Treating Cancer: Access to Care
Even the world’s best cancer care is completely useless if you can’t get to the treatment. And, so begins our most ambitious endeavor yet. We are embarking on a multi-year, multi-phase project to systematically remove any and all barriers to care. Access to great cancer care means a lot more than getting a quick appointment, more than starting treatment quickly after a consultation. Barriers to care are present in many different forms and are found all along the care continuum. Barriers to care seriously threaten the health and wellbeing of those who entrust us with their care.

Over the coming months, our team will systematically evaluate and remedy a multitude of barriers to care, thereby improving patients’ access to care. In the process, we will analyze our operations in everything we do. We will be rewriting cancer care from the ground up, optimizing systems and procedures to ensure the timely delivery of the right care to the right patient at the right time.

Everything is on the table. We will look for ways to get patients who have suspicious symptoms to their diagnosis more quickly, and get newly diagnosed patients into treatment more quickly. We promise to shorten the time it takes to formulate a treatment plan by instituting even more sophisticated coordination among doctors. All barriers will be assessed, from parking and education to improved coordination with a primary care doctor.

Cancer is hard enough. Barriers to great quality cancer care have no place at the table. We usher in 2019 with a new era for Kettering Cancer Care. Having built world-class facilities and a world-class team, we now turn our attention to making it all work with the precision of a Swiss watch. May 2019 bring you and your family health, prosperity, and happiness.
Our efforts this year have focused on a few key strategies to increase capacity, access, and availability of cancer expertise. As the incidence of cancer diagnoses continues to climb, our strategic focus has been around increasing access to care. In fact, this year’s report is dedicated to highlighting several of our targeted initiatives to provide patients easier access to the world-class cancer care at Kettering Health Network.

The foundation of this world-class cancer care is the physicians who lead the care team. This year, we added six additional experts to our panel of physicians: three medical oncologists, two surgical oncologists, and one additional radiation oncologist. Timely access to these specialists is essential for patients. We have implemented radical initiatives to reduce the time a patient waits for their first appointment with one of our cancer specialists.

We’ve continued to focus on expanding care services to additional communities in our region. Through the help of the Greene Medical Foundation, we added radiation therapy at Soin Medical Center. Additionally, we are currently in the midst of a dramatic overhaul to unveil Kettering Cancer Care at Fort Hamilton Hospital. Finally, we have recently announced that we are expanding services to the patients of Miami County with the addition of medical oncology, infusion, and radiation therapy at Troy Hospital, targeted to open in 2019.

At Kettering Cancer Care, we emphasize putting the patient’s needs first. We have learned from our patients that a cancer diagnosis takes a toll on their spirit. Cancer patients experience a unique fatigue when trying to balance physician appointments, traveling for treatments, and scheduling follow-up care. We focus on addressing both a patient’s mind and spirit by increasing our service offerings of integrative medicine programs, mental health clinics, and the expertise of our dedicated oncology social workers, dietitians, chaplains, and experts in the Renew Boutique and Spa.
As I reflect on the unprecedented success of 2018, I am reminded that we are only as strong as the commitment each employee holds in their heart to the patients they serve. In this regard, we are mighty. Each and every employee of Kettering Cancer Care reveres the opportunity to participate in this sacred work. God’s calling in each of our lives is to stand in the gap for the cancer patients in our community. It is our profound privilege to walk hand-in-hand with each person who comes to us as patient—but inevitably leaves us as family.

We thank you for your continued support. Together, we are filled with excitement as we continue to look toward the future. As our program continues to grow, we are grateful for the sacred opportunity to improve the lives of the people in the communities we serve.

It is our profound privilege to walk hand-in-hand with each person who comes to us as patient—but inevitably leaves us as family.
Constructing Kettering Cancer Center at the Pavilion was one way Kettering Health Network took initiative to ensure that cancer patients have access to high quality cancer care in their own community. However, access to care doesn’t stop with the brick and mortar, or even with the renowned physicians and remarkable care providers that work within it. With the center up and running, the team focused on another critical component of access: bringing patients in for their initial consult with a Kettering Cancer Care provider in a timely manner.

“Using process analysis and Lean methodology, we worked with the physicians and staff to design a more streamlined process that would get patients on the schedule faster,” shares Elizabeth LaForce, manager of Oncology Access for Kettering Cancer Care. Throughout 2017, it was taking an average of three to four days from when a referral was received to contact the patient and schedule them for their first appointment with a physician. By creating efficiencies within this system, that time was cut in half, contacting patients within an average of 1.5 days, and often within just 24 hours of receiving a referral.

Another factor that contributed to timeliness of the initial consult was to make sure that the physicians’ schedules provided more immediate openings for new patients. This involved a detailed formula, which accounted for the number of referrals received, the number of providers the consults could potentially be distributed amongst, and coverage for physicians on call or out of the office. The physician schedules were then rebuilt with the right number of new patient slots, taking into consideration the amount of time each provider tends to spend with a new patient. The electronic medical record system was instrumental in understanding those data points that helped establish the scheduling needs with specificity.

