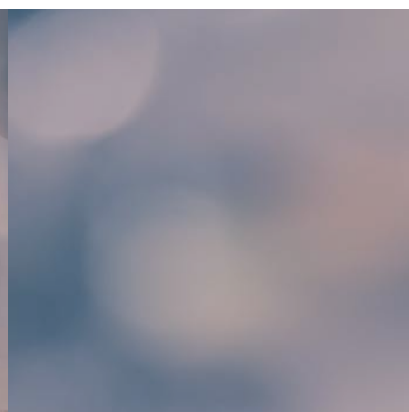
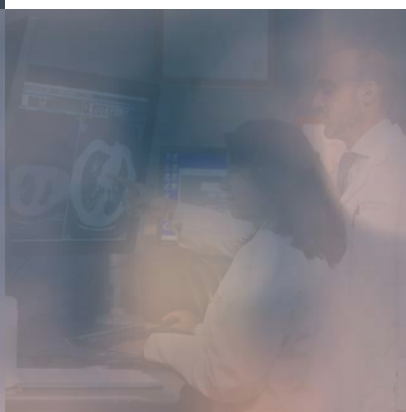


DuPage Medical Group
| WE CARE FOR YOU

Honoring Our Past Defining Our Future

Integrated Oncology Program | Annual Report with Statistical Data from 2017





Five years

DuPage Medical Group Integrated Oncology Program

In 2018, DuPage Medical Group (DMG) proudly celebrated the five year anniversary of our Integrated Oncology Program. This is a significant milestone – both for our program and for our patients – and we have been honored to help our patients navigate through their diagnosis and treatment into survivorship. Since its inception in 2013, our Integrated Oncology Program has grown from 1,300 cases per year to nearly 3,000 cases in 2018 and has provided comprehensive cancer care to more than 12,000 patients. As the program has grown and evolved, our focus has remained centered on providing patients with access to high-quality, personalized care.

DMG was formed in 1999, when three healthcare groups serving the western suburbs of Chicago joined together with the desire to provide innovative, comprehensive healthcare led by physicians, focused on the needs of each individual patient.

Since then, we have grown into the largest multi-specialty physician group in Illinois, providing access to care in communities across the west, northwest and southwest suburbs. Our longstanding commitment to our founder's mission has served as our north star and is at the forefront of everything we do – and our Integrated Oncology Program is no exception.

Why choose our Integrated Oncology Program?

We understand that receiving a cancer diagnosis and undergoing treatment can be overwhelming. That's why we strive to provide a seamless, patient-centered experience and offer a wide-range of support services to care for the physical and emotional needs of our patients, families and caregivers.

Our Integrated Oncology Program is comprised of board-certified physicians who specialize in medical and radiation oncology. They collaborate with our team of specialists including dermatologists, endocrinologists, gastroenterologists, gynecologists, otolaryngologists, plastic surgeons, pulmonologists, radiologists, surgeons and urologists to provide a comprehensive range of oncology services to treat all cancer types.

Early detection and prompt care are critical, which is why we continue to invest in leading-edge technology to offer the most accurate diagnosis and treatment options available. Through our partnerships, we are able to provide access to clinical trials and emerging treatments, and adapt to the ever-changing needs of our patients.

Our team includes several fellowship-trained physicians, skilled in advanced procedures, including minimally-invasive options such as robotic-assisted surgery. Access to cancer-related services including infusion, on-site lab and diagnostic imaging are available throughout the Chicagoland area.

Throughout our patients' cancer journeys, we help them navigate the entire treatment process, offering support and resources from screenings and diagnosis to treatment into recovery.



“The care provider is
not sitting
on the sidelines”

“We are mindful of the term “navigation” and what it means to our providers and patients. Navigation is an important term in cancer care because it indicates that the care provider is not sitting on the sidelines watching while a patient moves through the system. Instead, staff members are working alongside the patients as teammates and confidants, helping to anticipate the next move in the complex playbook of cancer care.”

Brian Moran, MD, Cancer Committee Chair



Putting patient's needs first

“From the beginning, the overreaching vision was always to do the right thing – the physicians putting the patient’s needs first and not letting egos get in the way of providing the best patient care possible. It’s a philosophy that has served us well and will carry the organization through many years to come.”

Robert McCray, MD
Founder of Glen Ellyn Clinic

2018 A Year in Review

“When we set out to create an Integrated Oncology Program for our patients and the communities we serve, our goal was to improve survival rates for our patient population. We also wanted to create a program that offers patients the most advanced clinical treatments, affords physicians access to the latest technology and treatment options, and provides patients and their families support in the form of education, counseling and other needed resources.”

Mike Kasper, CEO DuPage Medical Group

NOTEWORTHY ACCOMPLISHMENTS

In 2018, we continued to build upon our Integrated Oncology Program to provide the best care possible and support the communities we serve by:

Expanded 3D Mammography Services in Joliet

Continuing to provide increased access to advanced screenings in the south suburbs with the addition of a second 3D Mammography scanner and breast MRI screening capabilities in Joliet.

Introduced Interventional Radiology Services in Tinley Park

Offering additional interventional radiology services in Tinley Park including CT, c-arm and ultrasound-guided procedures, which provide improved image quality and reduces the radiation dose for patients.

Provided Radiology Services in Hoffman Estates

Expanding our radiology services into the northwest suburbs, offering CT, MRI, ultrasound and X-ray services in Hoffman Estates.

Grew our Integrated Oncology Team

Growing our team of skilled providers who support the Integrated Oncology Program with the addition of board-certified physicians, physician assistants and nurse practitioners, dedicated nurse navigators, a clinical social worker and genetic counselor.

Advanced our Robotics Program

Adding to our robotic surgery program, which now includes more than 35 highly-skilled general surgeons, obstetricians and gynecologists, otolaryngologists and urologists, who specialize in numerous robotic procedures, including complex cancer-related surgeries.

Launched Multi-Disciplinary Appointments

Launching multi-disciplinary appointments in Lisle, giving patients the ability to meet with multiple members of their care team including their radiation oncologist, specialist and nurse navigator to develop a comprehensive care plan during a single visit.

Enhanced Online Scheduling

Enhancing online scheduling capabilities to include nearly all our Integrated Oncology Program providers, specialists and radiology services through MyChart, including “no order” screening mammograms and low-dose CT scans.

Offered Community Education and Screening Programs

Offering several community cancer prevention education and screenings throughout the Chicagoland suburbs, including skin cancer spot checks and nutrition workshops for oncology patients.

Provided Smoking Cessation Programs

Providing patients, staff and community members with education and support to quit smoking through the Courage to Quit® cessation program developed by the Respiratory Health Association. The six-week program was offered in the spring and fall at our Lisle and Tinley Park locations.

Provided Grants to Community Partners

Utilizing the DMG Charitable Fund to support our community partners with grants and volunteers, totaling more than \$150,000 in 2018.

Our history

Integrated Oncology Program
2013 - 2018

2013

Our Integrated Oncology Program is formalized and a cancer registry is established

Our cancer registry serves as our mechanism to compile the data and statistical information used to measure our performance, develop quality initiatives to improve treatment outcomes and track our progress against national standards.

A formal cancer committee is developed

The cancer committee at DMG is comprised of carefully selected clinical and non-clinical healthcare professionals that represent each of the specialty groups within our oncology program. The purpose of the committee is to identify opportunities to improve patient care and clinical outcomes. Providing high quality, compassionate care that meets the American College of Surgeons Commission on Cancer standards remains the driving force guiding every decision the DMG cancer committee makes.

Multi-specialty cancer conferences are established

Cancer conferences enable physicians across all specialties to collaborate with one another to review individual cancer cases, discuss all available treatment options and develop a personalized treatment plan that is based on the type of cancer as well each patient's needs and overall health.

2014

herDMG exams are introduced

herDMG exams address the challenges faced by our busy female patients by offering all-inclusive, age-specific preventive services and education during a single visit.

Radiation therapy services are enhanced with addition of a linear accelerator

The linear accelerator allows radiation therapy treatments to be delivered with unparalleled ease, precision and speed.

2015

Integrated Oncology Program receives a three-year, national accreditation

Our oncology program is awarded a three-year, national accreditation from the American College of Surgeons Commission on Cancer (CoC), in the category of Free Standing Cancer Center Program, the highest level accreditation possible for a new cancer program.

Radiology locations are designated as Breast Imaging Centers of Excellence

Our radiology locations in Lisle, Hinsdale and Naperville are designated as Breast Imaging Centers of Excellence by the American College of Radiology. These locations are also certified 3D Platinum Programs by Genius – a distinction only awarded to an elite group of healthcare facilities offering the latest, state-of-the-art digital technology for breast cancer detection.

2016

Integrated Oncology Program expands to south suburbs

To continue to provide increased access to care, oncology services are offered in the south suburbs at our Joliet and Tinley Park locations, and our team of medical oncology providers doubled.

Online scheduling offered for more convenient access to care

Online scheduling is available for nearly all our physicians and preventive services -- including screening mammograms -- making access to care easier than ever before.

2017

Robotic Surgery Program is launched

Our robotic surgery program is led by our team of more than 25 highly-skilled general surgeons and specialists including gynecologists, otolaryngologists and urologists trained in complex, cancer-related robotic-assisted surgeries.

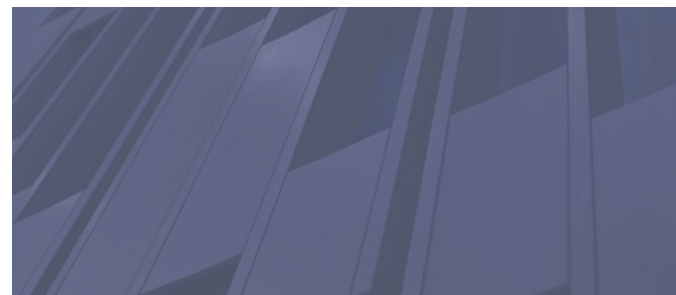
Additional Diagnostic Imaging Services Offered in the South Suburbs

More robust radiology services are offered in the south suburbs, most notably with the expansion of 3D Mammography services provided at our Tinley Park location

2018

Re-accreditation

In 2018, our Integrated Oncology Program underwent a re-accreditation process and was awarded a three-year, nationally-recognized accreditation based on our continued commitment to delivering high quality, accessible and compassionate care to our patients. 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.



