

annual report 2019

*"Once you choose*

*Hope*

*anything is possible."*

*-Christopher Reeve*



**SEBY B. JONES REGIONAL  
CANCER CENTER**

of

**WATAUGA MEDICAL CENTER**



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## Cancer Committee

The Cancer Committee is a multidisciplinary committee comprised of, but not limited to, representatives from surgery, medical oncology, radiation oncology, diagnostic radiology, pathology, administration, nursing, social services, cancer registry and quality assurance. The Cancer Committee is responsible for establishing the quality improvement priorities of the cancer program.

### Members

Damon Anagnos, MD, Plastic Surgeon	Beth Miller, Senior Director, Clinical Support Services
Camile Andrews, DO, Obstetrics & Gynecology	Betty Mize, CTR, Cancer Registry
Anne-Corinne Beaver, MD, Surgeon, Cancer Liaison Physician	Donna Owens, Clinical Research RN
Kim Bianca, MSN, RN, Program Administrator	Bryan Payne, Director of Quality
Beverly Bowen, Pharmacist	Romualdo Talento, MD, Pathologist
Melanie Childers, Director of Pastoral Care	Paul Saconn, MD, Radiation Oncologist
Timothy Dailey, MD	Debbie Shook, RN, Director of Oncology Nursing
Angie Del Nero, MSW, Cancer Center Social Worker	Anna L. Sobol, MD, Chair, Medical Oncologist
Robin Fox, RN, Director of Care Management	Tony Schlake, MD, Urologist
Amy Freeman, MEd, CTR, Cancer Registry	Vicki Stevens, Director of Marketing
Patti Henry, FNP, Palliative Care	Richard Stork, MD, Anesthesiologist
Patrick Holmes, MD, Radiologist	Khurram Tariq, MD, Medical Oncologist
Marjorie Hrozencik, RN, Clinical Trials Nurse	Douglas Trate, MD, Gastroenterologist
Stephanie Johnson, NP-C, Cancer Center	Jillian Tremblay, PA-C, Cancer Center
Candy Jones, RN, Community Outreach	Kevin Wolfe, MD, Pulmonary Medicine
Tate Maddox, MD, ENT	Paul Young, RN, OCN, Oncology Nurse Navigator
Eddy Maillot, Senior Director, Clinical Service Lines	

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## Cancer Resource Alliance

The Cancer Resource Alliance (CRA) is a comprehensive team of healthcare professionals, business partners, cancer caregivers and cancer survivor volunteers. The Alliance was established in 2006 as an outreach arm of Seby B. Jones Regional Cancer Center in Watauga County, the American Cancer Society and the Rural Healthcare Initiative of Avery County. The CRA presence in Watauga and Avery counties is further committed to helping Seby B. Jones Regional Cancer Center qualifying patients and their families with support services and programs.

### Board

Randy (Doc) McCoy, Chairperson  
Angie Del Nero, Treasurer  
Betty Mize, Secretary  
Mark Saia, Community Member  
Trina McCoy, Community Member  
Kathy Rimmer, Community Member  
Irene Sawyer, Community Member  
Kay Decherd, Community Member  
Candy Jones, Community Outreach  
Debbie Shook, Cancer Center Administrator

### Advisory Committee

Randy (Doc) McCoy, Chairperson  
Angie Del Nero, Treasurer  
Betty Mize, Secretary  
Debbie Shook, Cancer Center Administrator  
Candy Jones, Community Outreach  
Lynette Hartley, Cancer Center RN  
Mary Morgan, Community Member  
Joe Sinford, Community Member  
Joanie Venza, Community Member

# Watauga Medical Center's Seby B. Jones Regional Cancer Center Earns National Accreditation from the Commission on Cancer of the American College of Surgeons

The Commission on Cancer (CoC), a quality program of the American College of Surgeons (ACS) has granted **Three-Year Accreditation** to the cancer program at Seby B. Jones Regional Cancer Center of Watauga Medical Center. To earn voluntary CoC accreditation, a cancer program must meet 34 CoC quality care standards, be evaluated every three years through a survey process, and maintain levels of excellence in the delivery of comprehensive patient-centered care.

As a CoC-accredited cancer center, Seby B. Jones Regional Cancer Center (SBJRCC) takes a multidisciplinary approach to treating cancer as a complex group of diseases that requires consultation among surgeons, medical and radiation oncologists, diagnostic radiologists, pathologists, and other cancer specialists. This multidisciplinary partnership results in improved patient care.

The CoC Accreditation Program provides the framework for SBJRCC to improve its quality of patient care through various cancer-related programs that focus on the full spectrum of cancer care including prevention, early diagnosis, cancer staging, optimal treatment, rehabilitation, life-long follow-up for recurrent disease, and end-of-life care. When patients receive care at a CoC facility, they also have access to information on clinical trials and new treatments, genetic counseling, and patient centered services including psycho-social support, a patient navigation process, and a survivorship care plan that documents the care each patient receives and seeks to improve cancer survivors' quality of life.

Like all CoC-accredited facilities, SBJRCC maintains a cancer registry and contributes data to the National Cancer Data Base (NCDB), a joint program of the CoC and American Cancer Society. This nationwide oncology outcomes database is the largest clinical disease registry in the world. Data on all types of

cancer are tracked and analyzed through the NCDB and used to explore trends in cancer care. CoC-accredited cancer centers, in turn, have access to information derived from this type of data analysis, which is used to create national, regional, and state benchmark reports. These reports help CoC facilities with their quality improvement efforts.

The American Cancer Society estimates that more than 1.7 million cases of cancer will be diagnosed in 2018. There are currently more than 1,500 CoC-accredited cancer programs in the U.S. and Puerto Rico, and these facilities diagnose and/or treat more than 70 percent of all newly diagnosed patients with cancer. When cancer patients choose to seek care locally at a CoC-accredited cancer center, they are gaining access to comprehensive, state-of-the-art cancer care close to home. The CoC provides the public with information on the resources, services, and cancer treatment experience for each CoC-accredited cancer program through the CoC Hospital Locator at <https://www.facs.org/search/cancer-programs>.

Established in 1922 by the American College of Surgeons, the CoC is a consortium of professional organizations dedicated to improving patient outcomes and quality of life for cancer patients through standard setting, prevention, research, education, and the monitoring of comprehensive, quality care. Its membership includes Fellows of the American College of Surgeons. For more information, visit: [www.facs.org/cancer](http://www.facs.org/cancer).



# Then and Now: Breast cancer detection and treatment in the High Country

by Sarah Pinnix

Few things in life are more unifying than a breast cancer diagnosis. Of course, the diagnosis itself is devastating, but it also has a way of bringing together family, friends and medical staff in unexpected and life-changing ways.

At Appalachian Regional Healthcare System (ARHS), patients have come to expect and appreciate the family-first team approach used to diagnose and treat breast cancer in the High Country. Thanks to advanced technology, a collaborative medical community, innovative surgical techniques, and a first-class regional cancer center located right here in our backyard, patients are choosing now more than ever to stay in our community for their cancer treatment.

1993



## 1993: Regional Cancer Center is established

Watauga Medical Center established the Seby B. Jones Regional Cancer Center in Boone,

bringing cancer care – previously unavailable in the High Country – close to home. Patients and their caregivers are seen as family by the highly-trained and compassionate staff. Since its founding, the Cancer Center has continually improved access and quality of care.

2002



## 2002: Wilma Redmond Fund begins providing mammograms for local women

The Wilma Redmond Mammography Fund is dedicated to the memory of Wilma Redmond, who for more than 20 years managed Watauga Medical Center's Imaging Department and courageously fought her own breast cancer. When she died in 2002, a fund was established by Watauga Medical Center Foundation (currently Appalachian Regional Healthcare Foundation). The fund provides free first-time mammograms for uninsured women 35 years and older.

2003

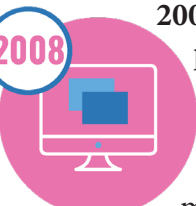


## 2003: Stereotactic breast biopsy is introduced at Watauga Medical Center

A breast biopsy obtains a sample of breast tissue in order to test for signs of breast cancer or other disorders.