This modification, along with efforts to recruit additional physicians to meet our patient’s needs, has made another significant impact in scheduling new patients. The change was initially piloted at Kettering Cancer Care at Soin Medical Center in early 2018 and expanded to the Kettering Medical Center location shortly after demonstrating positive results and continuing to show a steady reduction from scheduling the appointment to the actual visit by almost nine days on average. “There is still work to be done, and while there will always be variables that impact scheduling,” Elizabeth says, “hopefully those variables are the patient’s choice about when they want to come in, not barriers that prevent us from seeing them as quickly as possible.”

These process changes also directly aligned with our Commission on Cancer (CoC) accreditation status under Standard 4.8, Quality Improvements.
Another access-focused initiative the team continues to work on relates to the call center. Known to patients as the 1-855-500-CURE line, the call center continues to grow and develop, demonstrating improvement through patient survey scores, where most recent scores show average of 92.7% satisfaction in “ease of getting clinic on the phone.” This places Kettering Cancer Care in the top decile on this metric when compared to other facilities participating in Press Ganey patient experience surveys. One study examining the management of phone calls by oncology clinics published by the Journal of Oncology Practice found that, on average, for every 10 clinic appointments, there were seven phone calls made or received by the clinic [1]. Kettering Cancer Care far exceeds that finding, taking almost twice as many calls as visits from all locations.

The certified medical assistants and nurses who answer these calls use their expertise and specialized training in conjunction with triage algorithms to be able to assess patients’ symptoms and address their needs. In addition to increasing accessibility to care providers, the call center functions as a resource to reduce trips to the emergency department and subsequent inpatient hospitalizations for cancer patients, and provide them with the whole-person care that Kettering Health Network strives to deliver.

Per the Centers for Disease Control and Prevention, cancer registries provide the data-driven foundation for cancer control efforts in the United States. Cancer registry data is used to:

- Monitor cancer trends over time
- Show cancer patterns in various populations and identify high-risk groups
- Guide planning and evaluation of cancer control programs
- Help set priorities for allocating health resources
- Advance clinical, epidemiologic, and health services research

THE KETTERING HEALTH NETWORK CANCER REGISTRY INCLUDES DATA FROM THE FOLLOWING NETWORK HOSPITALS:

- Kettering Medical Center
- Grandview Medical Center
- Sycamore Medical Center
- Southview Medical Center
- Fort Hamilton Hospital
- Greene Memorial Hospital
- Soin Medical Center

Kettering Health Network Hospitals are located in the following counties:

- Montgomery County: Kettering Medical Center, Grandview Medical Center, Sycamore Medical Center, Southview Medical Center
- Greene County: Greene Memorial Hospital, Soin Medical Center
- Butler County: Fort Hamilton Hospital

Laura L. Vondenhuevel, BS, RHIT, CTR
Manager, Oncology Outcomes, Kettering Health Network
BY THE NUMBERS

35,555 total cases from 2005-2017 that are maintained in our cancer registry database

2,673 total 2017 analytic* cases reportable to the National Cancer Database**

236 additional 2017 cases that were reported to OCISS only

14,886 total cases due for CoC required annual follow-up

* cases diagnosed at or receiving any part of the first course of treatment at the accessioning facility after the registry’s reference date (date after which all eligible cases must be included in the registry—reference date KHN 2005).

** also reported to the Ohio Department of Health
TOP FIVE CANCER SITES
2017 NETWORK DATA BY GENDER

<table>
<thead>
<tr>
<th>Primary Site</th>
<th>Case Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bronchus &amp; Lung</td>
<td>219</td>
</tr>
<tr>
<td>Prostate Gland</td>
<td>141</td>
</tr>
<tr>
<td>Colon</td>
<td>72</td>
</tr>
<tr>
<td>Bladder</td>
<td>69</td>
</tr>
<tr>
<td>Skin</td>
<td>55</td>
</tr>
<tr>
<td>All other sites:</td>
<td>436</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Primary Site</th>
<th>Case Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast</td>
<td>671</td>
</tr>
<tr>
<td>Bronchus &amp; Lung</td>
<td>236</td>
</tr>
<tr>
<td>Corpus Uteri</td>
<td>153</td>
</tr>
<tr>
<td>Thyroid Gland</td>
<td>73</td>
</tr>
<tr>
<td>Colon</td>
<td>62</td>
</tr>
<tr>
<td>All other sites:</td>
<td>486</td>
</tr>
</tbody>
</table>

CANCER CONFERENCES
Per the CoC’s Cancer Program Standards, “cancer conferences improve the care of patients with cancer by providing multidisciplinary treatment planning and contributing to physician and allied medical staff education.” As an approved CoC Integrated Network Cancer Program (INCP), Kettering Health Network cancer conferences include discussion of cancer stage, evidenced-based national treatment guidelines, prognostic indicators, and clinical trials.

