

20 YEARS OF CARING FOR OUR PATIENTS & COMMUNITY

DuPage Medical Group's Integrated Oncology Program

Annual Report with Statistical Data from 2018



DuPage Medical Group
| WE CARE FOR YOU

| 20 YEARS

OF CARING FOR PATIENTS



DUPAGE MEDICAL GROUP INTEGRATED ONCOLOGY PROGRAM

In 2019, DuPage Medical Group (DMG) proudly celebrated 20 years of making healthcare better for its patients and community by offering high quality and compassionate healthcare. Our founder, Dr. Robert McCray, had a vision for redefining the physician practice to give patients access to primary, specialty and support services. In 1964, he partnered with several local physicians to open the Glen Ellyn Clinic. In 1999, during an era of rapid change in healthcare, the Glen Ellyn Clinic joined forces with Wheaton Medical Clinic and Mid-America Physicians to establish DuPage Medical Group as an independent, physician-led healthcare provider. Fast-forward 20 years, and you'll see that our commitment to providing high quality and compassionate healthcare has remained constant. What started as an overarching vision to do the right thing and put our patients first has become a winning philosophy.

Over the last 20 years, as the needs of our patients have grown and evolved, so have we. Today, DMG is comprised of more than 800 primary and specialty care physicians at over 120 suburban Chicago locations. We remain committed to keeping you well by offering a full spectrum of preventive exams and screenings as well as a robust team of experts to care for those diagnosed with cancer.


Formalized in 2014, our Integrated Oncology Program has grown from 1,300 cases per year to nearly 3,000 cases in 2019. Since the program's inception, we have delivered compassionate, comprehensive cancer care to more than 15,000 patients.



CONTINUED FOCUS ON PATIENT CARE

In 2018, after completing a rigorous re-accreditation process, our Integrated Oncology Program was again awarded a three-year, nationally-recognized Freestanding Cancer Center designation by the Commission on Cancer (CoC) and the American College of Surgeons. To maintain our accreditation, our Integrated Oncology Program shared statistical data on our cancer detection and treatment success rates, as well as metrics for many of the process improvement projects we have implemented over the last five years. Each project was designed to eliminate barriers in access to care and enhance the level of care we provide to our patients.

We are proud to still be the only accredited Freestanding Cancer Center in Illinois, a distinction that demonstrates our unwavering commitment to providing high quality, patient-centered care.



For 20 years, our focus has remained constant – striving to make healthcare better by offering high quality, compassionate and accessible healthcare to our patients and communities.

During this time, I've witnessed firsthand our unwavering commitment to provide patients with exceptional care. It is this purpose and dedication that will continue to guide us for years to come.

Paul Merrick, MD – CEO



2019 A YEAR IN REVIEW

NOTEWORTHY ACCOMPLISHMENTS

In 2019, we continued to expand our Integrated Oncology Program to meet the growing and ever-changing needs of our patients by:

GROWING OUR ROBOTIC SURGERY PROGRAM

We now have more than 45 highly-skilled general surgeons, gynecologists, otolaryngologists and urologists who specialize in advanced robot-assisted procedures, including complex cancer-related surgeries.

OFFERING PREVENTION SCREENINGS

We provide cancer prevention and screening programs, including skin cancer spot checks and colorectal cancer risk assessments, free-of-charge to our patients, employees and members of our community.

ADDING TUMOR ABLATION SERVICES

Our interventional radiology services now include bone, kidney and liver tumor ablation procedures.

EXPANDING MULTI-SPECIALTY APPOINTMENTS

Our multi-specialty appointments now include medical oncology at our Hinsdale and Lisle locations. Multi-specialty appointments allow patients diagnosed with genitourinary cancers, including those of bladder, kidneys, prostate or testis, to meet with multiple members of their care team within a single visit. This may include a medical and/or radiation oncologist, urologic oncologist and nurse navigator.

OFFERING FREE CLINICAL BREAST EXAMS

Free clinical breast exams were offered at seven of our locations throughout the month of October in support of National Breast Cancer Awareness month.

HOSTING SMOKING CESSATION CLASSES

We provide access to a free six-week smoking cessation program for our patients, employees and members of our community. Developed by the Respiratory Health Association, the Courage to Quit® program provides participants with the education and support needed to quit smoking.

OFFERING ACCESS TO SUPPORT SERVICES

Our partnership with the American Cancer Society provides cancer patients with access to complimentary wigs and transportation assistance.

