About the MaineHealth Cancer Care Network

Maine Medical Center is a proud network partner of the MaineHealth Cancer Care Network, which brings together a team of cancer experts to lead a coordinated system of cancer care across Maine and the Mt. Washington Valley in New Hampshire. This team approach provides the best evidenced-based cancer care as close to home as possible. So wherever a patient accesses care within the network, they receive the best care, based on nationally recognized treatment guidelines for cancers.
At Maine Medical Center (MMC) Cancer Institute, we have the expertise to deliver state-of-the-art care to our patients. Our physicians, many of whom have achieved the highest level of training in their field, 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 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 patients and engage in shared decision making that takes into consideration that individual’s values and preferences.

In the following pages, you will see highlights of the data we track to measure our work treating patients with five of the most prevalent cancers in Maine: breast, gynecological, prostate, lung, and colon and rectal. Our outcomes meet or exceed national measures:

- We care for more than 3,000 people with cancer annually — more than any other hospital in the state.
- We hold three national accreditations that require we uphold rigorous standards:
  - American College of Surgeons’ Commission on Cancer
  - American College of Radiology Radiation Oncology
  - National Accreditation Program for Breast Centers
- 10 disease-specific multidisciplinary tumor boards meet 24 times a month to review cases and develop recommendations for treatment plans.
- 11 disease-specific patient navigators support patients and their families throughout their cancer journey.
- An array of supportive services includes dieticians who specialize in nutritional counseling for people undergoing cancer treatment, and social workers and financial counselors who remove barriers to accessing cancer care in a timely fashion.
- MMC Cancer Institute’s Radiation Oncology Department is part of the core team so patients have access to the latest, most effective treatment options proven to deliver the best possible outcomes.
- At our expanded Adolescent and Young Adult (AYA) & Adult Cancer Survivorship Clinic, we review each patient’s prior cancer diagnosis and treatment, review family cancer history, evaluate and screen for possible late effects based on individual risk, and provide a cancer survivorship care plan.
- MMC is the academic medical center within the MaineHealth Cancer Care Network. The network’s approach to cancer care represents a powerful collaboration of Maine’s largest health system, MaineHealth. We deliver the best cancer care as close to home as possible for the people of Maine and eastern New Hampshire.

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 here in Maine.
TUMOR SITE SPECIFIC: Breast

MMC’s breast program providers offer the most dedicated experience and broadest scope of services, treating more patients with breast cancer than any other hospital in northern New England.

The Breast Care Center (BCC) provides comprehensive breast health care in a welcoming and patient-centered environment. Services include early detection, diagnostic imaging, specialist consultation for benign breast conditions, high-risk evaluation and breast cancer treatment. Our program was the first in Maine to earn full accreditation by the National Accreditation Program for Breast Centers (NAPBC), ensuring all patients access to critical and comprehensive services.

Our model of care, which has been in place since 1996, includes a highly integrated, multidisciplinary team of specialists derived from MMC-employed physicians and providers from the most respected, private practice groups in the community. This multidisciplinary team is comprised of fellowship trained breast surgical oncologists, radiologists, pathologists, radiation oncologists, medical oncologists, and breast reconstructive surgeons. Other members of the team include dedicated breast nurse practitioners, clinical patient navigators and social workers. The Breast Care Center also provides a program for high-risk patients in collaboration with the Cancer Risk and Prevention Clinic.

State-of-the art breast care treatments and distinguishing features of MMC Breast Care Center

MMC Breast Cancer Center sees many patients with complex issues; options for treatment are discussed with each patient to ensure that the patient makes an informed decision.

Seed vs Wire Localization
At MMC, 86% of breast surgery patients received the radioactive seed localization procedure.

- A seed technique is often preferred and may be more comfortable and convenient for some patients. Rather than inserting a localizing wire, this newer technique involves placing a radioactive pellet, or “seed,” in the breast next to the tumor. Studies have shown that surgical outcomes, such as the amount of tissue removed and the rate of obtaining ‘clear’ margins of tissue around the tumor, are just as good with the seed method, and it is more desirable for patients. MMC was the first hospital in the state to provide this treatment.

