ADVANCING
WITH PURPOSE

INTEGRATED ONCOLOGY PROGRAM
ANNUAL REPORT WITH STATISTICAL DATA FROM 2016
2017 marked another year of significant growth and achievement for DuPage Medical Group (DMG). As DMG continues to expand its reach and provide care in new communities, our focus remains centered on delivering comprehensive, innovative and personalized care through the use of leading-edge technology, the latest medical advancements and collaboration among our healthcare providers to develop individualized treatment plans. Since its inception in 2013, the program has grown from 1,300 cases to 2,800 cases in 2017. DMG also remains focused on providing a seamless patient experience and is dedicated to ongoing expansion of care and support resources we offer our patients; our integrated oncology program is no exception.

In 2017, during the program’s fourth year, we were able to provide even greater access to care by expanding our services to meet the needs of patients spanning the west and southwest suburbs with more specialties and services offered in both Will and Suburban Cook Counties. The Integrated Oncology Program is comprised of board certified physicians who specialize in medical and radiation oncology and partner with a number of specialists to provide a broad range of oncology services. Specialties include dermatology, endocrinology, gastroenterology, gynecology, otolaryngology, pathology, plastic surgery, pulmonary, radiology, surgery and urology.

Working together, the multi-disciplinary physician-led teams have continued to make a high impact on our patients and their families.

Throughout our patients’ cancer journeys, we help them navigate the entire treatment process and offer resources and encouragement every step of the way. From screening and diagnosis, to treatment and recovery support, DMG’s Integrated Oncology Program provides comprehensive care for all types of cancer. DMG also continues to invest in technology to aid in the most accurate diagnoses and treatment options available. Through our partnerships, we are able to provide access to the latest clinical trials, emerging treatments, and adapt to the ever-changing needs of our patients.

In 2015, DuPage Medical Group’s Integrated Oncology Program was awarded a nationally-recognized accreditation based on our continued commitment to quality, access and exceptional patient outcomes. In 2017, we are proud to still be the only accredited Freestanding Cancer Center in Illinois, a distinction received by the Commission on Cancer of the American College of Surgeons.
Expanding the oncology services in the south suburbs to now include 3D mammography at our Tinley Park location.

Providing more robust radiology services including, but not limited to, CT, digital mammography and MRI in our new Bloomingdale location.

Growing our team of skilled medical oncology providers who support the Integrated Oncology Program, including board certified physicians, physician assistants, nurse practitioners and nurse navigators.

Launching our Robotic Surgery Program, comprised of more than 25 highly skilled general surgeons, gynecologists, otolaryngologists and urologists who specialize in robotic-assisted procedures, including complex cancer-related surgeries to achieve the best possible patient outcomes.

Collaborating with Myriad® to launch a telegenetics program in July, which provides access to free genetic testing for oncology and high-risk patients at our Winfield and Lisle locations.

Expanding online scheduling capabilities to nearly all Integrated Oncology Program providers, specialists and diagnostic services through MyChart.

Continuing to offer community cancer prevention sessions and educational seminars, including skin cancer screenings and nutrition workshops for oncology patients.

Offering free smoking cessation classes to patients and community members, including classes in the south suburbs at our Tinley Park location.

Supporting our community partners with grants and volunteers totaling more than $150,000 in 2017.
DMG’s Integrated Oncology Program is accredited by the Commission on Cancer of the American College of Surgeons and provides exceptional cancer care, from screening and diagnosis, to treatment, recovery and survivorship.

The program consists of a multidisciplinary team comprised of physicians skilled in medical oncology, radiation oncology, radiology and numerous surgical specialties who work together with specialists across DuPage Medical Group to offer patients comprehensive and individualized treatment plans.

Our team of providers utilizes state-of-the-art, highly accurate equipment and advanced treatment techniques to provide the best possible care for our oncology patients. DMG was the first organization in the western suburbs to offer 3D mammography, the latest in breast imaging technology, and expanded this service to most of its Chicagoland area radiology locations, including our Tinley Park location, to serve the communities in the south suburbs.

Access to other cancer-related services is available throughout Suburban Chicagoland at multiple locations, with the program’s hub at the Lisle Medical Office Building. Many DMG offices offer on-site lab and radiology services for a more convenient patient experience.

DMG’s academic affiliation with Rush University Medical Center provides further resources to patients by bringing university-level, sub-specialty care to the suburbs.
CANCER CONFERENCES

YOUR SECOND OPINION

Cancer Conferences are highly valuable tools that allow our physicians to educate and become educated on new or best treatment options and protocols, participate in multidisciplinary planning and promote collaboration among physicians and medical staff. The National Comprehensive Cancer Network® (NCCN) guidelines require 15 percent of cancer cases be presented. In 2016, DMG specialists presented more than 20 percent of their annual cases, surpassing national standards. The specialty conferences represent major cancer diagnosis at DMG, including breast, genitourinary system, digestive system, lung/chest, hematologic, head/neck cancers, skin and soft tissue malignancies.

In 2017, in an effort to continue to meet the needs of our growing service area and engage new DMG providers in the Integrated Oncology Program, a general cancer conference was launched for providers in the south service area on October 12th. The south cancer conferences are held on the second Thursday of every month in Tinley Park and feature case review of all cancer types.

Patient communication is also an important part of the cancer conferences. Patients are informed when their case will be presented during our weekly cancer conferences for multidisciplinary input. Following the conference, the managing physician communicates the group consensus to the patient.

SPECIALTY CANCER CONFERENCES | 2016

PERCENTAGE OF CASES PRESENTED BY CANcer TYPE

<table>
<thead>
<tr>
<th>CANcer TYPE</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>BREAST</td>
<td>22%</td>
</tr>
<tr>
<td>UROLOGIC</td>
<td>22%</td>
</tr>
<tr>
<td>LUNG</td>
<td>20%</td>
</tr>
<tr>
<td>DIGESTIVE TRACT</td>
<td>13%</td>
</tr>
<tr>
<td>HEMATOLOGIC</td>
<td>9%</td>
</tr>
<tr>
<td>HEAD &amp; NECK/THYROID</td>
<td>8%</td>
</tr>
<tr>
<td>SKIN &amp; SOFT TISSUE</td>
<td>6%</td>
</tr>
</tbody>
</table>

NEW CANCER INCIDENCE BY GENDER & SITE | 2016

<table>
<thead>
<tr>
<th>CANCER TYPE &amp; SITE</th>
<th>Male # of Cases (%)</th>
<th>Female # of Cases (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROSTATE</td>
<td>371 (34%)</td>
<td>BREAST 539 (47%)</td>
</tr>
<tr>
<td>MELANOMA OF THE SKIN</td>
<td>109 (10%)</td>
<td>LUNG &amp; BRONCHUS 90 (8%)</td>
</tr>
<tr>
<td>LUNG &amp; BRONCHUS</td>
<td>85 (8%)</td>
<td>THYROID 84 (7%)</td>
</tr>
<tr>
<td>COLON &amp; RECTUM</td>
<td>85 (8%)</td>
<td>COLON &amp; RECTUM 76 (7%)</td>
</tr>
<tr>
<td>URINARY BLADDER</td>
<td>69 (6%)</td>
<td>MELANOMA OF THE SKIN 76 (7%)</td>
</tr>
<tr>
<td>KIDNEY &amp; RENAL PELVIS</td>
<td>34 (3%)</td>
<td>NON - HODGKIN LYMPHOMA 39 (3%)</td>
</tr>
<tr>
<td>PANCREAS</td>
<td>32 (3%)</td>
<td>UTERINE CORPUS 22 (2%)</td>
</tr>
<tr>
<td>LEUKEMIA</td>
<td>27 (3%)</td>
<td>LEUKEMIA 22 (2%)</td>
</tr>
<tr>
<td>ORAL CAVITY &amp; PHARYNX</td>
<td>23 (2%)</td>
<td>KIDNEY &amp; RENAL PELVIS 14 (1%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>OVARY 8 (1%)</td>
</tr>
<tr>
<td>ALL OTHER SITES</td>
<td>203 (19%)</td>
<td>ALL OTHER SITES 171 (15%)</td>
</tr>
</tbody>
</table>
**MEDICAL ONCOLOGY & INFUSION SERVICES**

DuPage Medical Group’s board-certified oncologists and hematologists provide a wide range of services in a caring and comfortable environment at six convenient locations. Our specialists manage chronic and acute non-malignant blood disorders, leukemia and lymphoma and solid tumor treatments. Our physicians keep current in changes in clinical advancements and NCCN guidelines.

