



# Cheyenne Regional Cancer Center

## **2017-2018 Annual Report**

Based on 2016-2017 Cancer Program Activities  
and 2017 Cancer Registry Data

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# Message from the Chair



The Cheyenne Regional Medical Center's Cancer Committee, which I had the privilege of chairing once again this year, continued to develop our American College of Surgeons' Commission on Cancer-accredited program in 2017. Our focus throughout 2017 was to provide our patients with the most current, high-quality, compassionate care available, while also allowing them to stay close to home and family. This report offers a summary of our personalized patient-centered care. It also showcases our achievements and activities in addition to information about our patient population in 2017.

Much of the data presented here was prepared by our cancer registrars. The registrars collect and organize the data. They also monitor trends, assist our Cancer Committee with studies and analysis and submit de-identified aggregate data to the National Cancer Database for research and to support the Wyoming Cancer Surveillance Program.

The service and care that take place in our Cancer Center are largely due to the work of our Cancer Committee. I am so appreciative of the continued dedication and commitment shown by committee members, including our radiation and medical oncologists, surgeons, pathologists, diagnostic radiologists, the palliative care and hospice medical director, members of administration, the service line director, social workers, nurses, chaplains, physical therapists, cancer registrars, staff from the quality department, the American Cancer Society representative and many others.

In addition, I would like to recognize our Cancer Center volunteers. This dedicated group provides a wonderful service to our patients and staff.

On behalf of the entire Cancer Committee, I would also like to express our tremendous gratitude for the contributions and engagement of our community as a whole. We are truly honored to be able to care for you and serve you.

A handwritten signature in black ink, appearing to read 'Alana Workman'. The signature is fluid and cursive, with a long horizontal stroke at the end.

**Alana Workman, MD**  
Chair, Cancer Committee

# Message from the Service Line Director



In 2017 Cheyenne Regional's Oncology Program continued to provide outstanding care and treatment following the American College of Surgeon's Commission on Cancer accreditation standards.

## **Major goals for the year included the following:**

- Our clinical goal was to partner with Cheyenne Radiology Group (CRG) to achieve a Breast Center of Excellence designation for our Women's Imaging Pavilion, which is a joint venture between our health system and CRG. In April 2017 the Women's Imaging Pavilion achieved this designation along with a three-year accreditation by the American College of Radiology.
- Our programmatic goals included exploring the feasibility of a multidisciplinary breast clinic, providing CMEs for physician attendance at the Cancer Conference (tumor board) and obtaining links in coordination with our registry software to improve follow-up rates.

## **Our Cancer Committee's 2017 quality improvement studies were as follows:**

- To study the percentage of patients aged 65 years and older who had an advance care plan or surrogate decisionmaker documented in the medical record. We discovered that we could increase the percentage by discussing advance care plans or directives with patients when they received treatment education. This led to the creation of more user-friendly patient care plans and also allowed us to answer patients' questions about advance care and surrogate decisionmakers.
- To study if pain intensity was being documented by the patient's second office visit. This study included all patients with a cancer diagnosis who were receiving chemotherapy or radiation therapy. We discovered that not all providers were documenting this in the same location in the chart. By standardizing our processes, we were able to show that this was being done and thereby increase the percentage.

## **Our Cancer Committee's 2017 quality improvement projects were as follows:**

- Increase palliative care utilization. We were able to increase the volume of patients seen by our palliative care team from a low of 28 percent to an average of about 57 percent.
- Increase the documentation of performance status on medical and radiation oncology patients prior to treatment. We were able to increase the pretreatment documentation of performance status by about 70 percent.

## **Below are other achievements in 2017:**

- Twenty-one patients were enrolled in clinical trials (4 percent of eligible patients).
- Fifty-four patients were provided with genetic counseling.
- One hundred and thirty-two patients were provided with survivorship care plans.

Last year we started highlighting team members in the annual report and decided to continue this focus for 2017. We hope you enjoy getting to meet the individuals featured here.

I also want to share that I will be stepping down from my position in November 2018. I have been with Cheyenne Regional for 40 years and have watched the oncology services grow exponentially into a program that would make any healthcare system proud. We offer the same high-quality services here in our community that you would find in many larger cities.

In closing, I want everyone in our system and community to know what an honor it's been to work alongside the outstanding providers and dedicated staff of our Cancer Center. Each and every one gives their all to their patients. I will miss being a part of this excellent team but know that only greatness will follow.

Sincerely,

 CCS-P  
Oncology Service Line Director

# Cancer Committee 2017-2018

**Alana Workman, MD**

*Medical Oncology, Cancer Committee Chair*

**Amanda Watson, CTR**

*Cancer Registrar*

**Amber Carroll, PT, DPT, CLT-LANA**

*Physical Therapy and Rehabilitation Services*

**Anita Janssen, RN**

*Accreditation Specialist, Quality Improvement Department*

**Ashley Davis, RN, BSN**

*Hospice and Palliative Care Manager*

**Barbara Lawyer, RN**

*Oncology Program Manager-Outreach / Community Outreach Coordinator*

**Brook Zabka, RN, BSN**

*Oncology Nurse Navigator*

**Bruce Linscheid, M Div**

*Director of Pastoral Care*

**Cynthia Smith, MSN, RN**

*Oncology Clinical Nurse Educator*

**Dana Pate, MS, RN, BSN**

*Oncology, Hematology and Infusion Clinical Manager*

**Danette Best, RN, BSN, OCN**

*Oncology Nurse Navigator*

**Debbi Armstrong**

*American Cancer Society*

**Denise Hopkins, PCSW, MSW**

*Oncology Social Work Navigator*

**Douglas Schmitz, MD**

*Alternate General Surgery Representative*

**Elizabeth Marshall, RHIA, CTR, CCS**

*Cancer Registrar*

**Ellen Rossi, RN**

*Quality Improvement Coordinator*

**Eric Hoyer, MD**

*Diagnostic Radiologist*

**Jakub Stefka, MD**

*Pathologist*

**Jana Gurkin**

*American Cancer Society*

**Jennifer Van Horn, RN, MSN, AOCNS**

*Oncology Clinical Research Specialist / Coordinator, Genetic Counselor*

**Jessica Warren, RN, RNP**

*Palliative Care / Hospice Representative*

**Kristen Begger, MSN, NP-C**

*Oncology Clinic Nurse Practitioner*

**Laurie Wright, RN, BSN**

*Administrator of Aging Services*

**Leonard Geringer, RTT, RTR**

*Radiation Oncology Manager, Practice Manager Medical Oncology Office, Alternate for Oncology Service Line Director*

**Lisa Burton, MD**

*General Surgery Representative*

**Maristela Batezini, MD**

*Medical Oncology, Cancer Liaison Physician, Alternate Chair*

**Melissa Wright**

*American Cancer Society*

**Michelle Anaya, RN**

*Patient Safety and Quality Coordinator, Alternate for Quality Improvement Department Representative*

**Mohamed El-Tarabily, MD**

*Medical Oncology, Cancer Registry Quality Improvement Coordinator*

**Nyoka Carter, LPN**

*Alternative Quality Improvement Coordinator*

**Phillip Haberman, MD**

*Pathologist*

**Rebecca Lavallie, RN**

*Oncology Clinic RN*

**Robin Roling, RN**

*Chief Operating Officer*

**Sophie Winget, RD, LD**

*Clinical Dietician*

**Subashini Furman, MD**

*Radiation Oncologist*

**Tamela Thiede, RTR, CCS, CCS-P**

*Oncology Service Line Director*

**Tiffany Malcom, RN**

*Oncology Inpatient Unit Nurse Manager / Oncology Nursing Representative*

**William Ketcham, MD**

*Diagnostic Radiologist*

# Comprehensive and Compassionate Treatment

## OVERVIEW

The Cheyenne Regional Cancer Center offers a comprehensive and compassionate treatment, prevention and research program that delivers high-quality oncology care to patients from southeastern Wyoming, western Nebraska and northern Colorado. Our services include the diagnosis, management and treatment of cancer and hematopoietic diseases, in addition to a variety of resources that support our patients and their families.

Our vision is to ensure that each patient achieves the highest quality of life possible, while also holding onto hope.