Stereotactic is a clinical word for a technique using a mammography machine to precisely locate where the sample should be taken. In 2015, The Wilma Redmond Breast Center, located in the Outpatient Imaging and Lab Center, began performing stereotactic breast biopsies. Stereotactic breast biopsy was upgraded in 2015.

2008



## 2008: The first digital mammogram is performed

Breast diagnostics advanced even further in the High Country with the addition of digital mammography. Instead of mammograms producing x-ray film, a digital image is created that can be manipulated in order to see more clearly.

2015



## 2015: 3D Mammography comes to the Wilma Redmond Breast Center

With a traditional mammogram, radiologists were tasked with reading the complexities of the breast in a flat image. 3D Mammography builds images into very thin layers, or slices, making details more clear and unobstructed by overlapping tissue.

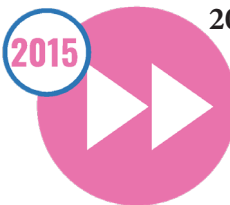
Because 3D Mammography allows the radiologist to better assess the size, location and shape of any abnormal tissue, more cancers are found at earlier, more treatable stages. The Hologic 3D mammography technology accounts for a 41% increase in the detection of invasive breast cancers and a 40% decrease in a callback rate for a false positive finding.

Even so, some insurance companies still only cover the standard mammogram. Because ARHS felt so strongly about making the latest diagnostic technology available to all of our community, the healthcare system decided to perform all mammograms with 3D technology and not to ask patients to pay out of pocket for any additional costs not covered by their insurance.



**2015: Local genetic testing expanded to provide an extensive panel of genetic mutations to be checked**

Cancer genetics counseling and testing is available to our patients. At the no-cost initial visit, patients can meet with a genetic counselor who reviews the patient's personal and family history, discusses the risks and benefits of genetic testing, and provides support in healthcare decision making. Further testing and evaluation are also available.



**2015: The Wilma Redmond Breast Center institutes a fast-track breast program and a breast navigation team**

Patients with an abnormal breast screening are sent to a fast track for surgical consultation so doctors can diagnose cancer early and immediately begin to treat it. The breast navigator, Gloria Payne, RTRM, walks patients through the process of receiving abnormal results, scheduling additional imaging examinations, and sending patients for surgical consultation.



**2018: The Together We Fight collaborative coordinates many local events for maximum impact**

The Together We Fight collaborative includes community events and fundraisers such as Tanger Outlets PINK campaign, Doc's Rocks Mining for a Purpose, Pink Day at ARHS, CrossFit event Kilograms for Mammograms, and the High Country Breast Cancer Foundation's Walk/Run for Breast Cancer.



**2018: Hidden Scar® Breast Cancer Surgery is introduced at Watauga Medical Center**

Hidden Scar® is an advanced surgical technique used to hide the scars of cancer surgery as best as possible with an oncoplastic approach. If surgery is recommended to remove breast cancer, patients can take comfort in

the fact that Watauga Medical Center is one of only a few hospitals in North Carolina to offer Hidden Scar® Breast Cancer Surgery. Both Dr. Anne-Corinne Beaver and Dr. Paul Dagher of Watauga Surgical Group are recognized as Hidden Scar® Trained Surgeons for Hidden Scar® Breast Cancer Surgery.



**2018: Breast MRI is used for advanced diagnostics**

Breast MRI provides advanced diagnostics for detecting breast cancer, other breast abnormalities, or routine breast screening. This is another important tool in detecting breast cancer early and accurately.



**2018: Progressive Anesthesia is performed for Breast Cancer Surgery at Watauga Medical Center**

The Anesthesia team at Watauga Medical Center began routinely performing ultrasound-guided pectoralis muscle blocks for better pain control during and after surgery. This allows fewer inhalational agents and fewer opioid pain medicines to be used, which is believed to improve outcomes— especially for cancer patients.



**2019: Paxman Scalp Cooling technology available**

Thanks to generous donors, Paxman scalp cooling is available to qualifying patients receiving chemotherapy treatments for solid tumor cancer. It could help to prevent hair loss caused by certain chemotherapy drugs. The goal is to help patients look and feel their best while fighting a difficult battle.

Appalachian Regional Healthcare System has made significant advancements in diagnosis and treatment of breast cancer. To learn more about ALL we have to offer, visit [apprhs.org/breastcare](http://apprhs.org/breastcare).



## Seeing me and not my cancer – Donna Sluder’s Story

by Celia Pennington

Nearly a year ago, Donna Sluder received some exciting news. She was going to be a grandmother. Her youngest daughter was visiting from California, so the family decided to have a baby shower even though it was early in the pregnancy. It snowed that day, and Sluder remembers thinking that despite the snow, the baby shower was wonderful.

“I couldn’t believe how blessed I was to have so many amazing people in my life already, with a new one on the way,” she recounts.

Life was good. And then a few months later, that changed.

### A life-changing diagnosis

“It all started with a suspicious red spot on my breast. I went to the doctor believing that it couldn’t be anything serious, and that I was just being careful. I was wrong. I was diagnosed with breast cancer. I ended up going straight from the doctor to the surgeon to get a biopsy, then to get a mammogram.”

“When they tell you that you have cancer, it’s like you switch to autopilot mode. A fog settles over you, and you just go through the motions. You do what the doctors tell you to do, but for me it didn’t really click until they told me that I needed to have chemotherapy,” she said.

Sluder, whose three children lost their father when they were young, did not want them to go through the trauma and heartbreak of losing another parent.

“I wasn’t ready to say goodbye to them. I wasn’t ready to believe that I wouldn’t be there to see my grandchild grow up. I wasn’t ready to lose myself to all the harsh treatments that cancer required.”

### Anticipating the side effects of chemotherapy

As if cancer itself isn’t enough of a trial to endure, one of the cruelest side effects of chemotherapy is hair loss.

Chemotherapy drugs used to treat solid tumor cancer work by targeting all of the body’s rapidly dividing cells. Since hair is the second fastest dividing cell in the body, hair loss is an inevitable side effect of chemotherapy.



Donna Sluder

After a meeting with Medical Oncologist Dr. Anna Sobol at the Seby B. Jones Regional Cancer Center, Sluder learned about the new PAXMAN Scalp Cooling System that would be arriving around the time she was scheduled to receive her first chemotherapy treatment.

This technology allows some chemotherapy patients to keep most or all of their hair, and Dr. Sobol’s news gave her a measure of hope.

Administered through an inner and outer scalp cap during each chemotherapy treatment, Paxman technology lowers the temperature of the scalp by a few degrees before, during, and after treatment. As a result, the three-stage cooling process reduces the blood flow to the hair follicles, minimizing hair loss.

### Holding on to her confidence, and her privacy

“I wanted to feel like I could hold onto some part of me through all of this,” she said.

Electing to try the new technology, Sluder arrived 30 minutes early to each of her chemotherapy treatments to allow time for the cap to be applied and the cooling to take effect. She also spent an extra hour and a half wearing the cap at the end of the treatment. Though she admits there was some discomfort in the first 15 minutes while adjusting to the cold and the tightness of the silicon cap, her body adapted.

*The results were what she had hoped for. She was able to keep 75% of her hair through chemotherapy. And she was able to keep her privacy.*

To read the complete story, visit [apprhs.org/sluder](http://apprhs.org/sluder)

# TOGETHER WE FIGHT

## *A Community United*

Prevent | Diagnose | Treat | Support | Empower

October is National Breast Cancer Awareness Month. For the second year, Appalachian Regional Healthcare System (ARHS), along with many other High Country businesses and organizations, adopted a *Together We Fight* approach to breast cancer. The collaborative approach took shape after several community organizations discussed ways to join forces to support breast cancer patients on a local level. The *Together We Fight* collaborative included the following community events and fundraisers, which raised over **\$90,132** for local breast cancer patients.

### Tanger Outlets PINK Campaign

Tanger Outlets in Blowing Rock hosted a local food truck festival and PINK campaign launch party on September 28. In addition

to the food truck festival, the event featured a sidewalk sale, live entertainment, kid friendly activities and an opportunity to purchase PINKStyle cards.