In the oncology specialty, Advanced Practice Providers (APP), including Nurse Practitioners (NP) and Physician Assistants (PA), are part of the interdisciplinary team that develops plans for active cancer treatment and post treatment care. Our APPs collaborate with physicians to determine treatment decisions. They perform inpatient rounds, follow-up visits, symptom management, survivorship care, end-of-life care and providing non-cancer-related primary care to help improve patient outcomes.

In 2016, DMG added to our APPs by bringing on a team of highly skilled Advanced Nurse Practitioners (APN) to help meet the growing demands. Since joining the program, our APNs have played an instrumental role in providing exceptional care to our patients and work closely with our physicians and other support staff, including infusion nurses and nurse navigators.

DMG’s compassionate nurse navigators offer medical guidance and support and walk the patient and their family through the cancer treatment process. Our skilled nurses are certified through the Oncology Nursing Certification Corporation (ONCC), highlighting our commitment to employing highly knowledgeable nurses with advanced expertise to provide care for our patients.

Infusion Center services are integral to our cancer program. Our numerous infusion centers are staffed with certified chemotherapy and biotherapy providers, who are specially trained to administer all chemo-toxic drugs and monitor patients while in treatment. All patients receive a customized treatment plan for their infusion needs and their care is monitored by dedicated nurses every step of the way. Additionally, on-site lab services are available at each location. To enhance our infusion patient experience, we have a clinical pharmacist that oversees the dosing and administration of all medications infused.

**HEMATOLOGIC MALIGNancies**

The Hematologic Malignancy program at DuPage Medical Group provides comprehensive, patient-centered care for adult patients diagnosed with leukemias, myelodysplastic syndromes, lymphomas, myeloma and other blood-related malignancies. The team is led by hematology/medical oncologists who collaborate with radiation oncologists, pathologists, radiologists, advanced practice providers and nurse navigators to provide individualized care to our patients. Diagnostic tests may include blood tests, bone marrow aspiration and biopsy, lumbar puncture to collect spinal fluid, lymph node biopsy or lymph node removal.

Once the diagnosis is made, the physician may need to determine the stage of cancer via chest X-ray, CT, PET/CT or MRI. Our multidisciplinary team takes into account many factors when developing individualized care plans including the stage of cancer, overall health and ability to withstand therapy. Treatment options may include chemotherapy, radiation therapy, blood or bone marrow transplantation, biological therapy, immunotherapy or combination therapies. Our program allows seamless transition to one of the area’s best blood and marrow transplant programs.

**PHARMACY SERVICES**

Clinical pharmacists (PharmD) specializing in oncology practice provide pharmacy services to patients by overseeing treatment plans (per NCCN Guidelines) for accuracy and completeness and ensuring delivery of the highest quality patient care. They collaborate with physicians and advanced practice providers and recommend adjustments to drug therapy based on clinical status and treatment outcomes. They also coordinate with the clinical team to ensure all aspects of pharmaceutical care are delivered in a safe and timely manner.

In addition to supervising certified pharmacy technicians, the clinical pharmacist coordinates workflow and acts as a resource for patient and staff education. Our on-site pharmacists help to increase the safety and efficacy of prescribed chemotherapies. The pharmacists calculate appropriate chemotherapy doses based on body surface area, weight and renal function and assess possible drug interactions and contraindications to therapy. This quality initiative reflects the highest level of integrated, patient-centered care.

DMG has the highest commitment to advanced technology and continues to demonstrate this by using a closed-system transfer device (CSTD).

Oncology pharmacists oversee the preparation of chemotherapy in United States Pharmacopeia (USP) approved clean rooms where sterile infusion mixtures are processed. This process significantly reduces the chance of exposure to hazardous materials.

DMG also has on-site retail Pharmacies in Lisle, Tinley Park, and Blue Island. Each pharmacy is aligned with the oncology department financial counselor and the national Patient Assistance Network to help patients gain access to drug assistance if necessary, and to ensure their out-of-pocket expense is as low as possible. Retail pharmacies are staffed with pharmacists (PharmD) who work with prior authorizations, appeal letters and co-pay programs to assist with all oncology and specialty medications.

Our highly specialized care team has implemented a clinical quality program aimed at minimizing errors and maximizing patient safety. DMG has implemented a clinical quality initiative reflecting this commitment by providing advanced technology and ensuring all chemotherapy is administered in a safe and timely manner. This quality initiative reflects the highest level of integrated, patient-centered care.

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Our highly specialized care team has implemented a clinical quality program aimed at minimizing errors and maximizing patient safety. DMG has implemented a clinical quality initiative reflecting this commitment by providing advanced technology and ensuring all chemotherapy is administered in a safe and timely manner. This quality initiative reflects the highest level of integrated, patient-centered care.
Since 2013, DMG Radiation Oncology services have grown to offer patients access to more advanced services. Our team continues to provide exceptional patient care, utilizing state-of-the-art stereotactic radiosurgery used to target both intra-cranial and extracranial lesions, as well as a variety of techniques used to treat all other body sites. This technology allows us to provide treatment with unparalleled ease, precision, accuracy and speed.

For those receiving intra-cranial radiation, DMG physicians offer a frameless approach. Without sacrificing accuracy, this technique allows patients to remain in a less confined position, easing fears of claustrophobia during the highly complex procedure. Accomplished through the use of Vision RT, which is an optical surface monitoring system (OSMS), infrared lights are used to monitor thousands of points across a patient’s body to aid in positioning before treatment and track movement during treatment delivery. Software allows for interruption of the treatment if a patient moves outside of a tightly set tolerance to ensure that radiation is only delivered to the exact location of the tumor. OSMS is also used in radiation oncology to offer an advanced approach to patients with left side breast cancers.

In cases where patient anatomy is less than favorable, DMG radiation oncologists apply an innovative technique called Deep Inspiration Breath-Hold (DIBH). By having patients take a deep breath prior to initiating treatment, radiation oncologists can increase the distance between the breast and the heart, preserving healthy heart tissue. Using OSMS in these cases ensures that treatment is only delivered when patients are perfectly aligned and have taken the correct amount of air into the lung.

In addition to the external beam radiation therapy services, DMG proudly offers access to high-dose rate (HDR) brachytherapy radiation. HDR brachytherapy allows for high doses of radiation to be accurately delivered to more localized areas of disease by using a small radioactive source.

