Cancer patients, like breast cancer survivor Karyn Chisholm (pictured on the cover), throughout Maine and the Mt. Washington Valley in New Hampshire have access to state-of-the-art, coordinated cancer care. The MaineHealth Cancer Care Network is designed to reduce the need for travel whenever possible by connecting cancer patients with cancer experts. This powerful collaboration brings together nearly 300 of the most talented cancer care providers in Northern New England, with the support of the Harold Alfond® Foundation. The foundation is providing a generous five-year grant that supports the staff and technology that connect us.

NAVIGATORS CONNECT PATIENTS TO CARE

Cover Story: Karyn explores Maine by hiking. Karyn went through two battles with breast cancer — both found in routine mammograms. During the four years between her surgeries, Karyn said, the person who coordinated most of her care was Kim Lynch, RN, her patient navigator at Mid Coast Hospital in Brunswick, part of the MaineHealth Cancer Care Network. Kim coordinated care between radiation therapy at Coastal Cancer Treatment Center in Bath, provider visits at Mid Coast Medical Group — Breast & Surgical Oncology Center in Brunswick and outpatient surgery in Scarborough. “Kim was compassionate and professional,” said Karyn. “She was there for me during cancer treatments, appointments and much more.” Karyn added that it was convenient to have the expertise of gifted professionals and care close to her home in Topsham.
MaineHealth launched a new medical oncology practice in 2019 providing state-of-the-art cancer care close to home. MaineHealth Cancer Care brings together services and providers specializing in medical oncology, head and neck cancer, hemostasis, thrombosis, malignant hematology, gastrointestinal cancer, geriatric cancer and medical research. Pictured above are staff from the Sanford office.
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The MaineHealth Cancer Care Network is a coordinated system of care with 11 MaineHealth partner hospitals and organizations committed to improving the health and well-being of our communities. By working together, we provide high quality treatment to patients throughout Maine and Mt. Washington Valley, New Hampshire.

The network is supported by the Harold Alfond Foundation with a five-year grant for $10 million, which has enabled the hiring of providers, patient navigators and program managers, and the deployment of critical technologies for cancer treatment, prevention and education. Our physicians, many of whom have achieved the highest level of training in their fields, value the team approach that brings together experts in medical oncology, radiation oncology and surgical oncology with peers in radiology, pathology, palliative care, oncology nursing, pharmacy and patient navigation. Together, we evaluate a patient’s case and develop an evidence-based treatment plan. Importantly, we then discuss the recommended plan with the patient and engage in shared decision making that takes into consideration that individual’s values and preferences.

We have the expertise to deliver state-of-the-art cancer care to our patients. In 2019, an estimated 8,600 new adult cancer cases were diagnosed in Maine, according to the American Cancer Society; cancer is the most common cause of death in our state. Of these adult cases, nearly two-thirds of the population received care at a MaineHealth Cancer Care Network hospital or outpatient facility. In the following pages, you will see highlights of our data, along with profiles of programs and services. Our network includes:

- A platform for physicians and clinical staff from all network sites to collaborate in the care-delivery process. Multidisciplinary tumor-specific teams have formed to develop common clinical pathways, standardizing our approach to care. Regional tumor boards are established, allowing current cancer
cases to be reviewed by multidisciplinary clinical teams across the network to ensure that patients receive the most appropriate care.

- An array of supportive services including dietitians who specialize in nutritional counseling for people undergoing cancer treatment, as well as social workers and financial counselors who remove barriers to accessing timely cancer care.

The network’s approach to cancer care represents a powerful collaboration of Maine’s largest health system, MaineHealth. Maine Medical Center (MMC) is the academic medical center within the MaineHealth Cancer Care Network, with national accreditations that require we uphold rigorous standards: American College of Surgeons’ Commission on Cancer, American College of Radiology Radiation Oncology and National Accreditation Program (NAPBC) for Breast Centers.