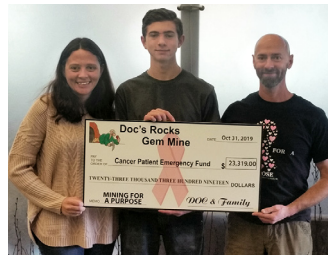
### ARHS Pink Day

ARHS employees, volunteers and community members gathered at Cannon Memorial Hospital and Watauga Medical Center on Friday, October 11 for the 16th Annual Pink Day celebration. Participants were encouraged to wear pink, purchase raffle tickets, schedule a mammogram, and hear remarks from a breast cancer survivor. This year we introduced *Bras for a Cause* and had 11 entries. Harmony Center for Woman won with the bra *Every Woman is a Wonderwoman*. Pink Day raised **\$2,155** through raffle items, donations and *Bras for a Cause*, 100 percent of which supports the Cancer Resource Alliance to help purchase Thanksgiving meals for cancer patients and their families.



### Doc's Rocks Gem Mine "Mining for a Purpose"

On October 31, Randy and Trina McCoy, long-time owners of Doc's Rocks Gem Mine, along with their son, D'Artagnan, presented Seby B. Jones Regional Cancer Center, with a check for **\$23,319** for the Cancer Patient Emergency Fund. The donation is the result of their year-long fundraising efforts, as well as from their



"Mining for a Purpose" event, held in October. The McCoy's donate 100 percent of the proceeds from the event. Since 2014, the McCoy's have donated more than **\$104,900** to support the Cancer Center.

### Kilograms for Mammograms

On October 12, CrossFit Boone, Seven Seals CrossFit, Ashe CrossFit and CrossFit Postal worked together to support the cause through a new program called Kilograms for Mammograms. This fitness oriented fundraiser celebrated survivors and helped remove the cost barrier for those in need of a mammogram by raising **\$4,658** for the Wilma Redmond Mammography Fund.



### High Country Walk/Run for Breast Cancer

The second annual High Country Walk/Run for Breast Cancer took place on October 26 in Blowing Rock, NC. The event is hosted by the High Country Breast Cancer Foundation and raised over **\$60,000**,



100 percent of the funds raised were used to provide for the needs of breast cancer patients, survivors and their families in the High Country.

# Community Outreach

Dates of Service 1/1/19 - 12/31/19

## Prevention Education

Education and prevention are essential elements in the ongoing fight against cancer. The Community Outreach team works to educate and provide screenings in the High Country to improve cancer awareness and early detection. Some of the activities used to reach that goal included:

- 19 Breast and 75 Lung Cancer screenings (94 attendees)
- 18 community health events and 23 AppFaith Health visits to partnering congregations providing information about cancer prevention, healthy lifestyles, nutrition, physical activity, smoking cessation and information about Seby B. Jones Regional Cancer Center (1,144 attendees)
- *Sun Safety* cancer awareness program was provided to 5th grade students in Watauga County. Students received sunglasses, chapstick and information to help protect the whole family (336 attendees).
- Hosted “*Pink Day*” event to promote Breast Cancer Awareness Month (100 attendees; 9 mammograms scheduled during the event)
- 5 education talks with seniors in Watauga County about nutrition, healthy lifestyles and cancer prevention (Average attendance, 14)
- 2nd Grade Health Fair, 5th Grade Sun Safety, Back2School fairs (all grades), Avery Healthy Halloween (all grades), 9th Grade Health Fairs and Avery YMCA Healthy Kids (all ages) (2,133 attendees)
- **CoC Standard 4.1 Youth Tobacco Initiation Prevention Educational Program**  
This program was presented to 349 Healthful Living students during the 9th Grade Health Fairs at Watauga High School on April 17, 2019 and November 7, 2019.

## Community Health Screenings

### Smoking Cessation Program

Community and employee education using QuitlineNC and counseling

QuitlineNC November 1, 2018 - October 31, 2019

Registered callers: Avery County 36, Watauga County 44

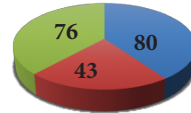
Fax referrals: ARHS 43 (7 accepted services)

*One-on-One Counseling*

ARHS Employee Wellness Program: 1 counseled and relapsed

Lung Cancer Screening Program: 75 counseled

### 199 Smoking Cessation Education



80 Registered callers

43 Fax referrals

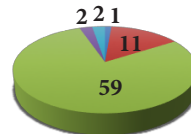
76 One-on-One counseling

### CoC Standard 4.2 Lung Cancer Screening Program

November 1, 2018 - October 31, 2019

Participants of this program have a Low-Dose CT (LDCT) scan annually for three years unless further testing is necessary.

### 75 LDCT scans completed



1 Lung Rads 0

11 Lung Rads 1 Negative

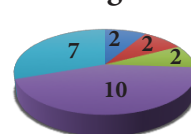
59 Lung Rads 2 Benign Appearance/Behavior

2 Lung Rads 3 Probably Benign

2 Lung Rads 4 A/B Suspicious

### CoC Standard 4.2 Breast Cancer Screening Program

#### Mammograms Scheduled at Community Events



### 23 Mammograms Scheduled (19 Completed)

2 No show

2 Appointments pending

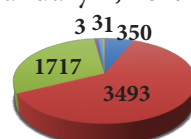
2 Need Additional Imaging Evaluation

10 Negative

7 Benign

### Screening and Diagnostic Mammograms

January 1, 2019 - November 30, 2019



### 5567 Total Screening Mammograms

350 Need additional imaging evaluation

3493 Negative

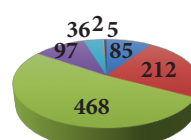
1717 Benign

3 Probably benign

3 Suspicious for malignancy

1 Highly suggestive of malignancy

### 905 Total Diagnostic Mammograms



85 Need additional imaging evaluation

212 Negative

468 Benign

97 Probably benign

36 Suspicious for malignancy

2 Highly suggestive of malignancy

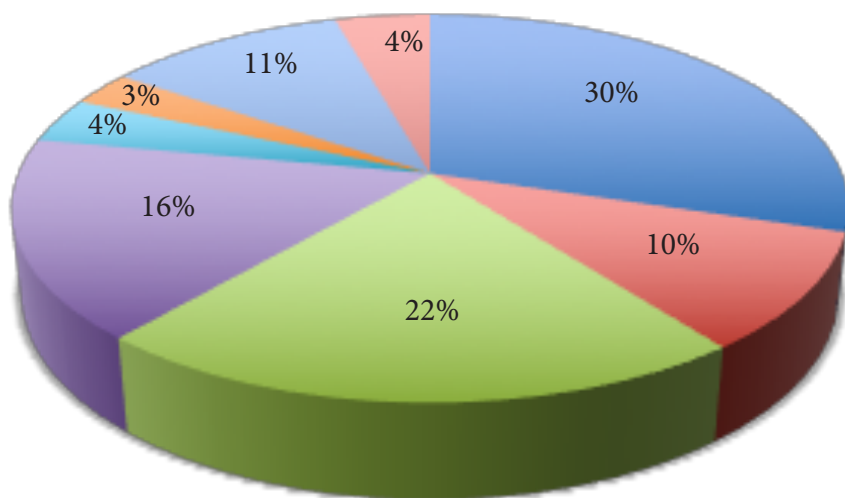
5 Known biopsy, proven cancer



## Community Partnership

### Cancer Patient Emergency Fund

10/01/18- 9/30/19



Transportation	\$24,850.58
Medication	\$8,184.67
Utilities	\$18,143.45
Housing	\$13,879.36
Medical Supplies	\$3,161.25
Nutritional Supplements	\$2,404.13
Medical Care	\$9,191.13
Miscellaneous	\$3,658.01
<b>Total</b>	<b>\$83,472.58</b>

### CRA Funds

10/01/18 - 9/30/19

*In FY 2019, CRA funds were used in support of:*

Radiance  
 Thanksgiving Dinners  
 THRIVE  
 Pink Day  
 Lighting of the Tree  
 Patient Celebration at Chetola  
 Fly Fishing Retreats  
 Yoga  
 Breast Cancer Fund  
 Graduation Boxes