This service is offered for a variety of body sites, including gynecological, breast and skin. For skin lesions, radiation is applied at the skin surface allowing the radiation to target only the area of interest with minimal dose to surrounding skin and underlying tissue. For both gynecological and breast cancers, HDR brachytherapy is delivered by specialized applicators that allow the HDR brachytherapy source to deliver radiation internally to the area of disease.

This technique can be used in lieu of external beam radiation therapy or as a supplemental technique to boost areas of high risk depending on patient disease characteristics. HDR brachytherapy for breast cancer, also known as accelerated partial breast irradiation (APBI), is a special service offered to qualifying patients. This technique brings together specialists from both surgery and radiation oncology to deliver radiation locally to the lumpectomy bed over a five-day period, compared to the standard three to five-week course of radiation, while sparing healthy breast tissue.

Radiation therapy also plays an important treatment role for many breast cancer patients. Radiation oncologists, physicists, radiation therapists and nurses use their specialized skills to provide the most accurate treatment available. Treatment methods include HDR brachytherapy, prone breast radiation and accelerated partial breast irradiation. The deep inspiration breath hold technique can also be used for left-sided breast cancer patients.

From the advanced technologies and treatment techniques offered, to the compassionate staff members that help guide our patients through their cancer journeys; our physicians lead a comprehensive radiation oncology program. Their expertise and dedication has built DMG’s radiation oncology into a strong and highly rated program that complements all aspects of our Integrated Oncology Program.

**RADIATION ONCOLOGY**

**RADIATION TATTOO REMOVAL PROGRAM**

The American Society for Laser Medicine and Surgery, Inc. (ASLMS) has developed a program called New Beginnings: Radiation Mark Removal Program. This is a national, philanthropic campaign aimed at removing radiation treatment marks free of charge to cancer patients. DMG board certified dermatologists who are among only 100 other board certified ASLMS members across the United States providing this service.
Breast Services
As the first to offer 3D mammography, or tomosynthesis, in the western suburbs, DMG has continued its commitment to breast services. When new locations are acquired, we continue to upgrade equipment to offer patients enhanced imaging options for screening and diagnostic mammograms. With our recent expansion, we now offer these options at our Tinley Park location.

Additional breast services available include wire localization procedures, stereotactic biopsy, MRI diagnostic breast exams, MRI guided breast biopsies, breast ultrasound and lymphoscintigraphy. Additionally, DMG Breast Centers in Naperville, Lisle, Hinsdale and Joliet have been designated as Breast Imaging Centers of Excellence by the American College of Radiology.

PET/CT
DMG has two stationary PET/CT scanners to provide imaging services in the western and south suburbs. Scanners provide whole body imaging for most oncological indications and PET/CT bone scans to evaluate metastatic bone disease. NETSPOT will help locate tumors in adult and pediatric patients with somatostatin receptor-positive neuroendocrine tumors.

Nuclear Medicine
General nuclear medicine procedures are offered at our Lisle, Naperville and Blue Island locations. Both the Lisle and Blue Island locations offer therapeutic procedures using I-131 therapy to treat cancer and other medical conditions affecting the thyroid gland. In Lisle and Naperville, we offer lymphoscintigraphy procedures that allow surgeons to locate which lymph node a tumor drains to first. This lymph node is identified as the sentinel node and the procedure provides information for breast cancer and melanoma staging.

Interventional Radiology
Radiology launched the new Interventional Radiology (IR) program in August 2017. IR uses advanced imaging technology to perform minimally invasive procedures in the care and comfort of our outpatient radiology centers. Often times IR can perform procedures that are less invasive, more cost-effective and safer, with less recovery time when compared to traditional methods. Our board certified IR physicians and staff will be a valuable new asset to our current Integrated Oncology program.

The first phase of our IR program includes services such as biopsy, PleurX catheter placement, paracentesis and thoracentesis. Later phases of our IR program will include oncologic treatments such as radioembolization and tumor ablation. IR procedures are initially being offered at our centers in Glen Ellyn and Tinley Park, and select ultrasound procedures are available at our Naperville imaging center.

Radiology
DMG boasts some of the most state-of-the-art diagnostic imaging capabilities in the Chicago area, offering a complete spectrum of leading-edge technology and specialized clinical expertise. All DMG radiologists are board certified as well as subspecialized, which means they have advanced expertise, training and improved clinical accuracy to help ensure correct results are provided to guide patient care. DMG radiology sites have earned national accreditation from the American College of Radiology (ACR).

MRI
DMG has both 1.5T and 3.0T imaging capabilities. MRI services are now offered at eight locations throughout our service area. As new MRI scanners are added, DMG has selected “wide bore” models, which have broadened the demographics of patients who may be tested and provides greater patient comfort. DMG currently has wide bore MRI scanners in Bloomingdale, Glen Ellyn, Hinsdale and Lisle. DMG also offers advanced MRI imaging techniques such as cholangiography, MR spectroscopy, Whole-body diffusion-weighted MRI and multi-parametric MRI prostate exams.

Low-Dose CT
DMG radiology has been designated as a Lung Cancer Screening Center through the ACR. All CT locations are accredited and meet the requirements specified by Centers for Medicare and Medicaid Services to perform low-dose computed tomography (LDCT) for Medicare-eligible members who meet certain criteria. This testing is also available for consumers with commercial insurance or on a self-pay basis.

Low-dose protocols have also been put into place to ensure that patients receive the right dose and minimize radiation exposure while maintaining diagnostic quality imaging. We know that advanced imaging is crucial to providing the right cancer treatment, which is why we continue to evolve and invest in our offerings. In an effort to provide access and increased convenience to patients, diagnostic imaging appointments are available seven days a week with extended hours.
CANCER

BREAST

A primary care physician’s order to schedule a mammogram makes it convenient, current DMG patients do not need to stay up-to-date with their screenings, yearly mammograms. To emphasize the importance of early detection, DMG was proud to be the first to offer 3D mammography in the western suburbs, and today, nearly all DMG locations offering breast screenings are equipped with 3D mammography.

In 2017, DMG performed more than 60,000 mammograms. To emphasize the importance of regular screenings and to encourage patients to stay up-to-date with their screenings, yearly mammogram reminders are emailed to patients whenever possible. They are also trained in lymph node-related procedures to evaluate the spread of disease. During 2017, DMG surgeons performed approximately 770 including 255 mastectomies and 432 lumpectomies.

Since the inception of our cancer program, breast cancer has been a focus because it accounts for the largest percentage of cancer cases at DMG. DMG is focused on providing the very best in care and utilization of state-of-the-art screening equipment to facilitate patient care. 3D mammography is the gold standard in breast imaging and first line of defense in detecting breast cancer. DMG was proud to be the first to offer 3D mammography in the western suburbs, and today, nearly all DMG locations offering breast screenings are equipped with 3D mammography.

If a patient is diagnosed with cancer, DMG provides an array of treatment options including surgery, radiation therapy and chemotherapy, as well as advanced breast reconstruction or plastic surgery following treatment. DMG’s breast surgeons are sub-specialized and highly trained in the latest techniques relating to breast surgery. These surgeons have the patient’s best interest in mind and aim to offer breast-conserving procedures whenever possible. They are also trained in lymph node-related procedures to evaluate the spread of disease. During 2017, DMG surgeons performed approximately 770 including 255 mastectomies and 432 lumpectomies.