SUPPORTING OUR COMMUNITIES

Through the DMG Charitable Fund, we continue to provide support for our community partners through grants, sponsorships and volunteers. Our partnerships allow us to offer our cancer patients and their families with valuable support services while they receive treatment, including nutrition workshops and survivorship planning.

GROWING OUR TEAM

Our Integrated Oncology Program welcomed several new board-certified physicians. In the south suburban region, we added a dermatologist trained in Mohs surgery, an otolaryngologist and pulmonary specialist. In the north suburban region, we expanded our surgery department to include five new surgeons. We also added two plastic surgeon and a urologic oncologist.

EXPANDING OUR RADIOLOGY SERVICES

We now offer radiology services including CT, ultrasound and X-ray services at our Lockport Medical Office Building. We also welcomed two radiologists who sub-specialize in breast and female imaging.

WHY CHOOSE OUR INTEGRATED ONCOLOGY PROGRAM?

We understand that receiving a cancer diagnosis and undergoing treatment can be overwhelming, which is why our oncology team is here to guide you every step of the way. Through our partnerships, we are able to provide our patients and their caregiver with access to a wide-range of support services that may be needed during treatment. Support services are available to address any of the physical and emotional needs that may arise, as well as provide access to clinical trials and other emerging treatments.

Our Integrated Oncology Program is comprised of board-certified physicians who specialize in medical and radiation oncology. These physicians work alongside dermatologists, endocrinologists, gastroenterologists, gynecologists, otolaryngologists, plastic surgeons, pulmonologists, radiologists, surgeons and urologists. The program also utilizes physician assistants, nurse practitioners, dedicated nurse navigators, social workers and other support staff. Our team works closely with one another to develop personalized care plans using the latest techniques and technology to treat all cancer types.

Several of our physicians are fellowship-trained and skilled in advanced procedures, including minimally-invasive options and robot-assisted surgery. We offer additional cancer-related services such as infusion, on-site laboratory services and diagnostic imaging. Over the last several years, our academic affiliation with Rush University Medical Center has brought university-level, sub-specialty care to the suburbs. This allows our patients to complete their treatments where they feel the most supported – close to home.





Anand P. Shah, MD
Radiation Oncology

"The collaborative approach we take at DMG and within the integrated Oncology Program is of substantial benefit to patients and providers alike. Meeting with peers during cancer conferences allows physicians to tap into the collective knowledge and experience of the group. We are able to discuss complex cancer cases with one another and reach a consensus on how to best direct a patient's care, taking into consideration all available treatment options and clinical trials. If my family member were being treated, this approach is what I would want for them."

Samir Desai, MD, Hematology & Oncology

CANCER CONFERENCES: YOUR SECOND OPINION

Understand Your Disease, Feel Confident About Your Care

Seeking a second opinion following a cancer diagnosis is common and can be a helpful way to learn about available treatment options. This information can help patients feel more confident about their treatment plan and care team.

Our cancer program utilizes a physician-led, team-based approach to develop each treatment plan. To facilitate collaboration among our team of experts, cancer conferences are held regularly, allowing members of the program to present individual cases to a multi-specialty group. Upon extensive review of each case, the team participates in comprehensive treatment planning, taking into consideration any new or emerging

treatments and protocols to ensure patients receive a treatment plan best suited to their individual needs. Cancer conferences include all cancer types treated at DMG, including those of the breast, digestive system, genitourinary system, hematologic, head and neck, lung and chest, skin and soft tissue.

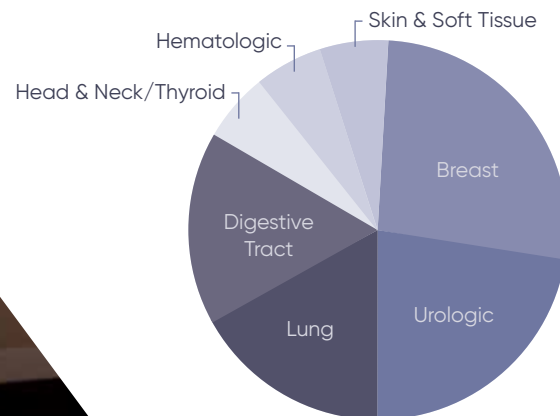
Weekly specialty cancer conferences are held at our Lisle Medical Office Building and a monthly general cancer conference is held at our Tinley Park location. In 2018, more than 23 percent of our cancer cases were presented for multi-disciplinary review, exceeding the CoC requirement of 15 percent.