This vision is fulfilled by caring for the mind, body and spirit of the patient and the patient's family by utilizing:

- State-of-the-art, advanced technology designed specifically for cancer treatment
- An expert team of cancer treatment providers, nurses and other specialists
- Diagnostic technologies and treatments that reduce the symptoms and side effects of cancer treatment

As a whole, our Cancer Center focuses each and every day on having a positive impact on survival rates and improving the overall quality of life for each patient we have the privilege to care for.

## AMERICAN COLLEGE OF SURGEONS' COMMISSION ON CANCER ACCREDITATION

Cheyenne Regional Medical Center is the first and only hospital in Wyoming to receive the American College of Surgeons' Commission on Cancer accreditation. Hospitals with this accreditation are surveyed every three years to ensure that they meet the commission's standards.



As part of the accreditation process, Cheyenne Regional's Cancer Committee establishes goals for quality improvement and directs the oncology program's growth by evaluating new technologies, programs and services that would enhance patient care.

Our Cancer Committee includes board-certified physicians from the following medical specialties that diagnose or treat cancer: surgery, medical oncology, hematology, diagnostic radiology, radiation oncology, pathology, internal medicine, family medicine, palliative care and urology.

Input is also provided by the following Cheyenne Regional departments: Administration, Social Work, Patient Navigation, Cancer Registry, Rehabilitation, Nursing, Nutritional Services, Quality Improvement, Clinical Research and Community Outreach.

Clinical and demographic data are collected by Cheyenne Regional's Cancer Registry employees. This information guides our decisions and can ultimately help us improve the prevention, detection and treatment of cancer. Data collection and analysis can also impact overall patient care and the kinds of services we offer, with the goal of improving the survival rate and quality of life for cancer patients in our region. Our Cancer Registry employees are instrumental in maintaining our accreditation and monitoring our compliance with the standards set by the American College of Surgeons.



*Cancer Registrars: Amanda Watson & Elizabeth Marshall*

## MULTIDISCIPLINARY CANCER CARE

The Cheyenne Regional Cancer Center provides a multidisciplinary approach to cancer care. Our team meets regularly in Cancer Conference to discuss patient cases that are diagnosed and / or treated at the hospital. Physicians and other health professionals involved in the care of cancer patients present and discuss the cases, including a review of each patient's history, pathology and imaging studies. In cooperation with the patient, this team develops a unique and comprehensive treatment plan that may include conservative monitoring, surgery, chemotherapy, radiation or a combination of treatments. Most patients are able to make appointments and see their oncology physicians in one location and on the same day.

# Cancer Care Program

## CHEYENNE REGIONAL CANCER SERVICES: ONCOLOGY, HEMATOLOGY AND INFUSION

Medical oncologists Dr. Maristela Batezini, Dr. Mohamed El-Tarabily and Dr. Alana Workman, specialize in diagnosing and treating blood disorders and cancers. They work with an experienced staff to provide individualized, compassionate and supportive care for patients. An onsite laboratory processes tests quickly, which helps in making critical treatment decisions. A full-time triage nurse with specialized training is also available to answer patient questions about medications, side effects, symptoms and other treatment-related topics.

The infusion area offers a relaxing environment for patients undergoing lab tests, chemotherapy, specialty infusions, blood transfusions and injections. Services are provided for patients with a wide variety of diagnoses, including cancer, rheumatoid arthritis, anemia and infections requiring intravenous therapy. All therapies are provided by registered nurses who are chemotherapy / biotherapy-certified by the Oncology Nursing Society. Onsite pharmacists prepare medications when the patient arrives, according to the physician's order and specific to the patient's treatment.

## PATHOLOGY

Our Pathology Department can diagnose and classify all cancer types and in doing so helps physicians determine the most effective treatments. Each pathologist is board certified by the American Board of Pathology in Clinical Pathology. The department offers 24- to 48-hour turnaround times for most tests.

## HOSPICE

Cheyenne Regional Hospice offers outpatient and inpatient services, with inpatient care provided at the Davis Hospice Center. Patients can be referred for hospice care by a physician, or the patient can speak directly to our staff about when hospice care is appropriate. Cheyenne Regional Hospice also offers bereavement and other services to support and guide those who are grieving.

## PALLIATIVE CARE

Palliative care can be offered during any phase of an illness and is often used to relieve pain, shortness of breath, fatigue, constipation, nausea, loss of appetite, difficulty sleeping and other symptoms that impact quality of life.

Medical decisions and treatment are guided by a team that includes palliative care physicians, nurse practitioners, social workers and chaplains. The team also provides support and resource assistance. This service is available to individuals receiving outpatient care at the Cancer Center.

## REHABILITATION

Rehabilitation services focus on helping patients achieve the best physical, social, psychological and work-related functioning possible during and after cancer treatment. Many patients find that rehabilitation can be especially helpful in overcoming fatigue. Patients who may need additional rehabilitation services can participate in specialized training and classes at Gold's Gym in Cheyenne.

## LABORATORY

Cheyenne Regional's Laboratory plays a vital role in detecting, diagnosing and treating cancer. Our onsite laboratory provides fast results for many routine laboratory tests, enabling physicians to quickly prescribe or adjust patients' treatment plans.

## NUTRITIONAL SERVICES

A nutritional assessment, patient education, nutritional supplements and personalized high-protein or nutrition-dense diets are provided by the oncology dietitian to help patients maintain healthy eating habits during cancer treatment.

## LYMPHEDEMA THERAPY

Lymphedema care is offered by lymphedema specialists in the Cancer Center's massage therapy room, which was designed specifically to care for patients undergoing this form of therapy.

## SURGERY AND TECHNOLOGY

Cheyenne Regional provides surgical services in the following areas: general, heart, vascular, neurology, orthopedic, genitourinary, gynecology, maxillofacial, plastic, ear / nose / throat, ophthalmology and dental. Our surgical team is dedicated to providing exceptional patient care and outcomes through the use of specialized, state-of-the-art technology, including a new da Vinci® robotic surgical system. The da Vinci system provides surgeons with greater precision and control and gives them minimally invasive access to hard-to-reach, hard-to-see internal structures within the body.

## Cancer Care Program (continued)



*Gail Fibranz oversees the Cancer Resource Center, including the library and boutique.*

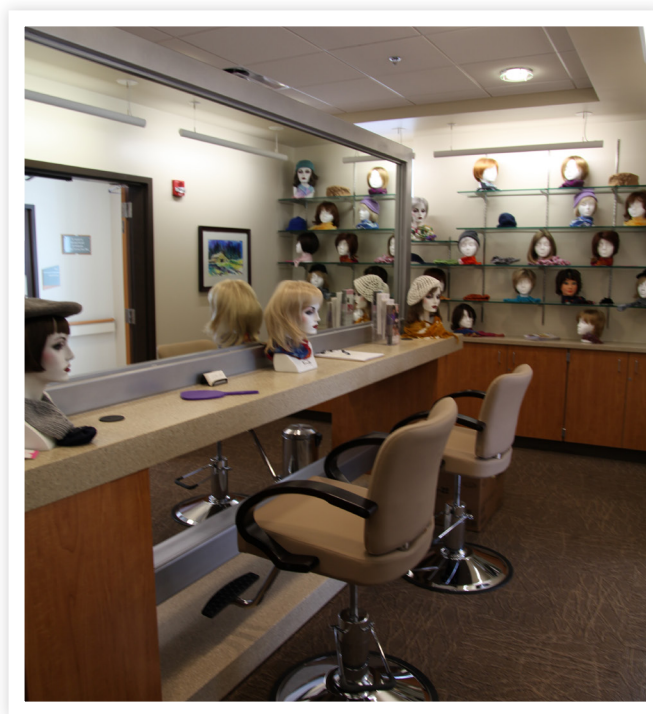
### CANCER RESOURCE CENTER

The Cancer Resource Center offers professional assistance and education to cancer patients and their families and caregivers from the moment of diagnosis. Working in collaboration with the American Cancer Society, the Cancer Resource Center provides the following:

- Computers to help patients and family members access online information about cancer and related topics
- A library of books, magazines, pamphlets and DVDs for patients and family members who would like to learn more about the patient's diagnosis
- A conference area for patients and families
- Information for patients and their families in addition to community members who are interested in cancer detection, treatment, clinical trials and prevention
- A boutique that offers several free services for patients undergoing cancer treatment at the Cancer Center

### CANCER RESOURCE CENTER BOUTIQUE

Cancer treatment can place a financial, physical and an emotional strain on patients and their families. To help ease this burden, the Cancer Resource Center has a boutique that provides free wigs, hats, liners and scarves to patients who have lost their hair due to cancer treatment. The head coverings are funded by grants and other outside sources, including local businesses and the American Cancer Society. Prosthesis and bras are also provided by the boutique and are free to patients undergoing treatment and who have no health insurance or who have high deductibles. Another reason for the boutique is to provide a private place for patients to try on head coverings. About 40 people, primarily women, use the boutique each year.