Cancer Conferences: Your Second Opinion

Understand Your Disease, Feel Confident About Your Care

Following a cancer diagnosis, seeking a second opinion is a common, often helpful way to learn more about the treatment options available, and to help patients feel confident about their treatment and care team.

Our cancer program takes a physician-led, team-based approach when developing each treatment plan. To promote seamless collaboration of care among our physicians and medical staff, we hold regular cancer conferences to present cases to a multi-specialty group to discuss new or emerging treatments and protocols and participate in comprehensive treatment planning.

Cancer conferences include all cancer types at DMG, including breast, digestive system, genitourinary system, hematologic, head and neck, lung and chest, skin and soft tissue malignancies.

Cancer conferences are an essential piece of our cancer program, providing patients with the opportunity to have their case undergo an extensive review to ensure they receive a treatment plan best suited to their individual needs. Patients are notified if their case is selected for review at a conference. Following the conference, the managing physician reviews the recommended treatment plan with the patient.

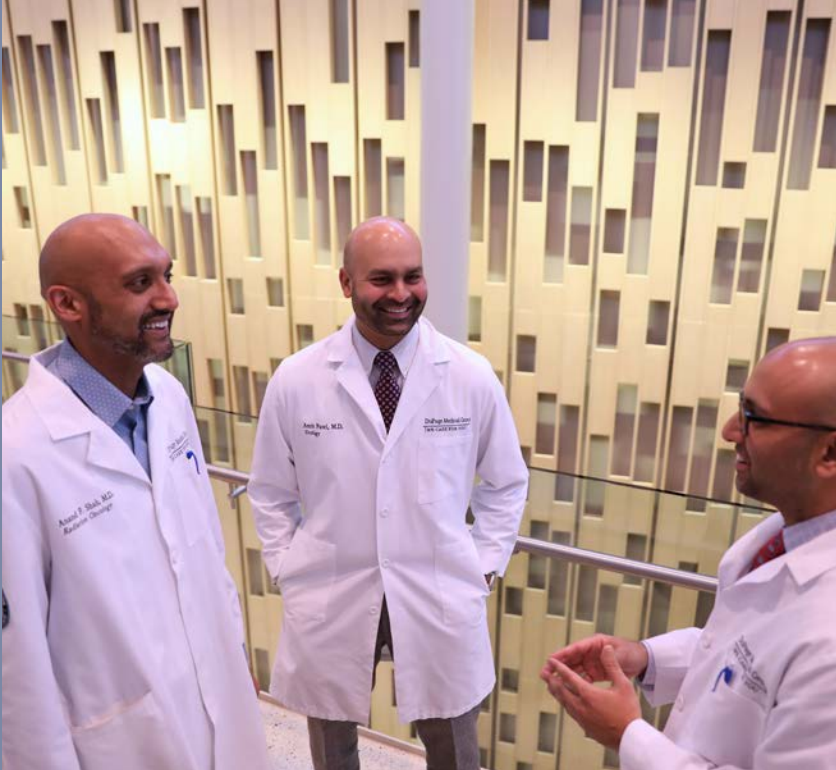
Since the program launched in 2013, weekly specialty cancer conferences have been held at our Lisle Medical Office Building, and in October 2017, a monthly general cancer conference was launched for providers in the south service area at our Tinley Park location. In 2017, more than 22.5 percent of our cancer cases were presented for multi-disciplinary review, exceeding the CoC requirement of 15 percent.



2017 Specialty & General Cancer Conferences

Percentages by Cancer Type

BREAST	22%
UROLOGIC	22%
LUNG	20%
DIGESTIVE TRACT	15%
HEAD & NECK/THYROID	9%
HEMATOLOGIC	6%
SKIN & SOFT TISSUE	6%



“Providing a collaborative forum for patient management”

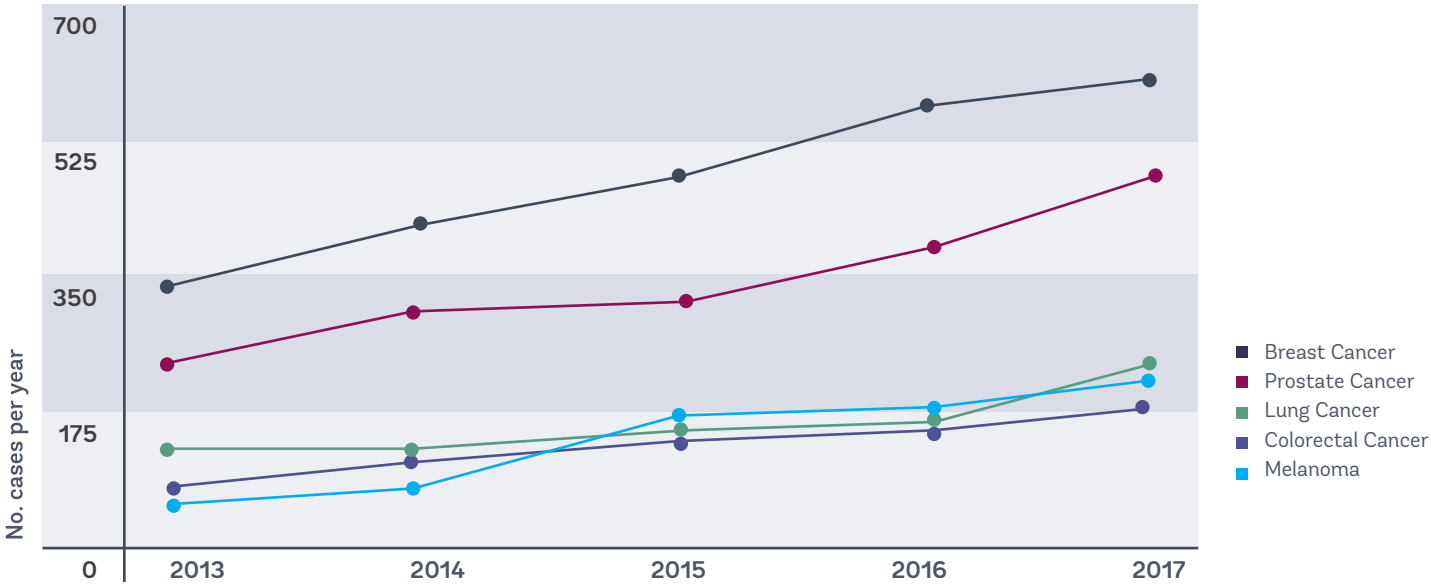
“Weekly cancer conferences continue to benefit our program and patients by providing a collaborative forum for patient management discussions and gaining consensus among many specialists involved in the treatment planning process. We are grateful for the continued support and commitment of the medical professionals who attend these conferences and provide their thoughtful commentary on each case.”

Janet Chin, MD, Cancer Liaison Physician

DMG’s Integrated Oncology Program Five Year Trend The Five Most Frequently Diagnosed Cancer’s

Breast		Prostate		Lung		Colorectal		Melanoma	
2013	339 cases	2013	248 cases	2013	121 cases	2013	76 cases	2013	53 cases
2014	422 cases	2014	291 cases	2014	124 cases	2014	111 cases	2014	69 cases
2015	473 cases	2015	306 cases	2015	133 cases	2015	126 cases	2015	176 cases
2016	557 cases	2016	377 cases	2016	178 cases	2016	169 cases	2016	199 cases
2017	602 cases	2017	454 cases	2017	244 cases	2017	209 cases	2017	231 cases

DMG 5Yr. Cancer Incidence Trend | 5 - Top Cancer Site



“The staff has been extremely kind and very organized”

2017 New Cancer’s Diagnosed by Anatomical Site

Breast	602 (22.6%)
Prostate	454 (17%)
Digestive System	355 (13%)*
*62 Upper GI cases, 209 colorectal cases and 73 pancreatic/ hepatobiliary tract cases	
Lung & Bronchus	244 (9.2%)
Skin – Malignant Melanoma	231 (8.7%)
Urinary Bladder	125 (4.8%)
Thyroid	111 (4.2%)
Leukemia	98 (3.8%)
Lymphoma HD & NHL	90 (3.3%)
Kidney, Renal, Pelvis & Ureter	89 (3.3%)
Head & Neck	73 (2.7%)
Gynecologic	50 (1.9%)
Myeloma	47 (1.8%)
All other types	95 (3.7%)

Total New Cases: 2,664

Medical Oncology & Infusion Services

Our board-certified oncologists and hematologists perform a wide range of services – including the management of chronic and acute non-malignant blood disorders, leukemia and lymphoma and solid tumor treatments – in a compassionate and comfortable environment. Our skilled physicians stay up-to-date on clinical advancements and changes in National Comprehensive Cancer Network (NCCN) guidelines. Hematology and oncology appointments are offered at eight locations throughout the west and south suburbs.

Infusion Center services are an integral part of our cancer program and are available at six convenient locations. All our infusion centers are staffed with certified chemotherapy and biotherapy providers, specially trained to administer chemo-toxic drugs and monitor patients while in treatment. Patients receive a customized infusion treatment plan based on the type of cancer and their specific needs. Our clinical pharmacistst provides oversight of the dosing and mixing of all medications being infuse, to ensure patients are receiving their treatment safely and accurately. Each infusion center offers on-site lab services for added convenience. Our infusion pharmacy and nursing staff utilize a closed-system transfer device (CSTD) to prepare and administer chemotherapy treatments. These devices block environmental contaminants from entering the system and the prevent chemotherapy drugs and their vapor from being emitted outside the system. This provides enhanced safety for the staff delivering chemotherapy treatments.