2019

Specialty & General Cancer Conferences

Case Percentages by Cancer Type

Breast	22%
Urologic	24%
Lung & Bronchus	19%
Digestive Tract	16%
Head & Neck/Thyroid	7%
Hematologic	6%
Skin & Soft Tissue	6%



The Five Most Frequently Diagnosed Cancers at DMG

Breast		Prostate		Lung & Bronchus		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
2018	697 cases	2018	477 cases	2018	236 cases	2018	223 cases	2018	241 cases



2018 New Cancers Diagnosed by Anatomical Site

Breast	697 cases
Prostate	477 cases
Digestive System (Upper GI, Colorectal, Pancreas-Hepatobiliary Tract)	391 cases
Skin – Malignant Melanoma	241 cases
Lung & Bronchus	236 cases
Kidney, Renal, Pelvis & Ureter	136 cases
Urinary Bladder	131 cases
Lymphoma HD & NHL (includes nodal & extra nodal sites)	124 cases
Thyroid	101 cases
Leukemia	98 cases
Head & Neck	81 cases
Gynecologic	70 cases
Myeloma	47 cases
All other types	95 cases
Total New Cases: 2,925	

2018 Cancers Diagnosed by Gender

Male		Female	
Prostate	477 cases	Breast	697 cases
Melanoma of the Skin	122 cases	Lung & Bronchus	130 cases
Colon & Rectum	121 cases	Melanoma of the Skin	119 cases
Lung & Bronchus	105 cases	Colon & Rectum	102 cases
Urinary Bladder	85 cases	Thyroid	68 cases
Kidney / Ureter	77 cases	Hematologic	62 cases
Non-Hodgkin Lymphoma	70 cases	Kidney/Ureter	59 cases
Hematologic	62 cases	Non-Hodgkin Lymphoma	54 cases
Thyroid	33 cases	Bladder	46 cases



MEDICAL ONCOLOGY AND INFUSION SERVICES

Our board-certified medical oncologists and hematologists provide 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, comfortable environment. Our oncologists stay up-to-date on clinical advancements and updates in National Comprehensive Cancer Network (NCCN) guidelines. Hematology and oncology appointments are offered at eight locations throughout the north, south and west suburbs.

Infusion Center services are an integral part of our cancer program and are available at six convenient locations which include Hinsdale, Joliet, Lisle, Plainfield, Tinley Park and Winfield. Each infusion center is staffed by certified chemotherapy and biotherapy providers, specially trained to administer chemo-toxic drugs and monitor patients while in treatment. Each patient receives a customized infusion treatment plan based on the type of cancer and their specific needs. Additionally, on-site laboratory services are available at each location, as well as a clinical pharmacist who oversees the dosing and administration of all medications being infused. This ensures infusion

patients are receiving their treatment in a comfortable, safe environment.

Advanced Practice Providers (APP) such as Nurse Practitioners (NP) and Physician Assistants (PA), work closely with physicians to develop care plans for both active cancer patients and those entering into 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 who 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.


HEMATOLOGIC MALIGNANCIES

For adult patients diagnosed with blood-related malignancies including leukemia, myelodysplastic syndrome, lymphoma and myeloma, our board-certified physicians who specialize in hematology and medical oncology work closely with specialists – including radiation oncologists, pathologists, radiologists, advanced practice providers and nurse navigators – to develop a personalized 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, other factors are taken into account when developing each treatment plan such as the stage of the cancer, as well as the patient's overall health and ability to withstand therapy.

Treatment options include chemotherapy, radiation therapy, blood or bone marrow transplantation, biological therapy, immunotherapy or a combination of therapies. We are proud to offer patients access to one of the best blood and marrow transplant programs in the area.



Care begins with
establishing an open,
two-way relationship

"Being an oncologist is a deeply personal endeavor. While each patient and treatment plan is unique, at the very core, care begins with establishing an open, two-way relationship with patients so that I can serve as a trusted advisor to help them navigate through their cancer treatment. While the healthcare system may be changing, the heart of practicing medicine remains the same – compassion coupled with science. I'm honored to have the opportunity to care for my community every day."

Surekha Boddipalli, MD, Hematology & Oncology

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PHARMACY SERVICES

We offer specialty pharmacies in the west and south suburbs to provide our patients with a convenient way to obtain their medications, including specialty medications used as part of a cancer treatment plan. Each of our pharmacies is led by clinical pharmacists (PharmD) who specialize in providing pharmacy services to cancer patients.

