



The University of Tennessee

WEST
Cancer Center

Methodist Healthcare Family

ANNUAL REPORT 2016

NCCN National
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**REPORT
EDITORS**

Caitlin McCaskill
Katie McDermott

FROM OUR

EXECUTIVE DIRECTOR

On behalf of West Cancer Center's faculty and associates, I am pleased to present our 2016 West Cancer Center Annual Report. I'm incredibly proud of the significant progress we've made this year not only in furthering our understanding of this terrible disease, but in shaping the future of cancer care with our innovative, patient-centered approach to cancer treatment. With multiple locations across the Mid-South, patients have access to the world-class expertise of our more than 100 faculty members, without having to leave the comfort of home.

From cutting-edge therapies to innovative breakthroughs, our research is discovering the cures of tomorrow, and saving lives today. With our partners at Methodist Healthcare and the University of Tennessee Health Science Center (UTHSC), West Cancer Center's collaborative approach combines the vitality of a multidisciplinary community cancer center with the expertise of a leading academic center. This unique combination of research and community-based cancer care provides patients access to a robust portfolio of clinical trials while also receiving the highest quality – and most compassionate – care. With groundbreaking researchers and world-class physicians working side by side, West Cancer Center conducts more clinical trials than any other cancer center in the region – trials that provide hope for patients who don't respond to the current standard of care. This year alone, we received more than 2,000 patient visits for 67 therapeutic clinical trials – each of them playing a critical role in helping us redefine cancer science and deliver the most effective treatments. While we used to have to send these patients to cancer centers such as MD Anderson or Memorial Sloan Kettering, we can confidently say that we have those trials right here in the Mid-South and patients no longer have to leave the comfort of their community.

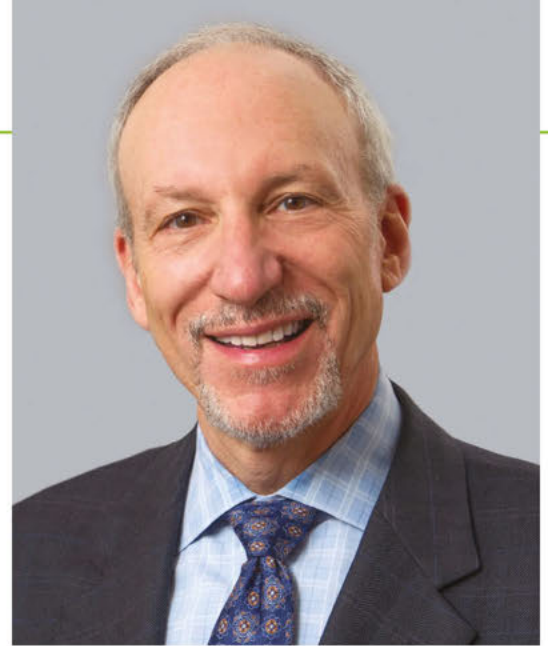
As West Cancer Center continues to establish a regional center of excellence in both patient-centered care and innovative research, philanthropy has never been more critical. Just as the amount of funding invested in cancer research has grown with each year, the five-year survival rates for cancer patients have continued to steadily rise. The advances of today are forging the foundation for the breakthroughs of tomorrow. Our commitment to finding a cure for this disease is relentless. So is the support we've graciously received – support that is saving lives and accelerating future progress.

This commitment to innovation continues in 2017, as we further expand our facilities and services, while also recruiting the brightest minds to join our world-class faculty. Together, with our dedicated faculty, patients, and supporters, we are well on our way to fulfilling our mission and discovering the breakthrough we've been dreaming of since the war on cancer was first declared.

Sincerely,



Lee S. Schwartzberg, MD
Executive Director, West Cancer Center



Lee S. Schwartzberg, MD
Executive Director, West Cancer Center



FROM OUR

CHIEF EXECUTIVE OFFICER

It is truly an exciting time for West Cancer Center, as we stand at the precipice of a new era of cancer care for our patients and our community. And while our goal of developing a National Cancer Institute (NCI)-designated Cancer Center right here in the city of Memphis is certainly lofty, we are making significant progress! This annual report acts as a tangible representation of not only our successes to date, but also our vision for the future. This journey is one that has been shaped and influenced by each and every physician, associate and patient that has ever walked through our doors. Our devotion to the collective vision and mission of providing exceptional care for our patients and their families is at the heart of our organization.

At West Cancer Center, we know that beating cancer takes more than just medicine. Rather, it takes a collaborative team and a comprehensive, holistic approach to support patients and their caregivers. From our renowned oncologists and advanced practitioners that devise treatment plans and our oncology nurses, medical assistants and ancillary care providers that care for and connect with our patients every day, to our innovative research team that develops cutting-edge experimental therapies and our bountiful volunteers and benefactors that donate their time and money, each one plays a significant role in each and every patient's journey with cancer. Because of this exceptional team, West Cancer Center is positioned as the region's leader in comprehensive adult cancer care and research.

Building on West Cancer Center's long-standing commitment to our community, several of our efforts this year have focused on eliminating barriers to care. From partnering with the ColoCare Consortium to improve colorectal cancer outcomes to establishing a Center for Healthy Equity, we are directly impacting the community's access to care. Because of the success of our community outreach and navigation programs, Centers across the nation have taken notice and are implementing similar programs to make a difference in their own communities.

And just as we plan for the future, so must we invest in continued education and the development of the next generation of world-class oncologists. Through our Radiation Oncology Residency, Hematologic Oncology, Gynecologic Oncology and Surgical Oncology Fellowship Programs, we are ensuring the same level of unparalleled expertise for not only the cancer patients of today, but for generations to come. As our goals become bigger and our reach extends wider, know that our patients remain – and always will remain – at the center of all we do.

Sincerely,



Erich Mounce
Chief Executive Officer, *West Cancer Center*



Erich Mounce
Chief Executive Officer, *West Cancer Center*

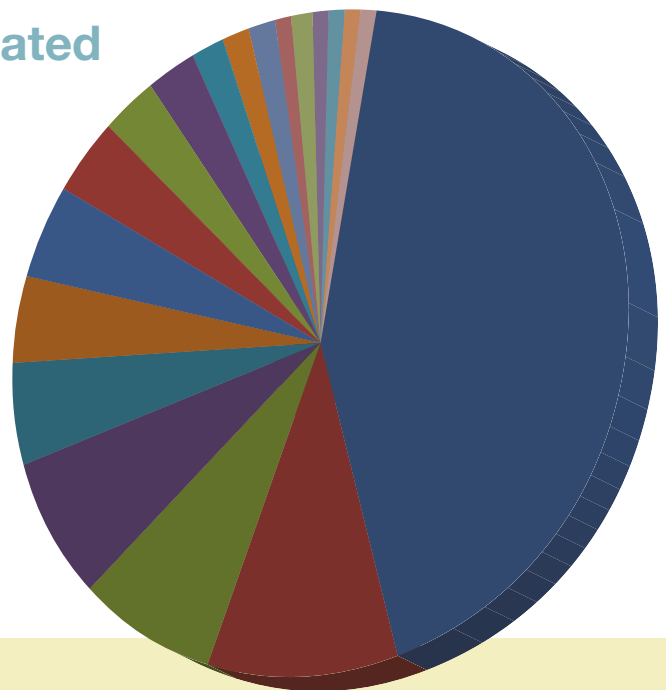
SCOPE OF SERVICE

CLINICAL METRICS AND THE PATIENTS WE SERVE

36,646 Total number of **patients treated** by West Cancer Center in **2016**

Highest Volume Cancer Types Treated in 2016 (New and Existing Cases)

■ Breast Cancer: 7,895	■ Kidney Cancer: 303
■ Colorectal Cancer: 1,785	■ Melanoma: 253
■ Lung Cancer: 1,396	■ Pancreatic Cancer: 228
■ Uterine Cancer: 1,299	■ Neuroendocrine Tumors: 192
■ Prostate Cancer: 909	■ Eye Cancer: 190
■ Ovarian Cancer: 780	■ Bladder Cancer: 162
■ Head and Neck Cancers: 780	■ Hodgkin Lymphoma: 142
■ Cervical Cancer: 665	■ Stomach Cancer: 139
■ Female Genital System Cancers: 537	■ Brain Cancer: 137
■ Multiple Myeloma: 445	



11,858 Total number of **new patients** treated by West Cancer Center in **2016**

5,875 Cancer Cases

5,983 Non-Cancer Cases

Highest Volume of Newly Diagnosed Cases By Type in 2016

Type of Cancer	New Cases in 2016	Type of Cancer	New Cases in 2016
Breast Cancer	1,208	Melanoma	145
Gynecologic Cancers	770	Eye Cancer	79
Lung Cancer	484	Kidney Cancer	99
Prostate Cancer	380	Multiple Myeloma	122
Colorectal Cancer	449	Liver Cancer	97
Head & Neck Cancer	278	Pancreatic Cancer	97

SCOPE OF SERVICE

SURGERY

Surgical Oncology Cases: 10,496

These cases included complex procedures, such as:

- Increased Number of Borderline Resectable Carcinoma
- Minimally Invasive Liver Resection and Ablation
- Synchronous Resection of Colorectal Cancer and Hepatic Metastases
- HIPEC

- Isolated Limb Infusion
- Endocrine Surgery for both Benign and Malignant Diseases, including Hereditary Neuroendocrine Syndromes
- Complex Surgical Intervention for the treatment of Breast Cancer and Melanoma

Head and Neck Surgery Cases: 6,729

Thoracic Oncology Cases: 3,291

RADIATION ONCOLOGY

Total number of treatments delivered by Radiation Oncology: **31,083**

- Total Number of Intensity-Modulated Radiation Therapy Treatments: **14,156**
- Total Number of Stereotactic Body Radiation Therapy Treatments: **369**
- Total Number of GYN High-Dose Rate Brachytherapy Treatments: **220**
- Total Number of Prostate Low-Dose Rate Brachytherapy Treatments: **33**
- Total Number of Eye Plaque Brachytherapy Treatments: **75**
- Total Number of Partial Breast High-Dose Rate Brachytherapy Treatments: **782**

DIAGNOSTIC & INTERVENTIONAL RADIOLOGY

Total number of procedures performed by Diagnostic and Interventional Radiology: **46,601***

- Total Number of Positron Emission Tomography (PET) Scans: **2,701**
- Total Number of Computed Tomography (CT) Scans: **13,657**
- Total Number of Magnetic Resonance Imaging (MRI) Scans: **1,695**
- Total Number of Ultrasounds: **2,582**
- Total Number of Ablation Procedures: **220**
- Total Number of Biopsies: **1,634**

**Does not include diagnostic or interventional radiology for breast.*

GYNECOLOGIC ONCOLOGY

- Total Number of Overall Patient Visits: **14,010**
- Total Number of New Patient Visits: **2,328**
- Total Number of Surgeries: **2,060**
- Total Number of Robotic Surgical Procedures: **1,183**

BLOOD & MARROW TRANSPLANT PROGRAM

85% one-year overall survival rate for Allogenic Transplant patients – exceeding national average for one-year survival of these patients **by 25%**

- Total Number of Allogenic Transplants performed by Bone and Marrow Transplant Program: **20**
- Total Number of Autologous Transplants performed by Bone and Marrow Transplant Program: **41**



PATIENT PROFILE: Sonya Faught

In 2007, Sonya Faught went in for a regular dental cleaning and noticed an abnormal white patch on the inside of her left cheek – an abnormality that a biopsy determined to be simply a common skin rash. Seven years later, however, a significant change accompanied by severe headaches led her to return to her oral surgeon for a re-evaluation. She was immediately referred to Courtney Shires, MD, Head and Neck Surgeon and member of West Cancer Center’s faculty, who diagnosed her with Stage IV Squamous Cell Carcinoma. Due to the uniqueness of Faught’s case and the nature of her diagnosis, Dr. Shires presented the case to the Head and Neck Tumor Board, a collaboration of physicians from different specialties who evaluate complex cases and provide a collective recommendation for the course of treatment.