*Learn more about these programs at [apprhs.org/cra](http://apprhs.org/cra)*

### Volunteers

10/01/18 - 9/30/19

**16** Volunteers clocked a total of **1809** hours

Dolores Amoroso	Janice Johnson
Rebecca Battista	Mary Lee Jones
John Barbour	Sandra Moretz
Della Critcher	Ginny Nilles
Monica Gault	Rose Marie Oldfield
Dodie Glowa	Mike Randall
Sandy Hansen	Barbara Robinson
Harold Hedge	Dema Spann

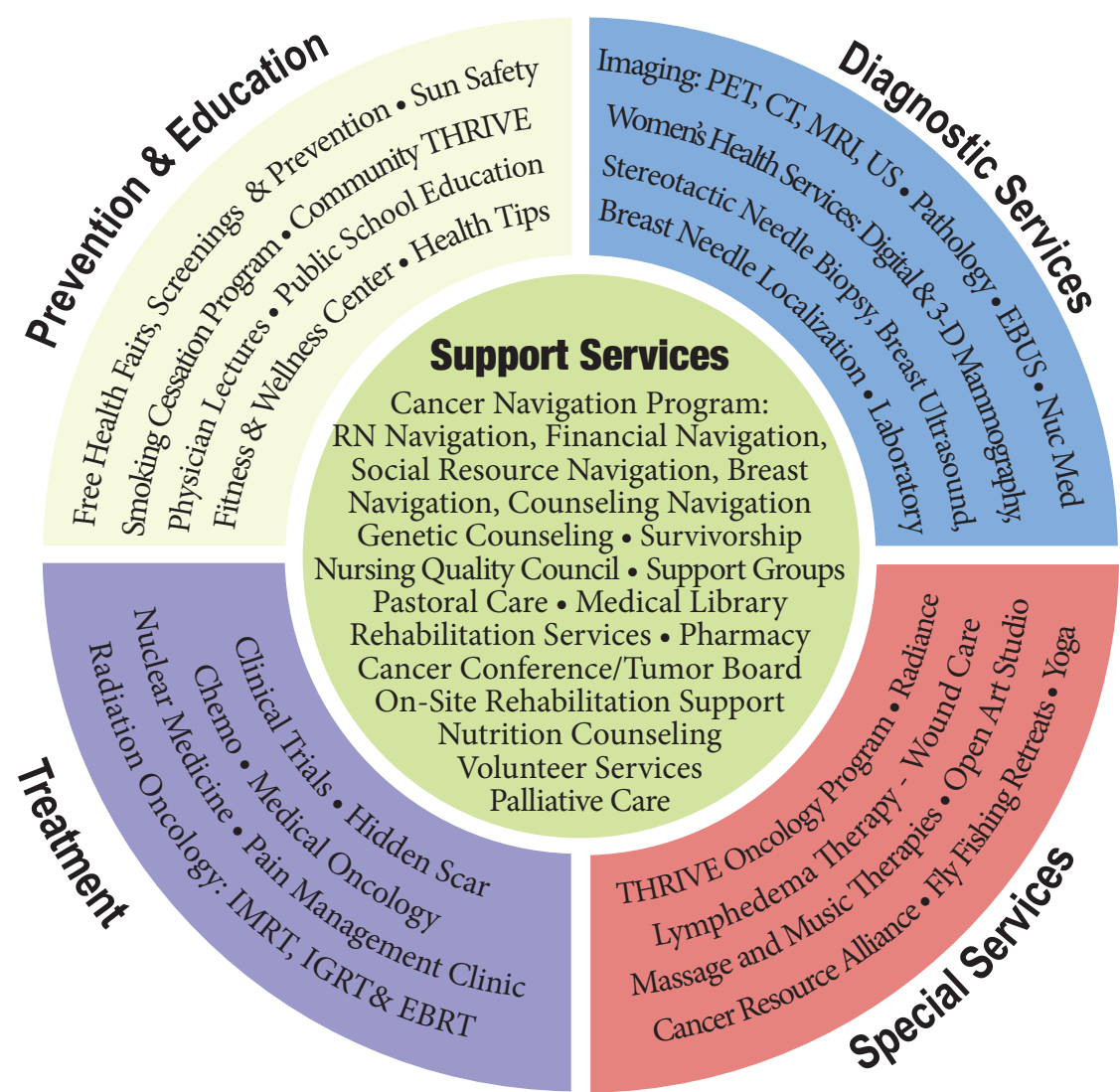
### Community Giving

Thank you to all clubs, organizations and individuals that raised money for the Cancer Center this year. Pretty In Pink at Beech Mountain Club and Giving Tuesday raised **\$32,541** for Paxman Scalp Cooling. Blowing Rock LGA, Grover Robbins Golf Tournament at Linville Ridge Country Club and Six Pence Pub raised **\$60,290** for the Cancer Patient Emergency Fund. Grandfather Golf and Country Club LGA and Land Harbor LGA raised **\$41,410** for the Avery County Cancer Emergency Fund. Pink Day, Bras for a Cause and Mining for a Purpose raised **\$25,474** for the Cancer Resource Alliance. Blue Ridge Energy raised **\$4,459** for the Cancer Resource Alliance Breast Cancer Fund. Kilograms for Mammograms raised **\$4,658** for the Wilma Redmond Mammography Fund. Lighting of the Tree and ARHS Employee Giving raised **\$1,888.87** for the Cancer Center. Together, these organizations and events raised **\$170,720.87**.