Our pharmacists oversee treatment plans (per NCCN Guidelines) for accuracy and completeness. They determine the 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. Each pharmacist works alongside our physicians and advanced care providers to recommend adjustments to drug therapy based on clinical status and treatment outcomes.

Our pharmacy and nursing staff utilize a closed-system transfer device (CSTD) while preparing and administering hazardous chemotherapy drugs. These devices mechanically prohibit the transfer of environment contaminants into the system and the escape of hazardous drug or vapor outside the system, thus protecting the staff handling these drugs.

In an effort to provide the most efficient, high-quality care possible, the pharmacy team has worked to streamline several of their processes. Beginning in 2017, 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.

In 2019, we implemented a new work cue allowing pharmacists to review patient treatment plans before their appointments. This new process allows the pharmacist to address any counter-indications with medications and make any recommendations or necessary adjustments to the treatment plan and proactively send updates to the medical oncologist.

Launched earlier this year at our Hinsdale location, oncologists are now able to order certain injectable supportive medications before a patient's appointment and have them delivered for administration during the appointment. This allows patients to receive their medication during their office visits with their medical oncologist, rather than obtaining them at one of our infusion sites.

Pharmacists can also develop and update preference lists for physicians to use that includes information on the safest, recommended administration routes for medications, dosing information and protocol updates. When a new drug is implemented, or if there are changes with drug indications or protocols, our oncology-trained pharmacists offer education for clinical staff, ensuring all aspects of pharmaceutical care provided at DMG are done in a safe and timely manner.

Retail pharmacies are available in Blue Island, Lisle and Tinley Park, offering patients a convenient way to obtain their medications. Our pharmacy staff works closely with our financial navigation team and the national Patient Assistance Network to ensure our patient's out-of-pocket expenses are as low as possible, and help to identify financial assistance and rebate programs that may be available. Pharmacy staff can also provide patients with medication counseling and assist with prior authorizations, appeal letters and copay programs that may be needed for certain specialty medications.

| RADIATION ONCOLOGY

Radiation therapy is a common treatment method recommended for many 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, comprehensive treatment plan for each patient. We are committed to providing our patients with safe and effective radiation therapy services using the most advanced technology and treatment techniques.

Our radiation oncology team utilizes 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 areas of the body. 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.

In 2019, our team implemented an automated electronic tracking system to follow each patient's progress throughout their treatment. This helps guide treatment planning during weekly follow-up visits with their radiation oncologist. Our team also utilizes a new, streamlined

process to create survivorship care plans for patients, based on the recommendations and standards set by the CoC.

Our Radiation Oncology team is comprised of expert physicians who are leaders in their field. In fact, our radiation oncologists were recognized in Chicago magazine's 2019 Top Doctors list. In 2018, one of our radiation oncologists was selected for the prestigious American Brachytherapy Society (ABS) Fellowship. This 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.

Depending on the type of cancer, cancer staging and the overall health of the patient, radiation therapy treatment may include:

EXTERNAL BEAM RADIATION THERAPY

Intra-cranial radiation therapy at DMG uses an advanced, frameless approach, providing 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 along with DIBH, we can ensure the patient is aligned and the necessary amount of air is present in the lungs, increasing the accuracy and delivery of treatment.

External Beam Radiation therapy is offered at our Lisle Medical Office building.

HIGH-DOSE RATE BRACHYTHERAPY RADIATION

We also 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 breast, gynecological and skin 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.

In 2019, we welcomed the Chicago Prostate Cancer Center (CPCC), now a part of the DuPage Medical Group Surgery Center of Westmont, to DMG and the Integrated Oncology Program. The CPCC is one of the most experienced facilities worldwide in delivering specialized brachytherapy treatments using a seed implantation of radioactive material to treat certain prostate cancers. Published research from the CPCC's 20 years of experience has greatly contributed to the management of prostate cancer and allows us to provide patients with highly-effective, evidence-based treatment. Brachytherapy seeded implants are performed as an outpatient procedure. This allows patients to resume work or their normal activity quickly, has relatively low rates of complication and preserves their quality of life. Additionally, brachytherapy implants in locally advanced prostate cancers in combination with external beam radiation has proven to be an effective treatment option for high risk patients.

"Caring for patients with cancer at DMG has been an incredibly gratifying experience. I am grateful to be part of such an incredible team of physicians, nurses, physicists, and radiation therapists who all deliver excellent care to our patients."

