

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

Cynthia Ballenger, MD, Radiation Oncologist
Anne-Corinne Beaver, MD, Surgeon, Cancer Liaison Physician
Beverly Bowen, Pharmacist
Melanie Childers, Director of Pastoral Care
Angie Del Nero, MSW, Cancer Center Social Worker
Holly Fisk, NP, Cancer Center
Amy Freeman, MEd, CTR, Cancer Registry
Kris Hartley, Practice Manager
Stephanie Johnson, NP-C, AMOREM Palliative Care
Betty Mize, CTR, Cancer Registry
Ken Neuvirth, RN, MSN, Senior Director of Oncology

Tami Little, Clinical Research RN
Debbie Shook, RN, Director of Oncology Clinical Services
Alison Collins, RD, Dietician
Chris Shuman, MD, Radiologist
Jane Smart, RN, American Cancer Society
Allan Smith, MD, Pathologist
Anna L. Sobol, MD, Chair, Medical Oncologist
Khurram Tariq, MD, Medical Oncologist
Kevin Wolfe, MD, Pulmonary Medicine
Madi Zaidel, CHES*, Community Outreach Specialist

Cancer Resource Alliance

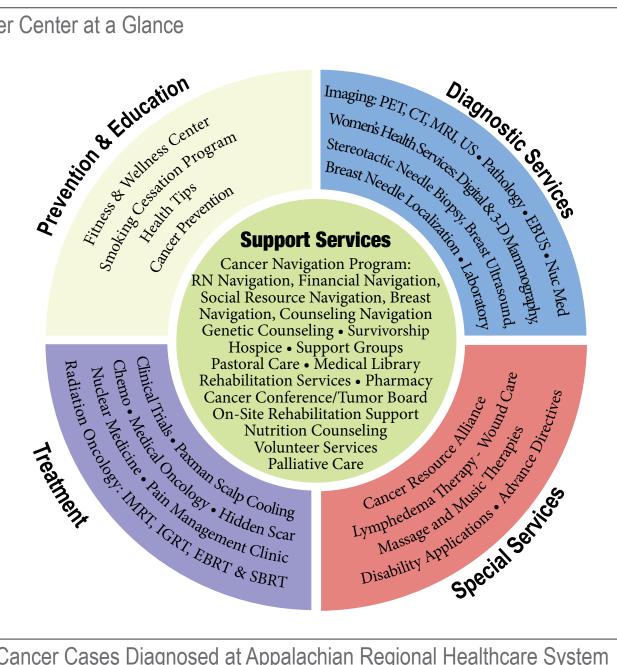
The Cancer Resource Alliance (CRA) is a comprehensive team of healthcare professionals, business partners, cancer caregivers and cancer survivor volunteers. The CRA was established in 2006 as an outreach arm of Seby B. Jones Regional Cancer Center (SBJRCC) in Watauga County, the American Cancer Society 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. The program is always interested in recruiting interested community members. If interested, contact Ken Neuvirth, RN, MSN, Senior Director of Oncology.

Members

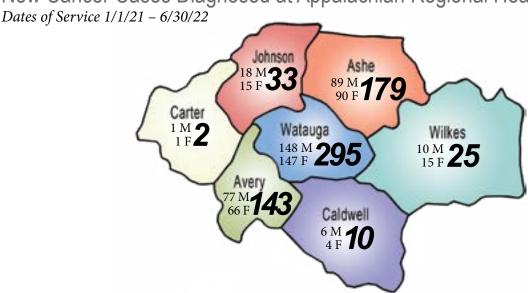
Randy (Doc) McCoy, Chairperson
Savanna Bradford, Community Member
Angie Del Nero, Treasurer
Joe Dombrosky, Community Member
Larke Griffin, Community Member
Kris Hartley, Practice Manager
Lynette Hartley, Cancer Center RN
Ken Neuvirth, RN, MSN, Senior Director of Oncology
Irene Sawyer, Community Member
Debbie Shook, RN, Director of Oncology Clinical Services
Joe Sinford, Cancer Center Financial Navigator
Melanie Thomas, Radiation Therapist
Kira Turner, Community Member
Joanie Venza, Community Member
Donna Warmuth, Community Member



Cancer Center at a Glance



New Cancer Cases Diagnosed at Appalachian Regional Healthcare System



Laneece Trivette's story of resilience, strength, faith and hope

To say 2020 was challenging is an understatement.