“In the midst of this overwhelming diagnosis, my exceptional care team immediately went to work – working to develop a plan that would work quickly and effectively for my aggressive cancer type,” said Faught. “I knew I had a long journey ahead of me, but I was prepared with what I considered the best resources possible to beat this.”

Following much evaluation, discussion and collaboration, Moon Fenton, MD, Medical Oncologist and Head and Neck specialist at West Cancer Center, prepared a treatment plan for tumor removal, chemotherapy and radiation. Faught proceeded to undergo a seven-hour surgery performed by Dr. Shires to remove the tumor, followed by six rounds of chemotherapy and 30 rounds of radiation under the care of Matthew Ballo, MD, FACR, Director of Radiation Oncology at West Cancer Center. Unfortunately, shortly after completing treatment, the cancer returned. Dr. Fenton and the rest of Faught’s healthcare team immediately devised a second treatment plan, which consisted of a 20-hour surgery to remove the entire left side of her face – including her jaw bone and teeth. Uzoma Ben Gbulie, MD, UT Medical Group Plastic Surgeon, replaced Faught’s jaw bone with titanium and

wired her mouth shut. To replace her facial skin, he took a skin graft from her thigh.

Despite the numerous and extensive therapy selections to combat Faught’s cancer, her battle against the disease was unfortunately not over yet. In 2015, the cancer came back again – this time to her thyroid. She was given one year to live if she decided to forego any treatment. Following a second opinion recommended by Dr. Fenton, Faught proceeded with a treatment plan that included additional chemotherapy coupled with an immunotherapy combination therapy clinical trial at West Cancer Center.

Faught completed nine rounds of the clinical trial combination therapy, which slowly caused the loss of her hair, but resulted in a 75-95% successful response. In June of 2016, her scans showed no evidence of disease and she is continuing to receive weekly treatments at West Cancer Center’s Midtown location.

Faught was named one of 25 finalists in the Memphis Business Journal’s 2016 Health Care Hero Awards. As a Certified Technician at the UT Hamilton Eye Institute, Faught provides hope for her patients diagnosed with eye cancer – since she knows first-hand what it’s like to be in their shoes. Today, she continues to be cancer free.

“You have three choices in life: give up, give in, or give it all you’ve got. And I’m going to keep giving it all I’ve got.”

SONYA FAUGHT

PATIENT, WEST CANCER CENTER

ONCOLOGY CARE MODEL

A Commitment to Better Cancer Care

An innovative payment model focusing on providing higher quality, more coordinated oncology care launched in the summer of 2016 – a launch that included West Cancer Center as one of the initial sites of participation. The Oncology Care Model (OCM), created by The Centers for Medicare & Medicaid Services (CMS), includes a group of oncology practices that have entered into payment agreements that include financial and performance accountability for episodes of care surrounding chemotherapy administration to cancer patients. West Cancer Center was one of just 200 physician group practices nationwide to participate in a care delivery model that supports and encourages higher quality, more coordinated cancer care.

“West Cancer Center was thrilled and honored to be selected as one of the participating practices for the Oncology Care Model,” said Lee S. Schwartzberg, MD, FACP, Executive Director of West Cancer Center and Chief of the Division of Hematology/Oncology at the University of Tennessee Health Science Center (UTHSC). “This initiative by the CMS is welcomed throughout our industry, as its goal is to foster a greater sense of coordination and collaboration for the often complex care required for cancer patients. It is also an opportunity for all of us at West Cancer Center to continue to elevate our commitment to patient-centered care, which has always been a building block of our organization.”

Through the OCM, CMS, in partnership with participating oncologists and care providers, supports better quality care, better health and lowers costs for this medically complex patient population. The program aims to promote whole-practice transformation through the use of aligned financial incentives, including performance-based payments, to improve care coordination, appropriateness of care, and access for fee-for-service (FFS) Medicare beneficiaries undergoing chemotherapy. OCM is a five-year model that began on July 1, 2016 and runs through June 30, 2021.



MARGARET WEST **COMPREHENSIVE BREAST CENTER:** **A Collaboration for Integrated Breast Care**

In an effort to better integrate comprehensive breast services for women in the Mid-South, the Methodist Breast Center and the West Clinic Comprehensive Breast Center consolidated to form the Margaret West Comprehensive Breast Center. The new Breast Center consolidates the services of the previously separate clinics into an integrated program for the complete management of breast health and wellness.



Jennifer Boals, MD
Breast Imaging Specialist
Margaret West Comprehensive
Breast Center

The new breast center collaboration features a full suite of comprehensive services for the total management of breast health, including the most advanced imaging and diagnostic services such as digital breast tomosynthesis, or 3-dimensional mammography. According to Jennifer Boals, MD, Memphis Radiological PC Radiologist and Breast Imaging Specialist at the Margaret West Comprehensive Breast Center and Assistant

Professor at the University of Tennessee Health Science Center (UTHSC), access to these high-quality services provides patients the best care possible for their overall breast health.

“Tomosynthesis, or 3-D mammography, provides the clearest image currently available of the breast tissue,” said Dr. Boals. “With only a few extra seconds of imaging, tomosynthesis obtains images that see through the layers of the breast tissue much more accurately than regular mammography.”

In addition to the highest-quality imaging available, patients at the Margaret West Comprehensive Breast Center also have access to complete diagnostic and treatment needs to evaluate and treat a vast array of both benign and malignant breast diseases and conditions. From screening and diagnostics, to treatment, surgical services and even high-risk assessment, the Margaret West Comprehensive Breast Center represents a collaborative approach to ensure patients receive the most progressive care available.

“Whether you are a patient here for your annual mammogram, or you require further diagnostic testing or possible surgical intervention, we can take care of you,” said Michael Berry, MD, Medical Director of the Margaret West Comprehensive Breast Center and Associate Professor at UTHSC. “This integrated partnership provides the patient an opportunity to stay within a comprehensive healthcare system to address any and all breast management needs, should they decide to do so.”



Michael Berry, MD
Medical Director
Margaret West Comprehensive
Breast Center

In addition to the comprehensive breast center located within West Cancer Center’s East Campus facility, the Margaret West Comprehensive Breast Center provides screening and wellness services at two additional satellite locations – one within the diagnostic center in Midtown Memphis, and another at the recently renovated screening and wellness center in Germantown, Tenn. These additional satellite sites represent not only a commitment to convenient and accessible locations across the city, but also to the delivery of comprehensive services for each woman’s wellness journey.

The Margaret West Comprehensive Breast Center received its name through a significant financial gift from Betty and Jack Moore in honor of West Clinic’s founder and the Moore’s brother-in-law, William H. West, MD, who lost his mother to breast cancer.



MARGARET WEST COMPREHENSIVE BREAST CENTER COMPREHENSIVE SERVICES

- Screening Mammography
- Diagnostic Mammography
- 3-D Mammography – Tomography
- SAVI Insertion
- Cryoablation
- Stereotactic Radiation Therapy
- Ultrasounds
- Breast Biopsies
- Wire Localization Procedure
- Genetic Testing
- High Risk Evaluation Clinic
- Medical Oncology for Malignant Breast Disease
- Breast Surgery
- Evaluation and Treatment of all Benign Breast Diseases
- Wellness and Prevention Education
- Mobile Mammography Services
- Bone Density (DEXA) Scan



MEANINGFUL METRICS

Total Number of Screening Mammograms Provided: **25,734**

Total Number of Diagnostic Mammograms Performed: **20,600**

Total Number of Ultrasounds Performed: **22,661**

Total Number of Biopsies Performed: **2,020**

Total Number of Breast Surgeries Performed: **2,557**



MOLECULAR TUMOR BOARD

A Multidisciplinary Approach to Individualized Care

Home to one of the nation's first Molecular Tumor Boards, West Cancer Center is dedicated to further understanding not only the genomic information of tumors, but also how to interpret that information so that it can be applied in clinical practice. From oncologists and researchers, to pathologists and geneticists, we've assembled a team that utilizes the collective expertise of various specialties. This collaborative team reviews individual patient cases and recommends appropriate courses of treatment, depending on the specific cancer, its stage and the patient's individual needs. This team-based approach to individualized care ensures our patients are receiving the most comprehensive care available.

Often times, patients diagnosed with metastatic cancer are offered the opportunity to have a tumor biopsy for extensive molecular testing, including evaluation of protein expression, genetic amplifications, and sequencing of genes commonly associated with cancer. The Molecular Tumor Board then evaluates the results of these extensive tests and provides a treatment recommendation. And while we are working to further our understanding of genomics and how we can use that information to improve patient outcomes, we are making progress along the way. For the cases that our team is unable to provide treatment recommendations for, we turn that into an opportunity to conduct more research on the specific tumor abnormalities, so that we will be able to provide recommendations for it in the future. Common recommendations include:

- Consideration for an available clinical trial
- Treatment with an approved anti-cancer drug
- Genetic counseling and testing for cancer syndromes

Through the combined insight of clinical research and a multidisciplinary approach for molecular testing review, West Cancer Center patients are offered the opportunity for a greater – and more precise – understanding of their individual tumor.

The Molecular Tumor Board reviewed a total number of **1,002 cases** in 2016.

Nearly 40% of the cases reviewed were selected to move on to the Multi-Disciplinary Tumor Board for further review.

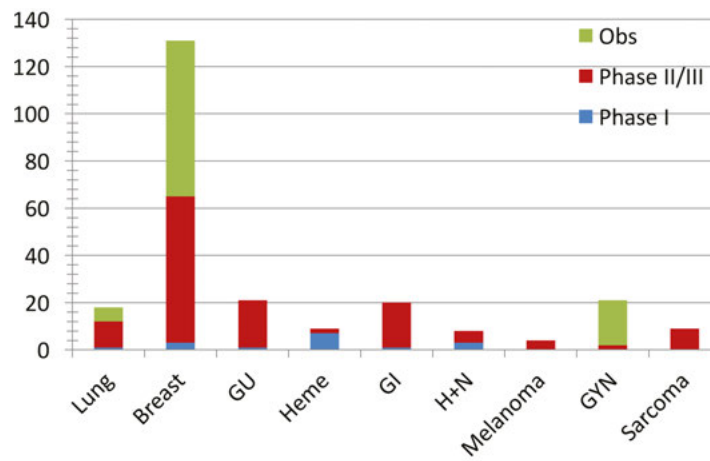
Of those cases that were further reviewed, **20%** resulted in **actionable, clinical recommendations** by the Molecular Tumor Board, which included clinical trial participation, as well as standard and non-standard therapy approaches.

CLINICAL RESEARCH AT WEST CANCER CENTER:

West Cancer Center's Research Program includes a large portfolio of clinical research studies that bring the latest advances in immuno-oncology and other targeted agents that offer the best opportunities for patients to benefit from precision medicine. The **Clinical Trial Database** tool at westcancercenter.org provides the opportunity for both patients and physicians to search through clinical trial opportunities based on disease type, stage and status. To view the **Clinical Trial Database** and learn more about the Department of Research and Clinical Trials Program, visit westcancercenter.org/research.

Patient & Trial Metrics

Total Clinical Trial Participation Accruals by Disease State



Total number of unique patients for the therapeutic trials at West Cancer Center **increased by 22%** year-over-year.

There were **almost 2,500 visits** for clinical research trials at West Cancer Center in 2016 – **a 14% increase** year-over-year.