In 2017 this included over:

- **174** cancer conferences
- **997** case presentations

This represents over 37% of our annual caseload.
Comparison of Selected Sites, % of New 2017 Cancer Patients

<table>
<thead>
<tr>
<th>Site</th>
<th>USA**</th>
<th>Ohio**</th>
<th>KHN*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast (Female)</td>
<td>14.96%</td>
<td>13.83%</td>
<td>25.10%</td>
</tr>
<tr>
<td>Bronchus &amp; Lung</td>
<td>13.18%</td>
<td>15.64%</td>
<td>17.02%</td>
</tr>
<tr>
<td>Colon &amp; Rectum</td>
<td>8.02%</td>
<td>8.08%</td>
<td>6.88%</td>
</tr>
<tr>
<td>Corpus Uteri</td>
<td>3.63%</td>
<td>3.92%</td>
<td>3.92%</td>
</tr>
<tr>
<td>Prostate Gland</td>
<td>3.92%</td>
<td>9.55%</td>
<td>8.57%</td>
</tr>
<tr>
<td>Skin (Melanoma)</td>
<td>5.16%</td>
<td>5.16%</td>
<td>4.93%</td>
</tr>
<tr>
<td>Urinary Bladder</td>
<td>3.37%</td>
<td>4.68%</td>
<td>4.93%</td>
</tr>
</tbody>
</table>

*KHN 2017 numbers reflect the analytic cases from the CoC INCP accredited locations

**Ohio and USA estimated number of newly diagnosed cancer cases for 2017, from Cancer Facts and Figures 2017 published by the American Cancer Society
# Oncology Outcomes Management

