

Outcomes Report 2018:

Accountability Measures and Quality Improvements

The FH Fish Memorial Medical Center's Cancer Committee ensures that patients with cancer are treated according to the nationally accepted measures. Because we are an accredited cancer program through the Commission on Cancer of the American College of Surgeons, we participate in the quality reporting systems called Cancer Program Practice Profile Report (CP3R) and Rapid Quality Reporting System (RQRS). These quality measures are standards of care based on evidence-based clinical trials.

SURVEILLANCE: BREAST						
Breast conservation rate for women with AJCC clinical stage 0, 1, or 2 breast cancer						
FH FISH MEMORIAL	72.5					
State of Florida	66.2					
Similar COC Approved Program	71.7					
All COC Approved Programs	67.3					
ACCOUNTABILITY MEASURE: 2016	BREAST					
Radiation is administered within 1 year of diagnosis for wom	en under the age of 70					
receiving breast conservation surgery for breast cancer (Expe	ected performance >90%)					
FH FISH MEMORIAL	92.9					
State of Florida	84.7					
Similar COC Approved Program	89.1					
All COC Approved Programs	91.4					
ACCOUNTABILITY MEASURE: 2016	BREAST					
Tamoxifen or third generation aromatase inhibitor is recomm	nended or administered					
FH FISH MEMORIAL	97					
State of Florida	85					
Similar COC Approved Program	90.1					
All COC Approved Programs	92.2					
ACCOUNTABILITY MEASURE: 2016 BREAST						
Combination chemotherapy is recommended or administere	d within 45 months (120					
FH FISH MEMORIAL	100					
State of Florida	88.5					
Similar COC Approved Program	91.9					

All COC Approved Programs

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Adjuvant chemotherapy is recommended or administered within 4 months of diagnosis for patients under age 80 with stage III (lymph node positive) colon cancer (Expected performance >90%)

FH FISH MEMORIAL	100
State of Florida	81.2
Similar COC Approved Program	86.7
All COC Approved Programs	88.6

QUALITY IMPROVEMENT MEASURE: 2016 COLON				
Fewer than 12 nodes pathologically examined (Expected performance >85%)				
FH FISH MEMORIAL	84			
State of Florida	91.1			
Similar COC Approved Program	90.3			
All COC Approved Programs	92.8			

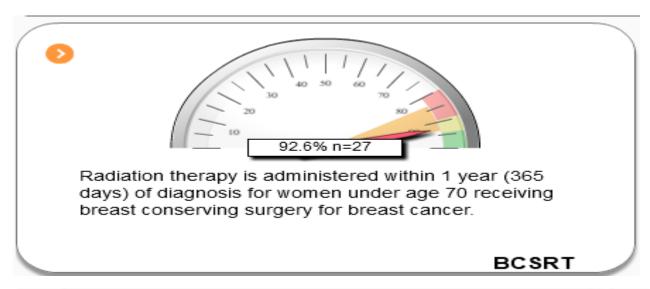
QUALITY IMPROVEMENT MEASURE: 2016 LUNG

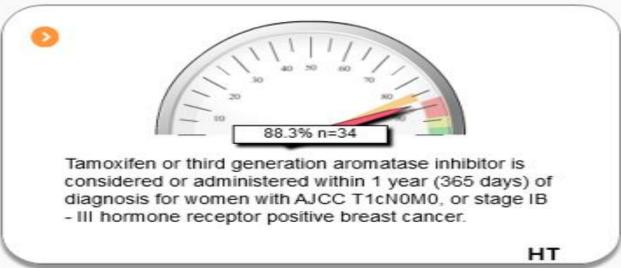
Surgery is not the first course of treatment for cN2 M0 lung cases (Expected performance >85%)

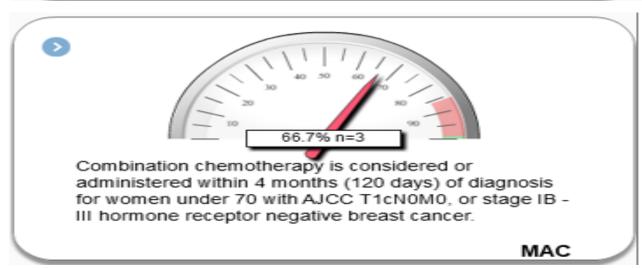
FH FISH MEMORIAL	100
State of Florida	87.6
Similar COC Approved Program	94.4
All COC Approved Programs	92.9

The Rapid Quality Reporting System (RQRS) is a quality reporting tool that outlines our current measures of standards within 3 months of diagnosis. Here are some examples of our quality measures. Expected performance should be $\geq 90\%$, unless otherwise noted.