West Cancer Center currently has **5 active studies** as part of the **National Cancer Institute's Cooperative Group Studies**. Participants were enrolled in studies across several disciplines including Breast Surgery, Medical Oncology, Radiation Oncology and Surgical Oncology.



Clinical Research at West Cancer Center: PHASE I – III CLINICAL TRIALS

The Research Program at West Cancer Center, which includes Phase I through III clinical trials, provides patients access to the most advanced therapies available – years before they are approved by the FDA. Our physician scientists and researchers are leading efforts in the laboratory that are having a direct impact on the patients we see in our clinics, every single day. Our vast portfolio of clinical trials is just another distinguishing factor – offering patients more options that aren't available elsewhere in the region.

“Our goal with our portfolio is very patient focused,” said Ari VanderWalde, MD, MPH, FACP, Director of Clinical Research at West Cancer Center and Associate Vice Chancellor of Clinical Research at the University of Tennessee Health Science Center (UTHSC). “What we are trying to do is get the best trials, with the best drugs, available to the patients that we see in our clinics every day. When we do that, the portfolio takes care of itself.”

At West Cancer Center, our patients have advanced access to the therapies of tomorrow – today. Patients participate in clinical trials for many reasons, including the potential to benefit from a new drug or treatment, improved management of symptoms resulting from treatment and the opportunity to directly contribute to discovering new therapies, that may ultimately benefit other patients.

And while the number of patients interested in clinical trial participation has gradually increased over the years, minority participation is a barrier that still exists. According to the National Institutes of Health (NIH), the minority population accounts for fewer than 10% of patients enrolled in clinical trials across the country. For the Memphis region, an area with a more than 60% minority population, this is even more alarming. That's why West Cancer Center has addressed these barriers to care and now have a clinical trial minority patient population of nearly 30%. This ensures that the discoveries being made through clinical trial studies are – and will continue to be – relevant and applicable to all populations.



Therapies of Tomorrow, Today: ANNOUNCE STUDY

One such clinical trial offering at West Cancer Center is the ANNOUNCE Study – a Phase III study of doxorubicin plus olaratumab (Lartruvo) in patients with advanced or metastatic soft tissue sarcoma. A monoclonal antibody, Lartruvo was administered with a chemotherapy called doxorubicin – uniting a breakthrough antibody treatment with an established cancer medication. And while Lartruvo’s indication was approved under Accelerated Approval based on the Phase II study, the Phase III trial – ANNOUNCE – was enrolled on a confirmatory basis. West Cancer Center was one of just 62 sites, including international locations, selected for the confirmatory phase.

“At West Cancer Center, we enrolled beyond our expectations for the ANNOUNCE study,” said David Portnoy, MD, Medical Oncologist at West Cancer Center and the Primary Investigator for the ANNOUNCE trial. “It signified to us that – even with this rare tumor type – we have the expertise, ability and portfolio access to treat soft tissue sarcoma on the same level as some of the largest cancer centers in the United States.”

Soft tissue sarcoma (STS) accounts for only 12,000 cancer diagnoses in the U.S. each year. Potentially even rarer than the tumor type itself are the options available to treat it. Until Lartruvo was approved in 2016, there had been no first line therapy approved by the FDA for the initial treatment of STS since doxorubicin was approved more than four decades ago. The results from the ANNOUNCE trial acted as confirmatory data for this important, and accelerated, approval indication. According to Dr. Portnoy, this will not only allow us to bring treatment for STS into the modern era of cancer treatment, but it also demonstrates the world-class treatment and care available to regional cancer patients – right here in our community.

“Just five years ago, you would have to leave the city to get this type of access to breakthrough treatments,” said Dr. Portnoy. “Now, with studies such as the ANNOUNCE trial, we can provide our patients reassurance that they are going to receive world-class care, right here in the Mid-South, without having to travel. In fact, we’re finding that more people are making Memphis and West Cancer Center a destination for advanced cancer care.”



David Portnoy, MD
Medical Oncologist
West Cancer Center



Danny Davidson

CLINICAL TRIAL PATIENT PROFILE

“...this trial has been a miracle for me.”

After battling and beating prostate cancer almost 10 years prior, a recurrence was the farthest thing from Danny Davidson’s mind. However, a trip to the Emergency Room coupled with tests indicating an increased PSA level – despite hormonal therapies – led Davidson’s physicians to question next steps. Ultimately, the decision was clear to his physicians: “Let’s get you to West Cancer Center.”

Follow-up scans indicated a spot on Davidson’s L4 vertebrae of his spine. With the cancer metastasized and standard therapy protocol no longer an option, Brad Somer, MD, Medical Oncologist at West Cancer Center and Davidson’s physician, recommended a clinical trial opportunity – one that could provide him with access to a new therapy option that had not yet been approved by the FDA.

The trial was the Alliance A031201 study – a Phase III trial of enzalutamide alone versus enzalutamide, abiraterone and prednisone for progressive, castration-resistant metastatic prostate cancer. To qualify for the trial, patients must have progressive disease at study entry – meaning a minimum of two rising PSA levels within a short timeframe, soft tissue disease progression and/or bone disease progression with two or more new lesions on bone scan – all while the patient was on androgen deprivation therapy. Davidson’s care team quickly determined that he was eligible for the trial, pushing through eligibility paperwork and details to get him started as soon as possible.

Today, Davidson is feeling great – and enjoying life with his wife and family. For him, enrolling in the study was accompanied by fear; but, more importantly, he was motivated to fight back with every resource and tool available to beat this disease.

“I’ve lost loved ones to this disease – and I was fearful of going through something like this again,” said Davidson. “But this time, I said to myself – ‘it’s on me.’ So I was determined to do everything I can to beat this and get a great quality of life. And this trial has been a miracle for me.”

319 The number of combined abstract presentations, publications and posters West Cancer Center faculty participated in for **2016**:

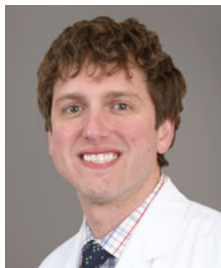
171 Published Articles **103** Abstract Presentations **45** Posters

Publication and Presentation Highlights

For nearly four decades, West Cancer Center has been on the frontline of cancer research and discovery. Always on the cusp of the next meaningful breakthrough, our physician scientists are not only actively involved in presenting their findings at international conferences, but also in robust clinical studies that have led to a better understanding of this complex disease. This is evidenced by the nearly 200 papers featured last year in prestigious scientific publications such as the *Therapeutic Advances in Hematology* journal, the *Breast Cancer Research* journal and the *Journal of the National Comprehensive Cancer Network*. These publications reflect findings that have helped redefine cancer science and deliver the most effective treatment available for patients.



Todd Tillmanns, MD, FACOG



Michael Ulm, MD



Linda Smiley, MD, FACOG



Mark Reed, MD, FACOG

Todd Tillmanns, MD, FACOG, Michael Ulm, MD, Linda Smiley, MD, FACOG, and Mark Reed, MD, FACOG, were authors on a study titled “Video-assisted genetic counseling in patients with ovarian, fallopian and peritoneal carcinoma,” published in the *Gynecologic Oncology* journal.



Matthew Ballo, MD, FACR



Michael Farmer, MD



Noam VanderWalde, MD

Matthew Ballo, MD, FACR, Michael Farmer, MD, and Noam VanderWalde, MD, were authors on a study published in the *Practical Radiation Oncology* journal titled “Accessibility, availability, and quality of online information for US radiation oncology.”



Jason Chandler, MD



Eric Wiedower, MD



Michael Martin, MD

Jason Chandler, MD, Eric Wiedower, MD, and Michael Martin, MD, reported a case of “Unusual, spontaneous aneurysm formation in a patient being treated with ibrutinib for chronic lymphocytic leukemia,” published in *Therapeutic Advances in Hematology*.

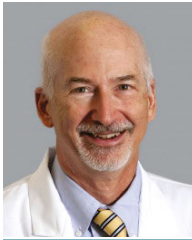


REDEFINING CANCER



Manjari Pandey, MD

Manjari Pandey, MD, Jason Chandler, MD, and Michael Martin, MD, were authors on a study titled “Genomic landscape of small cell carcinoma of the breast contrasted to small cell carcinoma of the lung,” published in the *Breast Cancer Research Treatment* journal.



Lawrence M. Pfeffer, PhD

Lawrence M. Pfeffer, PhD, was an author on a study published in the *Oncotarget* journal titled “MiRNA203 suppresses the expression of protumorigenic STAT1 in glioblastoma to inhibit tumorigenesis.”



Meiyun Fan, MD, PhD

Meiyun Fan, MD, PhD, was an author on a study published in the *Molecular Cancer* journal titled “ITGA6 is directly regulated by hypoxia-inducible factors and enriches for cancer stem cell activity and invasion in metastatic breast cancer models.”



Noam VanderWalde, MD

Noam VanderWalde, MD, was an author on a study titled “NCCN Guidelines Insights: Older Adult Oncology,” published in the *Journal of the National Comprehensive Cancer Network*.



David Portnoy, MD

David Portnoy, MD, was an author on a study published in the *Annual Oncology* journal titled “Subgroup analysis in RAISE: a randomized, double-blind phase III study of irinotecan, folinic acid, and 5-fluorouracil (FOLFIRI) plus ramucirumab or placebo in patients with metastatic colorectal carcinoma progression.”



Ramesh Narayanan, PhD

Ramesh Narayanan, PhD, was the author on a study titled “Novel, Isoform-Selective, Cholecystokinin A Receptor Antagonist Inhibits Colon and Pancreatic Cancers in Preclinical Models Through Novel Mechanism of Action,” published in the *Oncology Reports* journal.



Lee S. Schwartzberg, MD, FACP

Lee S. Schwartzberg, MD, FACP, was an author on a study published in the *Cancer* journal titled “Efficacy of the neurokinin-1 receptor antagonist rolapitant in preventing nausea and vomiting in patients receiving carboplatin-based chemotherapy.”



Alva B. Weir, III, MD, FACP

Alva B. Weir, III, MD, FACP, was an author on a study titled “Cancer and Chemotherapy Induced Anemia: Clinical practice guidelines in oncology,” published in the *Journal of the National Comprehensive Care Network*.



Michael Martin, MD

Michael Martin, MD, was an author on an abstract presentation titled “Impact of provider volume on outcomes of patients with Hodgkin lymphoma,” was selected for the American Society of Clinical Oncology (ASCO) Annual Meeting.



Jeremiah Deneve, DO, FACS

Jeremiah Deneve, DO, FACS, authored an oral presentation titled “Cytoreduction with hyperthermic intraperitoneal chemotherapy for fibrolamellar hepatocellular carcinoma with carcinomatosis,” which was selected for the 10th Annual International Symposium on Regional Perfusion Therapy in Tampa, Florida.