Introduced in 2016, our oncology team utilizes Advanced Practice Providers (APP), including Nurse Practitioners (NP) and Physician Assistants (PA) that work closely with physicians to develop individualized plans for both active cancer and post- treatment care. Our APP team also conducts inpatient rounds, performs follow-up visits and assists with managing symptoms and survivorship planning.

We also utilize a dedicated team of nurse navigators to provide additional support and a seamless, coordinated patient experience. Our nurse navigators serve as a single-point of contact for patients and caregivers, to be a partner and vital resource throughout the treatment process. Nurse navigators help ensure patients understand their diagnosis and treatment options, coordinate appointments with other members of the care team, provide education and resources and help find solutions to any barriers to treatment or concerns that may arise. Our nurse navigators have advanced training and are certified through the Oncology Nursing Certification Corporation (ONCC), allowing us to deliver the highest quality care to our patients.

2017 Cancers Diagnosed by Gender

Male		Female	
Prostate	454 cases (33%)	Breast	598 cases (46%)
Melanoma of the Skin	127 cases (9%)	Lung & Bronchus	129 cases (10%)
Colon & Rectum	121 cases (9%)	Melanoma of the Skin	104 cases (8%)
Lung & Bronchus	115 cases (8%)	Colon & Rectum	88 cases (7%)
Urinary Bladder	104 cases (8%)	Thyroid	58 cases (4%)
Kidney & Renal Pelvis	57 cases (4%)	Female Reproductive System	39 cases (3%)
Non-Hodgkin Lymphoma	57 cases (4%)	Kidney & Renal Pelvis	32 cases (2%)
Oral Cavity & Pharynx	44 cases (3%)	Leukemia	30 cases (2%)
Leukemia	41 cases (3%)	Non-Hodgkin Lymphoma	23 cases (2%)
Pancreas	24 cases (2%)		
All other sites	222 cases (16%)	All other sites	202 cases (16%)

“The clinic itself is so beautifully done and professional; the atmosphere is welcoming and not at all cold or sterile. The staff has been extremely kind and very organized, which has made my treatments not nearly as tough as I had been anticipating. I have also found the support and comradery that forms between patients, even just by talking together in the waiting room has been comforting. I will be happy when all of this is behind me, but have been pleasantly surprised at how much easier the entire process and my radiation treatments have been.”

Sabrina, Radiation Oncology Patient

Hematologic Malignancies

At DMG, we utilize a team-based approach to provide care for adult patients diagnosed with blood-related malignancies including leukemias, myelodysplastic syndromes, lymphomas and myeloma.

Our team is led by board-certified physicians who specialize in hematology and medical oncology and work closely with the entire care team – including radiation oncologists, pathologists, radiologists, advanced practice providers and nurse navigators – to develop the best treatment plan for each patient.

To detect blood-related cancers, diagnostic services including blood tests, bone marrow aspiration and biopsy, lumbar puncture to collect spinal fluid, lymph node biopsy or lymph node removal are often used. Once a diagnosis is made, the stage of cancer can be determined using chest X-ray, CT, PET/CT or MRI.

In addition to the information provided by these diagnostic tests, our team takes into account many factors when developing each treatment plan, including the stage of cancer, the patient's overall health and ability to withstand therapy.

Treatment options may include chemotherapy, radiation therapy, biological therapy, immunotherapy or a combination of therapies. Our program provides patients with access to one of the area's best blood and marrow transplant programs.

“Provide our patients & the communities we serve with the latest in technology & treatment options”



“In our group's history we have faced a lot of change within healthcare. The one thing that has remained constant is our desire, as physicians, to provide our patients and the communities we serve with the latest in technology and treatment options.”

Paul Merrick, MD, President, DuPage Medical Group

Pharmacy Services

We offer specialty pharmacies in the west and south suburbs to provide patients with a convenient way to obtain medications, including specialty medications, which may be needed as part of their cancer treatment.

Our pharmacies are led by clinical pharmacists (PharmD) who specialize in providing pharmacy services to oncology patients. They oversee treatment plans (per NCCN Guidelines) for accuracy and completeness and ensure that all aspects of pharmaceutical care provided at DMG are done in a safe and timely manner. Our pharmacists determine appropriate chemotherapy dosing for each patient based on their body surface area, weight and renal function, while considering any possible drug interactions and contraindications to therapy.

They work alongside physicians and advanced care providers to recommend adjustments to drug therapy based on clinical status and treatment outcomes. Our oncology-trained pharmacists also conduct education for clinical staff when a new drug is implemented or if there are changes with drug indications or protocols.

In 2017, a clinical quality program was implemented to standardize the evaluation and revisions of antiemetic schedules. Through the use of standards set by the Multinational Association of Supportive Care in Cancer (MASCC) and the evaluation of the effectiveness of our antiemetic regimens using the MASCC screening tool, revised schedules were applied to all our chemotherapy patients' profiles.

These tools enable the team to make adjustments tailored to each individual patient, improving patient care and better overall quality of life for patients during treatment. We also offer retail pharmacies in Blue Island, Lisle and Tinley Park. These pharmacies offer our patients a convenient way to obtain their medications, including delivering medications directly to a DMG office for pick-up, or for medications that will be administered during an appointment.

Our pharmacy staff works closely with our financial navigation team and the national Patient Assistance Network to ensure our patients' out-of-pocket expenses are as low as possible, and help to identify financial assistance and rebate programs that may be available. Our pharmacy staff provides patients with medication counseling and assists with prior authorizations, appeal letters and copay programs that may be needed for specialty medications.

Our clinical pharmacists and certified pharmacy technicians are able to educate patients and staff, increasing the safety and efficacy of prescribed chemotherapies. Our experienced clinical pharmacists, and the active role they play in a patient's treatment, allow us to deliver the highest level of integrated, patient-centered care.

215

The Pharmacy of
DuPage Medical Group

Radiation Oncology

Formalized in 2013, our radiation oncology team provides patients with exceptional care and advanced treatment options. We utilize state-of-the-art stereotactic radiosurgery to provide targeted treatments for both intra-cranial and extra-cranial lesions, as well as a variety of techniques to treat all other body sites. This leading-edge technology allows us to provide highly-effective treatment with unparalleled ease, precision, accuracy and speed. We also provide 3D conformal and intensity modulated radiation therapy (IMRT) and image guided radiation therapy (IGRT) to treat a variety of cancers including those of the brain, breast, extremities, gastrointestinal, genitourinary, head, lung, and neck. Our radiation oncology team offers treatment for non-cancerous conditions such as keloid growths and heterotopic bone formations.



“It is a privilege to help them fight their disease.”

“As the son of two internists, I fell in love with the field of medicine because the special relationships I saw between my parents and their patients. As I look back on the past five years here, the memories that stick out are the specific patients, and the battles we have fought and won together. It is a privilege to help them fight their disease.”

Anand Shah, MD, Radiation Oncology Physician

High-Dose Rate Brachytherapy Radiation

We proudly offer high-dose rate (HDR) brachytherapy radiation therapy that accurately administers high doses of radiation to localized, impacted areas of the body, using a small radioactive source. This service is used to treat cancers in many areas of the body, including gynecological cancers. To treat skin cancers, the radiation is applied topically to a specific area, allowing the radiation to target only the impacted area and reduce the effects on the surrounding skin and tissue. For both gynecological and breast cancers, HDR brachytherapy is completed using specialized applicators that allow the radiation to be delivered internally, targeting only the area of disease.

In some cases, a specialized HDR brachytherapy technique known as accelerated partial breast irradiation (APBI) may be recommended. APBI treatments require a team-based approach and are performed by specialists from both surgery and radiation oncology. Our physicians work closely with one another to deliver radiation treatments locally to the lumpectomy bed. This technique allows patients to receive an accelerated rate of radiation treatments and is administered over the course of a five-day period, compared to the standard three to five-week course of radiation, while sparing healthy breast tissue.

HDR brachytherapy can be used as an alternative to external beam radiation therapy, or be given as a supplemental treatment for areas of high risk. Radiation therapy is a common treatment method recommended for many breast cancer patients. Our team of radiation oncologists, physicists, radiation therapists and nurses work alongside one another, and utilize each individual's expertise to develop a thorough and comprehensive treatment plan for each patient. We are committed to providing patients with safe and effective radiation therapy services using the most advanced technology and treatment techniques to provide personalized, compassionate care for patients throughout our integrated oncology program.

In 2018, one of our radiation oncology physicians was selected for the prestigious American Brachytherapy Society Fellowship. This significant distinction is awarded to members of ABS with a minimum of 15 years of active involvement and at least a decade of extensive service to the Society. Nominees are evaluated based on their clinical excellence, accomplishments in patient care, demonstration of service (including educational training and mentorship) and contributions that have advanced the field of brachytherapy.

External Beam Radiation Therapy

At DMG, intra-cranial radiation therapy is performed using an advanced, frameless approach, which provides patients with a more comfortable experience without sacrificing accuracy. While highly complex, this technique is conducted in a less restrictive way, minimizing fears of claustrophobia. The procedure is done under the guidance of Vision RT, an optical surface monitoring system (OSMS), using infrared lights to monitor thousands of points across the body to help precisely position the body and monitor the patient's movement throughout the treatment. The OSMS software automatically interrupts treatment if the patient moves outside of the carefully calculated parameters.

This safety measure ensures that the radiation is only delivered to the exact location of the tumor. OSMS may be utilized as an advanced treatment option for patients with breast cancers located on their left side.

Our team also utilizes a technique known as Deep Inspiration Breath-Hold (DIBH). Before beginning the treatment, the patient is instructed to take a deep breath, which creates a larger space between the patient's breast and the heart. Increasing the distance between the heart and breast helps preserve a greater amount of healthy heart tissue. When an OSMS is used, we can provide increased accuracy and precise delivery of treatment. Once the patient is aligned, the necessary amount of air is present in their lungs.