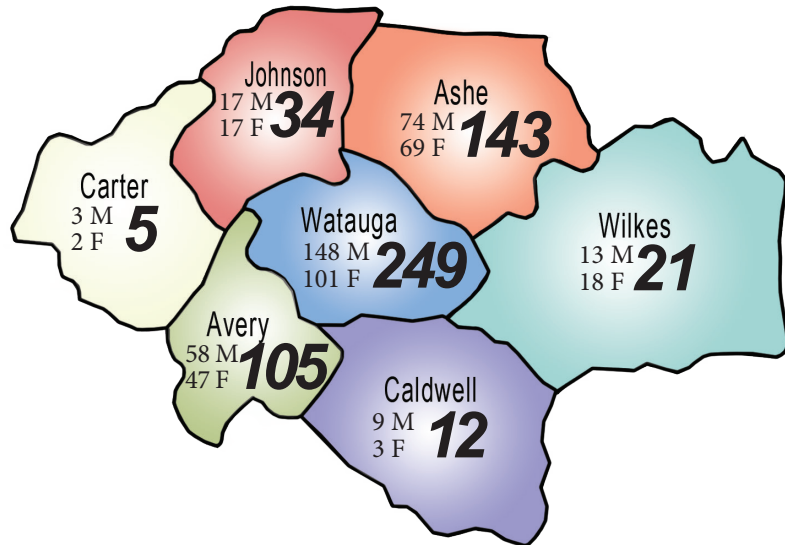
*Blue Ridge Energy Check Donation*

# Cancer Center at a Glance



## New Cancer Cases Diagnosed at Watauga Medical Center

Dates of Service 1/1/18 – 5/31/19

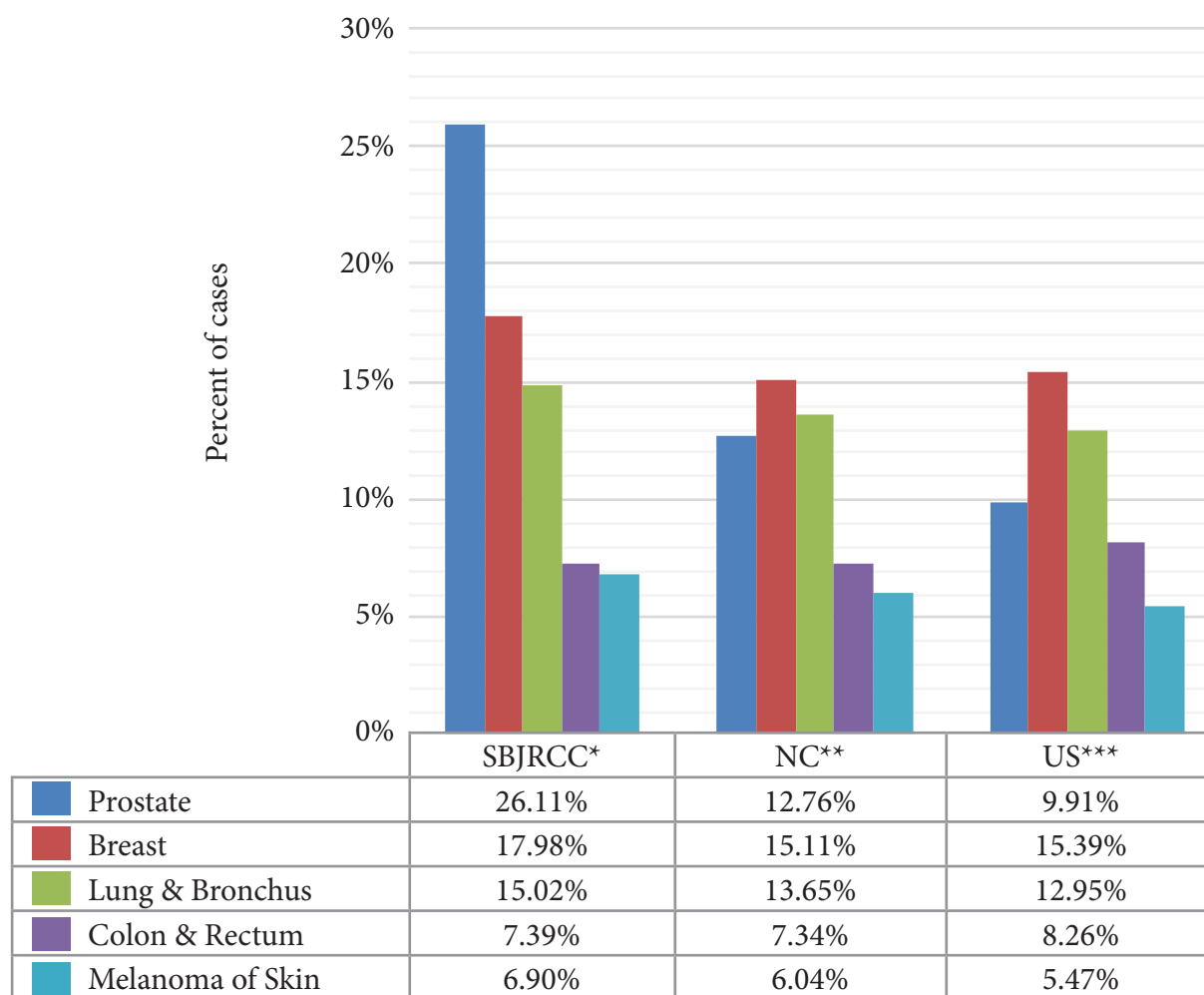




## Top 5 Sites - Local, State & National Comparison

*Prostate, Breast, Lung, Colon/Rectum, & Melanoma of the Skin*

### Top 5 Sites - Local, State & National Comparison



	SBJRCC*	NC**	US***
Prostate	106	7490	174,650
Breast	73	8870	271,270
Lung & Bronchus	61	8010	228,150
Colon & Rectum	30	4310	145,600
Melanoma of Skin	28	3550	96,480

\* Seby B. Jones Regional Cancer Center Registry - 2018 Analytic Cases

\*\* American Cancer Society estimated new 2019 cancer cases in NC: from 2019 Cancer Facts & Figures

\*\*\* American Cancer Society estimated new 2019 cancer cases in US: from 2019 Cancer Facts & Figures

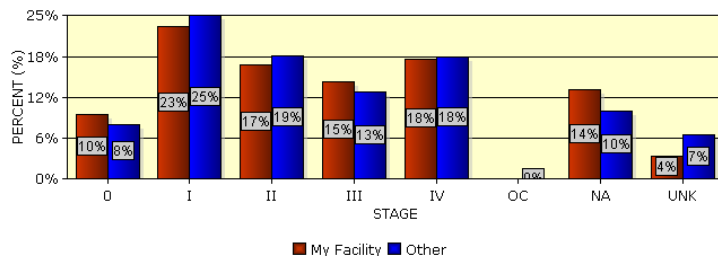
# All Cancer Comparison Report



AMERICAN COLLEGE OF SURGEONS  
Inspiring Quality:  
Highest Standards, Better Outcomes

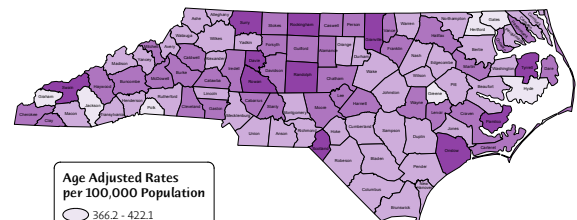
NCDB  
BENCHMARK REPORTS

Stage of All Sites Cancer Diagnosed in 2007 to 2016  
Watauga Medical Center, Boone NC  
vs. Community Cancer Program Hospitals in All States  
All Diagnosis Types - Data from 398 Hospitals



	0	I	II	III	IV	OC	NA	UNK
My Facility	10%	23%	17%	15%	18%		14%	4%
Other	8%	25%	19%	13%	18%	0%	10%	7%

## North Carolina All Cancer Incidence Rates 2012 - 2016



Age Adjusted Rates per 100,000 Population  
 366.2 - 422.1  
 422.2 - 481.8  
 481.9 - 512.0  
 512.1 - 585.7

NC Rate = 481.9  
US Rate (2011-2015) = 449.2

STATE CENTER FOR HEALTH STATISTICS

Note: Information is subject to change as files are updated.  
March 2019

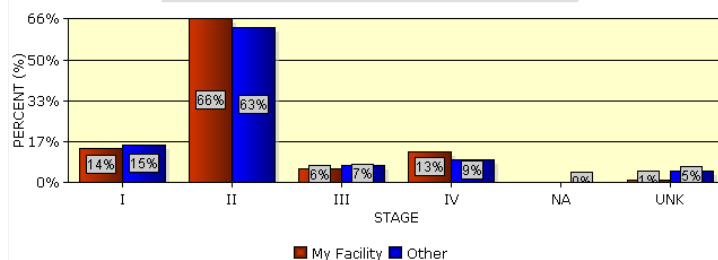
# Prostate Cancer Comparison Report



AMERICAN COLLEGE OF SURGEONS  
Inspiring Quality:  
Highest Standards, Better Outcomes

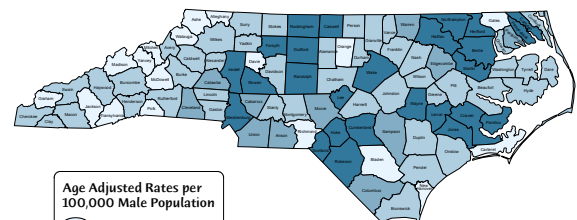
NCDB  
BENCHMARK REPORTS

Stage of Prostate Cancer Diagnosed in 2007 to 2016  
Watauga Medical Center, Boone NC  
vs. Community Cancer Program Hospitals in All States  
All Diagnosis Types - Data from 394 Hospitals



	I	II	III	IV	NA	UNK
My Facility	14%	66%	6%	13%		1%
Other	15%	63%	7%	9%	0%	5%

## North Carolina Prostate Cancer Incidence Rates 2012 - 2016



Age Adjusted Rates per 100,000 Male Population  
 62.1 - 93.7  
 93.8 - 115.8  
 115.9 - 122.0  
 122.1 - 139.1

NC Rate = 115.9  
US Rate (2011-2015) = 109.0

STATE CENTER FOR HEALTH STATISTICS

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March 2019

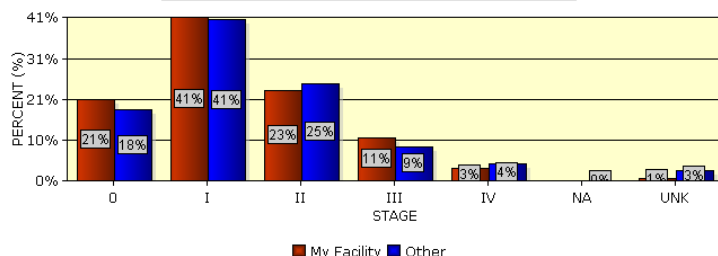
# Breast Cancer Comparison Report



AMERICAN COLLEGE OF SURGEONS  
Inspiring Quality:  
Highest Standards, Better Outcomes