Among the many lessons learned that year, most people were reminded that life is precious and fragile.

Lanecce Trivette of Matney probably learned that lesson better than most that year. She also learned that she has a compassionate team of healthcare providers fighting



Laneece Trivette with her husband James and children

in her corner at Seby B. Jones Regional Cancer Center.

These lessons began a week after her birthday on August 9, 2019. She was preparing for a hernia repair surgery and needed a pre-operation scan.

Life is turned upside down

"They called and said they found a mass on my liver, and they needed to do a biopsy," she remembers.

The stay-at-home mom of four was only 34 years old at the time and absolutely terrified. The biopsy along with other tests helped determine that she had stage 4 breast cancer and it was also in her lymph nodes and liver.

Laneece and James met with Dr. Khurram Tariq, a triple-board certified Hematologist and Medical Oncologist at the Seby B. Jones Regional Cancer Center. He started her on a treatment based on the CLEOPATRA trial, which includes chemotherapy and targeted therapy as part of the new precision medicine that, Dr Tariq explained, the field of oncology is headed toward.

For Laneece, everything seemed to be going well. Then a year later, while Laneece was shopping in late December, she had a seizure and blacked out.

After being rushed to Watauga Medical Center, they found three tumors on the right side of her brain and a couple of lesions on her spine.

Hope comes in the form of a new clinical trial

"Generally speaking, once a cancer goes to the brain, the prognosis becomes very grim. Once this happened to Laneece, it was very sad news for both her and me personally especially as I thought about her young children and asked myself

the essential question: 'How can I help her," Dr. Tariq remembers.

And then, one day he had an epiphany. He had just followed a breast conference in San Antonio where he remembered something that was mentioned within the minute details embedded in the brand new HER2CLIMB study. In this study a new targeted drug, Tucatinib, along with a second agent from precision medicine was paired with an older chemotherapeutic agent and it showed amazing results in breast cancer patients – especially those with brain metastasis.

"No one at Watauga Medical Center had used it before. We created a new care plan based on that trial. She was the first patient to receive this three drug combo. It was first administered on January 14, 2021," he said. "We kept it going and she had an exceptional response. The tumor in her liver and lymph nodes melted away and the tumor in her brain was radiated and never came back. The cancer in her breast shrank as well. Later another out of the box decision was made when her breast surgeon, Dr. Beaver, agreed to my request to remove the remaining tumor from her right breast."

Dr Tariq explained that although surgery typically isn't an option for stage 4 cancer patients, an exception was made because of the amazing results of this new treatment. The remnants of cancer in her breast (1.6 cm) and some tissue in her right armpit were removed in June 2021. The tissue in her axilla was non-cancerous. Since that day, Laneece has been cancer-free.

to continue reading visit: apprhs.org/laneece-trivette-story/

Ginger Powell and friends help Cancer Patient Emergency Fund

A cancer diagnosis is life changing. Apart from the physical toll, cancer patients can feel terrified, anxious, and depressed. If that wasn't enough, cancer can be a monumental financial burden for anyone. Often cancer patients and even their caretakers need to miss work for treatments. And the bills don't stop for cancer. Regular monthly bills are

compounded by new expenses like prescriptions and gas to and from the frequent appointments.

As terrible as all of this is, many patients gain a renewed perspective, realign their priorities, learn just how strong they are, and find they have a generous support system surrounding them.

For one local woman, who experienced a lot of that, helping cancer patients through the Cancer Patient Emergency Fund, is how she is celebrating her 10th year of being free of breast cancer.

Shortly after the youngest of her three daughters was born, Ginger Powell was diagnosed with stage 3 breast cancer. At the time she was a stay-at-home mom and was only in her early 30s.

With her husband Matt by her side, she underwent radiation and chemotherapy for breast cancer in 2011 and 2012 at Seby B. Jones Regional Cancer Center. For her, the Cancer Patient Emergency Fund provided gas cards and she found that to be a memorable blessing during a difficult time.

As the 10-year anniversary of being cancer-free approached she started dreaming and planning for a big celebration. She decided early on she wanted to somehow raise money for breast cancer patients. Ginger gathered a committee of friends, who she knew could help her make this happen.



Ginger Powell with her daughters

"Cancer gives you a whole new perspective and a new sense of gratitude," she says. "This has been a dream of mine. Not only can we celebrate but we can do it in a way where I can give back as well."

However, in the middle of making plans last May, Ginger was presented with another challenge.