# Cancer Care Program (continued)

## DEDICATED SEVEN-BED INPATIENT ONCOLOGY UNIT

A seven-bed inpatient unit is an important part of our comprehensive cancer care. The unit offers a multidisciplinary, holistic approach to cancer care that considers the medical, functional, psychosocial and spiritual needs of patients. Physicians, specialists and highly trained oncology nurses coordinate patient care with social workers, case managers, patient navigators, dietitians and pharmacists who are specially trained in cancer care. The multidisciplinary team rounds on patients weekly to ensure that their questions and needs are being met during their inpatient stay.

## ONCOLOGY DIAGNOSTIC AND MEDICAL IMAGING

The Medical Imaging Team is composed of dedicated radiologists, technologists, nurses and support staff focused on providing compassionate and comprehensive care to our community and region. A new joint venture with Cheyenne Radiology Group has enhanced our services for women. The Cheyenne Women's Imaging Pavilion (CWIP) features the combined staff of Cheyenne Radiology Group and Cheyenne Regional Medical Imaging. Cheyenne Regional's imaging services support our oncology program with a variety of screening and diagnostic exams / procedures, including the following:  
(\*Services performed at CWIP)

### Screening Programs

- Breast Cancer\*
- Lung Cancer
- DEXA for Osteoporosis\*

### State-of-the-Art Imaging

- PET / CT
- SPECT / CT
- Digital Diagnostic X-ray
- Digital Fluoroscopy
- CT
- MRI
- 3D Ultrasound: General, Vascular and OBGYN

### Women's Imaging

- Digital Mammography with CAD\*  
(Computer-Aided Detection)
- Breast MRI with CAD\*
- Stereotactic Biopsy\*
- 3D Ultrasound

### Access to Imaging

- PACS (Picture Archiving Communication System)
- PACS Mobility
- eMix

## ONCOLOGY PATIENT NAVIGATION & BREAST HEALTH NAVIGATION

Our oncology nurse navigators support our patients through the continuum of care from diagnosis through treatment into survivorship. They help remove barriers to care and ensure the patient receives the best and most suitable treatment, by focusing on the following:

- Helping patients find information about diagnosis, treatment and recovery, enabling them to make informed decisions about their care
- Coordinating services with medical providers, nutritionists, counselors, community resources and support groups
- Identifying patient needs and helping the patient find financial, psychosocial and other resources to meet these needs

Our oncology financial navigator addresses financial concerns by offering the following services:

- Helping patients and families understand the financial aspects of cancer care
- Aiming to relieve financial stress and improving access to care
- Evaluating a patient's health insurance benefits
- Working with the medication recovery advocate for copay assistance or medical replacement
- Contacting foundations that help underinsured patients with out-of-pocket costs
- Providing psychosocial support that may be caused by financial strain

Cheyenne Regional also offers the services of a breast health navigator, an oncology-registered nurse who guides and supports breast cancer patients throughout the treatment and recovery process.

## RADIATION ONCOLOGY

Radiation Oncology Services provide comprehensive and personalized consultation, treatment planning, radiotherapy and follow-up to cancer patients. Our board-certified radiation oncologist, Dr. Subashini Furman, along with our board-certified medical physicist, registered radiation therapists, certified medical dosimetrists and registered nurses deliver compassionate, patient-centered cancer treatment. They are committed to providing high-quality and individualized patient care.

Radiation Oncology provides care with the latest state-of-the-art equipment offering both external beam radiation therapy and high-dose-rate brachytherapy treatment options.

# Cancer Care Program (continued)

## TRIALS AND RESEARCH

Clinical trials are offered to patients for the prevention, diagnosis and treatment of cancer and treatment side effects. Cheyenne Regional currently participates in the National Cancer Institute Community Oncology Research Program through an affiliation with the Colorado Cancer Research Program. We offer many of the same state-of-the-art clinical trials available at Colorado health systems, with the additional benefit of receiving care close to home.

## CANCER GENETIC COUNSELING

Cancer genetic counseling is offered by an advanced practice oncology nurse with specialized education in cancer genetics and hereditary cancer predisposition syndromes. Determining which families have cancer related to an inherited gene mutation is important, as the cancer risks in hereditary cancer families are much higher than in the general population. At-risk individuals with a history of cancer or a family history of cancer have access to individualized evaluation, education, counseling and testing. Many important medical management decisions are based on a diagnosis of an inherited cancer predisposition gene.



Jennifer Van Horn, RN, MSN, AOCNS, Clinical Research Specialist

## OUTREACH SERVICES

Grant funding from the Wyoming Department of Health helps us offer services to reduce the impact of cancer in the region. Our Cancer Resources staff provides cancer awareness through education programs focusing on cancer prevention and the importance of being screened. Low-income and / or underinsured patients needing assistance are offered state-funded breast, cervical and colorectal cancer screening programs.



# Get To Know Our Cancer Care Staff

LIZ MARSHALL, RHIA, CTR, CCS  
*Cancer Center Registrar since 2013*

*Cancer Center Employee since  
March 2017*

## **How long have you worked in this field?**

I started working in health information administration (HIA) in 1994. Through the years, I've been fortunate to get more education and credentialing in this field. That's why you see so many letters after my name!

## **What inspired you to go into this area of service?**

I needed three internships for my bachelor's degree in HIA. My favorite was the one I did in a hospital cancer registry. I liked the variety of activities and projects. I guess I was hooked!

## **What do you like about working at the Cheyenne Regional Cancer Center?**

My co-workers are kind and compassionate professionals who are really dedicated to the patients, families and community we serve. The Cancer Center is a great, collaborative work environment.

## **Who is your role model and why?**

One of them is Nellie Taylor Ross, our nation's first female governor. Maybe I think about her more often than most because I live near the historic home on 17th Street bearing her name, and so I pass by it frequently. All the female "firsts" are inspirational to me.

## **What keeps you motivated to do what you do, day in and day out?**

When I was a teenager my older sister died of what we would now recognize as HPV-related cervical cancer. Today we have vaccines to prevent HPV infection. I like to think of my work as a contribution to the fight against cancer because data from cancer registries is used by cancer researchers.





## Get To Know Our Cancer Care Staff

ANGELA MURDOCH, RN  
*Cancer Center Employee for 14 Years*

### **How long have you worked in this field?**

I have worked in oncology at CRMC for 14 years. I worked on the oncology inpatient unit for seven years and have been with the ambulatory infusion center for seven years.

### **What inspired you to go into this area of service?**

Both the oncology patients and staff inspired me when I was doing clinicals as a student nurse. The manager and staff and overall atmosphere on the oncology floor were so welcoming. I knew that the oncology unit was where I wanted to be.

### **What do you like about working at the Cheyenne Regional Cancer Center?**

What I like most is the patients. I love being here for them and being able to make a difference in their lives. I am also very thankful for my co-workers. We have exceptional teamwork on our unit.

### **Who is your role model and why?**

Since I started at CRMC, my role model has always been Betty Siltzer. She was the oncology unit manager who hired me, and she is one of the biggest reasons I wanted to be there. She was an amazing manager who made me feel welcome from the first day as a student. She was wonderful to the patients as well as her staff. She was always cheerful and knew how to make everyone feel comfortable and welcome!

### **What keeps you motivated to do what you do, day in and day out?**

Our patients motivate me. They are always so kind, thankful and appreciative of everything we do for them. Just knowing we are making a difference in their lives makes it worth coming to work every day.

# Get To Know Our Cancer Care Staff

SHARON YOUNG  
*Radiation Therapist*

*CRMC Employee for 16 Years*

**How long have you worked in this field?**

I have been in radiation oncology for 13 years, and I have loved every moment.