## 2017 CaseLoad

<table>
<thead>
<tr>
<th>Primary Site</th>
<th>Total (%)</th>
<th>M</th>
<th>F</th>
<th>Alive</th>
<th>Deceased</th>
<th>Stg 0</th>
<th>Stg I</th>
<th>Stg II</th>
<th>Stg III</th>
<th>Stg IV</th>
<th>N/A</th>
<th>Unk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base of Tongue</td>
<td>14 (0.5%)</td>
<td>13</td>
<td>1</td>
<td>11</td>
<td>3</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>10</td>
<td>0</td>
<td>1</td>
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<tr>
<td>Other Tongue</td>
<td>9 (0.3%)</td>
<td>5</td>
<td>4</td>
<td>8</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Floor of Mouth</td>
<td>1 (0.0%)</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Palate</td>
<td>4 (0.1%)</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Other Mouth</td>
<td>2 (0.1%)</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Parotid Gland</td>
<td>4 (0.1%)</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other Major Salivary Glands</td>
<td>3 (0.1%)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Tonsil</td>
<td>22 (0.8%)</td>
<td>16</td>
<td>6</td>
<td>20</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>15</td>
<td>0</td>
<td>2</td>
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<tr>
<td>Oropharynx</td>
<td>4 (0.1%)</td>
<td>3</td>
<td>1</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Nasopharynx</td>
<td>1 (0.0%)</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
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</tr>
<tr>
<td>Pyriform Sinus</td>
<td>3 (0.1%)</td>
<td>3</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Hypopharynx</td>
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<td>2</td>
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<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>0</td>
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<td>0</td>
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<tr>
<td>Other Lip, Oral Cavity, &amp; Pharynx</td>
<td>1 (0.0%)</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Esophagus</td>
<td>24 (0.9%)</td>
<td>19</td>
<td>5</td>
<td>12</td>
<td>12</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>6</td>
<td>9</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Stomach</td>
<td>25 (0.9%)</td>
<td>13</td>
<td>12</td>
<td>14</td>
<td>11</td>
<td>1</td>
<td>5</td>
<td>1</td>
<td>4</td>
<td>8</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>Small Intestine</td>
<td>13 (0.5%)</td>
<td>5</td>
<td>8</td>
<td>10</td>
<td>3</td>
<td>0</td>
<td>4</td>
<td>0</td>
<td>4</td>
<td>2</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Colon</td>
<td>134 (5.0%)</td>
<td>72</td>
<td>62</td>
<td>115</td>
<td>19</td>
<td>2</td>
<td>30</td>
<td>36</td>
<td>32</td>
<td>30</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Rectosigmoid Junction</td>
<td>12 (0.4%)</td>
<td>8</td>
<td>4</td>
<td>7</td>
<td>5</td>
<td>0</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>4</td>
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<td>0</td>
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<tr>
<td>Rectum</td>
<td>50 (1.9%)</td>
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<td>22</td>
<td>44</td>
<td>6</td>
<td>1</td>
<td>5</td>
<td>12</td>
<td>17</td>
<td>8</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>Anus &amp; Anal Canal</td>
<td>14 (0.5%)</td>
<td>2</td>
<td>12</td>
<td>12</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>7</td>
<td>5</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Liver &amp; Intrahepatic Bile Duct</td>
<td>28 (1.0%)</td>
<td>20</td>
<td>8</td>
<td>10</td>
<td>18</td>
<td>0</td>
<td>5</td>
<td>6</td>
<td>1</td>
<td>6</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Gallbladder</td>
<td>4 (0.1%)</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Other Parts of Biliary Tract</td>
<td>14 (0.5%)</td>
<td>11</td>
<td>3</td>
<td>9</td>
<td>5</td>
<td>0</td>
<td>3</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Pancreas</td>
<td>48 (1.8%)</td>
<td>27</td>
<td>21</td>
<td>8</td>
<td>40</td>
<td>0</td>
<td>4</td>
<td>10</td>
<td>2</td>
<td>26</td>
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<td>6</td>
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<tr>
<td>Other Digestive Organs</td>
<td>6 (0.2%)</td>
<td>2</td>
<td>4</td>
<td>0</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>6</td>
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<tr>
<td>Nasal Cavity &amp; Middle Ear</td>
<td>2 (0.1%)</td>
<td>1</td>
<td>1</td>
<td>2</td>
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<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<td>1</td>
</tr>
<tr>
<td>Accessory Sinuses</td>
<td>1 (0.0%)</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
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<td>Larynx</td>
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<td>2</td>
<td>1</td>
<td>5</td>
<td>1</td>
<td>2</td>
<td>10</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Trachea</td>
<td>3 (0.1%)</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<td>0</td>
<td>3</td>
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<tr>
<td>Bronchus &amp; Lung</td>
<td>455 (17.0%)</td>
<td>219</td>
<td>236</td>
<td>238</td>
<td>217</td>
<td>0</td>
<td>106</td>
<td>34</td>
<td>98</td>
<td>205</td>
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<td>12</td>
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<tr>
<td>Primary Site</td>
<td>Total (%)</td>
<td>M</td>
<td>F</td>
<td>Alive</td>
<td>Deceased</td>
<td>Stg 0</td>
<td>Stg I</td>
<td>Stg II</td>
<td>Stg III</td>
<td>Stg IV</td>
<td>N/A</td>
<td>Unk</td>
</tr>
<tr>
<td>--------------------------------------</td>
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<td>------</td>
<td>-----</td>