Other hospitals and programs in the network holding these accreditations include: Commission on Cancer accreditation — MaineGeneral Health and Southern Maine Health Care (SMHC); American College of Radiology Radiation Oncology accreditation — MaineGeneral and SMHC; and NAPBC accreditation — Breast Health Program at St. Mary’s Health System and the SMHC Breast Care Center.

Two very large efforts in 2019 to enhance cancer care were:

- The opening of two new patient floors with 64 beds dedicated to surgical and medical oncology at Maine Medical Center as part of its ongoing expansion and modernization construction project in Portland. These floors are part of the newly named Coulombe Family Tower, made possible in part by a generous $7.5-million gift made by Paul and Giselaine Coulombe and their daughter, Michelle Coulombe-Hagerty.

- The $5.1-million grant from the National Cancer Institute to create the Lifespan Program, dedicated to expanding access to clinical trials in rural areas of Maine — intended not only to save lives but also contribute to new discoveries in the fields of cancer prevention, cancer treatment and cancer care delivery.

Maine cancer patients and their families desire access to state-of-the-art patient-centered care. Our singular goal is to ensure that “the right care, in the right location, as close to home as possible” will be provided. We welcome the opportunity to partner with you in the care of your patients with cancer, and I hope this report will give you confidence in the quality of care we offer.

Scot C. Remick, MD, FACP
Chief of Oncology
MaineHealth Cancer Care Network and Maine Medical Center
Professor of Medicine, Tufts University School of Medicine
KEY ACHIEVEMENTS

RESEARCH AND CLINICAL TRIALS

NETWORK RECEIVES $5.1M GRANT FROM THE NATIONAL CANCER INSTITUTE

Cancer patients across Maine and in Carroll County, New Hampshire have access to far more advanced clinical trials in their home communities, thanks to a major federal research grant awarded to the MaineHealth Cancer Care Network in 2019.

The six-year, $5.1-million award from the National Cancer Institute Community Oncology Research Program (NCORP) is the single largest grant ever extended by the National Cancer Institute (NCI) for clinical cancer research and cancer clinical trials in the state of Maine. It establishes the MaineHealth Cancer Care Network Lifespan Program, designed to bring the latest research in cancer prevention, cancer treatment and cancer care delivery to underserved populations. (NCORP is funding a total of 46 institutions, 32 of which, like our network, are community-based sites.)

The network’s Lifespan Program will be the only oncology program in Northern New England to enroll patients in NCI clinical trials at every stage of the cancer continuum, from prevention to survivorship, and from pediatric to adult. Some of the studies will focus on cancer control, screening and prevention, with a goal of reducing the incidence, risk and mortality rates for cancer and improving quality of life for survivors. Others will aim to improve the way cancer care is delivered.

NCORP was developed out of a recognition that both patients and researchers benefit when cancer clinical trials are offered to people where they live, not just at major research institutions in large urban areas. Patients are more comfortable being treated closer to their friends and family. Meanwhile, researchers generate evidence that applies to a more diverse population, contributing to science that leads to improved outcomes for a broader patient population. Patients often feel that in order to get state-of-the-art care and to enroll in clinical trials, they need to travel to a major metropolitan area. We believe patients should have access to advanced care close to home — wherever they live.

*This grant is a transformational award that will bring a wide variety of clinical trials to our rural communities.*
Patients currently have access to clinical trials through the MaineHealth Cancer Care Network at Maine Medical Center, MaineGeneral Health, Southern Maine Health Care, Stephens Memorial Hospital, Waldo County General Hospital and Pen Bay Medical Center. St. Mary’s Regional Medical Center and Mid Coast Hospital will begin enrolling cancer patients in trials through the network in 2020. The Lifespan Program will help extend the reach of clinical trials to Franklin Memorial Hospital, Lincoln Health and Memorial Hospital in North Conway, in addition to increasing the number of clinical trials available to patients at other locations. The number of clinical trials available to oncology patients is expected to nearly triple during the life of this grant.