**What inspired you to go into this area of service?**

I originally worked in radiology, which I loved. But in radiology you are only with your patients for a few minutes during a procedure. I wanted more connection with patients. Then I read a story about the radiation department doing something special for a patient. The patient was getting married after completing treatment. The therapists had a small reception with a cake for the patient and the patient's soon-to-be spouse. I knew then that this is the department I wanted to work for. All our therapists are able to bond with the patients during the time they spend with us.

**What do you like about working at the Cheyenne Regional Cancer Center?**

The best part of radiation oncology is working with our patients. They are incredible. It's such an honor that they have chosen us to provide their care. In return, we try our very best to meet every need possible. I love that our department wants to provide the very best care possible for each patient and that we work so well with one another.

**Who is your role model and why?**

My main role model would be Christ. Other role models are the physician that I currently work for and also the physicians I have worked for in the past. They all try their best for their patients. The other team members in radiation oncology are also my role models.

**What keeps you motivated to do what you do, day in and day out?**

My motivation is seeing patients through to the very end of their treatment and then looking forward to seeing them later on, outside of this setting, doing the things they love. I know we are a very small part of each patient's life, but we are an important part during treatment, and we can't take that for granted. We may be able to say something positive or help in some way that others can't. I am able to encourage each patient, letting that person know: "You can do this! You can make it!" When I see patients years later with incredible results, it makes my job that much more enjoyable.





## Get To Know Our Cancer Care Staff

BECKY HARBICK

*Front Office Supervisor for the Oncology, Hematology & Infusion Clinic*

*CRMC Employee for 12 Years*

**How long have you worked in this field?**

I started working at CRMC in 2002 as a unit secretary in Labor & Delivery / Nursery and later in Pediatrics. I moved out of town in 2008 and came back in 2012. I have worked with the Oncology, Hematology & Infusion Clinic since 2012.

**What inspired you to go into this area of service?**

I wanted to work for this clinic because I had several family members who had been diagnosed with cancer. I knew how much care and compassion they received from their providers. It was my way of giving back to the clinic and the community, which supported them so much.

**What do you like about working at the Cheyenne Regional Cancer Center?**

I absolutely love working with the patients and getting to know them. We sometimes see them several times a week, and they became a sort of family. Many of them have every reason to be scared and / or angry, but most of them are not. The world could learn a lot from the grace, compassion and strength our patients exhibit!

**Who is your role model and why?**

My best role models are my parents. My dad was a farmer and worked tirelessly to make sure we had what we needed. My mom was a CNA, a day care provider and eventually a foster parent. Both of them taught me to treat everyone with kindness, help when possible and work for what you want and need.

**What keeps you motivated to do what you do, day in and day out?**

My motivation comes from a combination of the Cancer Center staff members, our patients and my family. Our staff members are amazing. They work hard every day to provide the best care possible. Our patients are the reason we are here. Being part of their journey is humbling. And, without my family, I would not be where I am today. My mom and my husband both help keep me grounded, push me to grow as an individual and encourage me to do things that make a difference.

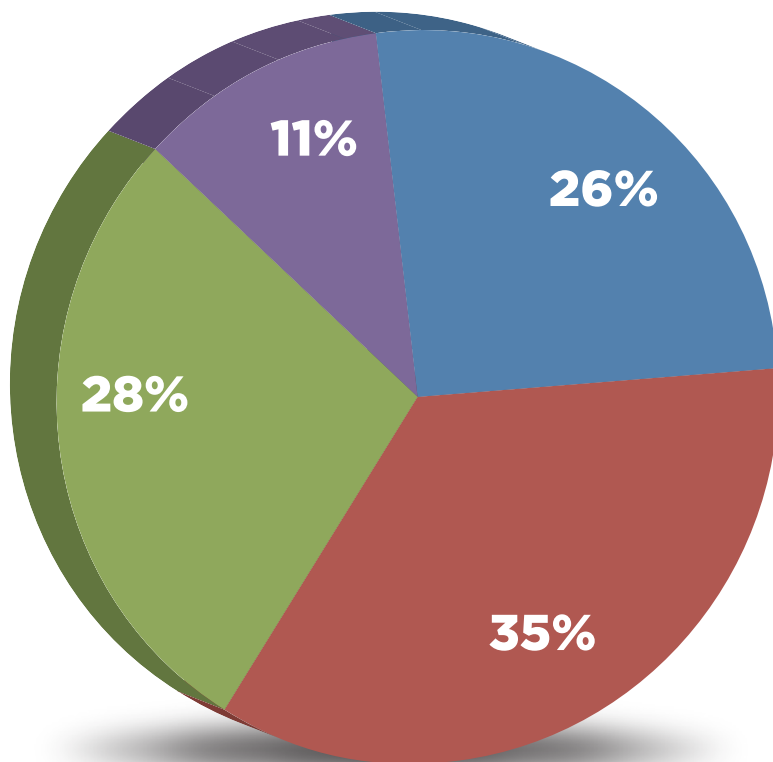
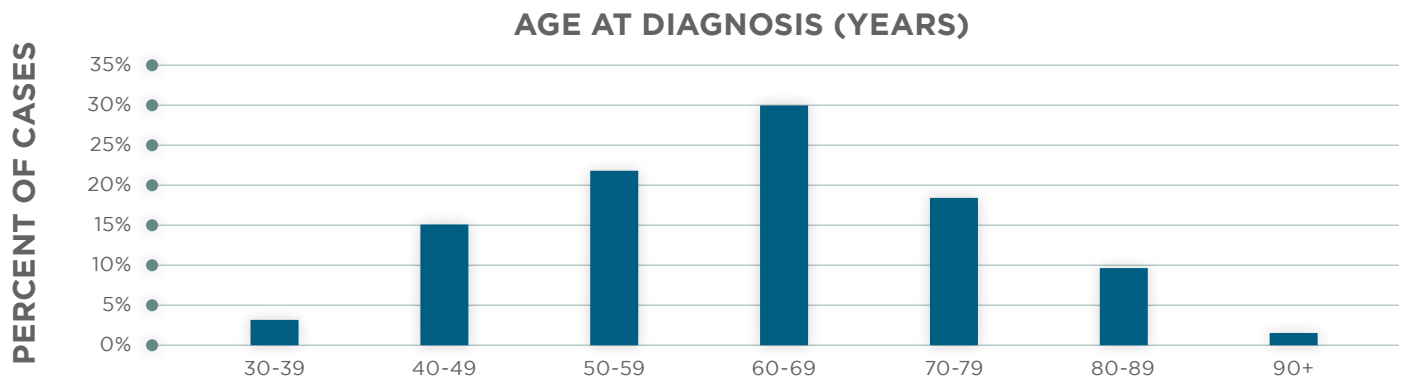
# Cheyenne Regional Cancer Cases - 2017