Katherine Baker, MD, Radiation Oncology



| 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 2019, we welcomed two fellowship-trained radiologists to our team of experts, one specializing in abdominal and women's imaging and the other specializing in breast imaging.

MRI

MRI services are offered at nine DMG locations, spanning the Chicagoland suburbs from Hoffman Estates to Tinley Park. We offer both 1.5T and 3.0T imaging capabilities and utilize advanced MRI techniques including:

Cholangiography, which is 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. It can also 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.

We also utilize two recently FDA-approved PET/CT imaging agents, the 18F-fluciclovine (Axumin) and 68Ga-DOTATATE (NETSPOT).

Axumin can be used for men when a recurrence of prostate cancer is suspected. NETSPOT can help locate tumors in adult and pediatric patients with somatostatin receptor-positive neuroendocrine tumors. PET/CT scans are offered at our Lisle and Tinley Park locations.

"Behind every image, there is a patient searching for an answer."

Equally, there is a radiologist striving to provide that answer. I work hard to serve our patients and my colleagues by identifying the cause of their concern. At DMG, I am fortunate to have access to cutting-edge technology, some of the best minds in radiology as partners and frequent and open communication with referring physicians to facilitate the best care for our patients."

Nasir Siddiqui, MD, Radiology

NUCLEAR MEDICINE

General nuclear medicine procedures are available at three of our locations, Blue Island, Lisle and Naperville. 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 includes board-certified IR physicians who 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 center.

IR can be used throughout cancer treatment and to diagnose certain types of cancer using needle biopsy as an alternative to a surgical biopsy. Other IR procedures, like central venous access using a catheter, allow patients to receive their medications, including antibiotics or chemotherapy, directly into their bloodstream. Additionally, paracentesis and thoracentesis procedures are used to 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.

A wide variety of conditions can be treated with non-surgical IR techniques, including:

- Abscess, hematoma and/or fluid collection
- Certain cancers including those of the bone, kidney and liver
- Chronic pelvic pain in women
- Peripheral Artery Disease (PAD)
- Spinal compression fractures
- Uterine fibroids
- Varicocele
- Vascular Access
- Varicose veins

IR procedures often used for cancer treatment include:

- Biopsies including bone, kidney, liver, lymph node and thyroid
- Bone tumor ablation with Kyphoplasty
- Kidney and liver tumor ablation
- Medi-ports
- PleurX catheters
- Paracentesis
- Thoracentesis

Tumor ablation procedures, which are minimally-invasive treatments that destroy specific areas of tissue using extreme temperatures, were added to our IR program in 2019. Ablation may be used to treat tumors or alleviate symptoms.

These procedures are now available in our full-service procedure suite in Lockport.

| BREAST CANCER

Breast cancer occurs in approximately one out of every eight 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. Our dedicated care team includes highly-skilled radiologists who specialize in breast services, advanced screening and treatments and offer a wide range of support services. 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.

Our Breast Centers in Hinsdale, Joliet, Lisle and Naperville are designated as Breast Imaging Centers of Excellence by the American College of Radiology (ACR). To be eligible for this designation, a facility must meet accreditation quality standards set by the ACR for all of the following:

- Breast MRI
- Breast ultrasound (including ultrasound-guided breast biopsy)
- Mammography
- Stereotactic breast biopsy

"I decided to pursue medicine because I wanted to make a difference. As a surgeon, especially when it comes to those who have been diagnosed with breast cancer, I am able to help patients navigate through one of the most difficult, vulnerable times in their life. I am deeply moved by the level of trust patients place in me. Each time a patient expresses their gratitude, it only deepens my commitment and passion for providing care for others."

Amrit Mangat, MD, Breast & General Surgery

3D MAMMOGRAPHY

Mammography is the first line of defense in detecting breast cancer. 3D mammography, also known as breast tomosynthesis, is an advanced screening option that allows the radiologist to view breast tissue with greater detail, one layer at a time rather than as a single, flat 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.

As of August 2019, we performed more than 51,000 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. Patients can also request an appointment online, making access to care easier than ever before. Once the mammogram has been completed, results are sent automatically through our electronic medical record system to the patient's primary care physician. Patients who are signed up for MyChart are notified of mammogram results electronically.

In October 2019, in honor of National Breast Cancer Awareness month, we offered free clinical breast exams with a certified professional. Free clinical breast exams were available on 14 dates at seven of our locations in the north, south and west suburbs. 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 free clinical breast exam, patients also received a risk assessment and additional education.