Though the recommended age for the first screening colonoscopy is 45-50, some concerning symptoms and a family history led her to ask her primary care provider for a referral to have a screening colonoscopy. From that, she was diagnosed with colon cancer. Fortunately, it was detected early, and Dr. Paul Dagher and Dr. Tim Edmisten from Watauga Surgical Group were able to remove it all through surgery without undergoing any additional treatments.

That didn't slow down Ginger and her friends. She remembers thinking, "I'm not going to let cancer take one more thing from me." They simply continued planning.

"I first wanted to give back to breast cancer patients, but after my colon cancer diagnosis, I wanted to expand our giving reach to anyone fighting cancer," she says. "I think cancer has touched a lot of people in a lot of ways."

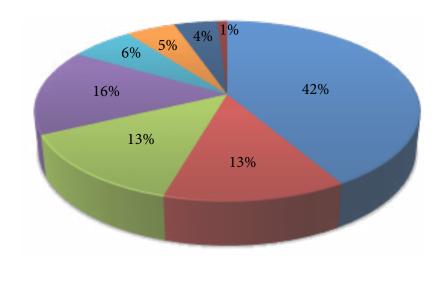
Ginger's celebration, Hope for the High Country, raised \$37,670.23 for the Cancer Patient Emergency Fund through Appalachian Regional Healthcare Foundation.

The Cancer Patient Emergency Fund provides financial assistance to Seby B. Jones Regional Cancer Center patients for items such as gasoline for transportation to treatments, utility bills, medications and grocery expenses.

Community Partnership

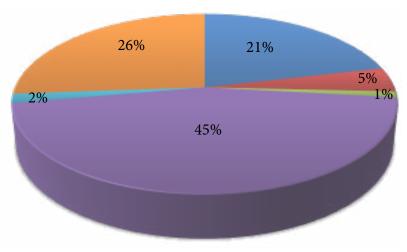
Cancer Patient Emergency Fund 10/01/21 - 9/30/22

Total	\$79,894.93
Gift Cards	\$800.00
Medical	\$3,464.37
Nutrition	\$3,943.50
DME/Supplies	\$5,064.50
Housing	\$12,369.36
Utilities	\$10,736.42
Medications	\$10,316.87
Transportation	\$33,199.91



Cancer Resource Alliance Funds 10/01/21 - 9/30/22

Total	\$9,814.42
Jewelry Raffle	\$2,568.00
Event at Chetola	\$163.32
Thanksgiving Dinners	\$4,454.19
Lighting of the Tree	\$99.49
Graduation Boxes	\$432.34
Breast Cancer Fund	\$2,097.08



Learn more about these programs at apprhs.org/cra

Community Giving 10/01/21 - 9/30/22

Thank you to all clubs, organizations and individuals that raised money for the Cancer Center this year. McCoy Minerals raised \$3,289 to support the Cancer Patient Emergency Fund. Grandfather Golf and Country Club's Ladies Golf Association raised \$30,495 for Avery Cancer Patient Emergency Fund. Linville Land Harbor's Ladies Golf Association raised \$11,000 for the Avery Cancer Patient Emergency Fund. Ginger Powell and the Hope for the High Country event raised \$37,670 for the Cancer Patient Emergency Fund. Blue Ridge Energy raised \$3,615 from their "Fueling the Fight" year-long fundraising effort for the Cancer Center. Together, these organizations, events and individuals raised \$86,069.

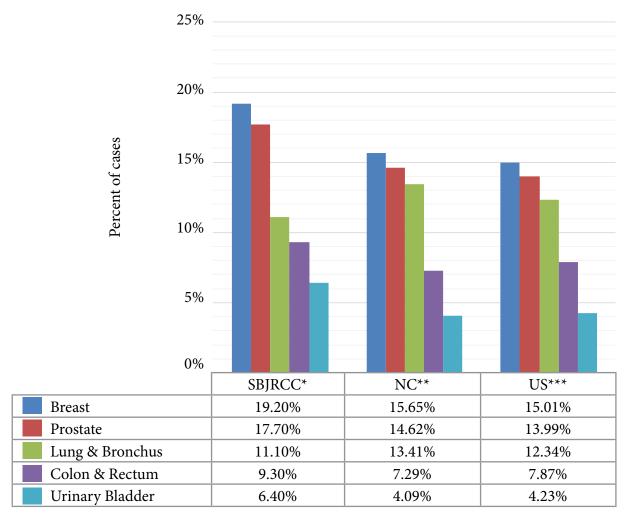
Volunteers 10/01/21 - 9/30/22

10 volunteers contributed a total of 1,054.31 hours
RoseMarie Oldfield
Trish Cabibbo
Dan Greenfield
Linda Baker
Sue Chase
Delores Amoroso
Doris Glowa
Joyce Alexander
Donita Berckemeyer
Kaylee Turner