</tr>
<tr>
<td>Thymus</td>
<td>1 (0.0%)</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Heart, Mediastinum, &amp; Pleura</td>
<td>2 (0.1%)</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Bones &amp; Cartilage of Other</td>
<td>3 (0.1%)</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>0</td>
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<td>0</td>
<td>0</td>
<td>1</td>
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<td></td>
</tr>
<tr>
<td>Hematopoietic &amp; Reticuloendo System</td>
<td>69 (2.6%)</td>
<td>38</td>
<td>31</td>
<td>46</td>
<td>23</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>3</td>
<td>64</td>
<td>1</td>
</tr>
<tr>
<td>Skin</td>
<td>104 (3.9%)</td>
<td>55</td>
<td>49</td>
<td>93</td>
<td>11</td>
<td>17</td>
<td>42</td>
<td>23</td>
<td>10</td>
<td>7</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Retroperitoneum &amp; Peritoneum</td>
<td>5 (0.2%)</td>
<td>1</td>
<td>4</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Connective &amp; Other Soft Tissue</td>
<td>13 (0.5%)</td>
<td>8</td>
<td>5</td>
<td>11</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>4</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Breast</td>
<td>682 (25.5%)</td>
<td>11</td>
<td>671</td>
<td>656</td>
<td>26</td>
<td>136</td>
<td>275</td>
<td>172</td>
<td>49</td>
<td>46</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Vulva</td>
<td>19 (0.7%)</td>
<td>0</td>
<td>19</td>
<td>14</td>
<td>5</td>
<td>2</td>
<td>8</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Vagina</td>
<td>2 (0.1%)</td>
<td>0</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
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</tr>
<tr>
<td>Cervix Uteri</td>
<td>26 (1.0%)</td>
<td>0</td>
<td>26</td>
<td>20</td>
<td>6</td>
<td>0</td>
<td>9</td>
<td>4</td>
<td>7</td>
<td>6</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Corpus Uteri</td>
<td>153 (5.7%)</td>
<td>0</td>
<td>153</td>
<td>137</td>
<td>16</td>
<td>0</td>
<td>98</td>
<td>5</td>
<td>20</td>
<td>16</td>
<td>0</td>
<td>14</td>
</tr>
<tr>
<td>Uterus, NOS</td>
<td>2 (0.1%)</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
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<tr>
<td>Ovary</td>
<td>44 (1.6%)</td>
<td>0</td>
<td>44</td>
<td>34</td>
<td>10</td>
<td>0</td>
<td>7</td>
<td>4</td>
<td>21</td>
<td>4</td>
<td>0</td>
<td>8</td>
</tr>
<tr>
<td>Other Female Genital Organs</td>
<td>7 (0.3%)</td>
<td>0</td>
<td>7</td>
<td>7</td>
<td>0</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>0</td>
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</tr>
<tr>
<td>Penis</td>
<td>1 (0.0%)</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
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<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
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<tr>
<td>Prostate Gland</td>
<td>141 (5.3%)</td>
<td>141</td>
<td>0</td>
<td>136</td>
<td>5</td>
<td>0</td>
<td>21</td>
<td>77</td>
<td>23</td>
<td>17</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Testis</td>
<td>3 (0.1%)</td>
<td>3</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Kidney</td>
<td>67 (2.5%)</td>
<td>38</td>
<td>29</td>
<td>58</td>
<td>9</td>
<td>0</td>
<td>34</td>
<td>4</td>
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<td>8</td>
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<td>10</td>
</tr>
<tr>
<td>Renal Pelvis</td>
<td>2 (0.1%)</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Ureter</td>
<td>4 (0.1%)</td>
<td>4</td>
<td>0</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Bladder</td>
<td>90 (3.4%)</td>
<td>69</td>
<td>21</td>
<td>76</td>
<td>14</td>
<td>46</td>
<td>14</td>
<td>19</td>
<td>4</td>
<td>6</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Other Urinary Organs</td>
<td>1 (0.0%)</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
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<td></td>
</tr>
<tr>
<td>Eye &amp; Adnexa</td>
<td>3 (0.1%)</td>
<td>3</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>0</td>
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<td>0</td>
<td>0</td>
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<td></td>
</tr>
<tr>
<td>Meninges</td>
<td>29 (1.1%)</td>
<td>3</td>
<td>26</td>
<td>24</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>29</td>
<td>0</td>
</tr>
<tr>
<td>Brain</td>
<td>42 (1.6%)</td>
<td>23</td>
<td>19</td>
<td>20</td>
<td>22</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>41</td>
<td>0</td>
</tr>
<tr>
<td>Spinal Cord &amp; Other CNS</td>
<td>5 (0.2%)</td>
<td>2</td>
<td>3</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Thyroid Gland</td>
<td>101 (3.8%)</td>
<td>28</td>
<td>73</td>
<td>100</td>
<td>1</td>
<td>0</td>
<td>51</td>
<td>9</td>
<td>11</td>
<td>4</td>
<td>0</td>
<td>26</td>
</tr>
<tr>
<td>Adrenal Gland</td>
<td>1 (0.0%)</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Other Endocrine Glands</td>
<td>4 (0.1%)</td>
<td>4</td>
<td>0</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>4</td>
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<tr>
<td>Other Sites</td>
<td>2 (0.1%)</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Lymph Nodes</td>
<td>71 (2.7%)</td>
<td>40</td>
<td>31</td>
<td>56</td>
<td>15</td>
<td>0</td>
<td>9</td>
<td>11</td>
<td>26</td>
<td>23</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Unknown Primary Site</td>
<td>51 (1.9%)</td>
<td>21</td>
<td>30</td>
<td>13</td>
<td>38</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>49</td>
<td>0</td>
</tr>
<tr>
<td>Totals</td>
<td>2673</td>
<td>992</td>
<td>1681</td>
<td>2093</td>
<td>580</td>
<td>210</td>
<td>755</td>
<td>463</td>
<td>371</td>
<td>510</td>
<td>215</td>
<td>149</td>
</tr>
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</table>