Richard Fine, MD, FACS

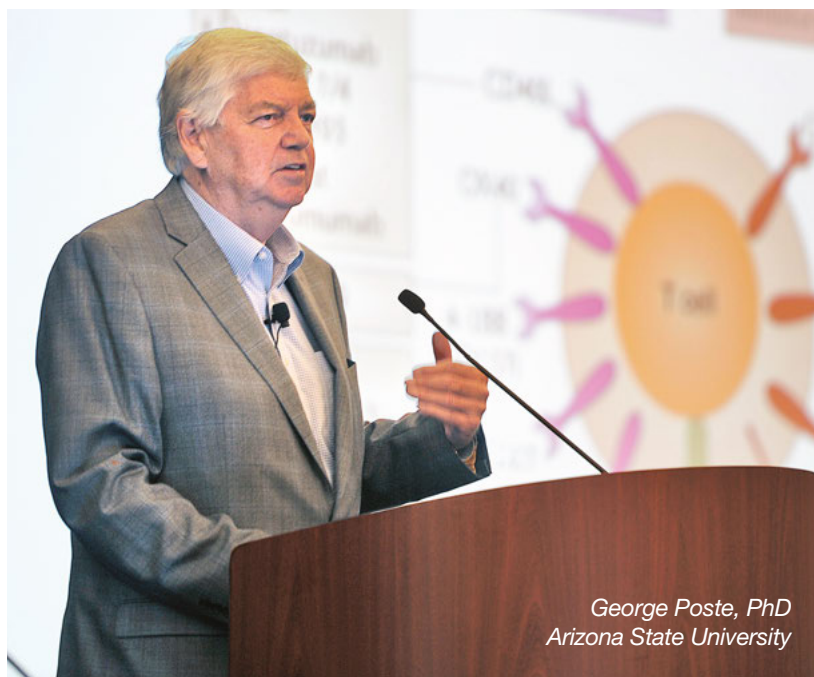
Richard Fine, MD, FACS, authored an abstract presentation titled “Breast Care; Emerging Technology and Emerging Roles for Existing Technology,” which was selected for the 2016 Congress meeting in Amsterdam.

R SCIENCE

Symposium Spotlight: Annual Oncology Conference

In November 2016, West Cancer Center welcomed internationally renowned experts in the study and treatment of cancer to Memphis for the 2nd Annual West Cancer Center Oncology Conference, November 18 and 19 at The Guest House at Graceland. The day-and-a-half event, titled Collaboration for the Future Cure: Precision Medicine & Immuno-Oncology, included an agenda focused on how to best integrate personalized medicine and the explosion of immunotherapy drugs into clinical practice.

“We were thrilled to once again welcome the premier minds in cancer care and research to our 2nd Annual Conference,” said Lee Schwartzberg, MD, FACP, Executive Director of West Cancer Center and Conference Meeting Chair. “This educational event provides a forum for collaboration with colleagues and specialists across our region, while also shining a national spotlight on the exceptional, world-class medical institutions that call Memphis home.”



*George Poste, PhD
Arizona State University*

Sessions focused on the intersection of germline and genomic testing, immunotherapy in genitourinary cancers and personalized medicine applications in the treatment of breast cancer, as well as CAR-T cells and the newest transplantation techniques in the treatment of hematologic malignancies.

According to Dr. Schwartzberg, these topics are what many oncologists and cancer specialists are facing, every single day. “We are experiencing an unprecedented growth in our understanding of this very complex disease,” said Dr. Schwartzberg. “And while these rapid, seismic shifts in our knowledge lead to better, more effective therapies, it is critical that we understand how to most effectively integrate these cutting-edge approaches into our clinical practice.”

2016 CONFERENCE SPEAKERS

Jeff Boyd, PhD
Miami Cancer Institute
Baptist Health South Florida

John DiPersio, MD, PhD
Washington University School
of Medicine

Harry Erba, MD, PhD
University of Alabama
at Birmingham

D. Neil Hayes, MD, MPH
UNC Lineberger Comprehensive
Cancer Center

Samer Khaled, MD
City of Hope Cancer Center

Terry Mamounas, MD, MPH, FACS
University of Florida Health Cancer Center
at Orlando Health

George Poste, PhD
Arizona State University

Suresh Ramalingam, MD
Winship Cancer Institute

Robert M. Rifkin, MD, FACP
Rocky Mountain Cancer Centers

Janis Taube, MD, MSc
Johns Hopkins University School
of Medicine

Wendy Woodward, MD, PhD
The University of Texas
MD Anderson Cancer Center

Evan Y. Yu, MD
Seattle Cancer Care Alliance
and University of Washington



Grants Awarded for Cancer Research

INTRAMURAL GRANTS

In late 2016, West Cancer Center awarded four intramural grants for cancer research. The awarded grants, each valued at \$50,000, were among the almost 20 proposals received by West Cancer Center for its annual grant awarding process.

This year's recipients and projects include:

Matthew Ballo, MD, FACR and Enrique Izaguirre, PhD, DABR, Department of Radiation Oncology, UTHSC - Awarded \$50,000 for their project titled "Novel 3D Printed Applicators for Advance Skin Cancer Brachytherapy."

Gustavo A. Miranda-Carboni, PhD, Division of Hematology/Oncology, UTHSC - Awarded \$50,000 for his research in the study of "Monoterpene Natural Products Against TNBC."

Lawrence M. Pfeffer, PhD, Department of Pathology and Laboratory Medicine, UTHSC - Awarded \$50,000 for his research proposal titled "The Role of APELA in Glioblastoma."

Junming Yue, PhD, Department of Pathology, UTHSC - Awarded \$50,000 for his research testing MTF1 as a new drug target in treating ovarian cancer.

EXTRAMURAL GRANTS

In addition to the intramural grants awarded by West Cancer Center, we were also the recipients of extramural grants. According to Lee S. Schwartzberg, MD, FACP, Executive Director of West Cancer Center and Chief of the Division of Hematology/Oncology at UTHSC, the projects funded embody not only the collaboration among the Mid-South's leaders in cancer care and research, but also the critical role of the "physician scientist" in the current oncology landscape. And while the projects focus on various cancer types and methodology, what they share in common is a commitment to improving patient outcomes.

Ari VanderWalde, MD, MPH, MBioeth, Department of Clinical Research, UTHSC, and Antoni Ribas, MD, Division of Hematology/Oncology, UCLA – Stand Up to Cancer awarded \$3,000,000 to fund their project titled "Reversing primary anti-PD-1 resistance with ipilimumab and nivolumab."

Ari VanderWalde, MD, MPH, MBioeth, Department of Clinical Research, UTHSC – Amgen awarded \$273,000 for his research study "testing combination of the oncolytic virus talimogene laherparepvec combined with the BRAF inhibitor dabrafenib and the MEK inhibitor trametinib in patients with melanoma and a mutation in the BRAF gene."

Meiyun Fan, MD, PhD, Department of Clinical Research, UTHSC – The National Institute of Health (NIH) awarded \$75,000 to her project titled "MYC/miR-18a-5p/HIF1A regulator network conferring drug resistance to basal-like breast tumors."



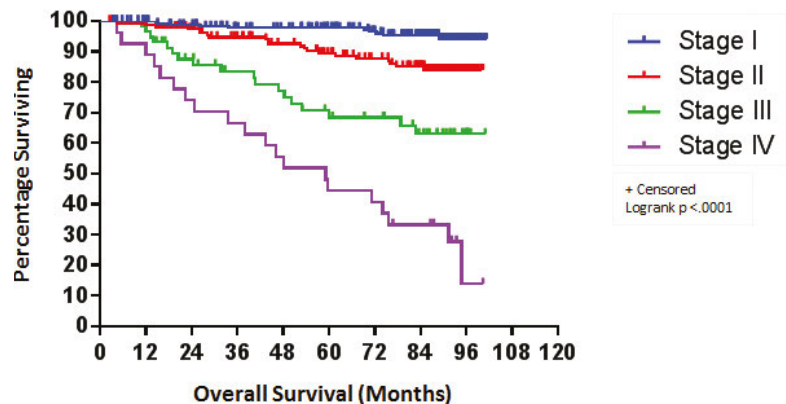
SUPERIOR PATIENT OUTCOMES

Analysis & Study

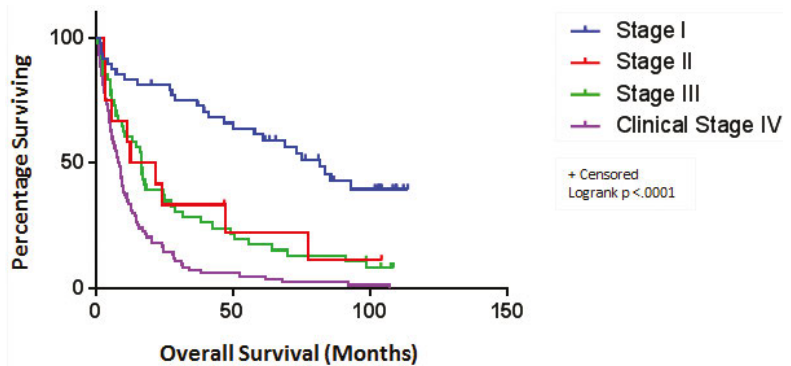
Part of our mission at West Cancer Center is to analyze our institutional outcome data for the diseases we treat. We do this by evaluating each stage independently, as the outcomes by stage vary considerably. With the help of our superb quality analyst team, we have now generated long-term survival curves for breast, lung and uterine cancers. “Our outcomes by stage, displayed here, are in line with the national data reported to the Surveillance, Epidemiology and End Results (SEER) Program of the National Cancer Institute,” said Lee Schwartzberg MD, FACP, Executive Director of West Cancer Center and Chief of the Division of Hematology/Oncology at the University of Tennessee Health Science Center (UTHSC). “The survival curves are now being updated annually with the latest year’s data so we can observe improvement in survival from year to year.”

Further sub-analyses of each of the diseases have looked at outcomes by race, socioeconomic status, BMI and other factors. Interestingly, the disparity gap between outcomes for the African American and Caucasian patient populations, previously evident in the Mid-South region at large, was not detected in our patient-level analysis. This suggests that once patients have entered West Cancer Center, their outcome is the same, regardless of socioeconomic factors. And while our community outreach efforts provide access to our state-of-the-art cancer center for patients across the Mid-South region, this data is evidence that these efforts are making an impact in survival outcomes in our community.

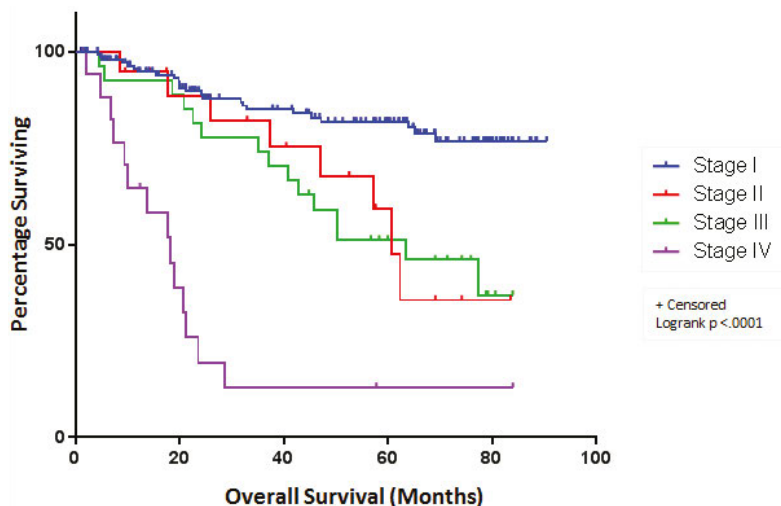
Breast Cancer Outcomes



Lung Cancer Outcomes



Uterine Cancer Outcomes



TRANSLATING SCIENCE INTO CARE

ColoCare Consortium: Collaboration to Impact Colorectal Cancer Outcomes

A “hot spot.” That’s what a study published in *Cancer Epidemiology, Biomarkers and Prevention* labeled three key geographic areas where colorectal cancer death rates remained elevated as compared to other areas of the country. One of those areas: the Mississippi Delta. In fact, colorectal cancer death rates were 40 percent higher in the Mississippi Delta region than the national average – a significant statistical variance attributed to lack of coordinated educational and prevention messaging in Mid-South communities. That’s where national collaborations – like the ColoCare Consortium – come in. And West Cancer Center and the University of Tennessee Health Science Center (UTHSC) are taking part.



