At every point along the path, our team is there, keeping the focus on the most important team member - the patient

The team at the Bristol Hospital cancer care center is behind you every step of the way. From our caring and compassionate oncology certified nurses, financial assistance counselor and our nurse navigator, to our support services, free events and support groups, we are here to help guide you through your journey. Our special triage nurse will assist you with all your medical needs and will be available to you during your appointments.

Our financial counselor will meet with you and your family to provide financial information and access to financial assistance and to answer any questions you may have along the way. Our Social Worker will provide emotional support, information on support groups and free community programs.

Our personal care approach will start the moment you walk through our doors, and will continue with you through treatment, and beyond. At Bristol Hospital’s Cancer Care Center, you are never just a number; you are a friend, a neighbor and a family member.

Our doctors and nurses work hand in hand. They meet regularly at multidisciplinary committees to review current cancer cases. With the knowledge and expertise of a whole team of specialists behind them, they can help you navigate through the maze of choices to develop an integrated plan that fits your specific needs and lifestyle.

Contact the Bristol Hospital Cancer Care Center at 860.585.3400
I am happy to present you with the 2015 edition of the Bristol Hospital Cancer Care Center Annual Report. In this update, we are proud to show you our many highlights from the past year.

From me personally, this has been a very exciting year; I joined Bristol Hospital as the Medical Director of Oncology Services in February. One of my main goals early on was to bring academic-level care to Bristol and the surrounding communities. The patients throughout Greater Bristol should not have to travel to the larger cities to get the best care. They deserve it right in their backyard—extraordinary cancer care that’s close to home.

There are numerous highlights from this past year to mention. Early last spring we established the Bristol Hospital Lung Cancer Screening Program which received immediate validation from the American College of Radiology’s Committee on CT Accreditation which designated Bristol Hospital as an ACR Lung Cancer Screening Center.

Last spring, Bristol Hospital’s surgical capabilities expanded with the addition of the da Vinci Xi Surgical System. The da Vinci Xi is the newest robotic surgery technology, and Bristol Hospital is proud to be the only hospital in Hartford County to have this system. I’m also thrilled to announce that Carmine Volpe, MS, FACS, joined Bristol Hospital as its new Chairman of Surgery. Dr. Volpe also is a surgical oncologist and his areas of special interest include sarcomas, gastric and pancreatic cancers, and recurrent and advanced cancers with expertise in HIPEC.

In November, the Bristol Hospital Cancer Care Center was re-accredited by the Commission on Cancer of the American College of Surgeons as offering the very best in cancer care. This is recognition for the quality of our comprehensive, multidisciplinary approach to patient care.

This report is just a snapshot of what is surely to be the start of an exciting new era in the history of the Bristol Hospital Cancer Care Center. We have an extraordinary team of physicians, nurses, and clinical and administrative staff whose passion is providing the very best in cancer care and support to our patients and families.

Jane Kanowitz, MD
Medical Director,
Oncology Services and
The Bristol Hospital Cancer Care Center
Primary Sites 2014
All Sites
Prevention and Screening Programs

Each year, the cancer committee implements a cancer prevention program designed to meet the needs of our community. In 2013, Alan Geller, MPH, of the Harvard School of Public Health published six decades of data from the Connecticut Tumor Registry. He found an “unremitting increase in the incidence and mortality of melanoma” in the state of Connecticut. The incidence of melanoma in Connecticut is the same as the incidence in Florida, the ‘sunshine state’. Mr. Geller concluded that more needs to be done to encourage and promote prevention and early-detection.

This year, Dr Brahaj, a board certified medical oncologist, who practices at the Bristol Hospital Cancer Care Center, held a prevention seminar.

Dr Brahaj detected early stage melanoma in two of the twenty participants. These two people went on to have curative surgery and today are doing well and are free of disease.

These efforts potentially reduced the incidence of fatal melanoma by 10%.
Accountability Measures

We continually strive to provide the highest quality of patient care. We voluntarily assess how well we perform on a variety of quality metrics designed by the Commission on Cancer and we benchmark our achievements against other cancer programs in our region and across the nation.