Data from the KHN Cancer Registry, retrieved 9/17/2018
*The KHN INCP includes the following hospitals: Kettering Medical Center, Grandview Medical Center, Greene Memorial Hospital, Soin Medical Center, and Fort Hamilton Hospital
At Kettering Cancer Care, we believe patients are more than their diagnosis. That’s why our comprehensive care combines world-class treatment with compassionate caregivers and supportive services tailored to each person’s needs.

OUR CARE TEAM
When someone faces a cancer diagnosis, finding the right care can seem overwhelming. Kettering Cancer Care’s dedicated oncology professionals work with the patients and their physician to plan the best care, both in and out of the hospital.

NURSING CARE
The nurses at Kettering Health Network facilities provide oncology inpatient and outpatient care, including medical-surgical care, intravenous (IV) therapy administration, and symptom management, according to Oncology Nursing Society national guidelines. Many of the nurses who care for patients and families who are experiencing a cancer diagnosis are nationally certified in medical-surgical nursing and oncology nursing.

NURSE NAVIGATORS
Certified oncology nurses assist patients through their cancer journey. We offer specialized and individualized care, education, support, resources, and encouragement from diagnosis through treatment and recovery.

SOCIAL SERVICES
Kettering Cancer Care social workers provide support and other services, which can reduce stress for patients and loved ones through the entire cancer journey. Our social workers can assist in finding prescription drug coverage, transportation, and home health care. They can also help patients understand the process of applying for Medicaid and social security disability benefits, link patients to programs that offer financial assistance, and facilitate advanced care planning.

FINANCIAL NAVIGATORS
Our financial navigator services assist with financial matters by evaluating insurance coverage for medications and treatments.

PHARMACY
Our specialty outpatient pharmacies are dedicated to cancer medications and ensure our patients leave with the medications they need to combat their disease.

REHAB THERAPY SERVICES
The goal of rehabilitation is to improve quality of life, increase daily functioning and independence, as well as decrease pain.

Our services include
- Physical and occupational therapy
- Lymphedema therapy
- Speech-language pathology
- Swallowing therapy
- Voice therapy
- Vision therapy
- Balance therapy
- Pelvic floor therapy
- Amputee therapy

For more information on specific locations of services please contact:

Kettering and Sycamore medical centers:
(937) 395-8882

Grandview and Southview medical centers:
(937) 723-3238

Greene Memorial Hospital and Soin Medical Center:
(937) 352-2300

Fort Hamilton Hospital:
(513) 867-2473

NUTRITION SERVICES
Nutrition services are essential to comprehensive cancer care and rehabilitation. Kettering Cancer Care strives to provide safe, effective nutrition care across the cancer continuum, from prevention through treatment and into survivorship. Comprehensive nutritional assessment, counseling, and education can be provided by our team of registered dietitians.

INTEGRATIVE MEDICINE
While patients are undergoing medical treatments to attack the disease itself, they can receive various therapies such as massage, exercise, reflexology, and art that have been shown to help alleviate some of the symptoms related to cancer and cancer treatments.

Art therapy - has been shown to alleviate emotional stress caused by cancer, relaxing the mind and body and boosting the mood of patients.
Healing Beyond Treatment

INTEGRATIVE MEDICINE (CONT.)

Exercise - participating in physical activity can help many people with cancer build strength and endurance, relax, and cope better with stress. Being active may also help relieve pain, fatigue, anxiety, and even depression. Through a partnership with Maple Tree Cancer Alliance, cancer patients have access on site to certified exercise physiologists at Kettering Cancer Center and Soin Medical Center locations.

Heartfulness Meditation - Patients can take a few minutes each day to center themselves and restore a calm state of being. No experience is necessary and all abilities are welcome. Classes are offered in collaboration with the Heartfulness Institute.

PALLIATIVE CARE

Palliative care provides relief of suffering and supports the best possible quality of life for patients and loved ones. Palliative care is offered simultaneously with all other medical therapies, working with the patient’s medical team to support the primary plan of care.

Kettering Health Network is pleased to offer palliative care consultation by physician referral to Innovative Care Solutions (937) 334-4208 and Carebridge (513) 528-8150.

SPIRITUAL CARE

Hospital visits can be a time of stress, anxiety, grief, and fear. Our mission is to extend compassion and demonstrate the healing love of God to our patients and their loved ones.

Kettering Health Network is dedicated to continuing the healing work not only with the best that medicine can provide, but also with compassion and care for spiritual and emotional needs.

The on-call chaplain may be reached by dialing “0” for the hospital operator or by calling Spiritual Service:

- Kettering Medical Center (937) 395-8640
- Sycamore Medical Center (937) 395-8640
- Southview Medical Center (937) 401-6387
- Grandview Medical Center (937) 723-3878
- Soin Medical Center (937) 702-4463
- Greene Memorial Hospital (937) 352-2693
- Fort Hamilton Hospital (513) 867-2133
- Kettering Behavioral Medicine Center (937) 395-8640

MENTAL HEALTH

Kettering Cancer Care understands that cancer patients at all stages of disease may suffer social, emotional, and psychological distress as a result of cancer diagnosis and treatment. Our oncology mental health program was established to meet these needs. An experienced behavioral and mental health provider is on staff and integrated into the care delivery team for all patients requiring support or evaluation.

RENEW BOUTIQUE AND SPA

Renew Boutique and Spa is a one-stop resource for cancer patients and survivors. Specialty products may be covered by insurance, and we are happy to help navigate the process. Personalized services include private fitting rooms, certified durable medical equipment fitters, breast prostheses, bras and post-mastectomy camisoles, mastectomy swimwear, wigs and hair alternatives, quality skincare products and certified organic make-up, wellness and relaxation items, fashion accessories, stationery, journals and inspirational books, and gift certificates.

BOULEVARD BISTRO CAFÉ OF HOPE

Boulevard Bistro is located inside Kettering Cancer Center and features food created for the needs and tastes of cancer patients. The menu centers on organic, high-protein, and anti-oxidant-rich foods. Food items include an array of salads, sandwiches, flatbread pizzas, specialty coffee drinks, and smoothie bowls.
Kettering Cancer Care is equipped with the technology and expertise to care for virtually any type of cancer. Our highly skilled cancer care team will work with the patient to create a plan customized for their needs.