David Shibata, MD
Deputy Director
West Cancer Center

The ColoCare Consortium is comprised of seven national leaders in cancer care and research collaborating to determine how lifestyle and other factors impact colorectal cancer outcomes. It is a prospective cohort study that enrolls newly diagnosed colorectal cancer patients, collecting detailed lifestyle, medical history and cancer treatment information in the process. These collections, which include extensive biospecimens collected during surgery, are analyzed to identify factors that may determine both short-term and long-term survival among these patients, including genetic and tumor biomarkers that may impact treatment response. A National Institutes of Health (NIH) grant awarded to ColoCare in December of 2016 allowed the Consortium to not only grow the biorepositories that fuel the study, but also to increase the number of study sites participating. That’s where UTHSC – and West – came in.

“It is very exciting for us to participate in a study of this scale – one that truly impacts the delivery of care and outcomes for the patients we see here in the Mid-South,” said David Shibata, MD, FACS, FASCRS, Deputy Director of West Cancer Center. “It is significant of the role our cancer center plays on the international level for cancer care and research.”

HPV Associated Cancers: Improving Response, Reducing Toxicity

With human papillomavirus (HPV)-associated cancers on the rise in the United States, particularly in the southeast, the counteraction to this growing epidemic is multi-faceted. Preventative measures available through HPV vaccinations as well as education around access to these vaccinations are one part. However, as the Center for Disease Control predicts HPV infections will cause more than 30,700 cancers in men and women every year, the imperative for improved treatment response – as well as the reduction in morbidity as a result of treatment – is clear. At West Cancer Center and the UTHSC, Dr. David Shibata is leading a National Institutes of Health funded study to determine just that.

And while radiation therapy remains the preferred treatment modality – it also predisposes patients to significant toxicity and negative side effects as a result of the anatomic locations of the cancer. With this in mind, Dr. Shibata seeks to leverage the growing trend of utilizing molecular biomarkers to predict treatment response and/or outcomes, focusing on consistent molecular changes taking place across all HPV-associated malignancies.

“Through the correlation of molecular profiling as well as retrospective outcomes data across these identified HPV-associated cancers, we are building a unique and powerful tool that allows us to essentially classify patients into groups stratified by their particular sensitivities to radiotherapy as well toxicity risk level for the treatments,” said Dr. Shibata. “By evaluating the interplay of these epigenetic as well as response and morbidity factors in HPV-associated cancers, we can develop an instrument that can allow us to personalize dose modification and reduce toxicity with the ultimate goal of improving patient outcomes and quality of life thereafter.”

With his prevention messaging focusing on a “priority” approach to understanding the usage (or lack thereof) of available HPV vaccines, he is also looking at research that can help determine which Anal Intra-epithelial neoplasia grade 3 (AIN3) will develop into cancer versus which ones will not. Based on the particular molecular profile taken at biopsy of the AIN3, his work could help to determine which are low-risk vs. high-risk, allowing for surgeons to avoid painful ablation techniques when unnecessary (e.g. as in the case of low-risk AIN3).

Mobile Health: Using Technology to Improve Symptom Management and Adherence for Aromatase Inhibitors

With the pace of cancer research only matched by the boom in the tech sector, researchers at the University of Tennessee Health Science Center (UTHSC) and West Cancer Center are looking at how technology – like mobile based health opportunities – may impact the prevention of recurrence in a target cancer population.

One such study includes a pilot randomized controlled trial evaluating the use of a web-enabled application to improve not only symptom management for hormone receptor-positive breast cancer patients, but also their adherence for aromatase inhibitors (AI). For postmenopausal women with hormone receptor-positive breast cancer, long-term use of AIs significantly reduces the risk of cancer recurrence, ultimately improving quality of life and survival outcomes. However, many patients do not adhere to the usage of AIs.

At the end of the eight weeks, the conclusion was clear: the use of the mobile app to provide real-time monitoring of AI adherence and treatment-related symptoms with weekly reminders significantly improved short-term AI adherence and may limit reductions to quality of life. According to Dr. Graetz, these findings indicate not only a potential low-cost intervention to improve survival outcomes, but also the platform's usage for other applications – including patient care for other cancer disease states.

For Dr. Vidal, this also shows a need – and opportunity – to develop better, more convenient tools for treating our patients. “It is only a matter of time before mobile applications become something we use on a daily basis in patient care,” said Dr. Vidal. “Patient reported outcomes and the utilization of this data continue to become more essential to the patient care process, and we must continue to put this information at the center of everything we do. At West Cancer Center, we continue to be at the forefront of this movement.”



Gregory Vidal, MD, PhD
Breast Medical Oncologist
West Cancer Center



Ilana Graetz, PhD
Assistant Professor
Dept. of Preventative Medicine
UTHSC

Center for Health Equity: Big Vision, Bigger Impact

A local initiative with national impact – fueled by a passion to heal. That's how David Schwartz, MD, FACR, Radiation Oncologist, describes West Cancer Center's new Center for Health Equity – an endeavor recently launched between the Departments of Radiation Oncology and Preventive Medicine. This Center is the first of its kind in the nation dedicated specifically to providing access to radiotherapy for cancer patients – regardless of income, race, religion or socioeconomic barriers.

“Cancer hits patients hard, especially patients who lack financial or social support,” said Dr. Schwartz. “Our goal is to tie on our running shoes, hit the streets, ask tough questions, and partner with all willing partners in the Memphis community to tackle nutritional, environmental, transportation, safety, and social challenges that impede effective cancer care in our most vulnerable neighbors.”



Michelle Martin, PhD
Radiation Oncologist
Center for Health Equity



David Schwartz, MD
Radiation Oncologist
Center for Health Equity

And while this program is part of a larger Center for Innovation in Health Equity Research (CIHER) at UTHSC School of Medicine, it also supports West Cancer Center's mission to provide cancer care to the Mid-South community and attain national-level standing as an NCI Designated Cancer Center. Dr. Schwartz serves as the founding Director of the Center, and co-leads its initiatives with Professor Michelle Martin, PhD, who founded and leads CIHER at UTHSC. This novel collaboration of clinical and health services leadership is the launching pad for developing partnerships with local providers, educators, community advocates, health economists, clergy, and government agencies to reduce costs and increase value of cancer treatment.



NEW FACULTY SPOT



Ramakrishna Battini, MD

Medical Oncologist and Hematologist, West Cancer Center

Dr. Ramakrishna Battini serves as an attending medical oncologist and hematologist in the hospital setting. He has a special interest in clinical instruction, quality improvement, clinical research and clinical trials. His research focuses on multiple myeloma.



R. Scott Daugherty, MD

*Clinical Instructor, Department of Surgery,
University of Tennessee Health Science Center
Surgical Oncologist, West Cancer Center*

Dr. R. Scott Daugherty is an academic leader and clinical expert in the surgical treatment of colorectal and anal malignancies. His research investigates treatments for anal canal squamous cell cancer.



Adam C. EINagggar, MD

*Gynecologic Oncologist, West Cancer Center
Assistant Professor, Department of Obstetrics and Gynecology,
University of Tennessee Health Science Center*

Dr. Adam C. EINagggar specializes in the treatment of women's cancers. His research – as well as his clinical practice – focuses on minimally invasive and robotic surgery, investigational therapeutics and surgical management of advanced gynecologic cancer. He is an active clinical researcher with a focus on ovarian cancer.



M. Boyd Gillespie, MD, MSc, FACS

*Chairman, Department of Otolaryngology,
University of Tennessee Health Science Center
Head and Neck Surgeon, West Cancer Center*

Dr. M. Boyd Gillespie is a nationally renowned expert in the study and surgical treatment of a variety of head and neck disorders. His areas of expertise include thyroid tumors, voice and airway disorders, swallowing disorders and sleep apnea. As a physician scientist, he has a dual focus on both his clinical practice and research initiatives.

LIGHTS



Evan S. Glazer, MD, PhD

*Assistant Professor of Surgery, University of Tennessee Health Science Center
Surgical Oncologist, West Cancer Center*

With a dual focus on both clinical practice and laboratory science, Dr. Evan S. Glazer is a renowned surgical expert and physician scientist focused on the treatment and study of pancreatic and hepatobiliary malignancies. Dr. Glazer spends half of his time in clinical practice, with the remaining half of his time spent in his laboratory at UTHSC.



Suhail Obaji, MD

Medical Oncologist and Hematologist, West Cancer Center

Dr. Suhail Obaji has more than 40 years of experience in providing compassionate and innovative patient care. He is dedicated to not only providing his patients with the most innovative treatment, but also to providing the best quality of life during and after treatment.



David Schwartz, MD, FACR

*Radiation Oncologist, West Cancer Center
Director, Center for Health Equity, Department of Radiation Oncology
Professor and Vice Chair, Department of Radiation Oncology,
University of Tennessee Health Science Center*

Recognized as one of the foremost experts in the innovation and delivery of radiotherapy for head and neck cancer, Dr. David Schwartz brings an academic focus coupled with clinical excellence. As the founding director of the Center for Health Equity in the Department of Radiation Oncology, he has a focus on the development of patient-centered technology to improve the quality and availability of cancer care for all patients across the Mid-South.



Daniel Vaena, MD

*Medical Oncologist and Hematologist, West Cancer Center
Director, Phase I and Genitourinary Cancer Programs
Professor of Medicine, University of Tennessee Health Science Center*

Dr. Daniel Vaena has a special focus on Urologic Oncology and the Experimental Therapeutics Phase I Program. His research investigates treatments for genitourinary cancers, prostate cancer, renal cell carcinoma, bladder cancer and neuroendocrine tumors.





Christopher C. Vanison, MD

*Assistant Professor of Otolaryngology,
University of Tennessee Health Science Center
Head and Neck Surgeon, West Cancer Center*

Dr. Christopher Vanison is a clinical expert in the surgical treatment of head and neck malignancies. He has a dual focus on both cancer surgery and reconstruction. His research focuses on high risk cutaneous squamous cell carcinoma of the head and neck.



A. Earle Weeks, MD

Medical Oncologist and Hematologist, West Cancer Center

Dr. A. Earle Weeks has more than three decades of clinical experience and research expertise. He is dedicated to serving patients in a manner that not only focuses on providing the most effective treatment, but also the most compassionate and supportive.



Eric Wiedower, DO

Medical Oncologist and Hematologist, West Cancer Center

Dr. Eric Wiedower has a reputation for compassionate care and is also an award-winning researcher. During his Fellowship, he served as our Chief Fellow – a prestigious honor awarded to one of the top performing fellows by West Cancer Center's faculty. His research focuses on gastroenterology and hematologic malignancies.

Radiation Oncology Residency Program

In 2016, West Cancer Center announced the establishment of its newly formed Radiation Oncology Residency Program, an initiative launched in conjunction with the University of Tennessee Health Science Center (UTHSC). The program will provide residents with cutting-edge training in the delivery and study of advanced radiotherapy techniques for the treatment of cancer.

“It is with great excitement that we launch our new Radiation Oncology Residency Program here at West Cancer Center,” said Michael Farmer, MD, Radiation Oncologist at West Cancer Center and Director of the Radiation Oncology Residency Program. “Not only does this program provide us the opportunity to train the next generation of leaders in this highly specialized field, but it also represents a substantial step in accomplishing our goal to become a major academic leader in both radiation oncology and cancer care.”

The Radiation Oncology Residency Program includes a total of four residents training at West Cancer Center’s two radiation oncology campuses – one at Methodist University Hospital, and one at West Cancer Center’s recently opened facility on Wolf

River Boulevard. West Cancer Center selected its first two residents for the program in 2016: Carolyn H. Savioz, MD, who recently completed additional radiation oncology training at the University of Pittsburgh Cancer Institute; and Yuefeng Wang, MD, who joined the program after participating in additional training in radiation oncology at the University of Mississippi Medical Center in Jackson, Miss. According to Matthew Ballo, MD, FACR, Director of Radiation Oncology at West Cancer Center and Chairman of the Department of Radiation Oncology at UTHSC, both Savioz and Wang represent the nation’s premier upper-level residents with proven track records in accomplishing meaningful clinical and basic science research.