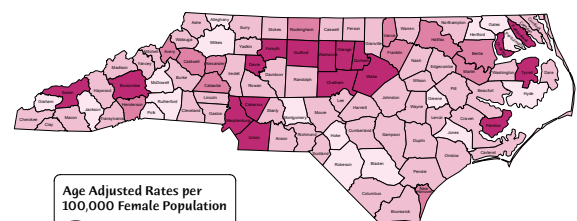
NCDB  
BENCHMARK REPORTS

Stage of Breast Cancer Diagnosed in 2007 to 2016  
Watauga Medical Center, Boone NC  
vs. Community Cancer Program Hospitals in All States  
All Diagnosis Types - Data from 397 Hospitals



	0	I	II	III	IV	NA	UNK
My Facility	21%	41%	23%	11%	3%		1%
Other	18%	41%	25%	9%	4%	0%	3%

## North Carolina Female Breast Cancer Incidence Rates 2012 - 2016



Age Adjusted Rates per 100,000 Female Population  
 98.1 - 131.8  
 131.9 - 161.7  
 161.8 - 169.3  
 169.4 - 194.7

NC Rate = 161.8  
US Rate (2011-2015) = 124.7

STATE CENTER FOR HEALTH STATISTICS

Note: Information is subject to change as files are updated.  
March 2019



# Annual Report of Cancer Registry Data

Seby B. Jones Regional Cancer Center of Watauga Medical Center

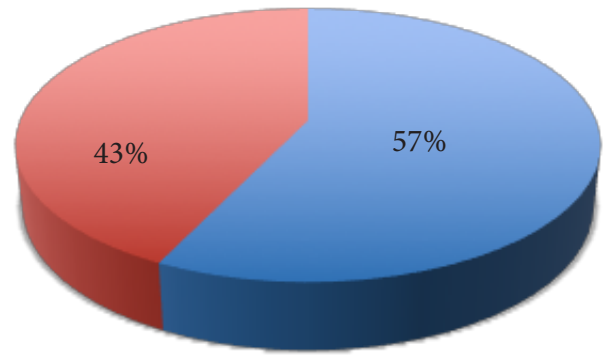
## 2018 Summary by Body System, Gender, Class, Status and AJCC Stage Report

Primary Site	Total (%)	Male	Female	Analytic	Alive	Expired	Stage 0	Stage I	Stage II	Stage III	Stage IV	Stage Unknown or N/A
<b>ORAL CAVITY &amp; PHARYNX</b>	10 (2.5%)	9	1	10	9	1	0	3	3	0	4	0
Tongue	3 (0.7%)	3	0	3	3	0	0	1	1	0	1	0
Salivary Glands	1 (0.2%)	1	0	1	1	0	0	0	0	0	1	0
Gum & Other Mouth	1 (0.2%)	1	0	1	1	0	0	0	0	0	1	0
Tonsil	3 (0.7%)	2	1	3	3	0	0	2	1	0	0	0
Oropharynx	2 (0.5%)	2	0	2	1	1	0	0	1	0	1	0
<b>DIGESTIVE SYSTEM</b>	57 (14.0%)	32	25	57	38	19	4	11	10	11	13	5
Esophagus	5 (1.2%)	5	0	5	3	2	0	0	1	2	1	1
Stomach	5 (1.2%)	2	3	5	5	0	0	0	1	2	0	0
Colon Excluding Rectum	24 (5.9%)	12	12	24	19	5	3	7	3	3	4	3
Cecum	5	2	3	5	4	1	0	1	1	0	3	0
Appendix	2	1	1	2	2	0	0	0	0	1	0	0
Ascending Colon	4	2	2	4	3	1	0	2	2	0	0	0
Transverse Colon	1	0	1	1	1	0	0	0	0	0	0	1
Sigmoid Colon	10	6	4	10	8	2	3	4	0	1	1	1
Large Intestine, NOS	2	1	1	2	1	1	0	0	0	1	0	1
Rectum & Rectosigmoid	3 (0.7%)	1	2	3	3	0	0	0	0	3	0	0
Anus, Anal Canal & Anorectum	4 (1.0%)	2	2	4	3	1	1	1	1	1	0	0
Liver & Intrahepatic Bile Duct	5 (1.2%)	4	1	5	3	2	0	2	1	0	1	1
Liver	4	3	1	4	2	2	0	1	1	0	1	1
Intrahepatic Bile Duct	1	1	0	1	1	0	0	1	0	0	0	0
Other Biliary	1 (0.2%)	0	1	1	0	1	0	0	0	0	1	0
Pancreas	10 (2.5%)	6	4	10	2	8	0	1	3	0	6	0
<b>RESPIRATORY SYSTEM</b>	60 (14.8%)	30	30	60	21	39	1	5	3	12	36	4
Larynx	5 (1.2%)	4	1	5	4	1	1	1	0	0	3	0
Lung & Bronchus	55 (13.5%)	26	29	55	17	38	0	4	3	12	33	4
<b>SOFT TISSUE</b>	1 (0.2%)	0	1	1	0	1	0	0	0	0	0	0
Soft Tissue (including Heart)	1 (0.2%)	0	1	1	0	1	0	0	0	0	0	0
<b>SKIN EXCLUDING BASAL &amp; SQUAMOUS</b>	25 (6.2%)	18	7	25	24	1	10	11	3	1	0	0
Melanoma -- Skin	25 (6.2%)	18	7	25	24	1	10	11	3	1	0	0
<b>BREAST</b>	68 (16.7%)	1	67	68	66	2	11	43	8	4	2	0
Breast	68 (16.7%)	1	67	68	66	2	11	43	8	4	2	0
<b>FEMALE GENITAL SYSTEM</b>	18 (4.4%)	0	18	18	16	2	0	8	4	2	0	3
Cervix Uteri	5 (1.2%)	0	5	5	4	1	0	1	4	0	0	0
Corpus & Uterus, NOS	10 (2.5%)	0	10	10	9	1	0	6	0	2	0	1
Corpus Uteri	9	0	9	9	9	0	0	6	0	2	0	1
Uterus, NOS	1	0	1	1	0	1	0	0	0	0	0	0
Ovary	2 (0.5%)	0	2	2	2	0	0	1	0	0	0	1
Other Female Genital Organs	1 (0.2%)	0	1	1	1	0	0	0	0	0	0	1
<b>MALE GENITAL SYSTEM</b>	89 (21.9%)	89	0	89	86	3	0	19	43	12	10	5
Prostate	86 (21.2%)	86	0	86	83	3	0	19	42	12	10	3
Testis	1 (0.2%)	1	0	1	1	0	0	0	1	0	0	0
Penis	2 (0.5%)	2	0	2	2	0	0	0	0	0	0	2
<b>URINARY SYSTEM</b>	30 (7.4%)	22	8	30	25	5	0	5	2	1	5	17
Urinary Bladder	23 (5.7%)	16	7	23	20	3	0	3	2	0	1	17
Kidney & Renal Pelvis	6 (1.5%)	6	0	6	5	1	0	2	0	1	3	0
Ureter	1 (0.2%)	0	1	1	0	1	0	0	0	0	1	0
<b>BRAIN &amp; OTHER NERVOUS SYSTEM</b>	1 (0.2%)	1	0	1	0	1	0	0	0	0	0	0
Brain	1 (0.2%)	1	0	1	0	1	0	0	0	0	0	0
<b>ENDOCRINE SYSTEM</b>	7 (1.7%)	1	6	7	7	0	0	6	0	0	0	1
Thyroid	7 (1.7%)	1	6	7	7	0	0	6	0	0	0	1
<b>LYMPHOMA</b>	13 (3.2%)	8	5	13	9	4	0	2	2	6	1	2
Hodgkin Lymphoma	1 (0.2%)	1	0	1	1	0	0	0	0	1	0	0
Non-Hodgkin Lymphoma	12 (3.0%)	7	5	12	8	4	0	2	2	5	1	2
NHL - Nodal	9	5	4	9	6	3	0	1	1	5	1	1
NHL - Extranodal	3	2	1	3	2	1	0	1	1	0	0	1
<b>MYELOMA</b>	5 (1.2%)	5	0	5	3	2	0	0	0	0	0	0
<b>LEUKEMIA</b>	9 (2.2%)	5	4	9	8	1	0	0	0	0	0	0
Lymphocytic Leukemia	6 (1.5%)	3	3	6	6	0	0	0	0	0	0	0
Acute Lymphocytic Leukemia	1	0	1	1	1	0	0	0	0	0	0	0
Chronic Lymphocytic Leukemia	5	3	2	5	5	0	0	0	0	0	0	0
Myeloid & Monocytic Leukemia	2 (0.5%)	1	1	2	1	1	0	0	0	0	0	0
Acute Myeloid Leukemia	1	1	0	1	0	1	0	0	0	0	0	0
Chronic Myeloid Leukemia	1	0	1	1	1	0	0	0	0	0	0	0
Other Leukemia	1 (0.2%)	1	0	1	1	0	0	0	0	0	0	0
<b>MISCELLANEOUS</b>	13 (3.2%)	11	2	13	6	7	0	0	0	0	0	0
<b>Total</b>	<b>406</b>	<b>232</b>	<b>174</b>	<b>406</b>	<b>318</b>	<b>88</b>	<b>26</b>	<b>113</b>	<b>78</b>	<b>49</b>	<b>71</b>	<b>37</b>