The MaineHealth Cancer Care Network was also selected as one of 20 NCORP sites to participate in the National Institutes of Health (NIH)-NCI Moonshot BioBank program. This program seeks to collect longitudinal blood and tissue samples from 1,000 oncology research participants over five years. The genomic testing data that is returned to patients and their physicians from the NIH will lead to better understanding of drug resistance and sensitivity and guide physicians in the selection of optimal treatment options for improved patient outcomes.

Other active network research grants include, to name a few, the Maine Cancer Genomics Initiative; NNE-CTR Pilot Award for cardio-surveillance of immune checkpoint blockade; MITE Education Innovation Award for training cancer-focused hospitalists; the Pfizer/Association of Community Cancer Centers Project ECHO for Hereditary Breast and Ovarian Cancer; and the NCI Moonshot SIMPRO Project for patient-reported outcomes, in partnership with Dana–Farber Cancer Institute. There are several scientists based at the Maine Medical Center Research Institute with research funding from NCI, the American Cancer Society and other foundations.

**HOSPITAL EXPANSIONS**

**MAINE MEDICAL CENTER CELEBRATES TWO NEW ONCOLOGY FLOORS**

The opening of 64 private, single rooms dedicated to top-of-the-line oncology care marked a milestone in the Maine Medical Center expansion and renovation project and for the MaineHealth Cancer Care Network. This addition to the Coulombe Family Tower was built to meet the contemporary needs of patients: the pavilions feature modern airflow systems, family lounges and floor-to-ceiling windows. With one floor dedicated to medical oncology and another to surgical oncology, patients with similar health care needs can be grouped closer together and receive focused care. The new oncology beds also are able to adapt to the needs of patients, whether they come to the hospital for a specialized surgery or to receive care and treatment as part of a clinical trial.

These new private rooms will significantly improve the healing environment we offer to oncology patients. Maine Medical Center serves some of the sickest patients and is recognized as playing a critical role in the region’s continuum of care. Medical oncology patients requiring hospitalization moved into the Marshall L. and Susan Gibson Pavilion for Medical Oncology on the new seventh floor in December of 2019. Medical oncology patients will move in to the Susan Donnell Konkel Pavilion for Surgical Oncology on the new sixth floor in February 2020.

Other hospitals in the network continued to expand and renovate for cancer care, including Southern Maine Health Care’s Sanford Campus, Waldo County General Hospital, Pen Bay Medical Center’s Health Center, LincolnHealth’s Herbert and Roberta Watson Health Center and Western Maine Health’s Stephens Memorial Hospital.
GROWTH OF STAFF / MAINEHEALTH CANCER CARE  
COMPREHENSIVE MEDICAL ONCOLOGY PRACTICE SERVES SOUTHERN MAINE

In the fall of 2019, MaineHealth announced the formation of MaineHealth Cancer Care, an expanded medical oncology and hematology practice providing patients with fully integrated, state-of-the-art cancer care. The practice, which joined together existing medical groups at Maine Medical Center/Maine Medical Partners and Southern Maine Health Care, plays a critical role in managing therapies and delivering highly coordinated care among a network of other specialists who are part of the MaineHealth Cancer Care Network. MaineHealth Cancer Care has locations in Biddeford, Sanford and South Portland.

Already home to some of the region’s highest levels of specialty cancer care, MaineHealth now offers patients a greater breadth and depth of cancer care services, more coordinated care and increased access. MaineHealth Cancer Care has nine practicing oncologists who come from a diverse range of leading clinical, research and academic centers. Altogether, these services and providers give patients greater timely access to the latest in treatment approaches.