6 | Seby B. Jones Regional Cancer Center Annual Report

Top 5 Cancer Sites - Local, State & National Comparison Breast, Prostate, Lung & Bronchus, Colon & Rectum and Urinary Bladder

2021 Top 5 Cancer Sites - Local, State & National Comparison



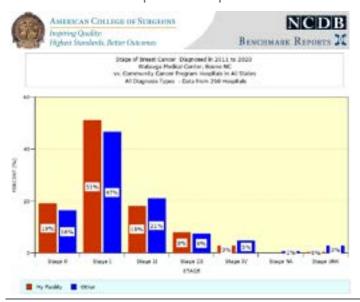
	SBJRCC*	NC**	US***		
Breast	93	10220	287,850		
Prostate	86	9550	268,490		
Lung & Bronchus	54	8760	236,740		
Colon & Rectum	45	4760	151,030		
Urinary Bladder	31	2670	81,180		

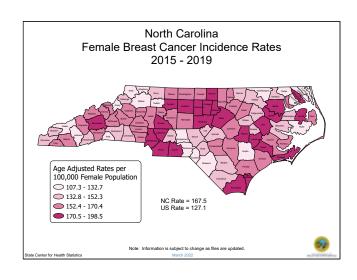
^{*} Seby B. Jones Regional Cancer Center Registry - 2021 Analytic Cases

^{**} American Cancer Society estimated new 2022 cancer cases in NC: from 2022 Cancer Facts & Figures

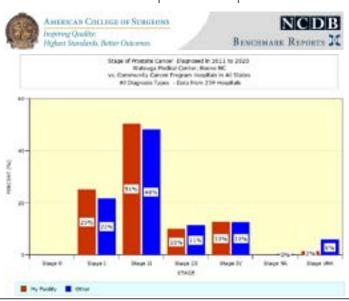
^{***} American Cancer Society estimated new 2022 cancer cases in US: from 2022 Cancer Facts & Figures

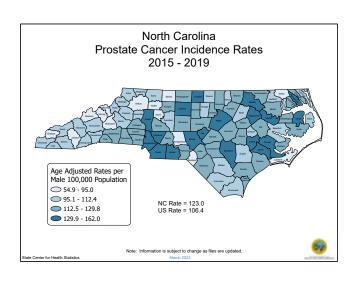
Breast Cancer Comparison Report



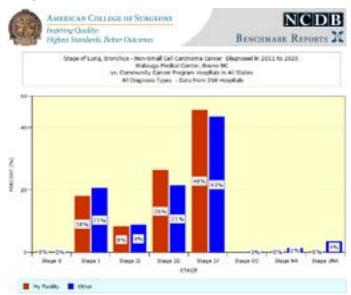


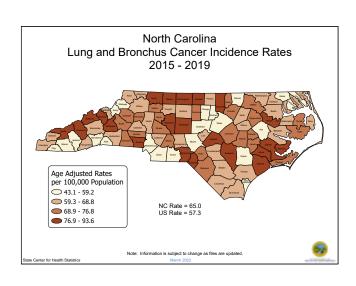
Prostate Cancer Comparison Report





Lung & Bronchus Cancer Comparison Report





Annual Report of Cancer Registry Data Seby B. Jones Regional Cancer Center of Watauga Medical Center