Carolyn H. Savioz, MD



Yuefeng Wang, MD

Hematology and Oncology Fellowship Program

In conjunction with UTHSC, West Cancer Center is developing the next generation of world-class hematologists and oncologists through the Hematology and Oncology Fellowship Program. Led by Program Director and West Cancer Center Oncologist Alva B. Weir, MD, FACP, the Hematology and Oncology Fellowship carries fellows through a rigorous training system that excites them about the science and practice in the fields of oncology and hematology while preparing them for the future of their educational dreams.

2016-2017 Hematology and Oncology Fellows:

1st Year

- Felicia Hare, MD
- Bryan Huber, MD
- Jason Porter, MD
- Philippe Prouet, MD
- Harsha Ranganath, MD

2nd Year

- Ken Byrd, MD
- Jeff Caughran, MD
- Melissa Crawley, MD
- Vamsi Koduri, MD
- Janice Mullins, MD

3rd Year

- Michelle Chi, MD
- Lindsey Lands, MD
- Muhammad Mirza, MD
- Sameer Nasir, MD
- Namratha Vontela, MD



FELLOW SPOTLIGHT

Gynecologic Oncology Fellowship Program

In partnership with the University of Tennessee Health Science Center (UTHSC), West Cancer Center is developing the next generation of world-class gynecologic oncologists through the Gynecologic Oncology Fellowship Program. Featuring a dual focus on both clinical excellence as well as laboratory research, the recently accredited program provides fellows the opportunity to further both their clinical and surgical techniques for their future as a physician scientist. The program is led by Todd Tillmanns, MD, FACOG, Gynecologic Oncologist and Division Head.

Michael Ulm, MD

Michael Ulm, MD, is a gynecologic oncology fellow at West Cancer Center. With a background in genetics that inspired a change to a clinical focus, Dr. Ulm will work over the next two years to complete his fellowship and specialty training here in Memphis. During his training in pelvic surgery and now gynecologic oncology, he has had the opportunity to perform more than 800 surgeries – many of which utilized a robotic and minimally invasive technique.

“Everything is here”

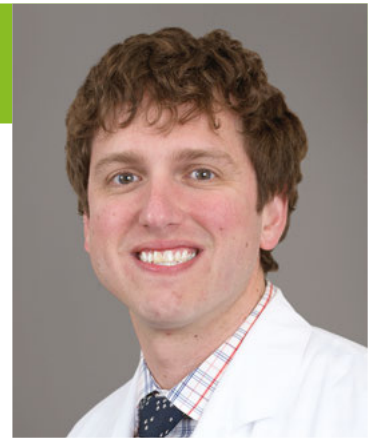
West Cancer Center’s recent growth in both services and educational opportunities made it an easy choice for Dr. Ulm to join the Fellowship Program. “West presents an interesting hybrid between private practice and an academically focused cancer center,” said Dr. Ulm. “I think it exemplifies that you can do both. And for me – and my training – that was absolutely critical.” The case volume in this city also provided a selling point for Dr. Ulm – one that would provide both diversity of patient experiences, as well as a high volume of “hands on” learning opportunities. “I did 500 major surgeries last year,” said Dr. Ulm. “And there are not many gynecologic oncology fellows in the entire country that can say that.” This diversity also applies to pathology – a factor that, according to Dr. Ulm, presents not only unique research access and opportunities, but also the opportunity to impact disparity challenges at the community level.

On life as a Fellow:

As with most fellows and residents, Dr. Ulm’s day often begins before the sun comes up. Starting his morning with rounds from about 5 a.m. until 7:15 a.m., followed by most surgeries beginning at 7:30 a.m., Dr. Ulm is constantly on the go. When he’s not in surgery, he is rounding with faculty, taking care of administrative duties, and staying ahead on research before heading back into the Operating Room. These days last until about 7 p.m. and he’s in surgery about four days out of the week. “We have the privilege of learning from the best in the field,” said Dr. Ulm. “The mentorship has been excellent. They truly take ownership in my training and they do it in a way that is sincere and supportive.”

His Next Steps

Dr. Ulm has opened a lab at the Cancer Research Building on the campus of UTHSC. Working with Dr. Tillmanns, Larry Pfeffer, PhD, and Ramesh Narayanan, PhD, Dr. Ulm will assist in some research projects around ovarian cancer cell lines. In addition to his new laboratory pursuits, Dr. Ulm looks forward to continuing to focus on both patient education and health care disparities in his clinical practice. “This is a very exciting time for my education as well as the entire Fellowship Program,” said Dr. Ulm. “Between the laboratory research and continued growth in my clinical practice we have the chance to really see – and do – everything at West Cancer Center.”



Michael Ulm, MD
Gynecologic Oncology Fellow
West Cancer Center



TAILORING THE PATIENT EXPERIENCE

NAVIGATION TO CARE

With an increasing level of complexity in the U.S. healthcare system, helping patients navigate their way through treatment is a topic of growing relevance and concern across multidisciplinary specialties. For the field of oncology, the inherent complexity – independent of the evolving health care landscape – demands a certain level of “high touch” for the patient experience. At West Cancer Center, that’s where Cynthia Tankersley and the WINGS Supportive Care Division’s Navigation Program enter the equation.

“Within the cancer care experience, navigation is literally walking a patient through the pathways of care,” said Tankersley. “Everybody comes to us with a different history, a different status on their life – all of that plays into their cancer journey and experience with us. Making sure we have team members who can tailor each patient’s experience to their specific needs is very important.”

The first level of West Cancer Center’s Navigation Program begins with the Care Support team. These individuals are identified to meet new oncology patients before they ever step foot in one of West’s clinic locations. These team members serve as the “frontline” for the patient experience – following up in advance to share general information on their appointment locations, what to expect on their first day, explain paperwork and answer any preliminary questions before the patient arrives. In the process of these initial conversations, the Care Support team begins to do an assessment. Determining what barriers may exist to the patient’s care is critical to the assessment findings.

“Do they have issues with transportation? Do they have language barriers? Do they take care of someone in their home that is going to prevent them from making their appointments? All of these – and many more factors – will determine how closely the team follows them,” said Tankersley. “This varies depending upon the needs of the patient, so it is highly tailored and individualized to them.”

Evaluating potential financial barriers is another important area of focus for Care Support team assessments. That’s where the Financial Navigators step in. Established as a result of West Cancer Center’s participation in the Oncology Care Model™, the Financial Navigation Program allows Medicare patients to be aware of the potential financial burden of their treatment plan, as well as opportunities for them to take advantage of potential secondary or subsidy insurance support if necessary. This, according to Tankersley, “empowers” them by providing additional information regarding their cancer journey.

“So much of the cancer journey is the unknown – and the fear that comes with that,” said Tankersley. “Our Financial Navigators provide critical knowledge on the front-end of their experience, ensuring they are financially prepared for their journey to survivorship.”

In addition to these non-clinical “lay” navigators, the Margaret West Comprehensive Breast Center also provides patients with the convenience of a Nurse Navigation Program. These nurses meet patients who receive abnormal mammography results that warrant a biopsy follow-up. According to Tankersley, these services provide that extra level of “concierge care” for patients.

“Navigation has become somewhat of a ‘buzz word’ in health care, but at West Cancer Center, we’ve taken it a step further,” said Tankersley. “Most navigation stops at coordinating appointments. Here, we are with the patient – every step of the way. It’s indicative of our forward-thinking approach to the patient experience. Most importantly, it reflects our commitment to our diverse patient population. At the end of the day, our patients are at the center of everything we do. And our Navigation Programs reflects that.”



Cynthia Tankersley
Director
WINGS Supportive Care Division
West Cancer Center



TAILORING THE PATIENT

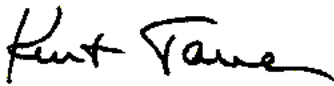
COMMITMENT TO **COMMUNITY**

At West Cancer Center, we consider it our calling – and highest obligation – to serve the community and guide them through this complex system of health care. With the high volume of underserved and underinsured in the Mid-South area, the need for a robust community outreach program has never been more critical. And while providing access to care is a daunting challenge, especially in the city of Memphis, it is one that we have been committed to since our doors first opened.

From providing patient navigators to assist with the complex healthcare system to strengthening partnerships with community-based organizations, our Community Outreach Program is not only extending care to the most impoverished and underinsured zip codes in Memphis, but also improving those outcomes. Our Community Outreach team is reaching individuals in these target demographic areas and disseminating knowledge, while also providing access to our many resources and equipping them with the innovative, cutting-edge care and compassionate, supportive services our community has come to know – and expect – from West Cancer Center. Through the combined efforts of community partners and our Community Outreach teams, we are leading efforts in improving cancer outcomes in all sectors of the community.

At West Cancer Center, we understand the burden cancer has on a patient and we are committed to alleviating that barrier and providing every single patient – regardless of their ability to pay, with the highest quality and most innovative care available. Our mission is clear and our commitment to the community that we've called home for nearly four decades is unwavering. Our goal is to eventually put ourselves out of business by not only educating the community about cancer screening, prevention and treatment, but by guiding and supporting them as they put what they've learned into use.

Sincerely,

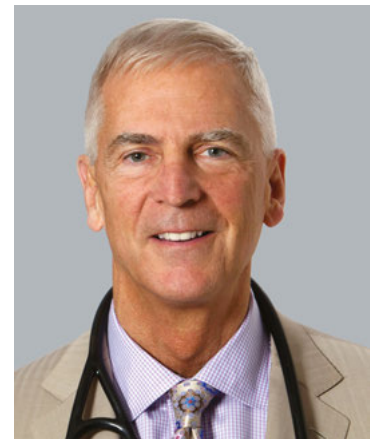


Kurt Tauer, MD
Chief of Staff, *West Cancer Center*

In **2016**, West Cancer Center provided

\$23 MILLION

in care to the uninsured and underinsured
in the Mid-South.



Kurt Tauer, MD
Chief of Staff
West Cancer Center

In partnership with the Margaret West Comprehensive Breast Center, the Methodist Mobile Mammography Unit screened **2,750 women** and detected 10 cancers in its first year in mobile mammography care.



In 2016, West Cancer Center screened **over 1,200 women** who otherwise would not have had access to these services. Much of this was made possible by grant funding support from the Susan G. Komen Foundation.



NT EXPERIENCE

CARE SUPPORT PROFILE: **Clarence Williams**

“The Patient’s Liaison”

If you’ve ever visited West Cancer Center’s East Campus location, you’ve probably met Clarence Williams. And if you haven’t met him, you certainly have seen him. With a joyful spirit and a big smile that is, quite frankly, day brightening, Williams is an institution at West Cancer Center. An institution that – for the patients he meets along the way – is a blessing from beginning to end.

As a Care Support team member, Williams oftentimes sees his role as the “liaison” between the patient and their physician’s team. From meeting the patient at their first appointment and following up after, to fielding and directing questions from the patient and their loved ones to the clinical team and back again, Williams is an “extension” of the care team itself. Foundational to that role is building trust, and relationships, with both the care teams and the patient’s support system.

“Building trust with the patient is absolutely critical,” said Williams. “We’ve got to help heal the entire family, every step of the way, as they go through the cancer journey, which is often full of ups and downs. But we are their guide – their comfort – through that process.”

With the East Campus as his primary service location, Williams monitors the patients of seven different medical oncologists at West Cancer Center – a few of which have some of the largest patient volumes in the entire network. From staying on top of the latest resources to responding to the emerging and immediate needs within West’s largest clinic site, Williams is often juggling numerous tasks – and priorities – simultaneously. And oftentimes, he is addressing not just the medical challenges of his patients – but the personal ones too. From helping patients navigate the emotional challenges of a cancer diagnosis, to helping a patient find transportation services – Williams is there for it all.