	Total	% of Total	M	F	Stage 0	Stage I	Stage II	Stage III	Stage IV	Unk/NA/Blank
<b>ORAL CAVITY &amp; PHARYNX</b>	15	3.1	7	8	0	3	0	0	11	1
Tongue	7	1.5	4	3	0	2	0	0	5	0
Floor of Mouth	1	0.2	1	0	0	1	0	0	0	0
Gum & Other Mouth	1	0.2	1	0	0	0	0	0	1	0
Tonsil	2	0.4	1	1	0	0	0	0	2	0
Oropharynx	2	0.4	0	2	0	0	0	0	2	0
Hypopharynx	1	0.2	0	1	0	0	0	0	1	0
Other Oral Cavity & Pharynx	1	0.2	0	1	0	0	0	0	0	1
<b>DIGESTIVE SYSTEM</b>	92	19.2	51	41	0	9	24	18	25	16
Esophagus	4	0.8	3	1	0	0	1	0	1	2
Stomach	5	1.0	5	0	0	0	2	2	1	0
Small Intestine	4	0.8	3	1	0	0	1	0	2	1
Colon Excluding Rectum	35	7.3	15	20	0	7	9	7	8	4
Rectum & Rectosigmoid	8	1.7	4	4	0	1	2	2	2	1
Anus, Anal Canal & Anorectum	5	1.0	2	3	0	0	1	3	0	1
Liver & Intrahepatic Bile Duct	6	1.3	4	2	0	0	4	1	0	1
Gallbladder	3	0.6	1	2	0	0	1	1	0	1
Other Biliary	3	0.6	0	3	0	0	0	1	0	2
Pancreas	19	4.0	14	5	0	1	3	1	11	3
<b>RESPIRATORY SYSTEM</b>	57	11.9	29	28	0	9	3	7	35	3
Larynx	3	0.6	3	0	0	0	0	1	2	0
Lung & Bronchus	54	11.3	26	28	0	9	3	6	33	3
<b>BONES &amp; JOINTS</b>	1	0.2	1	0	0	0	0	0	0	1
<b>SOFT TISSUE</b>	2	0.4	1	1	0	0	0	1	0	1
<b>SKIN EXCLUDING BASAL &amp; SQUAMOUS</b>	7	1.5	6	1	2	2	0	1	0	2
Melanoma -- Skin	4	0.8	3	1	2	1	0	1	0	0
Other Non-Epithelial Skin	3	0.7	3	0	0	1	0	0	0	2
<b>BREAST</b>	75	15.7	1	74	10	33	21	7	2	2
<b>FEMALE GENITAL SYSTEM</b>	15	3.1	0	15	0	6	2	2	4	1
Cervix Uteri	4	0.8	0	4	0	1	1	1	0	1
Corpus & Uterus, NOS	5	1.0	0	5	0	3	0	0	2	0
Ovary	4	0.8	0	4	0	1	0	1	2	0
Vagina	1	0.2	0	1	0	0	1	0	0	0
Vulva	1	0.2	0	1	0	1	0	0	0	0
<b>MALE GENITAL SYSTEM</b>	74	15.4	74	0	0	3	46	8	9	8
Prostate	69	14.4	69	0	0	2	45	6	9	7
Testis	5	1	5	0	0	1	1	2	0	1
<b>URINARY SYSTEM</b>	34	7.1	23	11	12	11	3	3	4	1
Urinary Bladder	20	4.2	15	5	11	5	2	1	1	0
Kidney & Renal Pelvis	14	2.9	8	6	1	6	1	2	3	1
<b>BRAIN &amp; OTHER CNS</b>	26	5.4	8	18	0	0	0	0	0	26
Brain (Benign, Borderline)	20	4.2	6	14	0	0	0	0	0	20
Brain (Malignant)	5	1.0	1	4	0	0	0	0	0	5
Cranial Nerves	1	0.2	1	0	0	0	0	0	0	1
<b>THYROID/ENDOCRINE SYSTEM</b>	17	3.5	5	12	0	11	2	0	2	2
<b>LYMPHOMA</b>	21	4.4	15	6	0	5	3	2	8	3
Hodgkin Lymphoma	2	0.4	1	1	0	0	0	1	1	0
Non-Hodgkin Lymphoma	19	4	14	5	0	5	3	1	7	3
<b>MYELOMA</b>	7	1.5	4	3	0	0	0	0	0	7
<b>LEUKEMIA</b>	15	3.1	10	5	0	0	0	0	0	15
Lymphocytic Leukemia	12	2.5	10	2	0	0	0	0	0	12
Myeloid & Monocytic Leukemia	3	0.6	0	3	0	0	0	0	0	3
<b>MESOTHELIOMA</b>	1	0.2	1	0	0	0	1	0	0	0
<b>MISCELLANEOUS</b>	20	4.2	7	13	0	0	0	0	0	20
<b>Total</b>	479		243	236	24	92	105	49	100	109

# Breast Cancer: Breakdown by Age at Diagnosis

835 Cases from 2008-2017				
Breakdown by Age at Diagnosis	2008-2016	2017*	2008-2017	Total Cases %
20-29	2	1	3	<1%
30-39	24	1	25	3%
40-49	111	15	126	15%
50-59	171	12	183	22%
60-69	229	20	249	30%
70-79	143	15	158	19%
80-89	71	9	80	10%
90+	9	2	11	1%
<b>TOTAL</b>	<b>760</b>	<b>75</b>	<b>835</b>	<b>100%</b>

\*Excludes 1 Lymphoma of Breast Case from 2017



## Treatment 2017 Breast Cancer Cases\*

- Biopsy, Surgery with or without Immunotherapy and / or Hormone
- Biopsy, Surgery & Radiation with or without Immunotherapy and / or Hormone
- Biopsy, Surgery, Radiation & Chemotherapy with or without Immunotherapy and / or Hormone
- Other Combinations

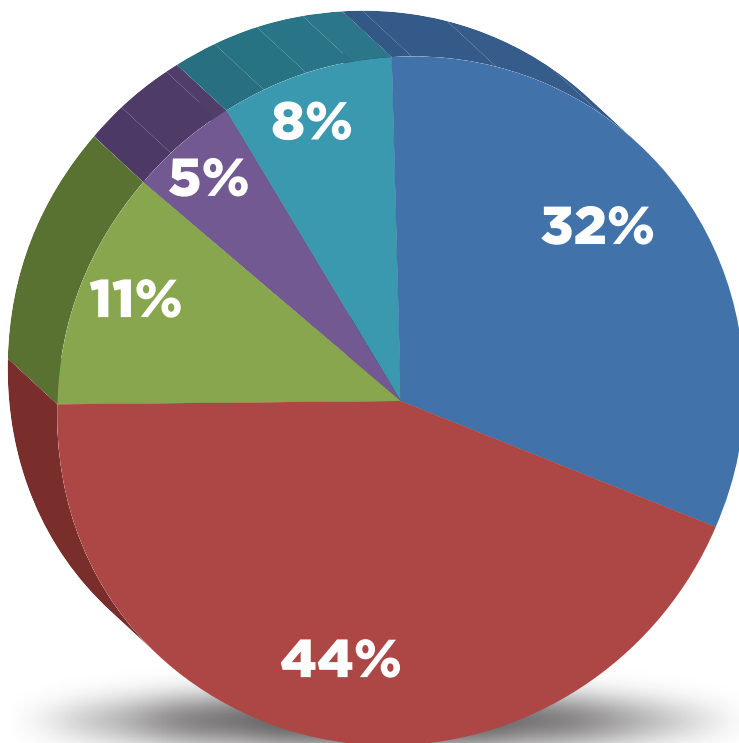
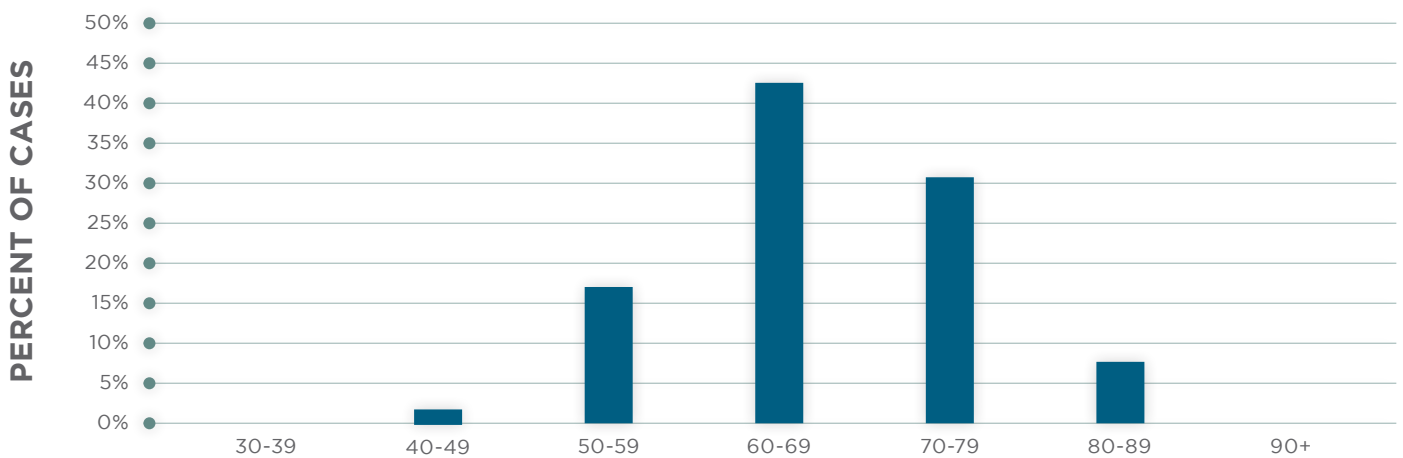
\*Excludes patients diagnosed at CRMC and treated elsewhere.