Of the free clinical breast exams completed in 2019, the following recommendations were made (some patients received multiple recommendations):

Yearly exam/mammogram with PCP/Gyne	17
Breast imaging now and/or annually due to findings	15
Routine self-breast exams	14
Imaging at Routine Screening age	6
Genetic counseling	1

If a patient is diagnosed with cancer, several treatment options are available. Treatment recommendations are based on the patient's overall health and specific cancer case, and can include one or more of the following – surgery, radiation and chemotherapy, as well as advanced breast reconstruction surgery following treatment.

Our oncology program includes breast surgeons who are sub-specialized and trained in the latest techniques relating to breast surgery. In 2019, we added five board-certified general surgeons to our team. We also expanded access to our surgical service offerings in the north suburbs with five new clinic locations in East Dundee, Elgin, Hoffman Estates, Itasca and St. Charles. Our surgeons have the patient's best interest in mind, striving to offer breast-conserving procedures whenever possible and are trained in lymph node-related procedures that help to evaluate the spread of disease. As of September, we performed more than 800 breast cancer-related surgeries, including 670 lumpectomies and 149 mastectomies in 2019.



HIGH RISK BREAST CLINIC

Led by a dedicated team of healthcare professionals, our High Risk Breast Clinic (HRBC) offers comprehensive breast services and support resources for patients considered to be at a high-risk or who have a genetic predisposition of developing breast cancer. HRBC services include cancer screenings, genetic risk evaluations and genetic testing. During a HRBC appointment, a patient's detailed personal and family history is reviewed to determine if additional screenings or genetic testing are needed to further evaluate their risk. Once the patient's risk has been assessed, they will receive an individualized screening schedule to monitor their breast health. In 2019, we welcomed additional providers to our High Risk Breast Clinic team and added three locations.

"High Risk Breast Clinic appointments are meant to be empowering visits for women. They are about education, being proactive, taking control of your health and educating yourself for the health of future women in your family."

**Shaunda Chin-Bonds, DO,
Obstetrics & Gynecology**

2018 Breast Cancer by Stage Group

Stage 0	149 cases
Stage 1	398 cases
Stage 2	77 cases
Stage 3	24 cases
Stage 4	30 cases
Other	18 cases

2018 Breast Cancer Patient's Age at the Time of Diagnosis

0-29	7 cases
30-39	29 cases
40-49	100 cases
50-59	168 cases
60-69	194 cases
70-79	145 cases
80-89	46 cases
90+	8 cases

Total Cases: 697

Average age at time of diagnosis: 61

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.

2016 CP3R data released on October 22, 2018

Accountability Measures – Required Performance Rate – 90%	DMG's Performance Rate %
Radiation therapy administered within 365 days after first diagnosis for women under age 70 who received breast conservation surgery (BCSRT)	100
Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under age 70 with AJCC – T1cN0M0 or stage II or stage III hormone receptor negative breast cancer (MAC)	100
Tamoxifen or third generation aromatase inhibitor is considered or administered within 365 days of diagnosis for women with AJCC T1cN0M0, stage II or stage III hormone receptor positive breast cancer (HT)	100
Radiation therapy is considered or administered following any mastectomy within 1 year (365 days) of diagnosis of breast cancer for women with ≥ 4 positive regional lymph nodes (MASTRT)	100
Quality Improvement Measure – Required Rate – 80%	
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 breast reconstruction options using leading-edge surgical techniques. Advanced reconstructive options include pre-pectoral breast reconstruction, which reduces the risk of postoperative complications such as muscle animation deformity and enhances the overall aesthetics of the reconstruction. Reconstructive surgical techniques are individualized to each patient and in addition to the use of a patient's own tissue, can involve placement of an implant above or below the muscle. In 2019, we added two board-certified plastic surgeons to our program.



Katherine F. Baker, M.D.
Radiation Oncology



| ROBOTIC SURGERY

Robotic surgery is the most progressive form of minimally-invasive surgery available today. We are proud to offer one of the most comprehensive robotic programs in the region. Our Robotic Surgery Program includes more than 45 skilled surgeons from multiple specialties, including general surgery, gynecology, otolaryngology (ENT) and urology. Our surgeons have expertise in a number of robot-assisted procedures, including several complex cancer-related surgeries. Using the da Vinci® Surgical System, which provides increased vision, precision, dexterity and control, our surgeons are able to perform complex surgeries with just a few tiny incisions.