“We are trying to help find support for their challenges – both cancer-related and personally – so it’s at least one less thing for them to worry about,” said Williams. “That’s part of the job description, and it’s a result of the trust and relationships we build with our patients.”

And while Williams sees it all as part of his job description, he also sees it as a greater purpose – one he was destined for all along. After working in other divisions of the organization, it was the growing Care Support team that reflected his commitment to both his neighbor as well as the true service experience.

“This is a calling for me. I often talk to my wife about this – that this is the job and the place where I’m meant to be,” said Williams. “For me, it’s not necessarily about the outcome. It’s about crossing paths with people that I would never have had a chance to meet or even talk to outside of this facility. Being able to do that – being able to help them – it’s service for me. That’s my prayer every morning – that I serve people. And that I serve the people I work with.”



“ I wake up every day thinking how lucky I am to get paid to do what I love. There’s no greater job in the world.”



TAILORING THE PATIENT

CARE SUPPORT PROFILE: **Valerie Payton**

“It changes you.”

Valerie Payton has reached the end of another very long day, but her passion and energy for her role at West Cancer Center is still present. As the care support team member for the Midtown and Methodist University Hospital locations, Payton sees a whole lot. Not just in quantity of patients, but in unique life experiences. For her, no day is the same; and that’s what makes her love her job even more.



“At our Midtown sites, we come across a diverse patient population,” said Payton. “We come across patients with no job, no family, and no income. Other patients have great coverage, great jobs and a huge network of support. It’s our job to determine and assess their needs then act accordingly.”

As a Care Support team member – also known as a “lay navigator” – Payton works with patients to guide them through the cancer journey. From assessing barriers to care to determining potential additional resources needed, Payton treats her patients like family – and the way she would expect herself or a loved one to be cared for in the same position.

“For me, I try to make my experience with each patient personal,” said Payton. “If it was me in that position – or a friend, family member or loved one – I would want someone to continue to follow-up with me and give me that same attention and same care that our team provides to our patients. Navigation is essential to that. The patients love it, and it is so desperately needed.”

This need for navigation is especially evident for Payton’s coverage locations. With a huge number of the city’s impoverished, under-served and under-insured falling in Midtown’s surrounding zip codes, Payton’s patients, quite simply, need her more. The

laundry list of socioeconomic statistics for the city of Memphis plague this particular zone, and Payton is constantly required to dig deeper – and find more resources and support for the patients in the midst of their battles with a disease that does not discriminate between the “haves” and the “lack thereof.”

“We oftentimes encounter patients who have nothing. I’m constantly forced to ask myself: ‘How do I dig deep to find something to help them?’” said Payton. “It can be challenging, but that’s our calling – to deal with it and help these patients the best we can.”

In the midst of an ever-expanding patient population with an ever evolving – and oftentimes challenging – set of circumstances, Payton remains committed and persistent in her navigation role. And while each day continues to present its own unique set of challenges for herself and obstacles for her patients, she stays committed to what she deems as a calling that has changed who she is a person.

“This job changes you. It makes you grateful,” said Payton. “Our stories are not always success stories. But for me, I love helping people. There is such joy when we celebrate those who do well and enjoy life beyond cancer.”

“**There is such a joy when you celebrate with someone who you’ve helped. That’s what this job is to me – a joyful calling.**”

GENETICS PROGRAM

The Revolution of Molecular Genetics: Counseling through the Information Wave

The revolution of personalized medicine is changing the way health care is practiced – especially in the field of oncology care. With new molecular insights informing how inherited predispositions may increase the likelihood – and treatment – of a cancer diagnosis, the age of genetic counseling is not just an imperative for the patient, but an essential aspect of the cancer journey.

Described by Rachel Covington, MS, Genetic Counselor at West Cancer Center, as the “process of helping people understand how genetics can play a role in developing cancer,” the program at West Cancer Center is the longest running in the region. Covington and Lindsay Lipe, MS, collectively provide counseling services for almost 30 patients each week. In addition to one-on-one sessions with both patients and their family members, the counseling team also participates in weekly multidisciplinary conferences – also known as “tumor boards” – to provide recommendations for further genetic testing as well as findings that help inform the treatment planning process.

“Our team reviews every single case that is presented at the tumor boards – determining if they meet criteria for a referral to our genetic counseling services,” said Covington. “This allows us to plug into early conversations, especially for those patients with potentially rare tumor types or a suspicious medical history that may benefit from further genetic testing. We are inundated constantly with new information on screening guidelines and recommendations, so we bring this focused expertise to the table for the benefit of our patients.”

The era of multigene “panel testing” has also expanded the role – and informational imperatives – for the genetic counselors at West Cancer Center. This new technology allows dozens of cancer genes to be examined at once, looking for inherited mutations in a number of different genes, including ones associated with an increased risk of hereditary colon cancers, breast cancer, gastric cancer, and uterine cancer, among others. According to Covington, this drastically broadens the scope for their team – requiring them to constantly stay ahead of new data and guidelines emerging daily in their field.

And while the explosion of information in their field requires them to “ride the tidal wave” of new data, both Covington and Lipe acknowledge that genetic testing is no crystal ball. However, their vision for success is clear – and it’s always determined by the patient.



Rachel Covington, MS
Genetic Counselor
West Cancer Center



Lindsay Lipe, MS
Genetic Counselor
West Cancer Center

Genetic Counseling: Key Facts

What is a Genetic Counselor?

A Genetic Counselor is a healthcare provider specially trained to evaluate your family history and determine if genetic testing would benefit you and your family members.

How is genetic testing performed?

Genetic testing is performed using a blood sample and results are usually available in several weeks. If genetic testing is ordered, your Genetic Counselor will discuss your results with you personally and help you with any follow up.

How can genetic counseling help my family and me?

Genetic counseling and genetic testing may help discover the cause of your cancer or the cancer(s) in your family. Sometimes, it can also tell you if you have an increased risk for cancers that are not running in your family.

If you have not had cancer, Genetic Counselors can help you to better understand your risk for cancer. This may include discussing extra screenings that may be beneficial in early detection and/or cancer prevention.

If you have a personal history of cancer, genetic testing can sometimes help with treatment decisions. It can also inform your family members about elevated cancer risks and the availability of increased screenings or preventative measures.



REHABILITATION PROGRAM

Stretching for new Heights

For Deanne Wade, blazing new trails – and creating new programs – has always been a part of the job description. As a Senior Physical Therapist at Methodist Le Bonheur Germantown Hospital, Wade had implemented programs both new to the hospital system and unique to the region itself. And when an opportunity at West Cancer Center came calling, she was ready to blaze another program for this unique cancer patient population. Physical therapists at West Cancer Center, Wade and Donna Thomas, quickly realized the role of rehab for this particular patient population was much bigger – requiring a truly multidisciplinary approach that encouraged earlier and more proactive intervention.

And while the first referrals to the Rehabilitation Program at West Cancer Center were the obvious referrals – such as high-risk fall patients – the program has quickly evolved into this multidisciplinary imperative; a focus that continues to expand

with the growing number of multidisciplinary experts and specialty services available as part of the collaborative cancer center partnership. Plugging in earlier to the treatment and survivorship process is key to this, according to Wade and Thomas, and will allow patients to potentially prevent some of the side effects that result from surgical treatment. This work is most evident in their partnership with West Cancer Center's Division of Surgical Oncology – working with these patients to intervene more quickly post-operatively, and even providing education in advance of their surgical procedures.

Shortly after the Rehabilitation program began, Wade and Thomas quickly discovered the need to address the lack of lymphedema support in the Mid-South community, so West Cancer Center developed the Lymphedema Program – the first and only of its kind in the region. This program assists cancer survivors who have developed lymphedema as a result of their cancer treatment with the resources that are vital to treatment of this lifelong medical condition. A Lymphedema Therapist is able to treat this condition with manual therapy to move and drain the swelling and educating the patients in home management and exercises to increase the body's natural pumping of fluid.



“ We are helping them to live their life the way they want to live it.”

DEANNE WADE
SENIOR PHYSICAL THERAPIST

Since the program began in June 2016, there have been:

483 Physical Therapy Visits

370 Lymphedema Visits

More than **350 referrals** received from more than **45 practitioners** from West Cancer Center

PHILANTHROPY

WINGS SUPPORTIVE CARE DIVISION

The WINGS Supportive Care Division, within the University of Tennessee/West Institute for Cancer Research, provides a comprehensive patient platform to address the holistic needs of patients – whether it is spiritual support, nutritional and wellness services, or access to screening services for the underserved in the Mid-South community. In 2016, West Cancer Center launched a low-dose computed tomography (CT) early detection program for lung cancer and began performing screenings for the underserved. The UT/West Institute also funded a physical rehabilitation program to address generalized weakness, deconditioning, balance issues and lymphedema therapy. Together with dedicated volunteers and generous benefactors, the UT/West Institute is well on its way to fulfilling its mission.

In 2016, the University of Tennessee/West Institute for Cancer Research provided **590** wigs, hats and scarves, **896** new patient bags and blankets, **724** transportation trips, **995** documented nutrition consults and over **70** support group meetings that served over **500** patients.



PHILANTHROPY

THE ART OF **HEALING**

With the opening of West Cancer Center's East Campus location in 2015, a substantial manifestation of the partnership came to life. This state-of-the-art building has provided patients with the unique opportunity to benefit from a truly comprehensive cancer center and research site – one that, for the first time in the Mid-South, united multiple cancer care and research specialists under one roof.

Beyond fostering a multidisciplinary care experience, it was also critical that the building represent a commitment to the emotional experience of the cancer patient – providing an atmosphere that advocated healing and encouraged reflection during the process. That mission came to life through a carefully curated art collection, featuring custom pieces by local and regional multi-medium artists.



“As the plans for the East Campus took shape many years ago, it was always our imperative to create a space that not only provided a state-of-the-art clinical experience, but also created a soothing, comfortable atmosphere for our patients,” said Candace Wilder, Chief Operating Officer at West Cancer Center. “It is this conscious design and custom art collection in our new building that serves as the tangible representation of our vision to foster the most healing, uplifting and hopeful environment for each and every individual that walks through the doors of West Cancer Center.”

Led by Linda Hill, Art Project Director at Le Bonheur Children's Hospital, each piece of art was selected by a special Art Committee, comprised of the city's leaders in art and design. Each piece of art in West Cancer Center's collection is available for sponsorship. The funds raised for art sponsorships benefit The University of Tennessee/West Institute for Cancer Research, the non-profit fundraising arm of West Cancer Center. To learn more about the pieces featured in the building, visit westcancercenter.org/philanthropy/art. Inquiries related to art sponsorship opportunities may be directed to Leighanne Hart Soden, Director of Development, at lhartsoden@westclinic.com.



SIGNATURE EVENT

West Fight On: Cycle. Run. Walk.

Building on the success of the third annual Fight On fundraising event for the UT/West Institute, West Cancer Center expanded the event – and day of celebration – to include a full suite of events for all levels of fitness enthusiasts.

The signature event, West Fight On: Cycle. Run. Walk., offered an array of fitness activities including bike rides at three distances; a 5K Run; and a Tribute Walk. Over 1,200 participants and 300 volunteers took part in helping to raise more than \$600,000 – dollars that will support both discovery and innovation in adult cancer research as well as critical patient education, care and support.



FIGHT ON: Cycle. Run. Walk.



The 2016 West Fight On: Cycle. Run. Walk.
raised more than **\$600,000**
for cancer research.