HIGH RISK BREAST CLINIC

DMG’s High Risk Breast Clinic was developed to treat individuals who are at a high risk or genetic predisposition of developing breast cancer. This team provides comprehensive breast cancer screening, genetic risk evaluation, genetic testing and counseling services. During an appointment in the High Risk Breast Clinic, a patient goes through a detailed personal and family history. Based on that information, genetic testing may be recommended to further evaluate their risk. DMG’s High Risk Breast Clinic gained an additional breast nurse navigator in 2017 to provide further support to our patients. The two breast nurse navigators oversee this program, along with a licensed genetic counselor through our partnership with Myriad®.

3D MAMMOGRAPHY

3D mammography, also known as breast tomosynthesis, is an exciting advancement in the screening and diagnosis of breast cancer that allows radiologists to see breast tissue in more detail than ever before. A 3D scan allows radiologists to view breast tissue one layer at a time. Rather than one flat, dense image, radiologists can examine breast tissue in one-millimeter layers, making it easier to interpret any abnormalities.

By compiling these layers into a 3D model, radiologists are able to see a more complete picture of a patient’s breast health, which helps to better detect cancer and reduces reporting of false positives. DMG continues to increase access to 3D mammography. Most recently, this service was introduced in Tinley Park with plans to add this offering at future locations.

herDMG EXAMS

In 2014, DMG launched the “herDMG” initiative to meet the needs of our busy female patients by offering an all-inclusive, age-specific preventive exam scheduled through a single phone call. Each herDMG visit includes a wellness exam, clinical breast exam, pelvic exam with pap test, routine blood work, and screening mammogram for patients 40 years and older (unless determined to be high-risk, requiring an earlier baseline mammogram). Additional blood work for chronic disease monitoring and management may also be completed during a herDMG visit.

In 2015, DMG expanded this program to all primary care and OB/GYN physicians. Since its launch, the herDMG program has grown to perform more than 45,000 herDMG wellness exams per year. The program continues to provide a clear clinical benefit to the well-being of our female patients and helps DMG meet preventive care benchmarks, which have become increasingly important in the evolving value-based healthcare arena.

ADVANCED BREAST RECONSTRUCTION

DMG plastic surgeons offer a full spectrum of breast reconstruction options using the most innovative surgical techniques. Having trained at some of the most elite institutions, these leaders in the field of plastic surgery offer both implant breast reconstruction as well as breast reconstruction using a patient’s own tissue. Not only were our plastic surgeons one of the visionaries of the prepectoral implant reconstruction technique using implants, they now teach this technique to plastic surgeons across the country. Prepectoral breast reconstruction with an implant reduces postoperative complications such as muscle animation deformity and enhances the overall aesthetics of the reconstruction.

In 2016, DMG expanded its breast reconstruction treatment options to offer state-of-the-art micro-surgery. As an alternative, plastic surgeons can perform deep inferior epigastric perforator (DIEP) flap reconstruction using the patient’s own tissue. This technique spares the patient’s abdominal muscles and creates a natural-looking breast for patients who are not candidates for breast implants.
Radiation therapy administered within 1 year (365 days) of diagnosis for women under age 70 who received breast conservation surgery (BCSRT) Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1cN0M0, stage IB - stage III hormone receptor positive breast cancer (HT) Radiation therapy is considered or administered following any mastectomy within 1 year (365 days) of diagnosis of breast cancer for women with ≥ 4 positive regional lymph nodes (MASTRT) Image or palpation-guided needle biopsy (core or FNA) of the primary site is performed to establish diagnosis of breast cancer → (breast needle bx)

**Accountability Measures | Rate 90%**

<table>
<thead>
<tr>
<th>Radiation therapy administered within 1 year (365 days) of diagnosis for women under age 70 who received breast conservation surgery (BCSRT)</th>
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**Quality Improvement Measures | Rate 80%**

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**Performance Measures for Breast Cancer**

Evidence-based measures or accountability measures promote improvements in care delivery and are the highest standard for measurement. These measures demonstrate provider accountability and promote transparency. The table below illustrates DMG’s ongoing commitment to achieve these quality measures and provide the highest level of care for our patients. These quality metrics are reviewed quarterly and shared with the cancer committee. DMG is in full compliance with the national quality metrics, which provide our patients with the confidence they are receiving the highest quality of care available.

**Accountability Measures | Rate 90%**

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**Robotic Surgery**

Robotic surgery is the most progressive form of minimally invasive surgery available today. DMG is proud to offer one of the most advanced and comprehensive robotic programs in the region. DMG’s Robotic Surgery Program offers a wide range of procedures performed by more than 25 robotically-skilled surgeons working across multiple specialties, including general surgery, gynecology, otolaryngology (ENT) and urology. DMG surgeons have expertise in numerous robotic procedures, including several complex cancer-related surgeries.

Using the da Vinci® Surgical System, surgeons accomplish delicate and complex operations through just a few tiny incisions with the help of increased vision, precision, dexterity and control.

With its stereoscopic, 3D imaging and precision-guided wrist movements, the robotic-assisted system allows surgeons to combine the best of laparoscopy and regular open surgery techniques.

**Robotic Surgery Program Accomplishments**

DMG’s expertise in urologic and colorectal robotic procedures is unsurpassed and one of the few programs in the area offering robotic cystectomy. Robotic surgery is particularly effective over traditional surgery when performing more challenging procedures. Notable accomplishments in our robotic program include:

**Transoral Robotic Surgery (TORS)**

A DuPage Medical Group otolaryngologist and member of the Integrated Oncology Program is currently one of the only surgeons performing Transoral Robotic Surgery (TORS) in the Chicago area. The minimally invasive TORS procedure involves removing tumors located in the throat, the base of the tongue or the tonsils, but with the benefits of quicker recovery time, no visible scarring or incisions and limited blood loss during surgery.

**Robotic-Assisted Cystectomy Surgery**

DMG urologic oncologists are performing leading-edge, robotic cystectomy surgery as a minimally invasive option for bladder cancer treatment. This procedure involves removing part, or all, of the bladder, lymph node dissection and urinary diversion through small keyhole incisions. While surgical cystectomy cases in the Chicagoland area are still predominantly performed by opening the abdominal cavity, DMG surgeons are making minimally invasive surgical options more widely available in the suburbs.

**Successful Removal of Large Kidney Tumor**

A DuPage Medical Group urologist and member of the Integrated Oncology Program performed the successful removal of a patient’s complex, football-sized kidney tumor using da Vinci® robotic technology after several other non-DMG surgeons said it couldn’t be done laparoscopically. Not only did he remove the massive tumor, but also the entire right kidney through an incision similar in size to a C-section incision. This innovative approach provided the patient a smaller and more discreet scar, and allowed her to return home only three days later and resume crossfit six weeks post-surgery.

**Robotics Program Accomplishments**

DMG's expertise in urologic and colorectal robotic procedures is unsurpassed and one of the few programs in the area offering robotic cystectomy. Robotic surgery is particularly effective over traditional surgery when performing more challenging procedures. Notable accomplishments in our robotic program include:

**Transoral Robotic Surgery (TORS)**

A DuPage Medical Group otolaryngologist and member of the Integrated Oncology Program is currently one of the only surgeons performing Transoral Robotic Surgery (TORS) in the Chicago area. The minimally invasive TORS procedure involves removing tumors located in the throat, the base of the tongue or the tonsils, but with the benefits of quicker recovery time, no visible scarring or incisions and limited blood loss during surgery.