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. Across the group, DMG surgeons perform more than 1,000 robot-assisted procedures each year.

| GENITOURINARY CANCER

Our Men's Health Clinic is designed to provide male patients with increased access to care, including consultations to manage their prostate health, cancer screenings and treatment for a wide-range of male-specific concerns. These appointments are available at 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 needs. For those requiring additional support following surgery, our patients can attend a prostate and bladder cancer support group or receive men's health rehabilitation services at the Waterford Place Cancer Resource Center in Aurora.

To aid in the detection of prostate cancer, diagnostic tests and physical examinations including prostate specific antigen (PSA) tests, digital rectal exams (DRE), 4KScore and multi-parametric MRI of the prostate are used. In 2019, more than 36,000 PSA tests were ordered and drawn across DMG and approximately 925 MRIs of the prostate were completed. Available testing for bladder and kidney cancer includes rectal/vaginal examinations, urine tests, imaging including CT, MRI, PET/CT scans, F18 Sodium Fluoride PET Bone scan or cystoscopy and biopsy procedures.

"I was diagnosed with prostate cancer at the age of 41 after routine lab work identified I had an abnormally high PSA level. It was a shock to me because I felt great at the time and assumed if I felt healthy, I must be fine. Initially, I was told if I survived, my chance of resuming my regular activities was unlikely. I decided to get a second opinion and ultimately chose to have robotic surgery and radiation therapy at DuPage Medical Group. Not only was my recovery time fast, but I was boarding a plane for work 30 days after my surgery. Five years later, I am cancer-free and enjoying the active lifestyle I loved prior to my diagnosis."

Robert B., Prostate Cancer Survivor

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

To provide comprehensive care for those diagnosed with a genitourinary cancer, our multi-disciplinary team of radiation oncologists, urologic oncologists, medical oncologists, radiologists, pathologists and oncology nurse navigators meets bi-monthly to review genitourinary cancer cases and develop personalized care plans. Many factors are considered during the treatment planning 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.

Launched in 2018 in an effort to provide more coordinated and patient-centered care, our radiation oncology and urology providers introduced multi-specialty cancer care appointments. In 2019, we expanded our multi-specialty appointments to include our medical oncologist. These appointments are offered for patients diagnosed with cancer (including those of the prostate) who are candidates for chemotherapy, radiation and/or surgical treatments. During a multi-specialty appointment, a patient meets with multiple members of their care team, including their urologist, medical and/or radiation oncologist and a nurse navigator, all within a single visit. This allows the care team to collaborate with one another in real-time and partner with the patient to answer questions about their treatment plan.

For those with prostate cancer, multi-specialty appointments are offered on Wednesdays and Thursdays at our Lisle Medical Office Building. For those who have been diagnosed with an advanced genitourinary cancer (including those of the bladder

or kidneys) who are considering chemotherapy or other medical oncology treatments, appointments are available on Tuesdays and Wednesdays at our Hinsdale and Lisle locations. To date, 90 patients have completed a multi-specialty appointment in 2019.

This year we expanded our urology department by adding three new physicians, which included a third urologist fellowship-trained in urologic oncology along with two new clinic locations in the north suburbs.

Our Urologic Oncologists offer minimally-invasive treatment options for bladder, kidney, prostate, testicular and ureteral cancers. We are proud to be one of the few programs in the Chicago area that offers robotic cystectomy to treat bladder cancer. The procedure involves removing part or the entire bladder, along with lymph node dissection and urinary diversion, using small keyhole incisions.

Other advanced robot-assisted urology procedures offered at DMG Include:

- **Nerve-sparing radical prostatectomy** for those with prostate cancer
- **Radical cystectomy with intracorporeal urinary diversion** used to treat bladder cancer
- **Partial nephrectomy, radical nephrectomy and retroperitoneal lymph node dissection** for kidney cancers
- **Retroperitoneal lymph node dissection** to treat testicular cancer
- **Salvage prostate cryotherapy (cryoblation)** as an alternative to hormone treatment for recurrent prostate cancer (as long as the cancer has not spread beyond the prostate)

In 2019, more than 105 prostatectomies and 103 nephrectomies were performed.

Cancer Stage at Time of Diagnosis

Stage I	127 cases
Stage II	215 cases
Stage III	89 cases
Stage IV	46 cases

Treatment Administered

Surgery	101 cases
Radiation	157 cases
Active surveillance	101 cases
Anti-depravation therapy and radiation therapy	75 cases
Other, combined treatments	35 cases
Refused treatment	8 cases

| GASTROINTESTINAL SERVICES

Our gastrointestinal (GI) program offers patients a 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.