Radiation Tattoo Removal Program

The New Beginnings: Radiation Mark Removal Program established by the American Society for Laser Medicine and Surgery, Inc. (ASLMS) is a national campaign that is comprised of board-certified ASLMS members who have volunteered to remove radiation marks for cancer survivors free of charge. We are proud to participate in the program and our dermatologist is one of approximately only 120 other board-certified ASLMS members across the United States to offer this complimentary service.



Radiology

Patient education, preventive screenings and early detection all play an important role in increasing the overall success of cancer treatment and survival rates. Advanced imaging and diagnostic testing can quickly and accurately identify cancer and aid in the development of each patient's treatment plan.

We offer patients convenient access to state-of-the-art diagnostic imaging. Several of our locations offer appointments seven days a week – including weekend and evening hours – throughout the Chicagoland suburbs. All our flagship radiology sites are accredited through the American College of Radiology (ACR), and utilize low-dose protocols that minimize radiation exposure to the patient while maintaining the quality of the images.

Diagnostic testing provided at DMG is led by our team of board-certified radiologists – many of whom have additional subspecialized training, including our dedicated breast services team – allowing them to provide a higher level of clinical accuracy and expertise to better guide patient care. In 2018, we added four additional radiologists to our team of experts.

MRI

MRI services are offered at nine DMG locations, most recently added in Hoffman Estates. We offer both 1.5T and 3.0T imaging capabilities and utilize advanced MRI techniques including:

Cholangiography, used to view bile ducts and identify any abnormalities and diagnose bile duct cancer.

MR spectroscopy, which scans the brain or spine and measures the chemical makeup of a suspected tumor.

Whole-body diffusion-weighted MRI, the gold standard for assessing patients with multiple myeloma.

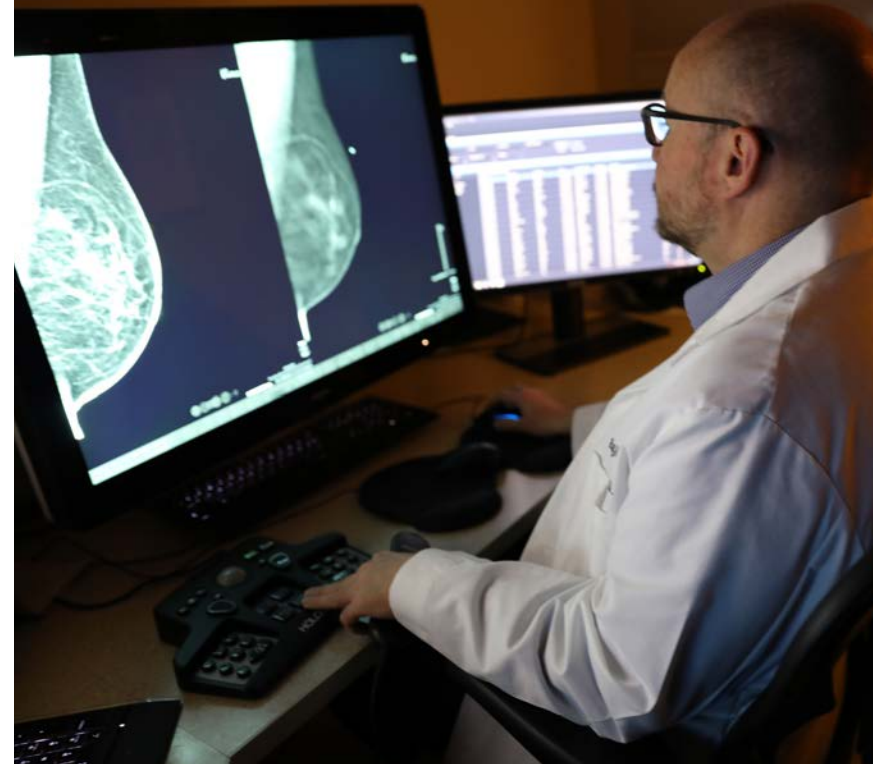
Multi-parametric MRI prostate exams, an effective way to view the prostate gland and aid in prostate cancer detection, and can measure and identify the size and location of a tumor and help to determine if the tumor has spread outside of the prostate gland.

In addition to traditional MRI services, we offer “wide bore” MRI scanners at our Bloomingdale, Glen Ellyn, Hinsdale, Lisle and Naperville locations. These scanners provide increased patient comfort during testing and often can be used for patients who may not have been a candidate for traditional MRI scans.

PET/CT

Positron emission tomography (PET) scanners use small amounts of radioactive materials called radiotracers, a special camera and computer to help the radiologist evaluate a patient's organ and tissue function by providing full body imaging for most oncological indications. Today, most PET scans are performed on instruments that combine PET and CT scanners. Combined PET/CT scanners are able to provide more accurate diagnoses than the two tests performed separately. The combined scans produce images that allow the radiologist to pinpoint the anatomic location of abnormal metabolic activity within the body. PET/CT bone scans can also be used to evaluate metastatic bone disease.

In 2017, we added two new FDA-approved PET/CT scans to our program: 18F-fluciclovine (Axumin) and 68Ga-DOTATATE (NETSPOT). The Axumin scan can be used for men when a recurrence of prostate cancer is suspected. The NETSPOT scan can help locate tumors in adult and pediatric patients with somatostatin receptor-positive neuroendocrine tumors.



Nuclear Medicine

General nuclear medicine procedures are available at our Blue Island, Lisle and Naperville locations. Therapeutic procedures using I-131 therapy to treat cancer and other medical conditions affecting the thyroid gland are offered in Blue Island, Lisle and Naperville. In Lisle and Naperville, lymphoscintigraphy procedures are available that allow surgeons to determine which lymph node a tumor drains to first, providing information used for breast cancer and melanoma staging.

Interventional Radiology

Our Interventional Radiology (IR) program was launched in August 2017. Our board-certified IR physicians utilize advanced imaging techniques that allow them to perform minimally invasive procedures that are often more cost-effective, provide reduced recovery times and may be safer than other traditional treatment options, all in the comfort of our outpatient radiology centers.

Interventional Radiology can be used to diagnose certain types of cancer using needle biopsy as an alternative to surgical biopsy. Additionally, central venous access with a catheter allows patients to receive medications, including antibiotics or chemotherapy, directly into their bloodstream.

Paracentesis and thoracentesis procedures remove the excess fluid that accumulates in the pleural space or abdominal cavity, a common side effect of certain forms of cancer, including breast, lung, colon and ovarian.

IR procedures are offered in Glen Ellyn, Lisle, Naperville and Tinley Park with select ultrasound procedures available at our Naperville imaging center. As we continue to grow our IR program, additional oncology treatments will be added including radioembolization and tumor ablation.

Our IR team continues to expand and provide a wide-variety of treatments to address a range of conditions including:

- Abscess drainage
- AV fistula maintenance
- Biopsies including: bone, kidney, liver, lymph node, thyroid and trans-jugular
- Bone marrow aspiration/biopsy
- Catheter and line placements and removals including: central line placement, dialysis catheters, drainage tubes, IVC filters, PICC lines, PleurX catheters, pneumothorax catheters and ports
- CT-guided procedures
- Extremity venography
- Kyphoplasty
- Lumbar puncture
- Myelogram
- Paracentesis
- Percutaneous nephrostomy
- Thoracentesis
- Varicose vein treatment





“I have felt cared for beyond just my medical diagnosis.”

“I was diagnosed in April and since then have undergone radiation treatments and a lumpectomy. I have never felt rushed and everyone has taken the time to make sure I understand my diagnosis and that I feel comfortable with each phase of my treatment. Being able to view my test results and visit information in MyChart has also allowed me to read and digest information at my own pace. One of my doctors actually took the time to draw pictures to explain the exact location of my tumor. It's moments like those that I have felt cared for beyond just my medical diagnosis.”

Judy, Breast Cancer Patient



“3D mammography (tomosynthesis) allows the radiologist to obtain images of the patient's breast from several different angles, and view one layer of tissue at a time. Imagine trying to spot something in a forest. Rather than simply trying to look through the forest while standing in one spot, walking around and looking from different angles allows you to see things that are hiding behind trees.”

Hal Kipfer, MD
DMG Breast Imaging and Intervention Radiologist

Breast Cancer

Breast Cancer occurs in approximately 1 out of every 8 women in the United States and continues to be a key area of focus for our Integrated Oncology Program, as it accounts for the largest percentage of cancer cases at DMG. We utilize a dedicated care team, which includes highly-skilled radiologists who specialize in breast services, advanced screening and treatment options and offer a wide range of support services through each patient's treatment.

Available screening and diagnostic breast services include clinical breast exams and education, screening and diagnostic digital/3D mammography, breast ultrasound, breast biopsy (ultrasound, stereotactic, MRI and open surgical) and breast MRI.

Additionally, our Breast Centers in Hinsdale, Joliet, Lisle and Naperville have been designated as Breast Imaging Centers of Excellence by the American College of Radiology. To be eligible for the ACR Breast Imaging Center of Excellence designation, a facility must meet accreditation quality standards set by the ACR for all of the following:

- Mammography
- Stereotactic breast biopsy
- Breast ultrasound, including the ultrasound-guided breast biopsy module
- Breast MRI

3D Mammography

Mammography, and more recently 3D mammography, is the first line of defense in detecting breast cancer. 3D mammography, also known as breast tomosynthesis, provides patients with an advanced screening option that allows radiologists to view breast tissue with greater detail, one layer at a time rather than one flat, dense image. This allows the radiologist to better interpret any abnormalities and provide more accurate results, reducing the rate of false positive readings and callbacks.

Today, nearly all our locations throughout the Chicago suburbs that offer breast screenings are equipped with 3D mammography. We continue to increase access to 3D mammography, and in 2017 3D mammography was added in the south suburbs in Tinley Park and in 2018 a second 3D mammography scanner was added in Joliet.

In 2018, we performed more than 65,000 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 when

they are due for their exams. For added convenience, current patients do not need a primary care physician's order to schedule a screening mammogram and patients can utilize online scheduling to request their appointment, making access to care easier than ever before. Once the mammogram is performed, results are sent automatically through our electronic medical record system to the patient's primary care physician. Patients who are signed up for MyChart can be notified of mammogram results electronically as well, allowing for a seamless transition of care.