**Robotic-Assisted Cystectomy Surgery**

DMG urologic oncologists are performing leading-edge, robotic cystectomy surgery as a minimally invasive option for bladder cancer treatment. This procedure involves removing part, or all, of the bladder, lymph node dissection and urinary diversion through small keyhole incisions. While surgical cystectomy cases in the Chicagoland area are still predominantly performed by opening the abdominal cavity, DMG surgeons are making minimally invasive surgical options more widely available in the suburbs.

**Successful Removal of Large Kidney Tumor**

A DuPage Medical Group urologist and member of the Integrated Oncology Program performed the successful removal of a patient’s complex, football-sized kidney tumor using da Vinci® robotic technology after several other non-DMG surgeons said it couldn’t be done laparoscopically. Not only did he remove the massive tumor, but also the entire right kidney through an incision similar in size to a C-section incision. This innovative approach provided the patient a smaller and more discreet scar, and allowed her to return home only three days later and resume crossfit six weeks post-surgery.
DMG provides a multidisciplinary approach throughout the continuum of care for patients diagnosed with genitourinary cancer.

With cancer screening being an important aspect to every patient’s care, DMG developed the Men’s Health Clinic in order to provide comprehensive, accessible care for all aspects of men’s health, including prostate health and cancer screening. Along with this program we have also added a Prostate/Bladder Cancer Support group and a Men’s Health Rehab Service for post-surgical support.

DMG primarily uses the following tests/examinations for prostate cancer: prostate specific antigen (PSA), digital rectal exam (DRE), 4KScore, genomic and genetic testing and multi-parametric MRI of the prostate, F18 Sodium Fluoride PET Bone Scan and F18 Axumin PET/CT. Additionally, testing for bladder and kidney cancer can include rectal/vaginal examination, urine tests, CT scan or MRI, PET/CT scan, F18 Sodium Fluoride PET Bone scan, or cystoscopy and biopsy. Epigenetic testing is also used.

Our multidisciplinary team meets bi-monthly to review cases related to genitourinary diseases/conditions. Our team takes into account many factors when developing individualized care plans including the stage of cancer, overall health and ability to withstand therapy. Depending on screening results, DMG urologists may recommend active surveillance (prostate cancer), surgery, chemotherapy, radiation therapy or a combination of methods.

In 2016, 371 new prostate cancer cases were diagnosed.

<table>
<thead>
<tr>
<th>STAGE</th>
<th>COUNT</th>
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<tbody>
<tr>
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<td>IV</td>
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TREATMENT MODALITY ADMINISTERED

<table>
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<th>COUNT</th>
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<tr>
<td>Surgery</td>
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<tr>
<td>ADT/RAD</td>
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<tr>
<td>ADT Alone</td>
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<tr>
<td>Patient Refused</td>
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</tbody>
</table>
The gastrointestinal (GI) program was formalized in 2015 and provides a fully comprehensive approach to GI cancer, beginning with screening, through diagnosis and treatment.

Although colorectal cancer is the third most commonly diagnosed cancer in the US, screening rates for colorectal cancer are currently below the national goal. In 2010, 59% of people eligible for screening reported having received colorectal cancer testing.

In an effort to increase patient awareness and educate patients on the importance of screening for colorectal cancer, DMG initiated a patient outreach initiative. Colorectal screening information and colorectal test kits were sent to approximately 2,000 DMG patients who are considered at a higher risk for colorectal cancer due to risk factors and age.

DMG is also working to make preventive gastrointestinal cancer services more accessible by adding free-standing endoscopy centers in Oakbrook Terrace and Warrenville in 2016. Through the 2017 acquisition of Northwest Health Care Associates, a third free standing facility was added in Hoffman Estates to serve the north suburbs. On average, DMG performs more than 16,000 colonoscopies each year with an adenoma detection rate of 42%.

DMG uses a variety of testing to find gastrointestinal cancers, including fecal occult blood test, stool DNA test, colonoscopy, sigmoidoscopy, CT colonography and double-contrast barium enemas. Under the leadership of an interventional gastroenterologist, radiofrequency ablation (RFA) and endoscopic mucosal resection (EMR) are also available for appropriate patients.

If colorectal cancer is detected, a variety of surgical treatments are available. Surgical treatment options available at DMG include:

**TRANANAL SURGERY**

Transanal surgery has been used for many decades to remove growths within the rectum. This approach is minimally invasive, helps patients avoid an abdominal surgery and is able to preserve rather than remove much of the rectum, which helps to preserve bowel function.

**TRANANAL ENDOSCOPIC MICROSURGERY (TEM)**

Transanal endoscopic microsurgery (TEM) has differences which provide advantages over the transanal surgery. TEM uses a closed tube system to stretch the rectum open with air to provide greater visibility and allows for larger growths to be removed. Through the use of a small camera, increased vision of the rectum lining is achieved for growth removal. The camera can be placed close to the growth, at an angle or magnified, enhancing precision and visibility through the entire length of the rectum.

**TRANSANAL MINIMALLY INVASIVE SURGERY (TAMIS)**

Transanal minimally invasive surgery (TAMIS) is one of the newest techniques in treating polyps and early-stage rectal cancer. TAMIS is a minimally invasive procedure and a hybrid of several different techniques that have been developed over many years, first available in 2009. This hybrid approach maintains the benefits of transanal surgery (minimally invasive with rectum preservation) and adds the benefits of TEM (enhanced visibility and further reach into the rectum) while using conventional laparoscopic instruments. The combination of a transanal approach (with excellent visibility) along with use of conventional instruments (ease of learning technique and reduced cost) has made this technique very popular and more widely utilized. It is also leading to new techniques for rectal surgery, such as transanal total mesorectal excision (taTME).

DMG is one of the few institutions in the area to offer these advanced treatment options. Our surgeons are specially trained in GI surgeries and provide full surgical capabilities to treat cancer while trying to preserve the patient’s quality of life. DMG continues to expand its GI program and in the last year added two more physicians to the team, fellowship-trained in colon & rectal cancer surgery.

**GASTROINTESTINAL SERVICES**

The gastrointestinal (GI) program was formalized in 2015 and provides a fully comprehensive approach to GI cancer, beginning with screening, through diagnosis and treatment.

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**IN 2016, 156 NEW COLORECTAL CANCER CASES WERE DIAGNOSED.**

**COLORECTAL CANCER BY STAGE AT TIME OF DIAGNOSIS**

<table>
<thead>
<tr>
<th>Stage</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>21%</td>
</tr>
<tr>
<td>II</td>
<td>27%</td>
</tr>
<tr>
<td>III</td>
<td>22%</td>
</tr>
<tr>
<td>IV</td>
<td>21%</td>
</tr>
<tr>
<td>0</td>
<td>2%</td>
</tr>
</tbody>
</table>

**STAGE II**

28%

**STAGE III**

27%

**STAGE IV**

22%

**STAGE I**

21%

**STAGE 0**

2%
Cancer can develop in many locations in the head and neck. The treatment of head and neck cancer is complex, depending on the location, since it can affect vital functions like breathing, speaking, swallowing, hearing, and smelling.

Currently, there is no screening method that has proven to improve survival rates for those with head and neck cancers. Because of this, DMG encourages patients to complete a yearly physical exam with their primary care provider which includes a physical examination of the neck and throat. Additionally, patients aged 9 to 26 are encouraged to get the Human Papillomavirus (HPV) vaccine to prevent becoming infected with a virus that may become cancerous.