# Prostate Cancer: Breakdown by Age at Diagnosis (all histologies)

514 Cases from 2008-2017				
Breakdown by Age at Diagnosis	2008-2016	2017	2008-2017	Total Cases %
30-39	1	0	1	< 1%
40-49	9	0	9	2%
50-59	77	12	89	17%
60-69	196	22	218	42%
70-79	128	30	158	31%
80-89	34	5	39	8%
90+	0	0	0	0%
<b>Total</b>	<b>445</b>	<b>69</b>	<b>514</b>	<b>100%</b>

**AGE AT DIAGNOSIS (YEARS)**



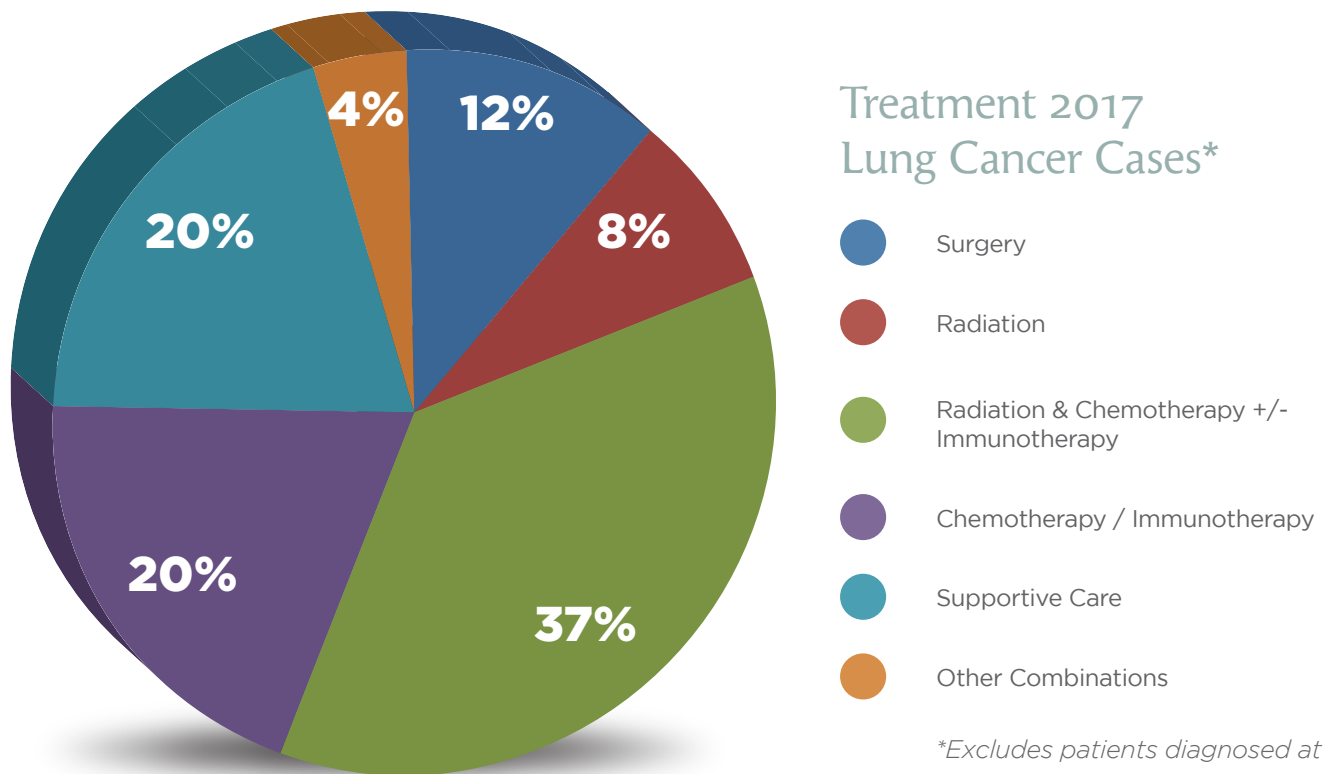
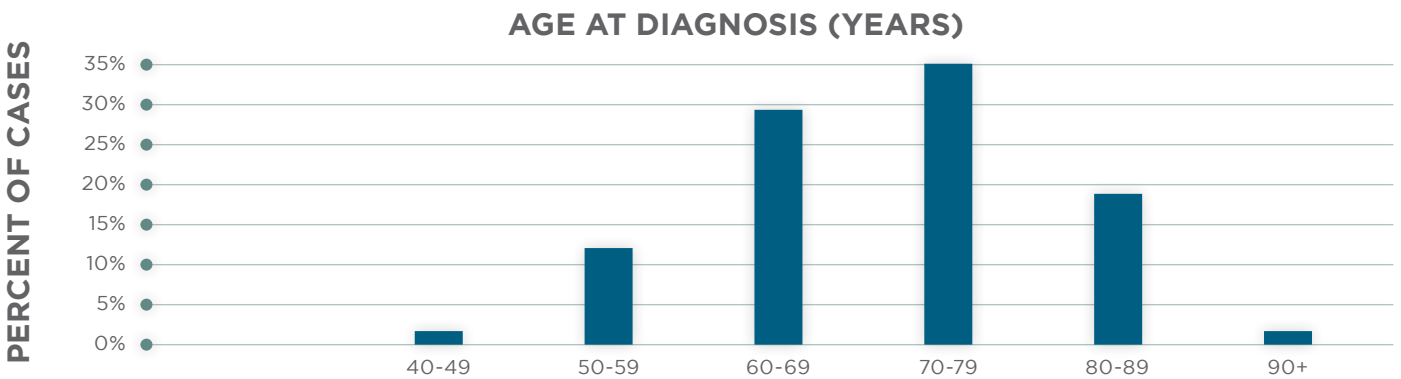
**Treatment 2017 Prostate Cancer Cases\***

- Surgery with or without Hormone
- Radiation with or without Hormone
- Surgery & Radiation with or without Hormone
- Active Surveillance (Watchful Waiting)
- Other Combinations

*\*Excludes patients diagnosed at CRMC and treated elsewhere.*

# Lung Cancer: Breakdown by Age at Diagnosis (all histologies)

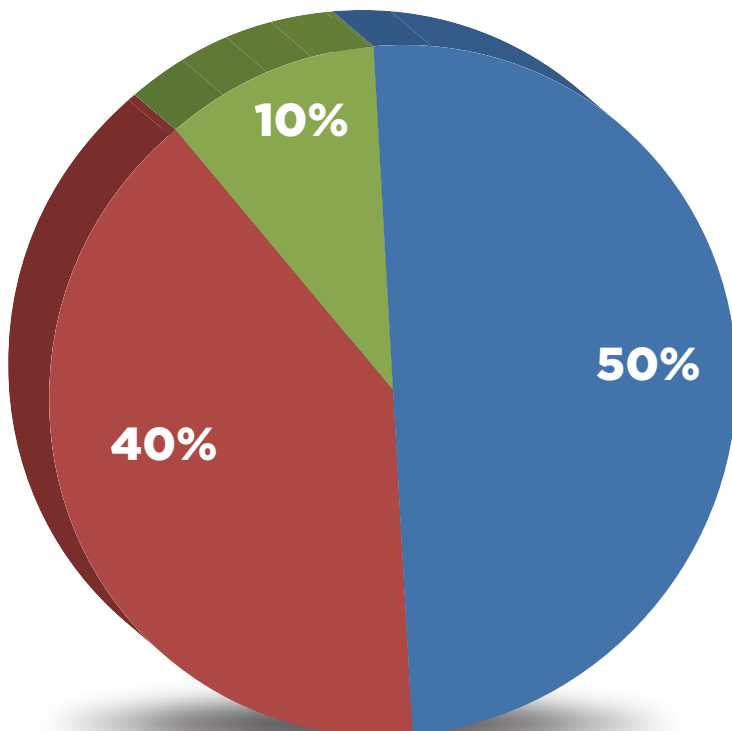
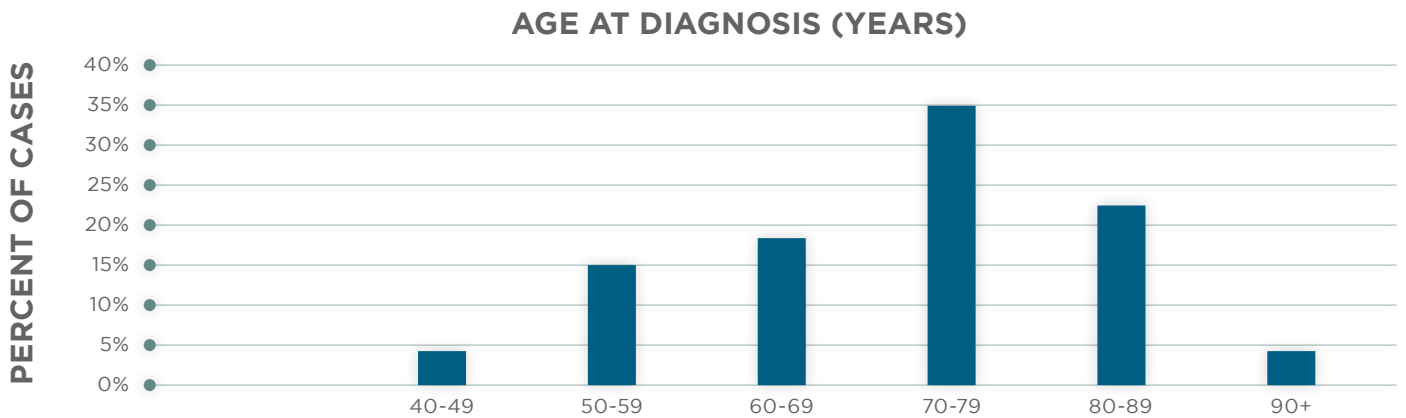
585 Cases from 2008-2017				
Breakdown by Age at Diagnosis	2008-2016	2017	2008-2017	Total Cases %
20-29	1	0	1	<1%
30-39	2	0	2	<1%
40-49	12	0	12	2%
50-59	74	4	78	13%
60-69	159	13	172	29%
70-79	174	28	202	35%
80-89	98	9	107	18%
90+	11	0	11	2%
<b>Total</b>	<b>531</b>	<b>54</b>	<b>585</b>	<b>100%</b>