Medical oncologists and hematologists play a critical role in modern cancer medicine. Medical oncologists typically oversee chemotherapy and biotherapy regimens and directly monitor a patient’s progress, but they may also coordinate care with radiation oncologists, surgical teams and even clinical trials enrollment. We have built an extraordinary team of medical oncologists and hematologists at MaineHealth Cancer Care — a team that works hand in hand with our broad network of specialists to not only deliver personalized care and state-of-the-art treatments but to also earn the trust of patients and their families.

New medical oncologists at MaineHealth Cancer Care include Jessica Bian, MD; Johnson Liu, MD; Jason Moran, MD; Vache Tchekmedyian, MD, MEd; and Michael Voisine, DO. New medical oncologists at MaineGeneral Health include Sneha Purvey, MD, and Lindsey Hathaway, MD. Other physicians who recently joined the network include Elizabeth (Vinny) Seiverling, MD, dermatology; Christina Mimikos, DO, head and neck cancer surgery, Richard Royal, MD, surgical oncology (all with Maine Medical Partners); and Dan Filitis, MD, Mohs surgery at MaineGeneral Health.
Our Work Across the System

• Information Technologies Linkages
  The MaineHealth Cancer Care Network, in collaboration with ClinicalPath, is delivering a software solution for oncologists to access disease-specific, evidence-based clinical pathways defined by national disease committees. Recently, the infrastructure and technical build of the medical oncology phase of the project was completed, providing for a complete bi-directional interface and harmonization of order sets between Epic, the network’s electronic medical record system, and ClinicalPath. Preparation and training of medical oncology providers was completed with a phased rollout by disease type in April 2019. The radiation oncology project phase began in October 2019 and included MaineGeneral Health and Maine Medical Cancer. The ClinicalPath initiative will also result in consistent documentation for MaineGeneral Health medical oncologists providing care at Franklin Memorial Hospital. Once fully implemented, ClinicalPath will be the decision-support tool that will enable the network to standardize our approach to cancer care delivery across the system and monitor compliance with pathways. This information will inform and enhance our network’s Quality Program. Since network-preferred clinical trials will be embedded in ClinicalPath, we anticipate improvement in screening as well as accruals.

• Survivorship Care Plans
  Our survivorship care plan project will greatly improve the efficiency of developing care plans for cancer patients who have successfully completed curative treatment. The new electronic templates in the Epic electronic medical record system are specific to each disease type, enabling information on the patient’s care plan to auto-populate from cancer history and staging information. Once complete, the plan will be stored in the patient record and provided to the patient through their individual portal in MyChart for Epic users. The build of six disease-specific templates has been completed and has undergone final review with key stakeholders to confirm appropriate clinical requirements and optimal functionality. The templates are being shared with non-Epic hospitals, such as MaineGeneral Health to assess interoperability of information across sites.

• Colorectal Cancer Screening
  Screening improves across the network due to work at the primary-care-practice level with workflows, data capture and outreach to patients and through grants to increase screening for underserved populations. Other efforts to support this work include a successful Screening Best Practices Series and a presentation by MaineHealth staff on “What Success Looks Like” at the National Colorectal Cancer Roundtable (NCCRT) meeting. Taken together, all of these efforts have culminated in Maine achieving the highest rankings in the nation for colorectal cancer screenings in 2018 and 2019, according to the NNCRT and American Cancer Society.

• Lung Cancer Screening
  Analysis and strategic planning to increase the number of Maine residents screened for lung cancer within the MaineHealth Cancer Care Network continues; the goal is to increase knowledge of system resources and screening guidelines for providers and patients so that access is not daunting and lung cancer can be detected earlier, thereby impacting mortality in Maine. This work is facilitated by the MaineHealth Lung Cancer Screening Task Force, along with subcommittees to address patient and provider education.
OUTCOMES AND QUALITY DATA

PATIENT CARE QUALITY STANDARDS

Tumor boards are multidisciplinary meetings where complex and new patient cases are discussed in significant detail. We concentrate on patients with difficult tumors and patients who have previously received treatment and, for a variety of reasons, now need a different treatment plan.