2021 Summary by Body System, Gender, Class, Status and Best AJCC Stage Report

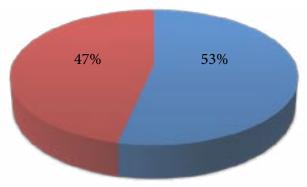
Primary Site	Total (%)	Male	Female	Analytic	Alive	Expired	Stage 0	Stage I	Stage II	Stage III	Stage IV	Stage Unknown or N/A
ORAL CAVITY & PHARYNX	11 (2.3%)	8	3	11	10	1	0	3	5	3	0	0
	1 (0.2%)	0	1	1	0	1	0	0	0	1	0	0
Tonsil	4 (0.8%)	3	1	4	4	0	0	3	1	0	0	0
Oropharynx	6 (1.2%)	5	1	6	6	0	0	0	4	2	0	0
DIGESTIVE SYSTEM	73 (15.1%)	44	29	73	49	24	2	10	11	18	21	15
Esophagus	8 (1.6%)	7	1	8	5	3	0	0	0	2	5	1
Stomach	5 (1.0%)	3	2	5	3	2	0	0	0	2	2	1
Small Intestine	1 (0.2%)	0	1	1	1	0	0	0	0	1	0	0
·	29 (6.0%)	17	12	29	26	3	1	8	5	9	3	3
Cecum	2	0	2	2	2	0	0	1	0	0	0	1
Appendix	3	1	2	3	3	0	0	2	0	0	1	0
Ascending Colon	1	4	3	1	1	0	1	1	1	3	1	0
Hepatic Flexure	2	2	0	2	2	0	0	0	0	1	0	0
Transverse Colon Descending Colon	2	0	2	2	1	1	0	1	0	1	0	0
	9	8	1	9	7	2	0	2	2	2	1	2
Large Intestine, NOS	3	1	2	3	3	0	0	1	1	1	0	0
Rectum & Rectosigmoid	16 (3.3%)	8	8	16	10	6	1	1	4	1	4	5
Anus, Anal Canal & Anorectum	3 (0.6%)	1	2	3	2	1	0	0	1	2	0	0
,	6 (1.2%)	5	1	6	1	5	0	1	0	1	3	1
Liver	3	3	0	3	0	3	0	1	0	0	1	1
Intrahepatic Bile Duct	3	2	1	3	1	2	0	0	0	1	2	0
Gallbladder	1 (0.2%)	1	0	1	0	1	0	0	0	0	1	0
Pancreas	3 (0.6%)	2	1	3	0	3	0	0	1	0	2	0
Peritoneum, Omentum & Mesentery	1 (0.2%)	0	1	1	1	0	0	0	0	0	1	0
RESPIRATORY SYSTEM	59 (12.2%)	29	30	59	29	30	0	12	3	12	31	1
Nose, Nasal Cavity & Middle Ear	1 (0.2%)	1	0	1	1	0	0	1	0	0	0	0
Larynx	4 (0.8%)	2	2	4	4	0	0	0	1	2	1	0
Lung & Bronchus	54 (11.1%)	26	28	54	24	30	0	11	2	10	30	1
SOFT TISSUE	1 (0.2%)	1	0	1	1	0	0	0	0	1	0	0
	22 (4.5%)	12	10	22	21	1	2	7	5	2	4	2
	20 (4.1%)	10	10	20	19	1	2	6	5	2	4	1
Other Non-Epithelial Skin BREAST	2 (0.4%)	0	93	93	90	3	20	47	0 15	0 5	0 6	0
	93 (19.2%)	0	20	20	16	4	0	6	0	4	3	7
	4 (0.8%)	0	4	4	2	2	0	1	0	2	1	0
Corpus & Uterus, NOS	13 (2.7%)	0	13	13	13	0	0	5	0	2	0	6
	3 (0.6%)	0	3	3	1	2	0	0	0	0	2	1
		87	0	87	84	3	0	23	31	24	8	1
	86 (17.7%)	86	0	86	83	3	0	22	31	24	8	1
Testis	1 (0.2%)	1	0	1	1	0	0	1	0	0	0	0
URINARY SYSTEM	37 (7.6%)	27	10	37	32	5	14	13	3	3	3	1
Urinary Bladder	31 (6.4%)	25	6	31	28	3	14	11	3	2	1	0
Kidney & Renal Pelvis	5 (1.0%)	2	3	5	4	1	0	2	0	1	2	0
	1 (0.2%)	0	1	1	0	1	0	0	0	0	0	1
	, ,	2	3	5	3	2	0	0	0	0	0	5
	3 (0.6%)	1	2	3	1	2	0	0	0	0	0	3
	2 (0.4%)	1	1	2	2	0	0	0	0	0	0	2
	, ,	7	6	13	12	1	0	6	2	1	0	3
	10 (2.1%)	4	6	10	10	0	0	6	2	1	0	1
	3 (0.6%)	3	0	3	2	1	0	5	0	0	0	2
LYMPHOMA	, ,	11	1	18	17	1	0		6	3	2	4
	3 (0.6%)	9	6	3 15	14	0	0	4	4	3	2	2
Non-Hodgkin Lymphoma NHL - Nodal	15 (3.1%) 11	7	4	11	10	1	0	3	3	3	1	1
	4	2	2	4	4	0	0	1	1	0	1	1
MYELOMA	<u> </u>	12	5	17	14	3	0	0	0	0	0	17
LEUKEMIA	14 (2.9%)	11	3	14	12	2	0	0	0	0	1	14
	9 (1.9%)	7	2	9	9	0	0	0	0	0	1	7
	8	7	1	8	8	0	0	0	0	0	1	7
Other Lymphocytic Leukemia	1	0	1	1	1	0	0	0	0	0	0	1
	5 (1.0%)	4	1	5	3	2	0	0	0	0	0	5
	2	2	0	2	0	2	0	0	0	0	0	2
	3	2	1	3	3	0	0	0	0	0	0	3
MISCELLANEOUS	15 (3.1%)	8	7	15	9	6	0	0	0	0	0	15