In 2014, we reviewed our performance in the care of men and women with breast cancer and colon cancer. The metrics reviewed for breast cancer included how the diagnosis was established, the timeliness of radiotherapy administration, the administration of hormonal therapy in the appropriate setting, and the consideration of combination chemotherapy when hormone therapy cannot be utilized. For colon cancer we examined the quality of the surgical procedure, and the consideration of post-operative chemotherapy.
Accountability Measures

Breast Hormone Therapy Considered or Administered
2013

Comparison Groups

Surgical Mastectomy for Breast Cancer >=4+
lymph nodes received Radiotherapy 2013

Comparison Groups

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Accountability Measures

Breast - Radiation Administered Within 1 Year (365 Days) Of Diagnosis Under Age 70 Receiving BCS 2013

Colon - Adjuvant Chemotherapy Considered or Administered 2013

Comparison Groups

Bristol Hospital Cancer Care Center Annual Report 2015
Quality Improvement Measures

All national and international colon cancer guidelines mandate that no fewer than 12 regional lymph nodes are to be surgically removed at the time of curative surgery. Adequate lymph node evaluation is important for prognosis, treatment and survival of patients with colon cancer. It has been proven that there is a correlation between the actual number of lymph nodes removed and the long term prognosis for colon cancer patients. Lymph node cancer involvement is a major determinant in the need for post-surgical therapy. Lymph node retrieval at the time of surgery is a measure of the quality of colon cancer care.

The Cancer Committee and the Cancer Liaison Physician at the Bristol Hospital Cancer Care Center reviewed compliance with this Quality Improvement Measure in 2014. The performance rate for this measure is deemed acceptable at a rate of 85%. A thorough review of all colon cancer cases in 2014 treated surgically was performed. We exceeded compliance with this measure at a rate of 94.7%.
Quality Improvement
Advanced Directives

The Declaration of Independence in 1776 provided Americans with certain unalienable rights. Among these rights are Life, Liberty, and the pursuit of Happiness. As Americans, we continuously search for better ways to exercise these rights, and explore lifestyles which will improve our quality of life and living.

Similarly, advances in medical technology have aimed to change the way we live by improving the quality of our health. Improvements in screening and treatment of diseases, as well expanded access to health care, health education, have not only provided Americans a higher quality of life, but have also allowed us a longer life.

Today, we realize it is not enough to only explore how to live better and live longer. Approximately one-third of all Americans die in a hospital or in a health care facility. At the end of life, many patients suffer through prolonged, painful and expensive treatments, often with a poor prognosis. Healthcare has become the most common cause of bankruptcy in the US, even though studies have shown that the majority of Americans would choose only comfort measures at the end of their lives.

It is “Advance Directives” which allows patients and families to consider, understand, and participate in medical decisions regarding their rights to end-of-life care and utilization of medical treatments, all in a non-pressured setting. In addition, when a patient is incapable of decision making or communication, an advance directive can provide guidance as to the wishes of the patient.

At the 2014 Palliative Care Symposium, co-sponsored by the American Society of Clinical Oncology we learned there is a growing body of evidence that early conversations about advance care planning is associated with positive outcomes at the end of life. For that reason, the Cancer Care Center established a goal in the last quarter of 2014, to explain to every new patient the value of advance directives. As a result of our efforts, 100% of our new patients have taken advantage of this quality improvement initiative. Today, establishing advanced directives continues to be an integral component of the services we provide.
In adherence with the quality and standards set by the American College of Surgeons and the Commission on Cancer, we randomly review at least 10 percent of all cancer cases at the Bristol Hospital Cancer Care Center.

All charts are reviewed to assess:
- The accuracy of the cancer stage as per the American Joint Commission on Cancer (AJCC)
- That the appropriate therapy was chosen based upon the National Comprehensive Cancer Network (NCCN) Guidelines
- Compliance with the NCCN Guidelines in all aspects of care

Our findings exhibit that we meet national standards. We are in 100 percent compliance for each and every case reviewed.
Cancer Care Center
affiliated with Yale-New Haven Cancer Network