Eighty-five percent of head and neck cancers are linked to tobacco use, including smoking or smokeless tobacco. DMG emphasizes the importance of quitting smoking to reducing risk, and provides smoking cessation resources to our patients.

Identifying the cancer and determining if it has spread, i.e., staging the cancer, is an important first step to determining the right treatment. We offer state-of-the-art diagnostic testing including endoscopy, imaging (CT, PET/CT, MRI, chest X-ray, ultrasound), fine needle aspiration and biopsy. Not all cancers respond in the same way to treatment. At DMG, we rely on the most current techniques in molecular testing to evaluate cancer specimens. These markers help us find the best treatment for that cancer and allow us to provide accurate prognostic information. We also obtain genetic testing for those individuals who have cancers with known familial associations.

Surgical techniques vary depending on the type and location of cancer. Surgery may involve minimally invasive, world-class, endoscopic and robotic techniques. DMG otolaryngologists are some of the few physicians in the Chicago area trained in robot-assisted surgery for the head and neck. Notably, we offer Transoral Robotic Surgery (TORS) for the treatment of oral cancers to treat tumors in the throat, base of the tongue and tonsils that can be challenging to reach. Studies show that Transoral Robotic Surgery (TORS) outcomes result in swallowing and speech function that is as good as or better than traditional surgical methods. Some other associated benefits include no visible scars, quicker recovery time and fewer complications and risks of infection. With TORS surgery, there is also a high probability that no additional treatments will be needed. This decreases the risk of injuring muscles used to swallow and other nerves of the throat.

Surgical treatment for head and neck cancer may be combined with reconstructive surgery, chemotherapy or radiation therapy (external beam or brachytherapy). All treatments are focused on preserving as much appearance, speech, taste and swallowing function as possible.

The hepatopancreatobiliary (HPB) program at DMG provides a comprehensive approach to the diagnosis and treatment of benign and malignant diseases of the liver, gallbladder, bile ducts, pancreas and duodenum.

Regarding HPB cancers, they are some of the most complex and challenging cancers to treat because their incidence is relatively low, there are no reliable screening tests, symptoms generally emerge in the late stages and they are often very aggressive. Our physicians employ a wide variety of techniques including state-of-the-art diagnostic imaging and advanced endoscopic interventions to investigate symptoms, ascertain and diagnose, and plan treatment as expeditiously as possible.

For instance, our multidisciplinary HPB team employs a variety of tests to help diagnose HPB cancers including blood tests, trans-abdominal ultrasound, Upper endoscopy and endoscopic ultrasound (EUS) with fine-needle aspiration (FNA), CT or MRI, and Endoscopic Retrograde Cholangiopancreatography (ERCPR) with cholangioscopy or pancreatoscopy for direct visualization of the bile and pancreatic duct. To further assist with staging and treatment planning, PET/CT scan is also available. Many patients will require several different types of treatment including chemotherapy, surgery and radiation therapy. Our multidisciplinary team convenes monthly to discuss our challenging HPB cancer cases and achieve consensus on the type and timing of treatment to offer.

Our surgeons who specialize in HPB cancers are experts in surgical resections and have access to world-class equipment for open, laparoscopic and robot-assisted surgery. Minimally invasive and laparoscopic methods, including intraoperative ultrasound and ablation techniques that use microwaves or radiofrequency to burn tumors, are also leading-edge techniques available for HPB treatment.

While surgery is the mainstay in treatment for HPB cancers, radiation therapy and systemic chemotherapy are also available as adjuncts to surgery or when surgery is not feasible or appropriate.
THYROID CANCER

Thyroid cancer is the most commonly diagnosed endocrine cancer and the fastest increasing cancer (by new diagnoses) in both men and women. DMG is committed to prevention, diagnosis and treatment of all endocrine cancers including thyroid, parathyroid, adrenal, pancreatic, pituitary, testicular and ovarian tumors.

The comprehensive thyroid cancer program takes a collaborative approach among subspecialists to create a personalized treatment plan. This plan addresses not only the disease, but also the patient experience, to ensure all questions are answered and every treatment option is discussed and explored. We help our patients understand the importance of their family history and risk factors for an endocrine-related malignancy. Our staff educates patients about avoiding unnecessary exposure to radiation as well as endocrine-disrupting and/or carcinogenic compounds.

We believe that excellent treatment refers to the technical aspects of medicine and surgery and in the way we guide patients through that process. Our care team works tirelessly to ensure patients understand each step in their care and who to contact when questions arise.

LUNG CANCER

Today, the outlook for someone diagnosed with lung cancer is better than ever, due to the advances in screening and treatment. Patients with a heavy smoking history who meet certain requirements fall into a high-risk group where preventive screening is recommended. DMG has multiple radiology locations that offer low-dose CT. Through this screening process, we are able to detect cancers when they are small and have not spread throughout the body.

Based on the diagnostic results, the multidisciplinary team is able to optimize therapy and individualize the course of treatment for a patient. State-of-the-art radiation therapies and cutting-edge surgical techniques are also available. In 2017, DMG added two new pulmonologists to the team and now offers pulmonary services in Joliet to provide increased access to care in the south suburbs.

LUNG CANCER STATISTICS | 2016
175 NEW LUNG CANCER DIAGNOSES MADE IN 2016

<table>
<thead>
<tr>
<th>LOCALIZED</th>
<th>REGIONAL</th>
<th>DISTANT</th>
</tr>
</thead>
<tbody>
<tr>
<td>MALE</td>
<td>14</td>
<td>12</td>
</tr>
<tr>
<td>FEMALE</td>
<td>66</td>
<td>18</td>
</tr>
</tbody>
</table>

DMG pulmonary specialists use innovative strategies such as endobronchial ultrasound bronchoscopy (EBUS) in diagnosing lung cancer. EBUS is a minimally invasive procedure used in the diagnosis and staging of lung cancer and other diseases causing enlarged lymph nodes in the chest. EBUS is less invasive than older methods, provides real-time imaging and lets the physician easily view “difficult-to-reach” areas.

Pulmonary specialists also routinely use advanced bronchoscopic techniques such as electromagnetic navigational bronchoscopy and radial probe endoscopic ultrasonography to biopsy peripheral lung nodules. Navigational bronchoscopy can also be used to place fiducial markers used in stereotactic body radiation therapy.

LUNG CANCER SCREENING

The earlier a cancer can be diagnosed, the easier it is to treat. That is why DMG offers low-dose lung CT (LDCT) scans, which diagnose lung cancer at an early stage. LDCT scans are the recommended screening test for lung cancer by the United States Preventive Services Task Force and the leading method for early detection of lung cancer, especially in high-risk patients.

LDCT exams are recommended for those who meet the following guidelines:

- Are between the age of 55 and 77 and are either current smokers or have quit smoking within the past 15 years.
- Have a tobacco smoking history of at least 30 pack years, which is at least a pack a day for 30 years. (If a person smoked 2 packs a day for 15 years that equals 30 pack years.)
- Obtain a written order from a qualified medical provider.

LUNG CANCER BY TYPE

Non-small cell carcinoma 84%
Small cell carcinoma 16%

LUNG CANCER BY STAGE AT DIAGNOSIS

STAGE IV 36%
STAGE I 28%
STAGE III 25%
STAGE II 11%

COC MEASURES FOR QUALITY CANCER CARE

NON-SMALL CELL LUNG - QUALITY IMPROVEMENT MEASURE - RATE 85%  DMG CONCORDANCE %

Surgery is not the first course of treatment for cN2, M0 lung cases
LNSSurg 100%

Systemic chemotherapy is administered within 4 months to 6 months postoperatively, or it is recommended for surgically resected cases with pathologic, lymph node-positive (pN1) and (pN2) NSCLC (LCT)

DMG also offered smoking cessation classes to support patients in their efforts to quit smoking as a first line of defense against lung cancer. In 2016, the DMG Integrated Oncology Program added new quality measures for its Lung Cancer Program to ensure we are providing patients with the highest level of quality care.