PHILANTHROPY

DONOR SPOTLIGHT: The Motte Family

In October of 2010, cancer hit home for Jason and Caitlin Motte when Caitlin's grandfather, Lynn H. Doyle, was diagnosed with stage IV lung cancer. He was directed to Brad Somer, MD, Medical Oncologist at West Cancer Center, who devised a treatment plan that made it possible for Lynn to be there to watch Caitlin walk down the aisle that November. His attendance at the Motte's wedding not only allowed the family to create memories that they will cherish for a lifetime, but it gave them an invaluable gift: *more time*.

"The people we were fortunate enough to connect with – and the stories they shared with us – while we fought alongside my grandfather, put everything into perspective," said Caitlin. "Jason and I were inspired and led to give back to the place – and the people – that gave us time and so much more."

In 2011, the Motte's philanthropic vision became reality and they started the Jason Motte Foundation, a non-profit organization dedicated to raising funds to support all those affected by cancer. Jason, a pitcher in the major leagues, leveraged his baseball platform to raise awareness not only about this terrible disease, but about giving back. "When we first started this foundation, we not only realized how many people have been affected by cancer, but also how many wanted to help make a difference and simply weren't sure how," said Jason. "This gave us the opportunity to direct that passion toward action and provide people with ways to give – in any way they could. Because every little bit helps in the fight against cancer."

Through numerous fundraising methods, including their annual signature event, Strike Out Cancer with Jason Motte, the Motte Foundation has raised over one million dollars for cancer research and patient care. When asked if they had ever imagined that the foundation would grow into the nationwide movement that it has, Caitlin's response was simple: "Never." "I play Major League Baseball," said Jason. "But the impact being made through this foundation is significantly bigger than that."

And while Jason and Caitlin have donated over \$280,000 to the UT/West Institute through personal and foundation gifts, it's about more than that to the Motte's. It's about empowering the community to be a part of something bigger than itself. "Our purpose for giving to West Cancer Center is two-fold," said Caitlin. "Our hope is to strike out cancer and find a cure; that's our end-game. At the same time, Jason and I hope for a day when West Cancer Center no longer has to exist. But in the meantime, we look forward to giving more, spreading more awareness and reaching more people affected by cancer."



Pictured with Caitlin and Jason are their children Sutter (left) and Mary Margaret (right).

“ Our hope is to strike out cancer and find a cure.”

CAITLIN MOTTE
JASON MOTTE FOUNDATION

OUR GENEROUS DONORS

In grateful recognition of the individuals and organizations whose dedication and generosity fuel the advancement of knowledge, nourish the discoveries of tomorrow, and support the lives of our patients and their loved ones. We, at The University of Tennessee/West Institute for Cancer Research, wish to recognize those generous donors:

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* Recognition Disclaimer

A note to our supporters: We appreciate your generous donations to the UT/West Institute, and we want to recognize everyone accordingly with 100% accuracy. If we inadvertently made an error, please contact us at 901.322.2984 or utwestinstitute@westclinic.org.



NEW ACCREDITATIONS & CERTIFICATIONS

Blood and Marrow Transplant Program: FACT Accreditation and National Marrow Donor Program Large Volume Center

In 2016, West Cancer Center announced that its Blood and Marrow Transplant (BMT) Program has received accreditation for both autologous and allogeneic transplantation from the Foundation for the Accreditation of Cellular Therapy (FACT). Acknowledged in the industry as the threshold for excellence in cellular therapy, including bone marrow or cord blood transplant, FACT accreditation is based upon compliance with the most comprehensive standards in the field. The BMT Program, a collaboration between West Cancer Center, Methodist Healthcare and the University of Tennessee Health Science Center (UTHSC), has achieved this prestigious standard in just over a year since its establishment.

“When we started the program last May, FACT accreditation was our ultimate and driving focus,” said Yasser Khaled, MD, Director of the BMT Program. “It is incredibly exciting to see the milestones we’ve achieved at this accelerated pace. And while we still have many milestones ahead of us, this accreditation is a moment to be celebrated – for our team, our patients and the Memphis community.”

The BMT Program is housed on the campus of Methodist University Hospital and provides stem cell transplantation and cellular therapy for a variety of hematologic malignancies, including Leukemia, Myelodysplastic Syndromes, Lymphoma and Multiple Myeloma, as well as bone marrow failure syndromes and aplastic anemia. In addition to achieving FACT Accreditation, the BMT Program has also been recognized as a Large Volume Center by the National Marrow Donor Program® (NMDP), a non-profit organization that facilitates transplants for patients in need of a hematopoietic cell transplant through their Be the Match® Registry.

“Our membership as a NMDP Large Volume Center positions our program among the most elite transplant centers in the country,” said Jeff Liebman, CEO of Methodist University Hospital. “This recognition provides confidence that our BMT Program will provide patients with the highest quality care available to not only our patients here in Memphis, but also to those in search of a potentially life-saving transplant from across the country.”

Recertification: QOPI Certification Program

West Cancer Center has received reaccreditation by the QOPI Certification Program (QCP™), an affiliate of the American Society of Clinical Oncology (ASCO). QCP builds on ASCO’s Quality Oncology Practice Initiative (QOPI®) and provides a three-year certification for outpatient hematology-oncology practices that meet nationally recognized standards for quality care.

“This recertification from ASCO and QCP is reflective of our organization’s collective commitment to delivering the highest quality cancer care for our patients,” said Erich Mounce, CEO of West Cancer Center. “At West Cancer Center, it is of paramount importance to us that we deliver not only the best possible care to our patients, but also the safest. The rigorous standards prescribed by the QOPI Certification Program hold us to the highest standard of excellence for cancer institutions across the country, and we are excited to be recognized for recertification.”

West Cancer Center first achieved certification in 2010 and was one of the first 16 practices nationwide to receive this certification. In applying for recertification, West Cancer Center participated in a voluntary comprehensive site assessment against clearly specified standards that are consistent with national guidelines and was successful in meeting the standards and objectives of QCP.

“ASCO’s QOPI certification recognizes those oncology practices that are committed to delivering the highest quality of cancer care,” said ASCO President Daniel F. Hayes, MD, FASCO. “By achieving recertification, these practices have demonstrated their commitment to quality and safety excellence in the care they deliver to patients, as well as to the continuous process of quality improvement.”

CERTIFICATIONS

QOPI is a voluntary self-assessment and improvement program launched by ASCO in 2006 to help hematology/oncology and medical oncology practices assess the quality of the care they provide to patients. Through the QOPI program, practices abstract data from patients' records up to twice per year and enter this information into a secure database. More than 900 oncology practices have registered for the QOPI program. The QCP was launched in January 2010, with more than 250 practices already certified. This certification for outpatient oncology practices is the first program of its kind for oncology in the United States. Oncologists can achieve certification by participating in a voluntary comprehensive site assessment against clearly specified standards that are consistent with national guidelines. The QCP seal designates those practices that not only scored above the threshold on the key QOPI quality measures, but met chemotherapy safety standards established by ASCO and the Oncology Nursing Society (ONS).



The National Comprehensive Cancer Network® (NCCN) is a not-for-profit alliance of 26 of the world's leading cancer centers devoted to patient care, research and education. With a dedication to improving the quality, effectiveness and efficiency of care, the NCCN promotes the importance of continuous quality improvement and recognizes the significance of creating clinical practice guidelines appropriate for use by patients, clinicians and other healthcare decision-makers.



The National Committee for Quality Assurance (NCQA) is a private, not-for-profit organization dedicated to improving health care quality. The NCQA seal is a reliable indicator that an organization is well-managed and delivers high-quality care and services.



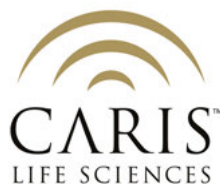
ASCO's Quality Oncology Practice Initiative® (QOPI) is an oncologist-led, practice-based quality assessment and improvement program. West Cancer Center was one of the first 16 practices nationwide to receive this recognition.



The Foundation for Accreditation of Cellular Therapy (FACT) establishes standards for high quality medical and laboratory practice in cellular therapies. Organizations that achieve FACT accreditation have a foundation of high-quality practices that result in cell products and patient care that are sought after by physicians and patients. West Cancer Center is accredited by FACT for both autologous and allogeneic transplants.



The Commission on Cancer® (CoC) is a consortium of professional organizations dedicated to improving survival and quality of life for cancer patients through standard-setting, prevention, research, education, and the monitoring of comprehensive quality care. West Cancer Center is accredited through the CoC as an Academic Institution, recognized for excellence in our multidisciplinary approach to treating our patients.



West Cancer Center is designated as a center of excellence site by Caris Life Sciences®, a leading biosciences company focused on fulfilling the promise of precision medicine, in the Caris Centers of Excellence for Precision Medicine Network™ (Network). As a Network member, West Cancer Center actively participates in the development of standards of care and best practices for integrating and utilizing molecular profiling in oncology practice, while also striving to increase widespread adoption and patient access to personalized medicine in clinical settings.



In partnership with Methodist Le Bonheur Healthcare, West Cancer Center is accredited as a DNV GL organization. Motivated by a commitment to empowering quality and patient safety through a more efficient and outcomes-based accreditation program, DNV GL has accredited nearly 500 hospitals in the United States. It is the first and only accreditation program to integrate the CMS Conditions of Participation with the ISO 9001 Quality Management Program, creating a seamless and integrated program for both mandatory CMS evaluation and world-class quality management system. With annual visits to accredited sites, rather than every three years, this accreditation enables a broader culture change toward continuous improvement and high performance.

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Methodist Healthcare

Michael Ugwueke

President and Chief Operating Officer,
Methodist Healthcare

Chris McLean

Chief Financial Officer,
Methodist Healthcare



OUR LOCATIONS

GERMANTOWN, TN

West Cancer Center - East Campus

7945 Wolf River Boulevard • Germantown, TN 38138
901.683.0055

Margaret West Comprehensive Breast Center

7945 Wolf River Boulevard • Germantown, TN 38138
901.516.4300

Methodist Le Bonheur Germantown Hospital

7691 Poplar Avenue • Germantown, TN 38138
901.516.6000

Margaret West Comprehensive Breast Center - Screening & Wellness Services

1381 S. Germantown Road • Germantown, TN 38138
901.516.4300

MEMPHIS, TN

Methodist University Hospital

1265 Union Avenue • Memphis, TN 38104
901.516.7000

West Cancer Center - Midtown

1588 Union Avenue • Memphis, TN 38104
901.683.0055

Margaret West Comprehensive Breast Center - Midtown Diagnostic Center

1801 Union Avenue • Memphis, TN 38104
901.516.4300

Memphis Professional Building

1211 Union Avenue, Suite 300 • Memphis, TN 38104
901.609.3525

1211 Union Avenue, Suite 400 • Memphis, TN 38104
901.683.0055

UTHSC Cancer Research Building

19 N. Manassas Street • Memphis, TN 38163
901.448.7855

JACKSON, TN

322 Hospital Boulevard • Jackson, TN 38305
731.668.1668

BRIGHTON, TN

240 Grandview Drive • Brighton, TN 38011
901.475.0678

PARIS, TN

1290 Kelley Drive • Paris, TN 38242
731.644.3522

SOUTHAVEN, MS

7668 Airways Boulevard • Southaven, MS 38671
662.349.9556

CORINTH, MS

2001 State Drive • Corinth, MS 38834
662.286.3694

JONESBORO, AR

405 East Jackson Avenue • Jonesboro, AR 72401
870.207.8177

WEST MEMPHIS, AR

271 West Polk Avenue • West Memphis, AR 72301
870.733.1800



The University of Tennessee

WEST
Cancer Center

Methodist Healthcare Family

For more information about our services and locations,
visit us at www.westcancercenter.org.