In honor of National Breast Cancer Awareness month, we offered free clinical breast exams with a certified professional throughout the month of October. In 2018, free clinical breast exams were available on nine dates at four of our convenient locations in Glen Ellyn, Joliet, Lisle and New Lenox. Clinical breast exams are a quick and non-invasive way to detect cancer and abnormalities early, when they are most treatable. In addition to the exam, patients also receive education and a high-risk assessment.

High Risk Breast Clinic

At DMG, our High Risk Breast Clinic provides additional support, resources and services to treat individuals who are at a high-risk or have a genetic predisposition of developing breast cancer. Our dedicated team of healthcare professionals provides patients with comprehensive breast services including cancer screenings, genetic risk evaluations, genetic testing and counseling services. During a High Risk Breast Clinic appointment, patients provide their detailed personal and family history to determine if additional screening methods or genetic testing may be recommended to further evaluate their risk, and develop an individualized screening schedule to monitor their breast health. Our High Risk Breast Clinic continues to expand its breast services team. In 2018, we welcomed an additional breast nurse navigator and a genetic counselor.

2017 Breast Cancer Patient Age at Time of Diagnosis

0-29	3 cases
30-39	32 cases
40-49	85 cases
50-59	155 cases
60-69	176 cases
70-79	111 cases
80-89	34 cases
90+	7 cases

Total Cases: 603
Average age at time of diagnosis: 60

2017 Breast Cancer by Stage Group

Stage 0	134 cases
Stage 1	263 cases
Stage 2	157 cases
Stage 3	28 cases
Stage 4	21 cases

In 2018, 13 free clinical breast exams were completed. Of these exams, the following recommendations were made (some patients received multiple recommendations):

Genetic counseling	2
Routine self-breast exams/ imaging at routine screening age	4
Referral to breast surgeon	2
Yearly exam/mammogram with PCP/Gyne	6
High Risk Clinic referral	3
Breast imaging now due to findings	4

If a patient is diagnosed with cancer, we provide an array of treatment options including surgery, radiation therapy and chemotherapy, as well as advanced breast reconstruction or plastic surgery following treatment. Our breast surgeons are sub-specialized and highly trained in the latest techniques relating to breast surgery. Our 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. In 2018, we performed more than 540 breast cancer-related surgeries, including 292 lumpectomies and 164 mastectomies.



Performance Measures Monitored by Commission on Cancer

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

2015 CP3R DATA RELEASED ON OCTOBER 23, 2017

Accountability Measures Required Percentage 90%	DMG Percentage
Radiation therapy administered within 365 days after first diagnosis for women under the age of 70 who received breast conservation surgery	100
Combination chemotherapy is considered or administered within four months (120 days) of diagnosis for women under the age of 70 with AJCC – T1cNOMO or Stage II or stage III hormone receptor negative breast cancer (MAV)	100
Tamoxifen or third generation aromatase inhibitor is considered or administered within 365 days of diagnosis for women with AJCC T1cNOMO, stage II or Stage III hormone receptor positive breast cancer (HT) – 100 percent DMG compliance	100
Radiation therapy is considered or administered following any mastectomy within one year (365 days) or diagnosis of breast cancer form women with ≥ four positive regional lymph nodes (MASTRTR)	100
Quality Improvement Measure Required Percentage 80%	DMG Percentage
Image or palpation-guided needle biopsy (core or FNA) of the primary site is performed to establish diagnosis of breast cancer nBx (breast needle biopsy)	100

Advanced Breast Reconstruction

Our plastic surgeons offer a full spectrum of breast reconstruction options using the most innovative surgical techniques. Having trained at 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 the visionaries of the prepectoral implant reconstruction technique using implants, but 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, we expanded our breast reconstruction treatment options to offer advanced 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-appearing breast for patients who are not candidates for breast implants.

herDMG Exams

A Different Approach to Screening & Prevention
In 2014, in addition to cancer education and screening events, we launched the “herDMG” initiative to address the challenges busy women face by creating an all-inclusive, age-specific preventive exam scheduled through a single phone call.

A herDMG visit includes a wellness exam, clinical breast exam, pelvic exam with pap test, routine blood work and additional blood work for chronic disease when indicated, as well as a screening mammogram for patients 40 years of age and older (unless determined as high-risk requiring earlier baseline mammogram). In 2015, this program was expanded to all our primary care and OB/GYN physicians. Since the launch of herDMG, the program has grown to perform more than 60,000 herDMG exams per year and provides increased access to preventive care services that are essential to the overall well-being of our female patients.

Robotic Surgery

Robotic surgery is the most progressive form of minimally invasive surgery available today. We are proud to offer one of the most advanced and comprehensive robotic programs in the region. Our Robotic Surgery Program offers a wide range of procedures performed by more than 35 robotically-skilled surgeons working across multiple specialties, including general surgery, gynecology, otolaryngology (ENT) and urology. Our surgeons have expertise in numerous robotic procedures, including several complex cancer-related surgeries. Using the da Vinci® Surgical System, our 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. Our specialist’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 robotics program include:

ADMG otolaryngologist and member of the Integrated Oncology Program is currently one of the only surgeons performing Transoral Robotic Surgery (TORS) in the Chicagoland area. The minimally invasive TORS procedure involves removing tumors located in the throat or 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. Urologic oncology at DMG includes two board-certified, fellowship trained physicians who utilize advanced treatment techniques and minimally-invasive procedures for bladder, kidney, prostate, testicular and ureteral cancer. Leading edge robotic procedures offered at DMG include: nerve sparing radical prostatectomy for prostate cancer, robotic radical cystectomy with intracorporeal urinary diversion for bladder cancer, robotic partial nephrectomy, radical nephrectomy

and retroperitoneal lymph node dissection for kidney cancer, robotic retroperitoneal lymph node dissection for testis cancer.

Our urologic oncology surgeons lead the Chicagoland area in performing robotic cystectomy to treat bladder cancer. The procedure involves removing part or all of the bladder, lymph node dissection and urinary diversion, accessed through small keyhole incisions. While many surgical cystectomy cases done in the Chicagoland area are still being performed by opening the abdominal cavity, our surgeons are making minimally invasive surgical options more widely available in the suburbs.

Our urologic oncology surgeons also offer robotic-assisted surgery options to treat recurrent prostate cancer, including salvage prostate cryotherapy (cryoablation). The treatment is as an alternative to hormone treatment as long as the cancer has not spread beyond the prostate.



Genitourinary Cancer

In 2014, we launched the Men’s Health Clinic to provide our male patients with better access to care, including consultations to manage prostate health and cancer screenings, as well as a wide-range of other male-specific concerns. Men’s Health Clinic appointments are offered at any of our 11 urology locations throughout the Chicago suburbs. For added convenience, appointments are also available on Saturdays at our Lisle Medical Office Building. Our team of board-certified urologists works with each patient to develop a treatment plan that is customized to meet their individual’s needs. We also added a prostate and bladder cancer support group and a men’s health rehabilitation service for post-surgical support, both held at the Waterford Place Cancer Resource Center in Aurora.

To aid in the detection of prostate cancer, we utilize a variety of diagnostic tests and physical examinations including prostate specific antigen (PSA) tests, digital rectal exams (DRE), 4KScore and multi-parametric MRI of the prostate. Testing for bladder and kidney cancer can include rectal/vaginal examination, urine tests, imaging including CT, MRI, PET/CT scans, F18 Sodium Fluoride PET Bone scan or cystoscopy and biopsy procedures.

In 2018, more than 18,000 PSA tests were ordered, approximately 20,000 DRE exams were performed (both new and repeat screenings), more than 550 4KScore tests were administered and 881 MRI’s of the prostate were completed.

Prostate Cancer Stage at Time of Diagnosis

Stage I	105 cases
Stage II	235 cases
Stage III	61 cases
Stage IV	50 cases

Treatment Administered

Surgery	113 cases
Radiation	120 cases
Active surveillance	78 cases
Androgen deprivation and radiation therapy	97 cases
Other, Combined treatments	35 cases
Refused treatment	8 cases

Genetic Testing – Prostate Cancer

For patients with known or suspected familial disorders, additional genetic testing may also be used to help determine the presence of a specific hereditary abnormality and to determine the risk of a patient or other family member developing prostate cancer in the future. Our urologists utilize epigenetic testing, including OncotypeDx, Prolaris, ConfirmMDx and Decipher for prostate cancer screening.

We provide a comprehensive approach for patients diagnosed with genitourinary cancer. Our multi-disciplinary team meets bi-monthly to review genitourinary cases and considers many factors when developing individualized care plans, including the stage of cancer, overall health and ability to withstand therapy. Based on these factors and depending on screening results, treatment recommendations may include active surveillance (prostate cancer), surgery, chemotherapy, radiation therapy or a combination of methods.

In 2018, in an effort to provide more coordinated and patient-centered care, our radiation oncology and urology providers launched multi-disciplinary clinic appointments. During a multi-disciplinary appointment, a patient is able to meet with multiple members of their care team, including their urologist, radiation oncologist and a nurse navigator all within a single visit. The team is able to collaborate with one another during the visit and partner with the patient to develop and monitor the progress of their treatment plan to provide a more seamless, convenient patient experience. More than 30 patients have utilized this comprehensive service. Multi-disciplinary appointments are offered on Mondays and Thursdays at our Lisle location.

Our urologic oncologists are well-versed in many complex procedures and are leaders in their field. In 2018, more than 135 prostatectomies and 122 nephrectomies were performed, and in 2017, we held a medical education event for other local urologists and medical professionals. There, our fellowship-trained urologists educated attendees about the oncologic efficacy of performing robotic cystectomy based on current literature in an effort to create awareness of robotic cystectomies available in the suburban area.