Breast Reconstruction
79% of patients having mastectomies at MMC choose to have breast reconstruction.

- One of the standards from the National Accreditation Program for Breast Cancer (NAPBC) is that every woman considering a mastectomy for the treatment of breast cancer receives the support she needs to make an informed decision about breast reconstruction. It is recognized that there are clear advantages of immediate reconstruction following a mastectomy. We work in close collaboration with reconstruction and plastic surgeons to offer breast reconstruction when appropriate.

Hypofractionated WBI
With a denominator of T1/T2 N0 M0; lumpectomy; at age >39, 79% (76/96) are treated with Hypofractionated WB.

- Hypofractionated whole breast irradiation (HF-WBI) has been proved effective and safe, and even better for late or acute radiation toxicity for early breast cancer. Moreover, it improves patient convenience, quality of life and is expected to be advantageous in the medical care system by reducing overall cost. MMC is a leader in the utilization of HF-WBI breast irradiation in the treatment of breast cancer patients after breast conserving surgery (lumpectomy).
TUMOR SITE SPECIFIC: 
Gynecological

Receiving treatment from a specialist is important because studies show that patients with gynecologic cancers who are treated by a gynecologic oncologist have a better likelihood of prolonged survival than those who receive care from a non-specialist.

MMC provides a comprehensive team of multidisciplinary, subspecialty providers focused on the diagnosis and treatment of women with gynecologic cancer. Maine Medical Partners - Women’s Health and Gynecologic Oncology provides the only Board certified physicians in Maine to have undergone fellow training in the advanced surgery and chemotherapy required to treat gynecologic cancer.

Gynecologic oncologists are not only trained to be skilled surgeons capable of performing cancer operations, but they are also trained in prescribing the appropriate chemotherapy and/or referral for radiation therapy when indicated. The radiation oncologist is part of the gynecologic oncology multidisciplinary team. This comprehensive approach translates into better patient outcomes. MMC’s gynecologic oncologists participate in a weekly meeting, called a tumor board conference, with specialists from the different disciplines, including radiation oncology and pathology. The specialists pool their expertise to explore all appropriate treatment options, including new therapies, and have access to state-of-the-art clinical trials when applicable to determine the most effective care plan for individual patients.

MMC Cancer Institute’s treatment outcomes meet or exceed CoC quality benchmarks. The estimated performance rates listed below are an indication of MMC’s concordance with evidence-based treatment guidelines for high-volume tumor sites. We use this data to improve outcomes as well as clinical management and coordination of patient care in our multidisciplinary setting. Minimally invasive surgery for endometrial cancer, using laparoscopy or robotic surgery, has been demonstrated to improve surgical outcomes and result in fewer complications for patients. As the data indicates, MMC is a leader in this area. MMC also exceeds the CoC guidelines on the use of adjuvant chemotherapy and radiation therapy for endometrial cancer (Stage III or IV).

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<tr>
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<th>CoC</th>
<th>MMC</th>
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<tr>
<td>Endometrial cancer minimally invasive surgery</td>
<td>77.0% (CoC ENDLRC)</td>
<td>89.4%</td>
</tr>
<tr>
<td>Endometrial cancer adjuvant chemo and radiation</td>
<td>82.9% (CoC ENDCRT)</td>
<td>100%</td>
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Data Source: CP3R, Commission on Cancer, First released: November 2008, Last updated: October 2017. For a more complete description of the Commission on Cancer Practice Profile Report, please visit the following website: www.facs.org/cancer.

TUMOR SITE SPECIFIC: 
Prostate

MMC’s program is one of the most advanced and comprehensive programs of its kind in the nation with specialists in medical oncology, surgery and radiation oncology.