<table>
<thead>
<tr>
<th>CASES DISCUSSED IN TUMOR BOARD / MAINEHEALTH CANCER CARE NETWORK</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3,423</td>
<td>3,815</td>
<td>3,888</td>
</tr>
</tbody>
</table>

AS OF DECEMBER 31, 2019

| NUMBER OF TUMOR BOARDS | 10 |
Our clinical trials are research studies that help us find better treatments and ways to prevent cancer and other diseases. The number of total trials accrual grew from 359 in 2018 to 513 in 2019.

<table>
<thead>
<tr>
<th>2019</th>
<th>MAINE CANCER GENOMICS INITIATIVE</th>
<th>NATIONAL CANCER INSTITUTE</th>
<th>INDUSTRY</th>
<th>OTHER</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>CANCER RISK &amp; PREVENTION</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>MMC GYNECOLOGY ONCOLOGY</td>
<td>94</td>
<td>10</td>
<td>11</td>
<td>24</td>
<td>139</td>
</tr>
<tr>
<td>HAROLD ALFOND CENTER FOR CANCER CARE</td>
<td>106</td>
<td>3</td>
<td></td>
<td></td>
<td>109</td>
</tr>
<tr>
<td>HEMOPHILIA</td>
<td>35</td>
<td></td>
<td></td>
<td></td>
<td>35</td>
</tr>
<tr>
<td>MAINE CHILDREN'S CANCER PROGRAM</td>
<td>25</td>
<td></td>
<td></td>
<td></td>
<td>25</td>
</tr>
<tr>
<td>MMC NEUROLOGY</td>
<td>50</td>
<td>2</td>
<td>3</td>
<td></td>
<td>55</td>
</tr>
<tr>
<td>PEN BAY / WALDO</td>
<td>23</td>
<td>3</td>
<td>1</td>
<td></td>
<td>27</td>
</tr>
<tr>
<td>MMC RADIATION ONCOLOGY</td>
<td>2</td>
<td></td>
<td></td>
<td>25</td>
<td>27</td>
</tr>
<tr>
<td>SOUTHERN MAINE HEALTH CARE</td>
<td>8</td>
<td>4</td>
<td></td>
<td>7</td>
<td>19</td>
</tr>
<tr>
<td>MAINEHEALTH CANCER CARE, SOUTH PORTLAND</td>
<td>30</td>
<td>3</td>
<td></td>
<td></td>
<td>33</td>
</tr>
<tr>
<td>STEPHENS MEMORIAL</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>MMC THORACIC CLINIC</td>
<td>39</td>
<td></td>
<td></td>
<td></td>
<td>39</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>314</td>
<td>52</td>
<td>15</td>
<td>132</td>
<td>513</td>
</tr>
</tbody>
</table>
MaineGeneral Health and the Harold Alfond Center for Cancer Care are both important to the MaineHealth Cancer Care Network. We foster our relationships between clinicians, allowing network sites to share patients in a collaborative fashion while mitigating volume concerns. Pictured above are MaineGeneral’s Seth D. Blank, MD, thoracic surgeon, and Kerri Medeiros, RN, oncology nurse navigator.

The MaineHealth Cancer Care Network total analytic case volume grew from 6,251 cases in 2017 to 6,411 in 2018. We treat the majority of cancer cases in Maine and the Mt. Washington Valley of New Hampshire.

