Care. Billings Clinic Dementia Support Group Billings, MT.

Jones, D. (June 2019). What is Supportive and Palliative Care and how can we help CHF patients? Billings Clinic CHF Support Group. Billings, MT.

Jones, D. (June 2019). Medical follow up and long-term effects. Billings Clinic survivorship class Partner’s in survivorship: Living well after cancer treatment. Billings, MT.

Presentations

Lee, S. (September 2019). Oncology and Heme Emergencies. Billings Clinic IMR Residency program didactic lectures series. Billings, MT.


Poster Presentations

2019 Cancer Center Annual Report

For the Physician/Provider Communication Line, please call (406) 255-8411 or 1-800-325-1774.

For questions about cancer or if you need a physician, please call HealthLine nurses at (406) 255-8400 or 1-800-252-1246.

billingsclinic.com/cancer