\*Excludes patients diagnosed at CRMC and treated elsewhere.

# Bladder Cancer: Breakdown by Age at Diagnosis (all histologies)

269 Cases from 2008-2017				
Breakdown by Age at Diagnosis	2008-2016	2017	2008-2017	Total Cases %
30-39	1	0	1	<1%
40-49	10	1	11	4%
50-59	38	2	40	15%
60-69	49	3	52	19%
70-79	84	9	93	35%
80-89	56	5	61	23%
90+	11	0	11	4%
<b>Total</b>	<b>249</b>	<b>20</b>	<b>269</b>	<b>100%</b>



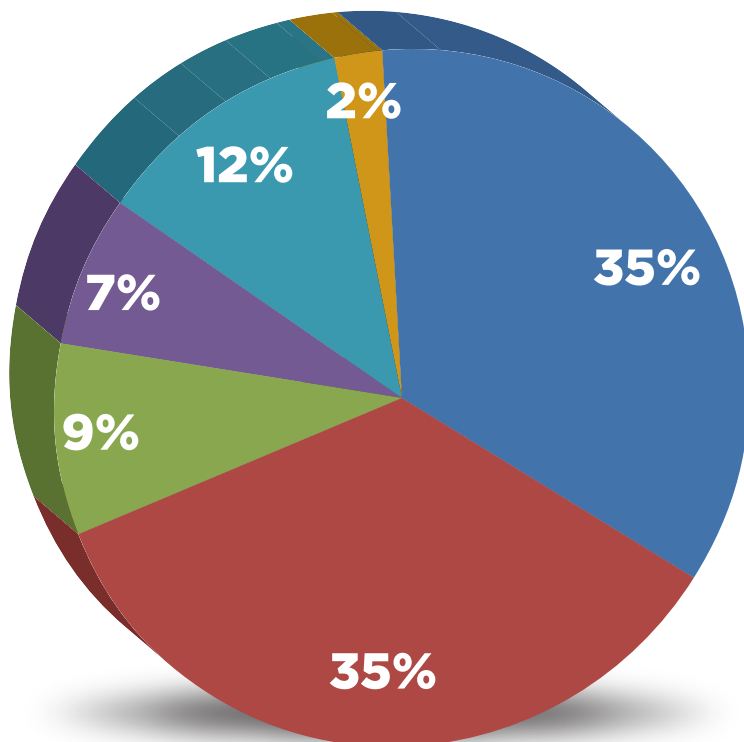
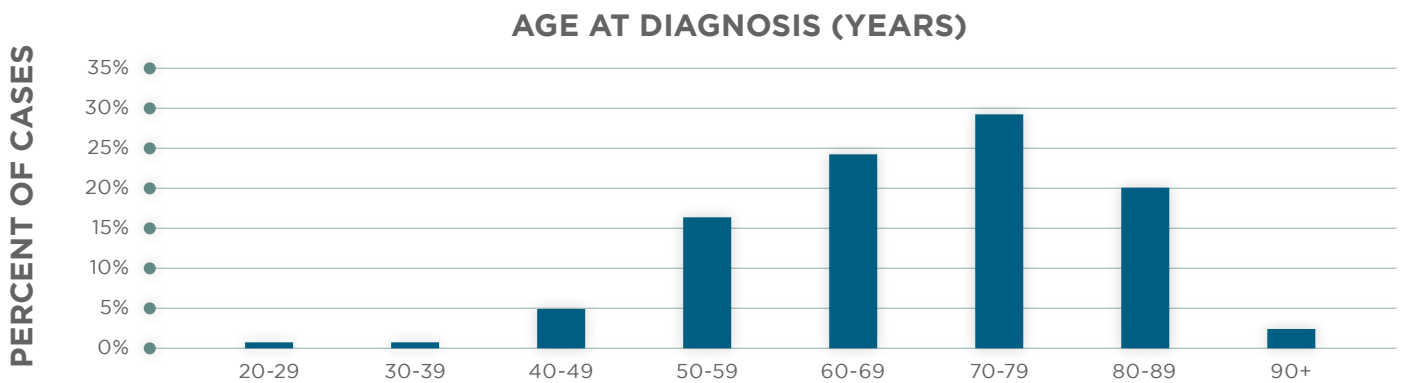
Treatment 2017  
Bladder Cancer Cases\*

- Surgery
- Surgery & Chemotherapy and / or Immunotherapy
- Other Combinations

*\*Excludes patients diagnosed at CRMC and treated elsewhere.*

# Colorectal Cancer: Breakdown by Age at Diagnosis (all histologies)

372 Cases from 2008-2017				
Breakdown by Age at Diagnosis	2008-2016	2017	2008-2017	Total Cases %
20-29	2	2	4	1%
30-39	5	0	5	1%
40-49	19	0	19	5%
50-59	53	7	60	16%
60-69	76	14	90	24%
70-79	96	13	109	29%
80-89	69	7	76	20%
90+	9	0	9	2%
<b>Total</b>	<b>329</b>	<b>43</b>	<b>372</b>	<b>100%</b>



Treatment 2017  
Colorectal Cancer Cases\*

- Surgery
- Surgery & Chemotherapy / Immunotherapy
- Chemotherapy / Immunotherapy
- Supportive Care
- Surgery & Radiation & Chemotherapy / Immunotherapy
- Other Combinations

\*Excludes patients diagnosed at CRMC and treated elsewhere.