**MAINEHEALTH CANCER CARE NETWORK REGISTRY ANALYTIC CASES (DIAGNOSED IN 2018)**

<table>
<thead>
<tr>
<th>Body System</th>
<th>Total MaineHealth</th>
<th>Other in Maine</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL</strong></td>
<td>63%</td>
<td>37%</td>
</tr>
<tr>
<td><strong>ALL OTHER CANCERS</strong></td>
<td>61%</td>
<td>39%</td>
</tr>
<tr>
<td><strong>LEUKEMIA/LYMPHOMA</strong></td>
<td>55%</td>
<td>45%</td>
</tr>
<tr>
<td><strong>THYROID</strong></td>
<td>51%</td>
<td>49%</td>
</tr>
<tr>
<td><strong>MELANOMA</strong></td>
<td>51%</td>
<td>49%</td>
</tr>
<tr>
<td><strong>NEURO (MALIGNANT/BENIGN)</strong></td>
<td>61%</td>
<td>39%</td>
</tr>
<tr>
<td><strong>GU (PROSTATE/BLADDER/KIDNEY)</strong></td>
<td>68%</td>
<td>32%</td>
</tr>
<tr>
<td><strong>GYN (CERVIX/UTERUS/OVARY)</strong></td>
<td>90%</td>
<td>10%</td>
</tr>
<tr>
<td><strong>BREAST</strong></td>
<td>78%</td>
<td>22%</td>
</tr>
<tr>
<td><strong>GI LOWER (COLON/RECTUM)</strong></td>
<td>57%</td>
<td>43%</td>
</tr>
<tr>
<td>**GI UPPER (GAST/PANC/LIVER/BILIARY)</td>
<td>61%</td>
<td>39%</td>
</tr>
<tr>
<td><strong>LUNG</strong></td>
<td>57%</td>
<td>43%</td>
</tr>
<tr>
<td><strong>ESOPHAGUS (EXCLUDES GE JUNCTION)</strong></td>
<td>82%</td>
<td>18%</td>
</tr>
</tbody>
</table>

Source: Percent of Maine Cases per Body System by Facility, Maine Incidence: 1-year average based on 2013, 2015 MCR incidence
NEWLY DIAGNOSED CASES

The number of newly diagnosed cancer cases has grown every year since the 2015 baseline. Recent state data now indicates that the MaineHealth Cancer Care Network is responsible for caring for 63% of newly diagnosed cancer patients within Maine.

<table>
<thead>
<tr>
<th>2017 ACTUAL</th>
<th>2018 ACTUAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL MAINEHEALTH DIAGNOSED CASES</td>
<td>6,112</td>
</tr>
<tr>
<td>BASELINE</td>
<td>11.3%</td>
</tr>
</tbody>
</table>

SHARED CASES

Shared cases metrics help inform the degree of collaboration between the network hospitals, supporting seamless transitions in care as part of the system care model.

<table>
<thead>
<tr>
<th>2017 ACTUAL</th>
<th>2018 ACTUAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL MAINEHEALTH SHARED CASES</td>
<td>886 (14.5%)</td>
</tr>
</tbody>
</table>

PERCENT OF ANALYTIC CASES NAVIGATED

<table>
<thead>
<tr>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAINEHEALTH CANCER CARE NETWORK</td>
<td>6,067 (57.5%)</td>
<td>6,251 (67.7%)</td>
</tr>
<tr>
<td>HAROLD ALFOND CENTER FOR CANCER CARE</td>
<td>1,010 (34.3%)</td>
<td>1,181 (42.3%)</td>
</tr>
</tbody>
</table>

2018 PATIENT NAVIGATION

Patient navigation is individualized care offered to manage complexities associated with a cancer diagnosis and facilitate timely access to care and shared decision making. We review patients for clinical trials, genetics, interpreters, nutrition, tobacco cessation, distress and for American Cancer Society referrals. Patient navigators facilitate care transitions for medical oncology, radiation oncology, gastro oncology, plastic surgery, urology, genetics, pulmonary and palliative care, along with support services of social workers and community resources.