Our Prostate/Genitourinary Cancer Program provides multidisciplinary, subspecialty care in the diagnosis and treatment of genitourinary cancer. Our multidisciplinary care team has attained the highest credentials in their area of specialty. Urologic surgeons perform surgery using the da Vinci® surgical robotic system, performing the highest number of robotic assisted radical prostatectomy (RARP) procedures in Maine. Radiation oncologists use the most up-to-date technology in the curative management of prostate and other genitourinary cancers. Maine Medical Center offers MRI/ultrasound fusion prostate biopsy, an advanced procedure of utilizing multi-parametric MRI images to help target suspicious lesions and improve detection of clinically significant cancers. Our team includes medical oncologists who specialize in treating prostate cancer with medication, such as chemotherapy, immunotherapy and hormonal therapy. Clinical trials are also available to prostate cancer patients to ensure that access to leading edge cancer treatment is available within the local community.

Comprehensive treatment options backed by active surveillance and navigation.

Active Surveillance
MMC active surveillance rate is at 13%, compare to 8% for the U.S. and 7% for New England. (National Cancer Database (US|Regional))

Active surveillance entails closely monitoring a prostate cancer patient’s condition and proceeding with treatment only if cancer progression is demonstrated. This would include a PSA doubling time that occurs in less than 3 years or a tumor grade progression to a Gleason score of greater or equal to 7. Active surveillance is generally only considered in men with early-stage, low-risk disease.

Navigation
81% of patients are navigated

Patients benefit from the services of a genitourinary clinical patient navigator, an experienced cancer nurse who engages in shared decision making and serves as an advocate and care coordinator for all newly diagnosed prostate cancer patients.
TUMOR SITE SPECIFIC: Lung

The Thoracic Oncology Program is home to one of the most experienced teams of thoracic cancer specialists in northern New England, with a lung and esophageal cancer patient volume that qualifies MMC as a national center of excellence in this type of care. We are the only hospital in Maine with this level of surgical volume and the depth of experience it represents.

MMC provides a comprehensive range of diagnostic and treatment resources for lung and esophageal cancer patients as part of its specialized Thoracic Oncology Program. The program uses a multidisciplinary model to plan the best care of patients with thoracic cancers. This team includes specialists in pulmonary medicine (treating diseases of the lung) or gastroenterology (treating diseases of the esophagus) working with experts in radiology, thoracic surgery, pathology, medical oncology, radiation oncology, interventional radiology, and palliative care. The team is also comprised of an oncology nurse navigator, research nurses, tobacco treatment specialist, oncology dietitian, oncology social worker, and the American Cancer Society patient navigator.

The navigation process helps patients through their diagnosis and testing, to guide the patient to the appropriate physicians with the information needed to discuss treatment options. These visits can be conducted in our multidisciplinary clinic with members from all aspects of the treatment team, tailored to each individual patient. The full spectrum of treatment options are available from surgery, chemotherapy and radiation treatment, whether used individually or in a coordinated, combined treatment plan.

MMC also provides a Comprehensive Lung Cancer Screening Program to screen or test for lung cancer in people who are at a high risk for developing the disease due to age and smoking history. The aim of this program is to find lung cancers early, before there are symptoms. Lung cancers found at an early stage, before they have had a chance to spread, have the best treatment options and outcomes.

MMC Cancer Institute’s treatment outcomes meet or exceed CoC quality benchmarks. The estimated performance rates listed below are an indication of MMC’s concordance with evidence-based treatment guidelines for high-volume tumor sites. We use this data to improve outcomes as well as clinical management and coordination of patient care in our multidisciplinary setting.