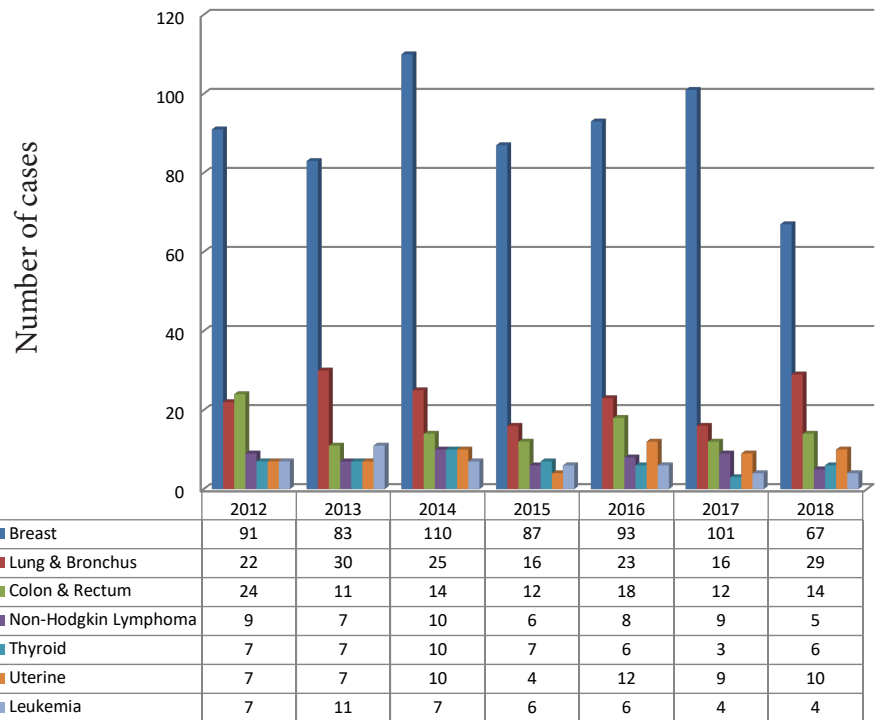
## Top Sites, Grouped by Gender

### 2018 Newly Diagnosed Cancers by Gender

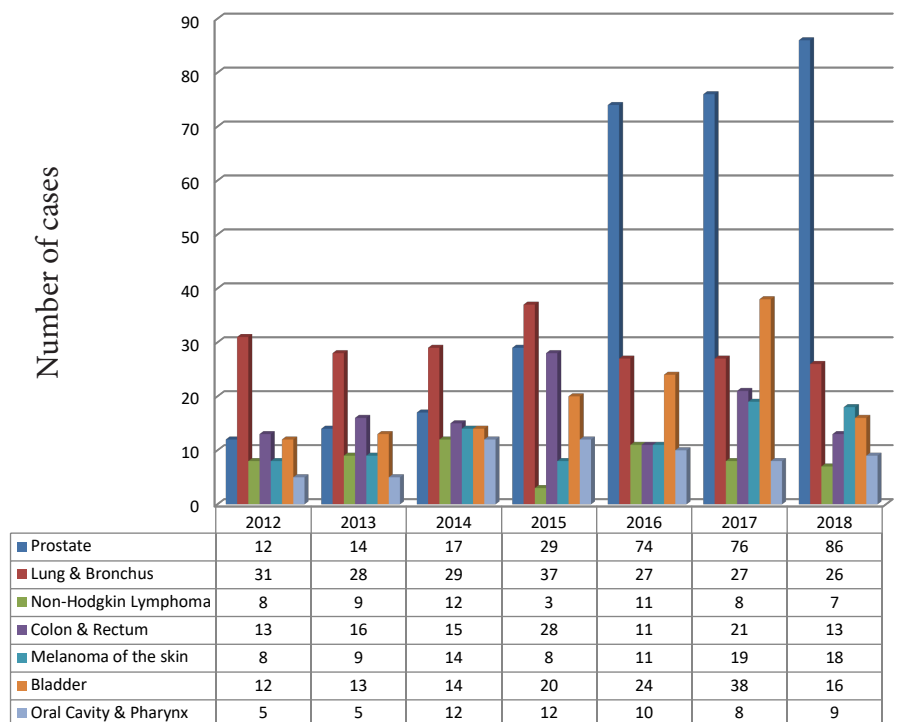
- Male (232)
- Female (174)



### Top 7 Cancer Sites for Women at WMC 2012-2018



### Top 7 Cancer Sites for Men at WMC 2012-2018





# Seby B. Jones Regional Cancer Center, Cancer Registry Data

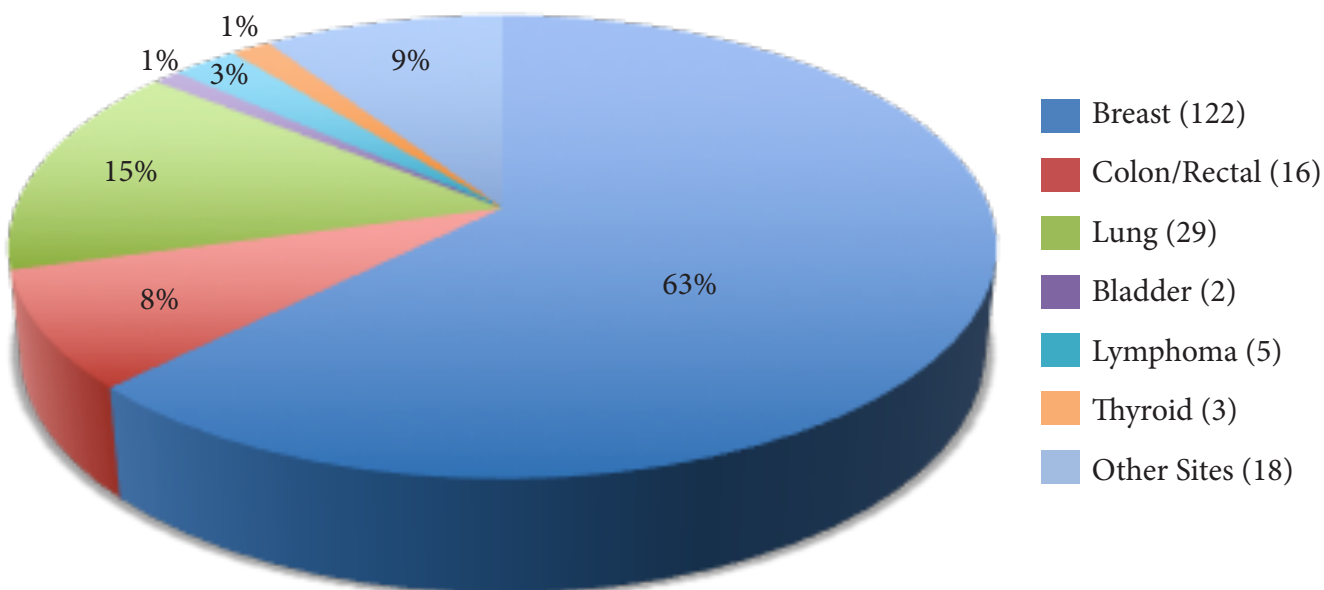
## 2019 Cancer Conference/Tumor Board Summary