<table>
<thead>
<tr>
<th>PATIENTS RECEIVING EDUCATION</th>
<th>PATIENTS SCREENED TO CLINICAL TRIALS</th>
<th>PATIENTS RECEIVING SMOKINGcessation</th>
</tr>
</thead>
<tbody>
<tr>
<td>5,727</td>
<td>2,715</td>
<td>3,240</td>
</tr>
</tbody>
</table>
Donna DeBlois understands the importance of having a dedicated team of health care professionals by your side when facing a medical challenge. As a practicing nurse and home care/hospice leader for more than 30 years, she is a champion for excellence and innovation in patient care. So when DeBlois was diagnosed in 2018 with upper gastrointestinal cancer — a treatable though incurable cancer — she wasn’t going to let it slow her down. DeBlois turned to medical oncologist Peter Rubin, MD, of MaineHealth Cancer Care in Sanford to develop an innovative, coordinated treatment plan to fight the disease. Dr. Rubin worked with DeBlois on a targeted therapy that differs from traditional chemotherapy yet still uses drugs to treat the cancer. It focuses on the cancer’s specific genes, proteins or the tissue environment that contributes to cancer growth and survival. Targeted drug therapies
that block molecular pathways involved in the development and progression of gastrointestinal cancers have recently
gained considerable attention for maintaining better outcomes. “My treatment allows me to travel with the use
of a port and a small bag for the drug,” said DeBlois. Her electronic health record also “travels” with her, and her
providers throughout the MaineHealth network can access her care plan anywhere at any time. DeBlois may travel
to a meeting in Saco at the beginning of the week, receive treatment in Biddeford and then participate in a meeting
in Augusta later in the week, continuing treatment at the Harold Alfond Cancer Care Center.

When Kevin Fay received a message from MaineHealth’s My Chart, an online program that connects him to
his medical provider appointments, office visits notes and test results, he paid attention. On his fiftieth birthday,
Kevin opened a MyChart email alert that said it was time for him to consider scheduling a colonoscopy. He
contacted his primary care physician, Fred Emerson, MD, at Maine Medical Partners Lakes Regional Primary
Care in Windham to schedule the procedure, which uncovered a cancerous polyp that needed to be removed.
In 2018, Kevin was referred to Melville Parker Roberts, MD, Maine Medical Partners — Casco Bay Surgery,
and underwent successful surgery at Maine Medical Center. After the surgery, Leslie Foreman, RN, a patient
navigator with the MaineHealth Cancer Care Network, coordinated his care with Roger Inhorn, MD, PhD,
MaineHealth Cancer Care, South Portland. “I was told I would have coordinated care throughout my care
journey,” Kevin added. “From my PCP to surgeon to my annual follow-up visit this past spring, I didn’t have
to worry about the transfer of any medical records. Each provider knew my story, and I’m cancer-free today.”
MaineHealth believes patients like Kevin are best served by a truly integrated care network that can deliver on
its commitment to state-of-the art cancer care, close to home.

SPECIALISTS BRING COLLABORATION
AND INNOVATION TO CARE

Some MaineHealth Cancer Care Network cancer specialists work collaboratively to provide the full range of
treatment for patients with head and neck cancer — including cancers of the mouth, sinuses, nose and throat. Early
detection is important for the most effective treatment.

Christina Mimikos, DO, of Maine Medical Partners — Otolaryngology and the MaineHealth Cancer Care Network,
treats both benign and malignant tumors of the head and neck, and performs surgery for disorders of the salivary
glands, thyroid, nose, sinuses, throat and voice box. Dr. Mimikos works closely with network patient navigator Amber
O’Leary, RN, to coordinate care for cancer patients throughout their treatment. The treatment team may include
radiation oncology, medical oncology, speech pathology, nutritional experts and physical or occupational therapists.
Ensuring a multidisciplinary approach to each patient’s care is critical for helping patients maintain optimum health
and function during cancer treatment.