BREAST CANCER MEASURES







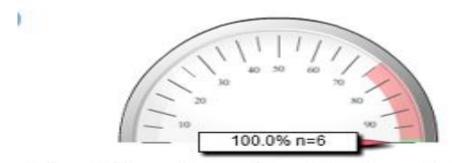
COLON CANCER MEASURES:

Expected Performance ≥ 85%



At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer.

Expected Performance ≥ 90%



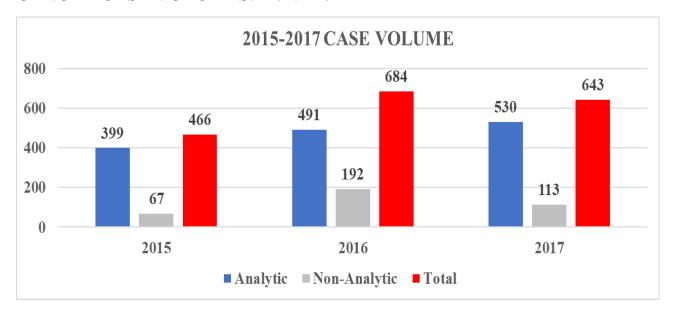
Adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer.

2017 Top 20 Cancer Sites Evaluation

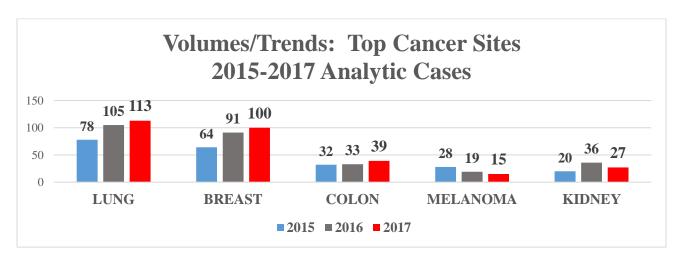
Primary Site	Total	Class		Sex		AJCC Stage						
		Α	N/A	M	F	0	1	Ш	III	IV	Unk	N/A
All Sites	643	530	113	223	307	29	133	79	65	95	55	54
Lung- All Types	125	113	12	59	53	2	30	9	21	42	8	0
Lung/Bronc-Non Small Cell	105	95	10	51	44	2	28	8	18	32	7	0
Lung/Bronc-Small Cell	20	18	2	9	9	0	2	1	3	11	1	0
Breast	115	100	15	1	99	16	40	26	8	5	4	0
Colon	43	39	4	19	19	3	4	12	13	4	2	0
Kidney	34	27	7	18	9	0	18	3	2	4	0	0
Non-Hodgkin's	32	27	5	10	16	0	17	3	2	3	1	0
FEMALE GYN	24	17	7	0	17	0	4	0	4	7	2	0
Pancreas	22	18	4	9	9	0	3	4	1	10	0	0
Bladder	22	17	5	8	9	2	7	5	0	2	1	1
Prostate	22	14	8	14	0	0	1	10	2	1	0	0
Leukemia	22	14	8	7	7	0	0	0	0	0	0	14
Brain (Benign)	20	19	1	10	9	0	0	0	0	0	0	19
Melanoma	17	15	2	9	6	4	5	1	1	1	3	0
Thyroid	16	15	1	3	12	0	6	0	1	2	4	1
Rectum	15	11	4	7	4	0	1	2	2	5	1	0
Head & Neck	12	6	6	5	1	0	0	0	2	2	2	0
Liver	10	10	0	9	1	0	2	0	1	2	4	1
Other/ Blood Disorder	10	5	5	2	3	0	0	0	0	0	0	5
Unknown Primary	8	8	0	2	6	0	0	0	0	0	0	8
Multiple Myeloma	6	4	2	4	0	0	0	0	0	0	0	4
Renal Pelvis	5	5	0	2	3	1	1	0	1	1	1	0
OTHER SITES	59	46	13	24	24	1	6	4	4	3	18	1