Top Sites, Grouped by Gender

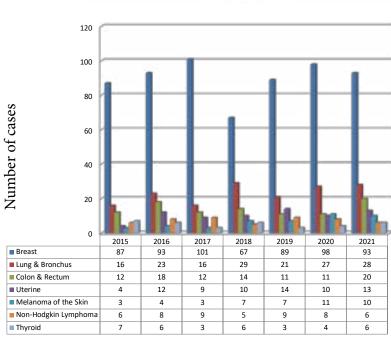
2021 Newly Diagnosed Cancers by Gender

Male (259)

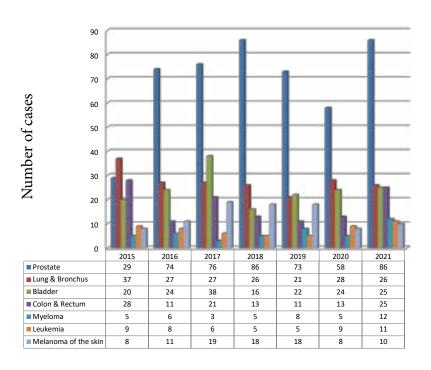
Female (226)



Top 7 Cancer Sites for Women at WMC 2015-2021



Top 7 Cancer Sites for Men at WMC 2015-2021

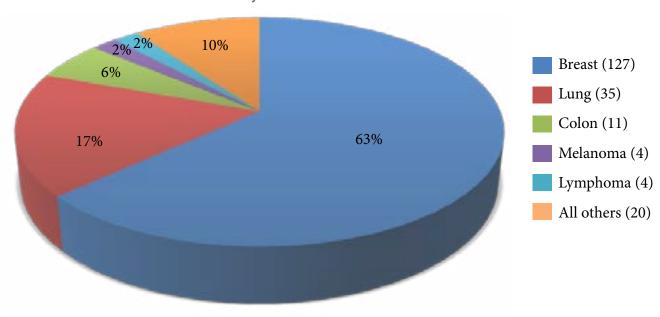


Seby B. Jones Regional Cancer Center, Cancer Registry Data

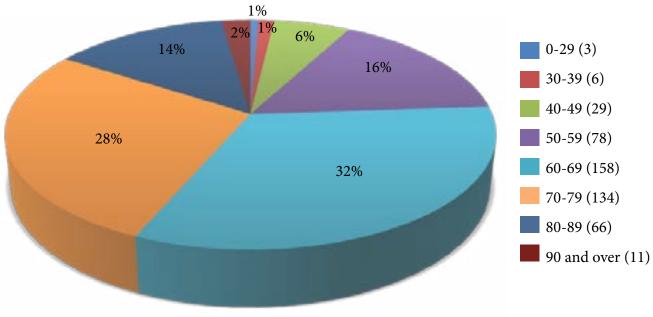
2022 Cancer Conference/Tumor Board Summary Dates of Service 1/5/2022 – 11/16/2022

35 Conferences held 201Cases presented

2022 Cancer Cases Presented by Site



2021 Age of Diagnosis of all Cancer Cases



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

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

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.

apprhs.org/cancercenter



of Watauga Medical Center

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.

Typically only available at larger centers, the Cancer Center has implemented Stereotactic Body Radiation Therapy (SBRT) to treat cancerous tumors. SBRT is an advanced technique that precisely targets a high dose of radiation directly to cancer cells.

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.