Speech Language Pathology at Waldo County General Hospital in Belfast collaborates with Maine Medical Center
to provide treatment for patients across Maine. The program is unique for the state and nation, and the network
provides coordinated care to patients at different locations. For many patients diagnosed with head and neck cancer,
there is a high likelihood of swallowing dysfunction. Such patients may be referred to Waldo County for swallowing
evaluation prior to treatment. After being evaluated, patients in need receive swallowing treatment before, during and
after their cancer treatment to maximize best swallowing recovery and maintain optimal swallowing and nutrition.
For those patients who find travel difficult or must travel longer distances, telehealth can be provided. Therapy can be provided directly to a patient at home by video connection on their computer, tablet or smart phone.

**IMPROVING SURGICAL ACCURACY AND QUALITY OUTCOMES**

Southern Maine Health Care (SMHC) was the first hospital in Maine to introduce a new procedure called magnetic seed localization, or Magseed, for breast cancer patients. This procedure dramatically improves the patient experience while maintaining surgical accuracy and quality outcomes. SMHC’s Center for Breast Care continues to find ways to improve patient outcomes, according to Cynthia Chao, MD, SMHC General Surgery.

At the time of surgery breast cancer patients often need lymph nodes removed to determine if the cancer has spread. This surgery puts the patient at risk for arm swelling. Though the risk is small, some patients develop lymphedema. Now, patients who medically qualify are offered Axillary Reverse Mapping, which may lower lymphedema risk. Particles are injected into the breast to identify the nodes to remove. A blue dye is injected into the arm to show which nodes drain the arm and should be left alone, if possible.

Staff at SMHC are also working to integrate Magtrace, a system that can lower lymphedema risk to zero in certain mastectomy patients. (Currently, patients with Stage 0 breast cancer who choose mastectomy must have lymph nodes removed at the time of mastectomy, in case the final pathology shows Stage 1 cancer. The use of Magtrace allows the patient two weeks to return to surgery and have nodes removed, if the pathology shows Stage 1 cancer. Patients who remain at Stage 0 cancer after surgery with no nodes removed have zero lymphedema risk.) These exciting techniques help lower lymphedema rates for breast cancer patients.

Staff from Speech Language Pathology at Waldo County General Hospital included speech language pathologists Michael Towey, MA, CCC-SLP, and Erica James, MA, CCC-SLP.
MATRIx FOR EVALUATION OF ABNORMAL CHEST IMAGING

Maine Medical Center’s program for the evaluation of abnormal chest imaging, known as MATRIx (Multidisciplinary Thoracic Review Program) made significant process in 2019 to lead the way in the network. MATRIx was designed to allow the review of abnormal findings on thoracic imaging by a multidisciplinary team consisting of representatives from Pulmonary Medicine, Radiology and Thoracic Surgery, in partnership with Chest Medicine Associates and Spectrum Radiology.

MATRIx provides expedited review and evaluation, recommendations and coordination of consultations with appropriate specialists for patients with abnormal thoracic imaging findings. The program:

- Streamlines evaluation and treatment of patients
- Provides a system to expedite further management of care
- Provides rapid evaluation in a multidisciplinary setting and can provide management recommendations or follow-up and care coordination based on the recommendations of the team
- Is available to any provider who finds abnormalities on imaging studies obtained as part of daily patient care.

Through patient navigators, we can provide recommendations for further management/follow-up/evaluations and facilitation of consultation with appropriate specialists. MATRIx brings together the physician experts and studies needed to deliver convenient, all-inclusive care for patients with chest abnormalities. The program continues its outreach across the MaineHealth Cancer Care Network for future growth, focusing on decreasing the average time to both surgery and CT-guided biopsy.

INNOVATIONS IN CANCER CARE

We are committed to knowledge sharing and the ongoing discussion of our best practices and outcomes. Visit mainehealth.org/cancer-innovate to find our latest provider interviews and case studies that share insights into our coordinated care network and the expert minds behind it.

In this provider section of the website, find clinical guidelines, clinical trial information, and patient education.
MaineHealth has been awarded a grant by the National Cancer Institute (NCI) as a member of the NCI Community Oncology Research Program (NCORP).