Gastrointestinal Services

Formalized in 2015, our gastrointestinal (GI) program at DMG offers patients a fully comprehensive approach to the screening, diagnosis and treatment of GI cancers. Colorectal cancer remains one of the most commonly diagnosed cancers in the United States, yet screening rates for colorectal cancer remain below the national goal.

In 2017, in an effort to support the nation-wide goal to raise the overall screening rate, we implemented an outreach program intended to increase patient awareness and education on the importance of screening for colorectal cancer. Again in 2018, we sent out colorectal screening information and colorectal test kits to patients who are considered to be at a higher risk for colorectal cancer due to certain factors including family history and age. In 2017, more than 3,400 fecal immochemical tests (FIT) were performed to screen for colorectal cancers. This proactive outreach provides patients with the knowledge and tools needed to stay up-to-date on all recommended preventive screenings, which are essential to maintaining better overall health.

In addition to patient education and outreach efforts, we continue to expand our gastroenterology department, increasing access to preventive gastrointestinal services. In 2016, two free-standing endoscopy centers were added in Oakbrook Terrace and Warrenville, and 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, we perform more than 20,000 colonoscopies each year with an adenoma detection rate of 43 percent.

At DMG, we screen for gastrointestinal cancers utilizing a variety of tests, including fecal occult blood testing, stool DNA tests, colonoscopy, sigmoidoscopy, CT colonography and double-contrast barium enemas. Under the guidance of an interventional gastroenterologist, advanced testing including 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:

Transanal Surgery, a minimally invasive approach that allows patients to avoid abdominal surgery and is able to preserve much of the rectum and bowel function.

Transanal Endoscopic Microsurgery (TEM) uses a closed tube system to open the rectum with air and a small camera for better visibility and precision that allows larger growths to be removed.

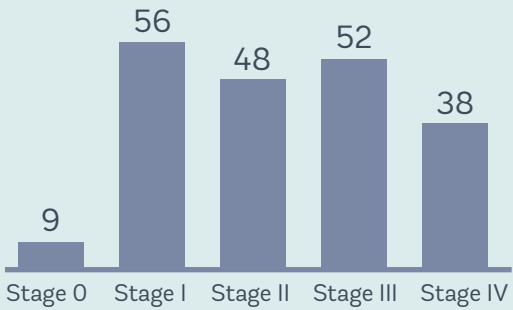
Transanal Mimimally Invasive Surgery (TAMIS) is one of the newest treatment techniques for treating polyps and early-stage rectal cancer. This minimally-invasive, hybrid approach first became available in 2009 and combines the benefits of transanal surgery (excellent visibility) with the benefits of TEM while using conventional laparoscopic instruments, making it an effective treatment option. It is also leading to new techniques for rectal surgery, such as transanal total mesorectal excision (taTME).

We are one of the few institutions in the area to offer these advanced treatment options. Our surgeons provide full surgical capabilities to treat gastrointestinal cancers while striving to best preserve our patient's overall quality of life. We continue to expand our GI program. In the last year, we added seven physicians to our team across the north, west and south suburbs, all of whom are fellowship-trained in colon and rectal cancer surgery.

Accountability Measure – Colon cancer Stage III	DMG Percentage
Adjuvant chemotherapy is recommended or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC stage III (lymph node positive) colon cancer	100
Quality Improvement – Commission on Cancer measure for rectal cancer	DMG Percentage
Preoperative chemo and radiation are administered for clinical AJCC T3N0, T4N0, or Stage III; or postoperative chemo and radiation are administered within 180 days of diagnosis for clinical AJCC T1-2N0 with pathologic AJCC T3N0, T4N0, or Stage III; or treatment is recommended; for patients under the age of 80 receiving resection for rectal cancer. CoC Std. 4.5/85%	100

Colorectal Cancer Stage at Time of Diagnosis

Stage 0	9 cases
Stage I	56 cases
Stage II	48 cases
Stage III	52 cases
Stage IV	38 cases



“This is a group of dedicated doctors whose first objective was not making a lot of money; they wanted to practice good medicine. We’re each other’s helpers and each other’s severest critics. The success of the clinic can be attributed to the ability to relate to and augment each other’s skills.”

Fred Kuharich, MD, Founding Physician

Head & Neck Cancer

Cancer can develop in many locations in the head and neck, and the treatment of head and neck cancer is complex. Depending on the location, it can affect vital functions such as 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, we encourage our patients to complete a yearly physical exam with their primary care provider which includes a physical examination of the neck and throat. Additionally, patients between ages 9 and 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. We emphasize the importance of quitting smoking to reduce risk and provide 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, endoscopic and robotic techniques. Our otolaryngologists are some of the few physicians in the Chicago area trained in robot-assisted surgery for the head and neck. 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 following a Transoral Robotic Surgery (TORS) procedure, swallowing and speech function is as good as or better than traditional surgical methods. TORS may also provide additional benefits including reduced recovery times, fewer complications, less risk of infection and no visible scarring. With TORS surgery, there is also a high probability that no additional treatments will be needed, decreasing the risk of injury to the muscles used to swallow and the surrounding nerves.

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.

Pancreatic, Liver, Biliary (HPB) Cancer

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

HPB cancers 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 utilize a wide variety of techniques including advanced diagnostic imaging and endoscopic interventions to investigate symptoms, diagnose and develop an individualized treatment plan as quickly as possible.

Diagnostic testing used to diagnose HPB cancers include blood tests, trans-abdominal ultrasound, upper endoscopy and endoscopic ultrasound (EUS) with fine-needle aspiration (FNA), CT or MRI, and Endoscopic Retrograde Cholangiopancreatography (ERCP) with cholangioscopy or pancreatoscopy for direct visualization of the bile and pancreatic duct. PET/CT scans are often used to assist with staging and treatment planning.

In many cases, patients with HPB cancers require a combination of several different types of treatment including chemotherapy, surgery and radiation therapy. Our multi-disciplinary team meets monthly to discuss challenging HPB cancer cases, leveraging the team's expertise to determine the type and timing of treatment to offer.

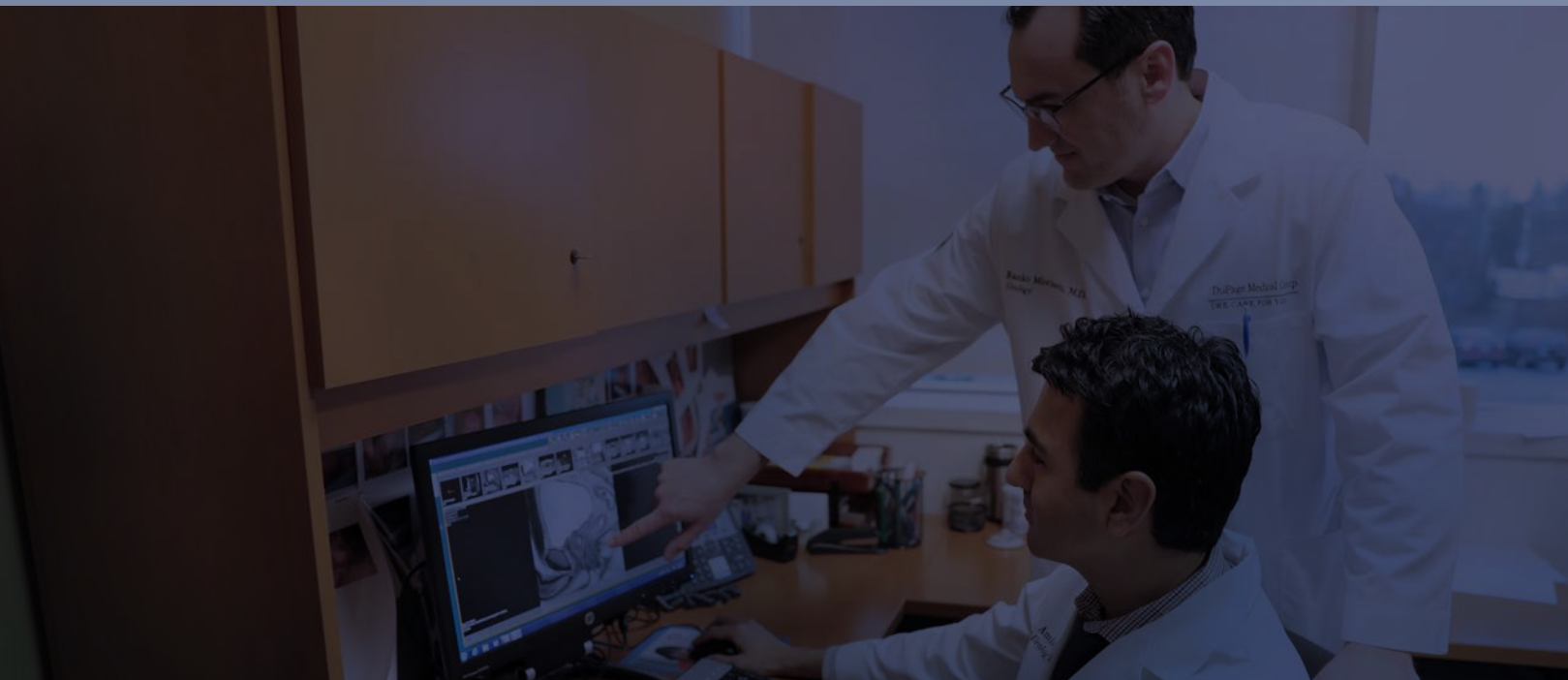
Our surgeons who specialize in HPB cancers are experts in surgical resections and have advanced training to offer open, laparoscopic and robot-assisted surgery options. We also offer minimally invasive and laparoscopic methods such as intraoperative ultrasound and ablation techniques that use microwaves or radiofrequency to burn tumors. While surgery is the primary treatment used 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. At DMG, we remain focused on the prevention, diagnosis and treatment of all endocrine cancers including thyroid, parathyroid, adrenal, pancreatic, pituitary, testicular and ovarian tumors.