Dates of Service 1/1/19 - 12/4/19

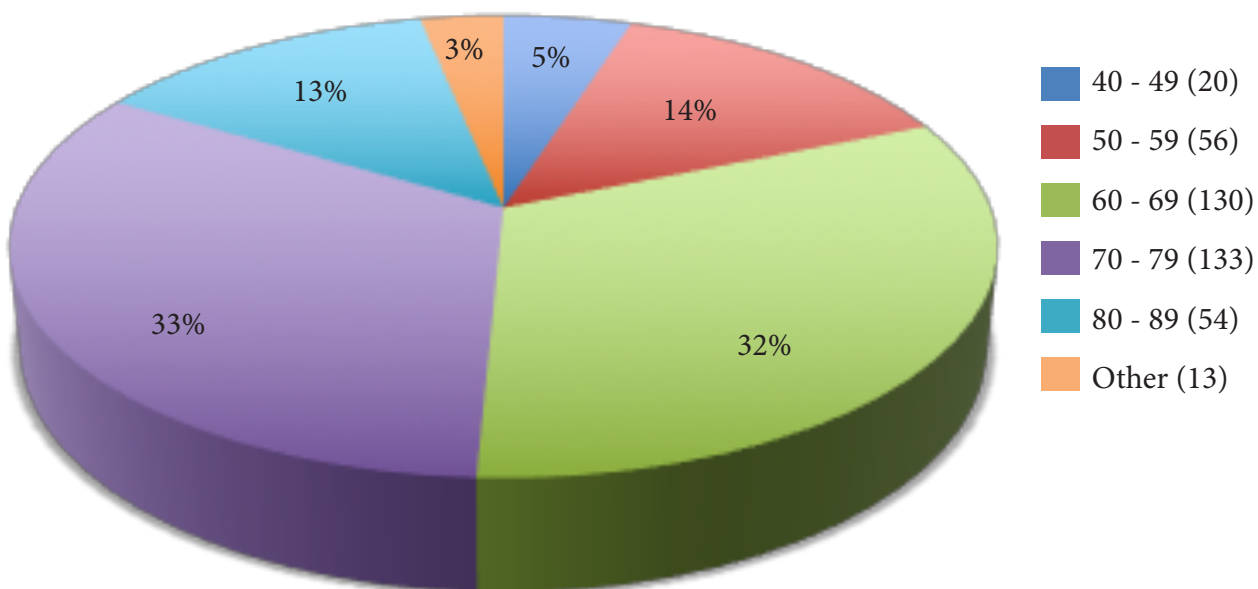
37 Conferences held

195 Cases presented

### 2019 Cancer Cases Presented by Site



### 2018 Age of Diagnosis of all Cancer Cases



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## Medical Oncology

(828) 262-4332 • Fax: (828) 265-5514

Located on the campus of Watauga Medical Center

338 Deerfield Road | Boone, NC 28607

Monday - Friday 8:00 am - 5:00 pm

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## Radiation Oncology

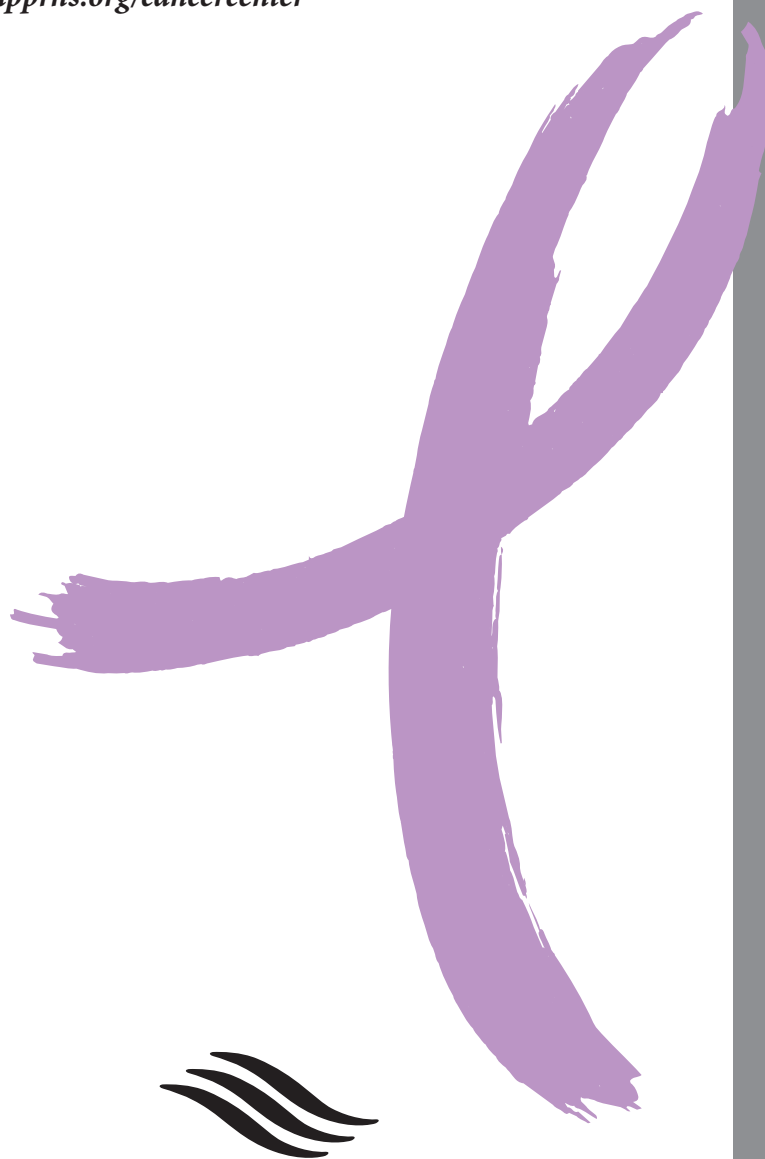
(828) 262-4342 • Fax: (828) 262-4414

Located on the campus of Watauga Medical Center

338 Deerfield Road | Boone, NC 28607

Monday - Friday 8:00 am - 5:00 pm

[apprhs.org/cancercenter](http://apprhs.org/cancercenter)



**SEBY B. JONES REGIONAL  
CANCER CENTER**  
of  
WATAUGA MEDICAL CENTER

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## About Us

Seby B. Jones Regional Cancer Center, consisting of medical oncology and radiation oncology, opened in 1993 on the Watauga Medical Center campus. In 2002, an 8,000 square-foot addition was opened to accommodate the growing regional demand for medical oncology services. The Cancer Center offers a multidisciplinary approach to the prevention, diagnosis and treatment of cancers. Through advanced technology and a highly trained staff, the center offers exceptional diagnostic and treatment procedures that include radiation, chemotherapy, biotherapy, immunotherapy, prostate brachytherapy and hormonal treatments.

The Cancer Center was among the first facilities in North Carolina to offer a new treatment modality called intensity modulated radiation therapy, or IMRT. This unique form of treatment is the most advanced method available to deliver high-dose radiation to destroy cancer cells while minimizing risk to normal tissues. IGRT (image guided radiation therapy) is the added component of a high quality x-ray system, or “on-board” imager, that allows quick and precise adjustments of a patient’s target volume for greater accuracy. Examples of sensitive tissues that can now be “sculpted” around include the prostate, spinal cord, optic nerve and salivary glands.

The American College of Surgeons awarded the Commission on Cancer® Three Year Certification of Accreditation to Seby B. Jones Regional Cancer Center in October 2019 and is accredited through 2022. The Cancer Center has been CoC accredited since 1997. Designation status: Accredited Community Cancer Program.



*Seby B. Jones Regional Cancer Center is located on the Watauga Medical Center campus. Watauga Medical Center is a member of Appalachian Regional Healthcare System.*