# Community Outreach Report

Prevention Programs & Early Detection					
Program/Community Needs Addressed	Activities	Date Held	Number of Participants	Guideline Used	Summary of Effectiveness
Great American Smokeout	Presented information on lung cancer, smoking cessation, radon	11/16/2017	11	ACS	Participants were willing to change and follow guidelines for prevention, cessation.
Cancer Night: Stampede Hockey	Presented information on prostate cancer, screening PSA, DRE	1/7/2017	24	ACS	Participants were willing to be proactive with screening following the guidelines for prevention.
Pink Night: East High girls basketball game	Presented information on breast cancer, breast cancer screening, free breast cancer screening programs	1/20/2017	21	ACS	Participants were willing to be proactive with their breast health and follow prevention guidelines.
Miller Elementary: School Sun Safety	Presented information on sun safety	1/27/2017	13	Skin Cancer Foundation NCI	Participants said they were willing to change and practice sun safety and follow guidelines for prevention.
Men's Health Fair	Presented information on lung, colorectal, smoking cessation, radon, prostate health	3/4/2017	78	ACS	Participants were willing to change and follow guidelines for prevention.
Colon Days	Presented information on colorectal cancer & screening, free state colorectal screening and radon	3/15/2017	15	ACS, EPA	Participants were willing to change and follow guidelines for prevention.
Home Show: Radon	Presented information on radon and lung cancer	4/7/2017	84	EPA, ACS	Participants were willing to follow radon prevention guidelines.
Laramie County Baby Shower	Presented information on HPV and cervical cancer, testicular cancer	4/27/2017	21	ACS	Participants said they were willing to change and follow the prevention guidelines.
Church of God	Presentation on healthy lifestyle changes for prevention and cancer screening for early detection	5/10/2017	18	ACS	Participants said they were willing to change and follow the prevention guidelines.
Home Show: Radon	Presented information on radon and lung cancer	5/13/2017	52	EPA, ACS	Participants were willing to follow guidelines on radon prevention.
Senior Fair	Presented information on cancer screening programs, sun safety	5/31/2017	16	ACS	Participants said they were willing to change and follow the prevention guidelines.

# Community Outreach Report (continued)

Prevention Programs & Early Detection (continued)					
Program/Community Needs Addressed	Activities	Date Held	Number of Participants	Guideline Used	Summary of Effectiveness
Glow Run for Colorectal Cancer	Presented information on colorectal cancer and screening	6/23/2017	24	ACS	Participants said they were willing to change and follow the prevention guidelines.
Black Hills Energy (power company)	Presented information on sun safety, skin cancer	7/20/2017	68	ACS	Participants said they were willing to change and practice sun safety following the prevention guidelines.
Wyoming Breast Cancer Initiative run	Presented information on sun safety, skin cancer, breast cancer screening	8/12/2018	34	ACS	Participants said they were willing to change and practice sun safety and follow the prevention guidelines through screening.
Bison Shuffle run—by the Cheyenne Regional Foundation	Presented information on sun safety	9/23/2017	31	ACS	Participants said they were willing to change and practice sun safety following the prevention guidelines.

# Community Outreach Report (continued)

Screening Programs				
Program/Community Needs Addressed	Activities	Date Held	Number of Participants	Summary of Effectiveness and Follow-up
Men's Health Event	Colorectal screening program, radon test kits, stool kits, PSA	3/4/2017	78	16 stool kits given, 24 radon test kits, 78 PSA blood tests
Colon Days	Colorectal screening program, radon test kits, stool kits	3/15/2017	15	4 radon kits, 2 stool kits
Home Show: Radon	Radon test kits	4/7/2017	84	19 radon test kits
Home Show: Radon	Radon test kits	5/13/2017	48	4 radon tests
Needs Inc. (food and clothing for low-income Laramie County residents)	Breast and cervical screening program, Free colorectal cancer screening program, stool kits	8/30/2017	12	3 stool kits
Heroes Day V.A. Medical Center in Cheyenne, WY	Colorectal and breast screening programs, stool kits	9/16/2017	24	7 stool kits
Home Show: Radon	Radon test kits, stool kits	9/30/2017	48	9 radon test kits, 9 stool kits
National Guard Retirees Conference	Colorectal and breast screening programs, stool kits	9/29/2017	11	4 stool kits
Blood Service Fair	Colorectal/breast screening, stool kits, testicular cancer check cards	10/2/2017	5	1 stool kit, testicular cancer how-to check card
Needs, Inc. (food and clothing for low-income Laramie County residents)	Breast and cervical screening program, Free colorectal cancer screening program, stool kits	10/4/2017	6	1 stool kit
Digestive Health	Colorectal cancer screening program, stool kits	10/6/2017	3	1 stool kit
Pine Bluffs Health Fair	Breast, cervical and colorectal screening programs, stool kits	10/11/2017	13	2 stool kits
Cheyenne Breast Screening Event	Free mammograms for uninsured or those with high-deductibles	10/11/2017	15	7 mammograms
Tough Enough to Wear Pink Men's Event	Breast, cervical and colorectal screening programs, stool kits	10/14/2017	16	7 stool kits

# Community Outreach Report (continued)

Screening Programs (continued)				
Program/Community Needs Addressed	Activities	Date Held	Number of Participants	Summary of Effectiveness and Follow-up
Catholic Church Health Fair	Breast, cervical and colorectal screening programs, stool kits	10/15/2017	26	5 stool kits
Cheyenne Alliance Church	Presented information on breast health and screening, colorectal and stool kits	11/8/2017	12	2 stool kits
Enroll Wyoming Event	Presented information on breast health and screening, colorectal and stool kits	11/9/2017	26	19 stool kits, 2 enrolled in the breast/cervical/colorectal screening programs
Diabetes Fair	Colorectal and stool kits	11/10/2017	58	4 stool kits
Alzheimer's Event	Colorectal screening, stool kits	12/9/2017	60	7 stool kits

Community Events				
Other Community Outreach Events	Identified Areas of Community Need	Date	Participants	Effectiveness
Cheyenne Step-up Health Awareness	30% of men and 27% of women in Laramie County are obese	4/19/2017	69	Colorectal, breast, cervical screening, testicular, radon information provided focusing on prevention through lifestyle changes and early detection
BBQ for Cancer Survivors in the Cheyenne-area Community	This Survivors Day Celebration provides an opportunity for all people living with a history of cancer to connect with each other and recognize those who have supported them along the way.	9/26/2017	114	Cancer Center doctors, managers and nurses reconnected with survivors.
Torrington Breast Cancer Fundraiser	Platte County breast cancer-- 2nd highest in incidence	10/19/2017	500	Educated on the importance of breast health and screening
Spa Night for Stage 4 Breast Cancer Patients	Psychosocial interventions can help people with cancer feel more upbeat. Bringing cancer patients together to talk and relaxation techniques such as massages/facials are used to help reduce distress that comes with a cancer diagnosis.	12/13/2017	7	All participants felt relaxed and enjoyed being with other cancer survivors.

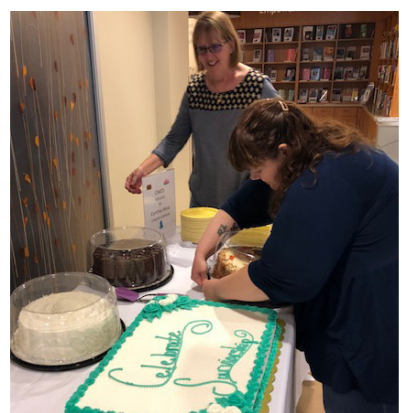
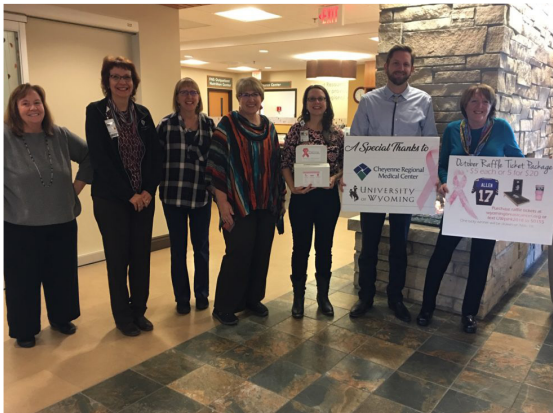
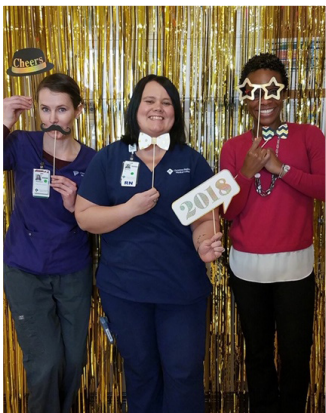


# Cancer Center Events

We are grateful to the many groups and individuals who have donated their time, talent and energy to our Cancer Center over the past year.

The photos on this page are a small sample of the many wonderful ways our community has reached out to help our patients. We want each person and group that has shared with our patients to know how very much we appreciate you. Every performance, hand-written note, piece of artwork and gift has been a blessing.

## Thank you all!





Cheyenne Regional  
Cancer Center

310 E. 24th Street  
Cheyenne, WY 82001  
(307) 996-HOPE  
[www.cheyenneregional.org/cancer](http://www.cheyenneregional.org/cancer)