Our thyroid cancer program strives to create personalized treatment plans that address not only the disease, but also takes into consideration the patient experience and each individual's needs. This approach ensures that all questions are answered and every available treatment option is considered. We are committed to educating patients on the role their family history plays, as well as other risk factors that may increase their likelihood of developing an endocrine-related malignancy, such as avoiding unnecessary exposure to radiation.

We believe that excellent patient care is a combination of leading-edge medicine, surgical techniques and a strong partnership with each patient to provide support and guidance through the entire treatment process. Our care team, which includes board-certified endocrinologists, surgeons who specialize in endocrine surgery, radiologists and our nuclear medicine department, works diligently to ensure patients feel confident in their treatment plan and understand each step in their care.



“I feel like I am not facing this hard time alone”

“Everyone has been so helpful and very kind every time I come in for an appointment. They all make me feel like I am important and that they are here for me in whatever I need, no matter how big or small of a request I may have. Everyone from the reception staff, to the nurses, technicians and my physician treat me like I am a part of their family. It makes me feel like I am not facing this hard time alone and I can't say enough how much I appreciate that. The kindness and support I have received has been amazing.”

Theresa C.

Lung Cancer

Thanks to advancements in available screenings and treatment options, the outlook for someone diagnosed with lung cancer is better than ever. Patients who are considered at a higher-than-average risk of developing lung cancer, including those with a personal history of smoking and other risk factors, may be eligible to receive low-dose CT scans at many of our radiology locations throughout the Chicagoland suburbs. Low-dose CT scans aid in detecting cancers before they spread and are more easily treatable. In an effort to make scheduling easier and increase access to these screenings, patients are able to request an appointment for a low-dose CT scan online.

Lung Cancer Screening

Our radiology department has been designated as a Lung Cancer Screening Center through the ACR. Most of our 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. Using low-dose CT as a screening method is the leading method for early detection of lung cancer. A study conducted by the National Cancer Institute confirmed these screenings reduce the mortality rate from lung cancer by 20 percent for people considered to be high-risk.

Early detection and prompt treatment is critical, which is why we offer low-dose lung CT (LDCT) scans, which help diagnose lung cancer at an early stage. LDCT scans are the recommended screening test for lung cancer by the United States Preventative Services Task Force and the leading method for early detection of lung cancer, especially in high-risk patients. In 2018, we provided low-dose CT screens to approximately 1,500 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
- Asymptomatic (no signs or symptoms of lung cancer)
- Individuals with a tobacco smoking history of at least 1 pack per year for 30 or more years (one pack per year = smoking one pack per day for one year; one pack = (20 cigarettes)
- A current smoker or one who has quit smoking within the last 15 years
- This testing is also available for consumers with commercial insurance or on a self-pay basis.

Lung Cancer Treatment

Based on the diagnostic results, our multi-disciplinary team evaluates all available treatment options and selects the most appropriate treatment plan for each patient’s needs. We also offer innovative radiation therapies and surgical techniques. In 2017, we added expanded our team, adding two additional pulmonologists, including an additional physician in the south-west suburbs at our Joliet location.

DMG pulmonary specialists use innovative techniques including endobronchial ultrasound bronchoscopy (EBUS) to diagnose 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.

As a first line of defense against lung cancer, we offer free smoking cessation classes to support patients in their efforts to quit smoking. The six-week Courage to Quit® program is developed by the Respiratory Health Association and is offered at our Lisle and Tinley Park locations throughout the year. The program provides participants with the education and support needed to lead a smoke-free life.

In 2016, our Integrated Oncology Program implemented quality measures for its Lung Cancer Program to ensure we were providing patients with the highest quality care. Since then, we have monitored these metrics quarterly, which is in compliance with national standards. The table below highlights our commitment to providing our lung cancer patients with the best care possible.

CoC Measures for Quality of Cancer Care

Non-Small Cell Lung Quality Required Percentage 85%	DMG Percentage
Systemtic chemotherapy is administered within 4 months to day preoperatively or day of surgery to 6 months postoperatively, or it is recommended for surgically resected cases with pathologic, lymph-node positive (pN1) and (pN2) NSCLC(LCT)	100
Surgery is not the first course of treatment for cN2, MO lung cases LNoSurg	100

2017 Lung Cancer by Type

Non-small cell carcinoma	179 cases
Small cell carcinoma	25 cases
Other	26 cases

2017 Lung Cancer by Stage Group

Stage I	65 cases
Stage II	27 cases
Stage III	33 cases
Stage IV	99 cases
Unknown/NA	6 cases

Skin & Soft Tissue Cancer

Formalized in 2016, our skin and soft tissue program provides a wide-range of diagnostic services and treatment options for individuals diagnosed with skin and soft tissue cancers, including malignant melanomas. The program was developed to ensure high-quality, compassionate care is provided across our growing team of expert dermatologists. Skin and soft tissue cancer cases are presented monthly during our multi-disciplinary case conferences and provide patients with an internal second opinion and treatment consensus from our team of experts. We continue to grow our team of highly-skilled dermatologists. In fact, we added four new physicians and an additional location in 2018.

Skin cancer screenings and patient education on prevention techniques remains a large focus for our dermatologists. In an effort to reinforce the importance of regular sunscreen use and other methods of skin cancer prevention, our medical spas sell a variety of

physician-grade sunscreen products to protect patients from the sun’s harmful rays. Our dermatologists also recommend yearly skin exams and routinely offer them to various community groups to help identify any skin abnormalities or cancers as early as possible.

Skin cancer is first diagnosed with a physical examination, followed by a biopsy to assist with diagnosis and staging. During a biopsy, all or part of the suspicious lesion is removed and sent to a laboratory for further evaluation. Additional diagnostic tests that may be used to identify soft tissue sarcoma include X-ray, CT or MRI, ultrasound, PET/CT scan or biopsy. Treatment plans for skin and soft tissue cancers are developed for each patient and take into consideration the stage of cancer, the patient’s overall health and their ability to tolerate therapy. Treatment options may include biopsy, surgery, chemotherapy, immunotherapy and radiation therapy or a combination of therapies.

Melanoma Cases by Gender

Male	127 cases
Female	104 cases

2017 Melanoma Stage at Diagnosis

Stage 0	79 cases
Stage I	114 cases
Stage II	16 cases
Stage III	16 cases
Stage IV	6 cases

Histology Lab

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), an achievement that speaks to the high-quality services the team provides to patients in need of histology services.



Detecting Cancer

In 2017, we introduced the “Ugly Duckling” campaign to help guide patients through the various skin cancer warning signs they should be aware of when performing a self-skin exam. 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



Mohs Surgery

At DMG, we have three dermatologists who are specially trained in Mohs surgery to provide the highest level of care to patients. Mohs surgery is considered to be the single most effective technique for removing basal cell carcinoma and squamous cell carcinoma. Mohs surgery allows the physician to spare the greatest amount of healthy tissue while almost completely removing cancer cells. Mohs treatment is highly effective, with successful cure rates exceeding 98 percent.

Skin Cancer Screenings, Community Events & Educational Presentations

Carillon Health Fair | June 13, 2018
Provider Participants | Chris Kelly, PA-C
Participants – 38
Recommended for follow up/biopsy – 10

Beacon Hill Skin Cancer Education | July 11, 2018
Provider Participants | Vanessa Lichon, MD
Participants - 75

Morton Arboretum Employee Skin Checks | July 26, 2018
Provider Participants | Katie Flaherty, PA-C, Cara Bushemi, PA-C
Participants - 14
Recommended for follow up/biopsy – 4

Chicago White Sox Office Staff Skin Checks | August, 2018
Provider Participants | Shraddha Desai, MD, Chris Kelly, PA-C, Cara Bushemi, PA-C
Participants – 79
Recommended for follow up/ biopsy – 8

Midwestern University Employee Wellness Fair | September 13, 2018
Provider Participants: Molly Gerber, PA-C

Midwestern University Health Fair
education was provided on proper sunscreen use and skin cancer prevention to approximately 150 attendees.

“Skin Cancer, Take a Hike” event | September 29, 2018
Provider Participants | Vanessa Lichon, MD
In 2018, this local, American Academy of Dermatology run event raised over \$41,000. Our DMG provider-led team raised over \$6,000 to support skin cancer prevention and detection programs, including free skin cancer screenings, sunscreen dispensers, and permanent shade structures in the community.

Coriant Technologies Health Fair | October 2018
Provider Participants | Shraddha Desai, MD
Participants – 17
Recommended for follow up/biopsy – 3

This Run’s for Jack 2018 | October 14, 2018
Provider Participants | Ainah Tan, MD, Kelle Berggren, MD
Participants- 15
Recommended for follow up/ biopsy – 3

Molex Health Fair | October 24, 2018
Provider Participants | Reena Varade, MD, Melissa Koopmann, PA-C
Our dermatology providers participated in a health fair for Molex employees, which drew more than 200 participants. During the health fair, employees were able to have spot checks performed on their forearms, head, and neck and receive information on sun safety, self-skin exams and sunscreen samples.

North Central College Skin Checks | December 8, 2018
Provider Participants | Chris Kelly, PA-C

Cancer Resources & Support

We provide patients and their families with a wide variety of complimentary resources, support and services to help them navigate through cancer treatment, including emotional support and the management of any side effects.

Online Scheduling

In a continued effort to provide easier and more convenient access to our care, we continue 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 an electronic ticket system in MyChart that was introduced in 2017. 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. In 2018, more than 350 oncology appointments were requested through the online scheduling system.

Resource Library

DMG's Cancer Resource Center, located in our Lisle Medical Office Building, offers patients, their families and caregivers access to educational materials about cancer, treatment and symptom management assistance and more.

Support Services

Throughout the year, we offer wellness programs that provide education and support for patients and their families as they undergo treatment. Our team provides supportive care, classes, information and reference materials. At DMG, we partner with several community organizations, including the American Cancer Society, LivingWell Cancer Resource Center, Wellness House and Cancer Support Center to ensure all aspects of a patient's physical and emotional needs are being met.