DMG has monitored these metrics quarterly and is in full compliance with national standards. The table below highlights DMG’s commitment to providing our lung cancer patients with the best care possible.

THYROID CANCER BY GENDER
IN 2016, 112 NEW THYROID CANCER CASES WERE DIAGNOSED

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<thead>
<tr>
<th>LOCALIZED</th>
<th>REGIONAL</th>
<th>DISTANT</th>
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</thead>
<tbody>
<tr>
<td>MALE</td>
<td>66</td>
<td>12</td>
</tr>
<tr>
<td>FEMALE</td>
<td>46</td>
<td>18</td>
</tr>
</tbody>
</table>

DMG Concordance %

100%
While DMG has been diagnosing and treating skin and soft tissue cancer for many years, 2017 marks the second year for our formal skin & soft tissue cancer program to ensure that care is provided consistently across our growing system of providers. Through this program, we have launched cancer conferences that provide patients with an internal second opinion and consensus from a multidisciplinary team. 

DMG dermatologists focus a large part of their patient care on skin cancer screening and prevention. As a part of preventive care, DMG’s medical spas sell a variety of physician-grade sunscreen products to best protect patients from the harmful sun rays. Dermatologists also recommend yearly skin exams and routinely offer them to various community groups to help find cancer at the earliest stage possible.

Skin cancer is diagnosed by a physical examination and biopsy. Through a biopsy, all or part of the suspicious spot is removed and sent to a laboratory. Diagnostic tests to identify soft tissue sarcoma include X-ray, CT or MRI, ultrasound, PET/CT scan or biopsy. Skin/soft tissue cancer treatment plans are individualized, and factor in the stage of cancer, the patient’s overall health and ability to tolerate therapy. Treatment options may include biopsy, surgery, chemotherapy, immunotherapy and radiation therapy.

Detecting Cancer

In 2017, DMG launched an “Ugly Duckling” campaign to help increase patient awareness on the importance of performing self-skin spot checks as well as the warning signs of skin cancer. The Ugly Duckling Method follows the traditional “A, B, C, D, E” guidelines for checking moles and skin lesions:

• A is for Asymmetry
• B is for Border irregularity
• C is for Color differences within a mole
• D is for Diameter greater than 6 mm or a pencil eraser head
• E is for Evolution or changing moles
• F is for Family history of melanoma in a first-degree relative

Skin & Soft Tissue Cancer

MOHS SURGERY

DMG has dermatologists who are specially trained in Mohs surgery to provide the highest level of care to patients. Mohs surgery is accepted as the single most effective technique for removing basal cell carcinoma and squamous cell carcinoma. Physicians are able to spare the greatest amount of healthy tissue while almost completely removing cancer cells. Cure rates reach more than 98 percent with Mohs surgery.

HISTOLOGY LAB

At DMG’s Histology Lab, providers review the structure and tissue of samples to determine if cells are cancerous or contain other diseases. The Histology Lab of DuPage Medical Group has been accredited by the College of American Pathologists (CAP), which is a significant achievement that speaks to the quality provided to patients in need of histology services.
Genetic Testing – Prostate Cancer

For patients with known or suspected familial disorders, blood can be tested to help determine the presence of a specific genetic abnormality. This can help in screening family members as well as providing prognostic information. DMG urologists utilize epigenetic testing, including OncotypeDx, ProLaris, ConfirmMDx and Decipher for prostate cancer screening.

Telegenetics

In partnership with Myriad, DMG launched a telegenetics program offering genetics testing and free genetic counseling to patients on Tuesdays and Thursdays in our Winfield and Lisle locations. The program provides patient education and genetic counseling completed by a phone call with an off-site Myriad counselor. Following the appointment, the genetic counselor is able to electronically submit the testing information and paperwork needed to obtain the specimen and complete the testing. This process provides high-risk and cancer patients access to genetic counseling services and testing at a convenient DMG site.

In a continued effort to provide easier and more convenient access to our care, DMG continues to expand upon our online scheduling capabilities. In 2017, nearly all Integrated Oncology Program providers, specialists and diagnostic services began offering patients the ability to schedule their appointments online.

In addition, patients being referred to the Integrated Oncology Program are able to make an appointment online utilizing a newly developed electronic ticket system in MyChart. When a referral is entered into MyChart, a ticket is generated which allows the patient to use the ticket to schedule their appointment online. Since its launch, the system provides more convenient scheduling for oncology patients. As many as 20 appointments are scheduled online through this new system each week.

RESOURCE LIBRARY

The DMG Cancer Resource Library is located in the Cancer Resource Center at the Lisle Medical Office Building and includes educational materials about cancer, treatment and symptom management for patients, their families and caregivers.

As part of our pledge to patient-centered care, we recognize our patients have more than just physical needs to be addressed throughout their cancer treatment. We assess these needs through a comprehensive distress screening process, based on NCCN guidelines. Currently, DMG social workers are averaging 370 distress screenings per month. Our patients and their families can be confident that our support extends to them beyond just their physical diagnosis and treatment plan.

ONCOLOGY SOCIAL WORK & SUPPORTIVE CARE

Our licensed clinical social worker helps patients identify practical and psycho-social needs and directs individuals to the appropriate supportive care resources. Our social worker is available at any point in the cancer continuum – from the point of diagnosis through survivorship – and can provide a wide array of support including counseling, education, family support and transportation assistance. Our social worker is an integral part of the care team and works closely with a patient’s medical team, patients, family and caregivers.

As part of our ongoing classes designed to support the mind, body and soul, and are a key part of the integrated approach to cancer care. Below are a few of our offerings:

ART THERAPY
Art classes using various art mediums are offered through Wellness House at DuPage Medical Group.

NUTRITION WORKSHOPS
Nutrition workshops offered by a registered diettian help patients learn how to optimize their diet and manage some of the effects of cancer treatment and aid in recovery.

AMERICAN CANCER SOCIETY
Their program is an integral part of the care team and works closely with a patient’s medical team, patients, family and caregivers.

GROUPS, CLASSES & SERVICES
Our ongoing classes are designed to support the mind, body and soul, and are a key part of the integrated approach to cancer care. Below are a few of our offerings:

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AMERICAN CANCER SOCIETY
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SMOKING CESSATION
A four-week program focused on overcoming nicotine addiction was offered in both the west and south suburbs.
Recovery program, which provides patients with
Look Good Feel Better program and the Road to
resources to 150 patients through the Wig Boutique,
To date, by partnering with the ACS, DMG has been
at no charge to cancer patients.
Lisle location. To date in 2017, 75 wigs were provided
fittings with a trained wig boutique volunteer at our
provide on-site, complimentary wigs and wig
DMG has partnered with the American Cancer Society
Boutique
Society Wig
American Cancer

BOARD
patient ADVISORY
services, cancer survivor day and use of technology
to communicate with healthcare providers.

AMERICAN CANCER SOCIETY WIG
BOUTIQUE
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resources to 150 patients through the Wig Boutique,
Look Good Feel Better program and the Road to
Recovery program, which provides patients with
transportation to and from treatment free of charge.