<table>
<thead>
<tr>
<th>Lung nodes and node stations sampled</th>
<th>CoC</th>
<th>MMC</th>
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<tr>
<td>As the data indicates, MMC significantly exceeds the benchmark in this area. Lung cancer staging is the assessment of the extent to which a lung cancer has spread from its original source. As with most cancers, staging is an important determinant of treatment and prognosis.</td>
<td>47.7% 10RLN</td>
<td>72.6% 10RLN 73% + LN Stations</td>
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Types of Surgery

MMC exceeds benchmarks for the treatment of early stage lung cancer with respect to the use of surgery and systemic treatment.

| Surgery not part of 1st treatment for cN2          | 92.1% (CoC LNoSurg) | 94.7% |
| Systemic treatment for pN1 and pN2                | 89.7% (CoC LCT)     | 100.0% |

“"The thoracic oncology navigation program provides a patient-centered approach to the evaluation of lung and esophageal cancers — tailoring the evaluation of the patient’s individual situation and guiding them through the process to the team of physicians who will be involved in the treatment plan.”

Gary Hochheiser, MD
Director, Thoracic Surgery/Thoracic Oncology and Medical Director for the Lung Cancer Screening Program, MMC and Maine Medical Partners — Thoracic Surgery

“MMC Cancer Institute’s oncology surgeons perform more of every type of cancer surgery than any other hospital in Maine, a volume level that translates into patient outcomes that consistently meet or exceed national benchmarks.”

Timothy L. Fitzgerald, MD
Director, Surgical Oncology, MMC and MMP — Surgical Care
Maine Medical Center provides comprehensive, multidisciplinary care for colon and rectal cancer. All specialists involved in the evaluation and management of the cancer work together to determine the optimal evaluation and course of treatment for each patient. This multidisciplinary team is comprised of fellowship-trained oncologic surgeons and radiologists, pathologists, genetic counselors, medical oncology and radiation oncology. A critical member of the team is an experienced oncology-certified clinical patient navigator to help coordinate care on behalf of the patient for referrals, palliative care, nutrition and ostomy care.

The team's commitment to outstanding patient care is augmented by the latest advances in surgical, endoscopic and diagnostic imaging techniques. MMC treats the largest volume of colon and rectal cancer in the state.

**TUMOR SITE SPECIFIC: Colon and Rectal**

Our colon and rectal cancer program includes:
- Three Board certified colorectal surgeons, dedicated to colorectal surgery
- Streamlined screening/referral to Cancer Risk and Prevention
- Fellowship-trained MRI radiologists

MMC Cancer Institute's treatment outcomes meet or exceed CoC quality benchmarks. The estimated performance rates listed below are an indication of MMC's concordance with evidence-based treatment guidelines for high-volume tumor sites. We use this data to improve outcomes as well as clinical management and coordination of patient care in our multidisciplinary setting. As the results indicate, MMC significantly exceeds the benchmarks for two important measures of care for colon cancer and demonstrates the use of multidisciplinary treatment and advanced surgical techniques for the care of rectal cancer patients.

<table>
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<tr>
<th>CoC</th>
<th>MMC</th>
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<tr>
<td>Colon lymph node assessment</td>
<td>92.0% (CoC 12RLN)</td>
</tr>
<tr>
<td>Colon adjuvant chemotherapy</td>
<td>87.6% (CoC ACT)</td>
</tr>
<tr>
<td>Rectal cancer multidisciplinary treatment</td>
<td>87.1% (CoC RECRTCT)</td>
</tr>
<tr>
<td>Rectal cancer sphincter sparing surgery</td>
<td>N/A</td>
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</table>

Data Source: CP3R, Commission on Cancer, first released: November 2004, last updated: October 2017. For a more complete description of the Commission on Cancer Practice Profile Report, please visit the following website: www.facs.org/cancer.

**Other Components of Quality-Driven Care**

Cancer support and resources often provide the extra services that people with cancer and their loved ones need. Our staff partner with patients to help coordinate care and access support resources, such as nutritional counseling, support groups, home health and palliative care.

- Patients Navigated: 2,950 (97%)
- Patients Screened to Clinical Trials via Navigators: 1,484 (49%)
- Patients Receiving Smoking Cessation: 1,585 (52%)
- Patient navigation is individualized care offered to overcome system barriers 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.
- MMC 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.