Oncology Social Work & Supportive Care

We recognize our patients have more than just physical needs to be addressed during their cancer treatment. To better address this need, in 2018, we welcomed an additional licensed clinical social worker in Tinley Park to provide patients with support for practical and psycho-social needs and to help direct individuals to supportive care resources. Our social workers are available to patients 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 workers assess patient needs through a distress screening process, based on NCCN guidelines. Currently, our social workers are averaging 300 distress screenings per month. Using this screening process, our social workers can partner with members of the medical team to offer support and resources to patients, their families and caregivers. Social workers play an integral role in a patient's care and ensure that our support extends beyond just their physical diagnosis and treatment plan.

Physical Therapy & Cancer Rehabilitation

We offer physical and occupational therapists trained to provide education, exercise and emotional support to help patients cope with the physical side effects of cancer and treatments. Our team strives to partner with patients diagnosed with cancer, and arm them with the tools they need to maintain and improve their quality of life during and after cancer treatments.

Cancer rehabilitation goals often include regaining motion, building strength, increasing endurance, reducing fatigue, decreasing pain and managing scar tissue or swelling. Our physical and occupational therapists work with each patient to understand their goals and limitations to develop a personalized exercise plan to meet their individual needs.



Groups, Classes & Services

Our classes are designed to support the mind, body, and soul, and are a key part of our integrated approach to cancer care. Below are our 2018 offerings:

STRESS MANAGEMENT & MINDFULNESS

Through practice and discussion, participants learn about the benefits of mindfulness meditation and how to live life in the present moment, even during the most difficult times. This free class was offered by Wellness House to DMG patients in March at our Lisle location.

CANCER & NUTRITION

Nutrition plays an important role in aiding recovery and helping patients manage the effects of cancer treatment. Nutrition workshops, led by our registered dietitian, were offered throughout 2018 and gave patients the opportunity to learn how to optimize their diet during treatment and recovery.

STRENGTHENING RELATIONSHIPS AFTER CANCER

A cancer diagnosis can be difficult, both for the patient and their loved ones. A free seminar led by our clinical social worker was offered at Wellness House in August 2018 to help patients learn how to re-engage, strengthen and/or build new relationships after a cancer diagnosis.

UNDERSTANDING MEDICATIONS TO MANAGE SYMPTOMS

In November 2018, our clinical pharmacy manager provided a free seminar at Wellness House in Hinsdale to educate patients about available medications and supplements to help manage side effects from cancer treatment including insomnia, nausea, constipation or pain. She also provided information on probiotics, supplements and other precautions patients should be aware of while in treatment.

AMERICAN CANCER SOCIETY LOOK GOOD... FEEL BETTER™

Beauty professionals help female cancer patients cope with the physical effects of cancer treatment during a complimentary workshop held throughout the year at our Lisle and Tinley Park locations. To date in 2018, the program has provided support to 23 patients.

SMOKING CESSATION

In the spring and fall of 2018, we offered free six-week Courage to Quit® smoking cessation classes developed by the Respiratory Health Association at our Lisle and Tinley Park locations. These classes provide patients, our employees and community members the education and support needed to lead a smoke-free life.

Survivorship

At DMG, we work closely with each patient during and after their treatment to develop a Survivorship Care Plan. Survivorship Care Plans – created by the patient's Advanced Practice Provider or Nurse with oversight by each patient's managing physicians – provide survivors with the information, tools and support they need to move forward following their cancer treatment.

Survivorship Care Plans are a critical part of a patient's cancer journey. Serving as an end-of-treatment summary, these plans include: a comprehensive description of all the treatments received from diagnosis onward, a summary of symptoms and probable complications the patient should be aware of, a long-term treatment plan and general recommendations that will allow them to best maintain their overall health.

A Survivorship Care Plan, along with an in-person meeting with an APP helps patients transition from active cancer treatment to follow-up and surveillance. The Survivorship Care Plan is also sent to the patient's primary care physician. This care plan empowers patients to take control of their future health through educational resources that help them feel informed and able to embrace the next phase of their health after cancer treatment.

In 2017, we established a formal process to engage all providers in the survivorship planning process that played a role in the patient's treatment. To date, we have developed 220 Survivorship Care Plans in 2018.

“An individual is considered a cancer survivor from the time of diagnosis, through the balance of his or her life. Family members, friends and caregivers are also impacted by the survivorship experience and are therefore included in this definition.”

- National Cancer Institute (NCI) Office of Cancer Survivorship (adapted from the National Coalition for Cancer Survivorship)

Financial Navigation

Finances are often a major concern for patients dealing with a cancer diagnosis. At DMG, we strive to provide support and eliminate any barriers to treatment, including financial obstacles. Our dedicated financial navigators are available to work one-on-one with patients to help find additional financial assistance when needed. Meeting with a financial navigator can help provide peace of mind about medical expenses and allow patients to focus on their recovery.

Financial navigators can help identify ways to minimize out-of-pocket expenses, including deductibles and coinsurance, as well as costs for prescription drugs. Navigators can also help patients gain a better understanding of their insurance policy, provide estimates for future treatments, assist with billing and claims issues, find secondary insurance coverage or patient assistance programs (if possible) and help establish payment arrangements if needed.

In 2017, we expanded our financial navigation program with additional patient resources and financial navigators who are available in-person, by phone and on a walk-in basis at our Lisle and Tinley Park locations.

American Cancer Society Wig Boutique

We partnered with the American Cancer Society to provide on-site, complimentary fittings and wigs with a trained wig boutique volunteer at our Lisle location. To date in 2018, 77 wigs were provided at no charge to cancer patients.

Road to Recovery Program

By partnering with the American Cancer Society (ACS) Road to Recovery Program, the ACS provided our patients with transportation to and from their appointments free of charge, giving more than 375 rides in 2018.



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 2018:

DATE	PROVIDER(S)	SCREENING TYPE	TOTAL RECIPIENTS
06/23/18	Janet Chin, MD	Wellness House	Hot Topics in Breast Cancer
08/9/18	Dawn Williams, LCSW	Wellness House	Strengthening Relationships After Cancer
08/18/18	Craig Smith, MD	Living Well	Managing Urinary Incontinence and Sexual Functioning
10/26/18	Janet Chin, MD Amrit Mangat, MD	DuPage Medical Group, Lisle Medical Office Building	CME Presentation on Updates on AJCC 8th Edition Changes in Breast <ul style="list-style-type: none">Anatomic, Clinical Prognostic Stage and Pathological StageUpdated Grouping System Based on Biological Marker and Genomic Profile for the Breast
11/13/18	Daniel Frank, MD	Wellness House	Management of Pancreatic Cancer
11/15/18	Chara Reid-Reed, PharmD	Wellness House	Understanding Medications for Symptom Management

Community Outreach

Our physicians and staff show their commitment to the communities we serve by providing educational talks, volunteering at community events and supporting philanthropic initiatives.

Charitable Grants

Through the DMG Charitable Fund, we provided grants totaling more than \$150,000 in 2018 to various partners, including:

- American Cancer Society CAN Committee Memberships
- American Cancer Society Share the Drive Campaign
- DuPage Health Coalition’s Silver Access Plan
- Dispensary of Hope Pharmacy
- FORWARD Initiative
- Jennifer S. Fallick Cancer Support Center
- Making Strides Against Breast Cancer
- Relay for Life
- Wellness House

Event Sponsorships

We participated in and sponsored a variety of community-based events in 2018 as well, including:

June 2018 Relay for Life
Our staff members participated by forming a team to walk and raised over \$15,500 for this event. We also served as a flagship sponsor.

October 2018 Making Strides Against Breast Cancer:
Our staff formed a team to walk, raised more than \$33,500 and served as a flagship event sponsor as well as a photo booth sponsor for the Orland Park event.

Cancer Committee 2018

- Brian J. Moran, MD – Committee Chair
- Anand Shah, MD – (Alternate) Committee Chair, Radiation Oncology
- Janet Chin, MD – Cancer Liaison Physician
- Saadia Yunus, DO – (Alternate) Cancer Liaison Physician, Medical Oncology
- Amrit Mangat, MD, FACS – Surgery
- Ciaran Bradley, MD, MA – (Alternate) Surgery
- Jonathan Nolan, MD – Radiology
- Nasir Siddiqui, MD – (Alternate) Radiology
- Richard Anderson, MD – Pathology
- Karl Napekoski, MD – (Alternate) Pathology
- Loren Baer, MHA, CMA (AAMA) – Cancer Program Administrator
- Theresa Levigne, RT(N), CNMT, MBA – (Alternate) Cancer Program Administrator, Radiology Senior Manager
- Misbah Baggia, CTR, RHIT – Cancer Registry Quality Coordinator
- Achiamma George, CTR, RHIA – (Alternate) Cancer Registry Quality Coordinator
- Kathryn Wieser, RN, BSN, OCN, MBA – Nurse Leadership
- Christine Agee, RN, BSN, OCN – (Alternate) Nurse Leadership
- Carrie Erwin RN, MSN, OCN –Cancer Conference Coordinator
- Dawn Williams, LCSW, CADC – Psychosocial Service Coordinator
- Jennifer Meter, LCSW (Alternate) – Psychosocial Service Coordinator
- Daniel Grzegorek, DO – Palliative Care
- Matthew Baugh, MD – (Alternate) Palliative Care, Pulmonary
- Rameez Alasadi, MD – Gastroenterology
- David Wolraich, MD – Otolaryngology
- Amit R. Patel, MD – Urology
- Stephanie Gan, MD – Dermatology
- Yoojim Kim Pak, MD – Endocrinology
- Stephanie Esterland, RN, BSN – Nurse Navigator, Community Outreach Coordinator
- Trai Le, MS, DABR – Physicist- Radiation Oncology
- Haley Goulson, PA-C – Survivorship Care
- Peri Todd – Clinical Research Coordinator
- Elizabeth Bludgen – Rehabilitation Services
- Nitika Agarwal, PharmD, MBA – Pharmacy
- Debbie Fager – American Cancer Society