SURVIVORSHIP
DMG has a survivorship program for patients during
their treatment and after treatment has concluded.
The survivorship program’s goal is to give survivors
the information, tools and support they need to move
forward after cancer treatment.
The primary tool is an individualized, comprehensive
end-of-treatment summary that includes: a detailed
description of all the treatments received from
diagnosis onward; notes of what to watch out for
in years to come; probable complications; long-term
treatment; and healthy steps and interventions that
are recommended in the future.
This Survivorship Care Plan, along with an in-person
meeting with an Advanced Practice Provider helps
patients transition from active cancer treatment
to follow-up and surveillance. The summary is sent
to the patient’s primary care physician who may
have had limited participation in the treatment
regimen once the cancer was diagnosed. The care
plan empowers patients to take control through
knowledge and resources that help them embrace
this phase of their health after cancer treatment.

FINANCIAL NAVIGATION
Finances are often a major concern for patients
dealing with a cancer diagnosis. Meeting with a
financial navigator can help lead to peace of mind
about medical expenses and allow patients to focus
on their recovery. Services provided include estimates
for future treatments, copays and deductibles based
on diagnosis and chosen treatment, assistance with
bills and claims issues, understanding insurance
benefits and obligations, patient assistance
program applications, and help for patients who are
underinsured or have no insurance in finding assistance.
Even more attention was placed on our financial
navigators in 2017 with the creation of additional
patient resources to help direct patients to financial
navigators who are available in person, by phone and
on a walk-in basis to assist our patients at locations in
Lisle and Tinley Park.

COMMUNITY OUTREACH
DMG physicians and staff show their commitment to the communities we serve by providing educational talks,
volunteering at community events and supporting philanthropic initiatives.
DMG provided grants totaling more
than $150,000 in 2017 to various
partners, including:
• DuPage Health Coalition’s Silver Access Plan
• Dispensary of Hope Pharmacy
• Wellness House
• Living Well Cancer Resource Center
• Close the Gap Campaign
• FORWARD Initiative
• Relay for Life
• Making Strides Against Breast Cancer
• American Cancer Society Share the Drive Campaign
DMG participated in and sponsored a
variety of community-based events in
2017 as well, including:
• June 2017 Cancer Survivor Day Sponsor
• June 2017 Relay for Life: DMG staff members
participated by forming a team to walk and raised
over $14,000 for this event. DMG also served as a
flagship sponsor.
• October 2017 Making Strides Against Breast Cancer: DMG staff formed a team to walk and served as
a flagship event sponsor as well as a photo booth
sponsor for the Orland Park event in our expanded
south region.

SCREENINGS
Screening tests are the best way to help find cancer at an early stage, many times before symptoms appear.
DMG is committed to its employees and the community, which is why we continuously provide routine cancer
screenings throughout the year.

<table>
<thead>
<tr>
<th>DATE – Nov 2017</th>
<th>PROVIDER(S)</th>
<th>SCREENING TYPE</th>
<th>TOTAL RECIPIENTS</th>
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</thead>
<tbody>
<tr>
<td>Oct – Nov 2017</td>
<td>Surgery Department Providers</td>
<td>Free Clinical Breast Exams</td>
<td>8 patients screened, 2 referred for genetic counseling, 1 referred to the high risk breast clinic, 1 referred to follow up with a breast surgeon.</td>
</tr>
<tr>
<td>9/30/2017</td>
<td>DMG-Wide Initiative</td>
<td>Colorectal Cancer Screening</td>
<td>Test kits &amp; screening information was sent to approximately 2,000 patients</td>
</tr>
<tr>
<td>8/26/2017</td>
<td>Shraddha Desai, MD, Cara Bushemi, PA-C, Chris Kelly, PA-C</td>
<td>Skin Cancer Screening</td>
<td>79 White Sox office staff &amp; player personnel (8 were recommended for biopsy)</td>
</tr>
<tr>
<td>6/16/2017</td>
<td>Chris Kelly, PA-C</td>
<td>Skin Cancer Screening</td>
<td>38 participants at the Carillon Health Fair (10 were recommended for biopsy)</td>
</tr>
<tr>
<td>5/1/2017</td>
<td>Shruthi Reddy, MD, Shraddha Desai, MD, Chris Arco, PA-C, Chris Kelly, PA-C, Cara Bushemi, PA-C</td>
<td>Skin Cancer Screening</td>
<td>20 DMG employees screened for Melanoma Monday (none referred for biopsies)</td>
</tr>
<tr>
<td>5/1/2017</td>
<td>Stephanie Gan, MD, Andrea Rutherford, PA-C</td>
<td>Skin Cancer Screening</td>
<td>18 DMG employees screened for Melanoma Monday (5 referred for biopsies)</td>
</tr>
<tr>
<td>5/1/2017</td>
<td>Melissa Koopmann PA-C, Sarah McCracken PA-C, Bridget Pagett PA-C</td>
<td>Skin Cancer Screening</td>
<td>19 DMG employees screened for Melanoma Monday (5 referred for biopsies)</td>
</tr>
</tbody>
</table>


**EDUCATIONAL PRESENTATIONS**

Expertise. Knowledge. Experience. These are just a few of the reasons DMG’s team of healthcare leaders and innovators are in demand as speakers and presenters. Below is a list of our community presentations in 2017:

| DATE       | PROVIDER(S)                        | SCREENING TYPE | TOTAL RECIPIENTS                                                                 |
|------------|------------------------------------|----------------|==================================================================================|
| 2/02/17    | Viveka Boddipalli, MD               | Wellness House | Developments in Lung cancer treatment & management recommendations                |
| 3/16/17    | Amit Patel, MD, Ranko Micinovic, MD | DMG sponsored at the Le Meridian Hotel in Oakbrook | CME Presentation on Advanced Robotic Surgery                                        |
| 4/25/17    | Amit Patel, MD                      | Wellness House | Updates in Bladder Cancer                                                          |
| 4/26/17    | Katie Dr assess, RN Lara Hamilton, MD | American Cancer Society | Foods that Fight Cancer                                                           |
| 6/6/17     | Chris Arico, PA                     | NICOR employee lunch & learn | Sun Protection & Skin Cancer Prevention                                             |
| 6/17/17    | Kim Warren, APN                     | Living Well Men’s Breakfast | Heart Health after Cancer                                                          |
| 6/24/17    | Daniel Frank, MD                    | Wellness House | Hot Topics in Breast Cancer – Medical Oncology Updates                              |
| 7/10/17    | Chris Arico, PA                     | Diabetes Support Group | Sun Protection & Skin Cancer Prevention                                             |
| 8/24/17    | Daniel Frank, MD Anand Shah, MD     | Wellness House | Head & Neck Cancer Treatment and Management                                         |
| 9/12/17    | Karl Napenkoski, MD Amit Patel, MD  | DMG Annual CME Presentation for Providers & Staff | Update on Pathologic Prostate Cancer Staging and Gleason Grade Grouping             |
| 9/16/17    | Dawn Williams, LCSW                 | Cancer Support Center Survivor Camp | Strengthening Relationships                                                        |
| 9/23/17    | Amit Patel, MD, Ranko Micinovic, MD | Wellness House | Hot Topics in Prostate Cancer – Recurrence                                          |
| 12/14/17   | Viveka Boddipalli, MD               | Wellness House | Developments in Lung Cancer treatment & Management Recommendations                  |