CANCER PREVENTION AND AWARENESS
Kettering Health Network is pleased to offer a variety of free educational cancer presentations and cancer awareness programs. For more information, please call Kettering Health Network Community Health Outreach at (937) 558-3988 or 1-800-888-8362.

SURGERY
Surgery can be a treatment option to remove tumors based on the size and type of cancer. Our team will assess and discuss the type of surgery that is recommended. Advanced technology, like the da Vinci robotic surgery system, may be used, allowing for a less invasive surgery and faster recovery time.

RADIATION THERAPY
Radiation therapy uses high-energy rays to kill cancer cells. With advanced radiation technology such as Versa HD and Gamma Knife Perfexion, our radiation oncologists have the capability to provide precise treatment for a wide range of cancers. Our radiation oncologists will develop a customized plan and recommend which type of radiation therapy is right.

Radiation therapies include:
- Brachytherapy
- External beam radiation therapy (EBRT)
- Image-guided radiation therapy (IGRT)
- Intensity-modulated radiation therapy (IMRT)
- Respiratory gating
- Stereotactic radiosurgery (SRS)
- Stereotactic radiotherapy (SRT)
- Volumetric-modulated arc therapy (VMAT)

CHEMOTHERAPY
Chemotherapy is a group of medicines used to treat cancer and to kill fast-growing cells. Chemotherapy may be used after or instead of surgery to reduce the risk that the cancer will return and to treat cancer that may have already spread (metastasized) to other parts of the body. Our outpatient oncology infusion centers include over 60 private and semi-private infusion bays.

BIOOTHERAPY AND IMMUNOTHERAPY
Biotherapy and immunotherapy work with the immune system to identify and attack specific cancer cells. They also help to control side effects from other cancer treatments such as neutropenia (low white blood cells) that can lead to infection.

TARGETED DRUG THERAPY
Targeted therapy blocks cell signals that affect the growth and function of cancer cells. Patients may need to take targeted therapy drugs for a long time to continue to block these cell signals. Targeted therapy may be used alone or with other types of cancer treatment.

HORMONE THERAPY
Hormone therapy adds, blocks, or removes hormones. If a type of cancer uses hormones to grow, the patient may be given hormone therapy medication to slow or stop the growth.

CLINICAL TRIALS
Patients at Kettering Health Network facilities can participate in one of over 100 research studies, for nearly every type of cancer, ranging from Phase II to Phase IV. An experienced research nurse coordinator will assist the physician to determine if a cancer clinical trial might be right for the patient and will follow them from enrollment through completion.

Kettering Health Network is pleased to offer this cutting-edge research to patients.
CANCER COMPANIONS: SEEING GOD IN YOUR CANCER JOURNEY
Cancer Companions is a Christian support group for those with cancer and their loved ones. The nine-week program utilizes devotionals, videos, group discussion, and prayer led by trained volunteers to support those on the cancer journey.

THE CHEMO CLASS
The Chemo Class is for people who are receiving or will soon begin chemotherapy. The class explores common side effects and symptoms as well as caring for yourself during active treatment.

CINDY WILDE VOGEL MEMORIAL LIBRARY
The Cindy Wilde Vogel Memorial Library is located at Kettering Breast Evaluation Center, 580 Lincoln Park, Suite 200. The library offers information on women’s health.

LIFE AFTER TREATMENT CLASS
This class is for people who are finishing active treatment and moving to follow-up care or maintenance therapy who may be asking, “what’s next?”

LOOK GOOD, FEEL BETTER
This free American Cancer Society program is designed specifically for women experiencing side effects of cancer treatments. The program was developed by the Cosmetic, Toiletry, and Fragrance Association; the National Cosmetology Association; and the American Cancer Society to provide information on ways to enhance appearance and take care of your skin, hair, and fingernails during treatment. The program includes instruction by licensed cosmetologists and a demonstration kit. Programs are offered at Dayton area locations every month throughout the year.

MAPLE TREE CANCER ALLIANCE
Kettering Cancer Care is pleased to partner with the Maple Tree Cancer Alliance to provide yoga, exercise and wellness classes, and individual instruction, just for cancer patients and survivors. Services are available at Greene Memorial Hospital, Soin Medical Center, and Kettering Cancer Center.

MOVING FORWARD HAND-IN-HAND
A support service in which breast cancer survivors offer support and encouragement to individuals newly diagnosed with breast cancer.

NAVIGATING THE BREAST CANCER JOURNEY
A free class for women and men with breast cancer and their support persons. Provides a working knowledge of the language and treatment options so women can be active participants in their own care and in physical and emotional healing.