The table above represents top cancers diagnosed /treated at FH Fish during 2017. Lung cancer is the most prevalent cancer, 113 analytic cases. Breast was second most common cancer with 100 new cancers. We see a fair number of kidney cancer cases. During 2017, there was a total of 643 cases reported. There were 530 analytic cases, which represent patients we diagnosed and/or treated for their cancer. There were 113 non-analytic cases, representing patients diagnosed and treated elsewhere and seen at FH Fish for recurrence or progression of cancer.

CANCER CASE VOLUMES: 2015-2017



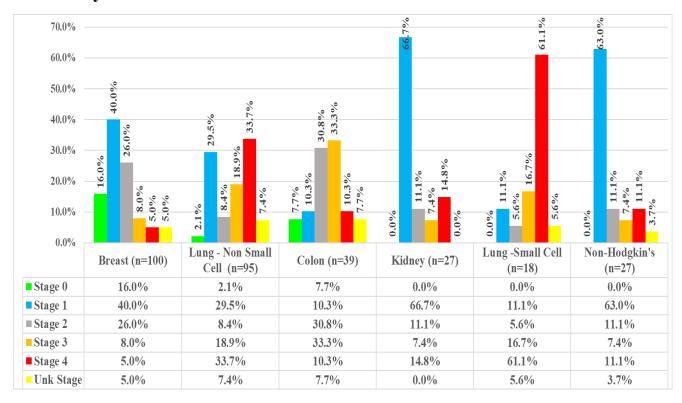
There was a significant increase, 8%, in cancer case volume of analytic cases in 2017. We are diagnosing and treating more cancer patients every year. Since 2015, we have experienced a 25% increase in analytic cases.



The above graph represents our top cancer sites and volume trends for the past 3 completed years of data. There were increases in volumes of lung, breast and colon, while there were declines in volumes of melanoma and kidney cancers.

Stage at Diagnosis Top 5 Cancer Sites

2017 Analytic Cases



The above table represents the Stage at Diagnosis of our top sites of our analytic cases. About 56% of our breast cancer patients are diagnosed at very early stages (Stage 0-1). We had 82% of our breast cancer patients diagnosed at early stages (Stage 0-2). In contrast, 77% of our lung cancer (non-small cell lung cancer) were diagnosed at advanced stages (Stages 3-4) compared to 56% of national data.

Cancer Incidence with Comparative Data

2017 Analytic Cases	S		2017 Analytic Case	s	
FH FISH MEMORIAL Incidence % (n=223)	MALE: CANCER TYPE	ACS * Incidence % (n=836,150)	FH FISH MEMORIAL Incidence % (n=307)	FEMALE: CANCER TYPE	ACS * Incidence % (n=852,630)
10%	Prostate	21%	32%	Breast	30%
32%	Lung	14%	20%	Lung	12%
14%	Colon & Retum	8%	7%	Colon & Rectum	8%
5%	Bladder	7%	3%	Uterine Corpus	7%
4%	Melanoma - Skin	6%	4%	Thyroid	5%
11%	Kidney & Renal Pelvis	5%	6%	Non-Hodgkin Lymphoma	4%
6%	Non-Hodgkin Lymphoma	5%	2%	Melanoma - Skin	4%
4%	Oral Cavity& Pharynx	4%	5%	Kidney & Renal Pelvis	3%
5%	Leukemia	4%	4%	Pancreas	3%
6%	Liver / Bile Duct	3%	3%	Leukemia	3%

^{*}ACS: American Cancer Society's Cancer Facts and Figures - 2017

The above table illustrates the cancer incidence by gender compared to national data of the American Cancer Society. For our male population, we see a much lower incidence of prostate due to that being treated in the community setting and not at the hospital. We see a higher incidence of Lung, Colon, Kidney and Liver cancers. For our female populations, we have a much higher incidence of Breast and Lung cancers and slightly higher incidence of Lymphoma, Kidney and Pancreas cancers. We have a lower incidence of uterine, thyroid and melanoma.