POWERFUL TOOLS FOR CAREGIVERS
An educational program designed to help family caregivers take care of themselves while caring for a relative or friend. You will benefit from this class whether you are helping a parent, spouse, friend, someone who lives at home, in a nursing home, or across the country.

SAY GOODBYE TO TOBACCO
Public Health of Dayton & Montgomery County is partnering with Kettering Health Network to offer free Clinical Best Practice Smoking Cessation.

SOUTHWEST OHIO BRAIN TUMOR SUPPORT GROUP
Provides encouragement and support to brain tumor patients (cancer and non-cancer), their families, and friends.

WOMEN’S WELLNESS FUND
An annual Walk for Women’s Wellness is held the first Sunday in May to raise funds for mammograms, breast prostheses, and other assistance for women experiencing cancer who have no insurance.
Kettering Cancer Care Expansion Project at Soin Medical Center

Kettering Cancer Care has expanded cancer service offerings to better serve the residents in the Greene County area.

Kettering Cancer Care at Soin Medical Center celebrated the expansion of its medical oncology clinic. This completion of the infusion center addition fulfilled phase one of the Kettering Cancer Care expansion at Soin Medical Center.

Michael Caccamo, DO, and chief medical officer at Soin Medical Center and Greene Memorial Hospital, says, “The infusion center at Soin has continually exceeded volumes since opening in 2014. The new space includes 20 infusion bays, 15 exam rooms, support for four oncologists, and a gym area for exercise and fitness programs in collaboration with Maple Tree Cancer Alliance.”

With the opening of the infusion center, Soin Medical Center has added two more medical oncologists, Glen Papaioannou, MD, and Zion Oshikanlu, MD, who have joined Manisha Nanda, DO.

Phase two of the Kettering Cancer Care expansion included the radiation therapy center. The radiation therapy center features a state-of-the-art linear accelerator, CT scan and simulation lab, dosimetry lab, and exam rooms.

Cancer care close to home
Cancer patients find it stressful and draining to travel any distance for infusion and radiation services, and services close to home help them better handle their cancer journey. The radiation oncology suite at Soin Medical Center offers a range of radiation therapy options to provide specific treatment needed for each patient. With the most advanced radiation technology, radiation oncologists have the capability to provide precise and accurate treatment for a wide range of cancers. Radiation oncologist, Matthew Knecht, MD, joined Soin Medical Center with the opening of the radiation oncology suite. Because the radiation oncology suite is on site, patients will not have to face delays in their treatment, or travel to a different facility to receive the care they need.

Kettering Cancer Care services at Soin also include the Kettering Breast Evaluation Center and a specialty outpatient pharmacy dedicated to cancer medications. Having a full-service breast evaluation center on site at Soin’s Dona Sheley Women’s Health Center with technology like 3D mammography, Breast Specific Gamma Imaging (BSGI), and ultrasound guided biopsies offers women access to the highest level of preventive care and diagnostics. The convenient location also enables rapid referral to physicians in the same building.
Infusion and Radiation Therapy Services at Soin Medical Center

The infusion center expansion doubles the number of infusion bays and exam rooms.

- 20 infusion bays
- 15 exam rooms
- support for four oncologists
- dedicated pharmacy
- gym area for exercise and fitness programs in collaboration with Maple Tree Cancer Alliance

Kettering Cancer Care has expanded cancer service offering to better serve the residents in the Greene County area.

- state-of-the-art linear accelerator
- CT scan and simulation lab
- dosimetry lab
- four exam rooms
Cancer Liaison Physician & Surgeon
Rebecca Tuttle, MD
Minia Hellan, MD

Medical Oncologist
Priya Jain, MD
Alejandro Calvo, MD

Cancer Conference Coordinator
Martin Jacobs, MD
Arash Kardan, MD

Cancer Program Administrator
Elizabeth Koelker, MHA
Tricia Tobe, RN, OCN®

Cancer Registry Quality Coordinator
Emily Franks, MD
Shelly Martin-Kelly, CTR

Clinical Research Representative
Mary Connolly, PhD
Judy Bair, BSN, RN, OCN®, CBCN®

Community Outreach Coordinator
Krista Bensman, BSN, RN, OCN®
Karen Stormer, MS, RN, OCN®

Psychosocial Services Coordinator & Social Worker
DeAnn Gallatin, MS, LSW
Martha Hoying, BS, LSW, ACM

Quality Improvement Coordinator & Quality Management Representative
Jeffrey Weinstein, MD
Richard Gregg, MD

Diagnostic Radiologist
Virginia Molleran, MD
Kyle Tharp, MD

Pathologist
Angela Schultz, MD
Geoffrey Hahm, MD

Palliative Care Professional
Jacqueline Matthews, MS, RN, AOCN®, ACHPN, CNS-BC
Theresa Kern, MS, RN, ACCNS, ACHPN

Radiation Oncologist
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