Beginning in 2017, in an effort to support the nationwide goal to raise the overall screening rate, we implemented an outreach program to increase patient awareness and education on the importance of screening for colorectal cancer. In May 2019, to encourage patients to be proactive about their health, we sent out screening information to more than 15,000 DMG patients turning 50 (in 2019) who had not yet begun testing for colorectal cancers. The outreach was intended to provide 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. Within the first three months following the outreach, nearly 400 of the patients had completed a colorectal cancer screening.

In addition to increased patient education and outreach efforts, we have continued to grow our gastroenterology department by providing increased access to gastrointestinal services including endoscopic procedures and colonoscopies. In an effort to make completing a screening colonoscopy as easy as possible, we offer virtual appointments utilizing video visits within MyChart. Eligible patients can receive a pre-procedure assessment with one of our Advanced Nurse Providers (APN), saving them a trip to the office. In 2019, we performed more than 23,000 colonoscopies with an adenoma detection rate of 43 percent. We also utilize five free-standing endoscopy centers in Hoffman Estates, Lockport, Oakbrook Terrace, Tinley Park and Warrenville.

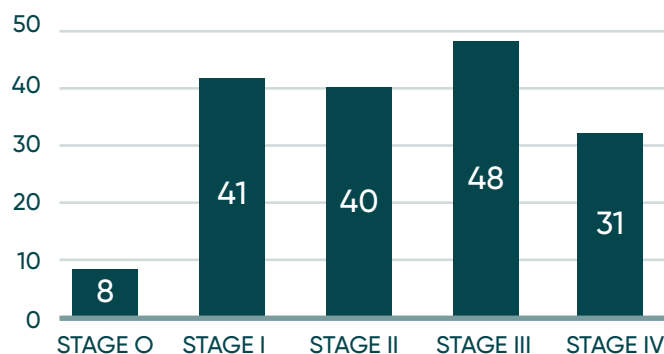
At DMG, we screen for gastrointestinal cancers utilizing a variety of tests, including fecal occult blood testing, stool DNA tests, colonoscopy, sigmoidoscopy, CT colonography and double-contrast barium enemas. Under the guidance of an interventional gastroenterologist, advanced testing including radiofrequency ablation (RFA) and endoscopic mucosal resection (EMR) are also available for appropriate patients.

"While most instances of colorectal cancer occur in patients over the age of 50, the number of colorectal cancer cases found in young adults continues to rise. Colorectal cancer is a slow-progressing cancer that often has no noticeable symptoms until it has reached a more advanced stage. This is why, regardless of your age, it is important to pay attention to your body and alert your physician to any changes with your digestive tract. Don't wait until your fifties to begin the discussion about colorectal health with your primary care physician. If you are considered to be at a higher risk for developing colorectal cancer, your doctor may recommend you begin screening early or more frequently. Knowing your risk and staying up-to-date on physicals and cancer screenings can have a significant impact on your health as you age."

Fares Hamad, DO, Gastroenterology

Colorectal Cancer Stage at Time of Diagnosis

Stage 0	8 cases
Stage I	41 cases
Stage II	40 cases
Stage III	48 cases
Stage IV	31 cases



PERFORMANCE MEASURES MONITORED BY COMMISSION ON CANCER

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Performance Measures for Rectal Cancer Monitored by Commission on Cancer

Measure: Quality Improvement – Standard 4.5

Required Performance Rate – 85%

DMG's Performance Rate – 97%

Management criteria:

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.

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 is able to preserve much of the rectum and bowel function while allowing patients to avoid abdominal surgery.

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 Minimally Invasive Surgery (TAMIS) is one of the newest treatment techniques for 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).

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 and within the last year, we welcomed seven new physicians to our team and added three new south suburban locations in Joliet, Lockport and Tinley Park.

| 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 in developing a treatment plan. To detect cancers of the head and neck, we utilize state-of-the-art diagnostic testing such as endoscopy, imaging (CT, PET/CT, MRI, chest X-ray and ultrasound), fine needle aspiration and biopsy.

Not all cancers respond in the same way to treatment, which is why we utilize advanced

techniques in molecular testing that enable us to thoroughly evaluate cancer specimens. These markers help us determine the best treatment for each individual cancer so we can provide more accurate prognostic information. For individuals with a family history of certain cancers, genetic testing is also available. Surgical options vary depending on the type and location of cancer and can include minimally invasive, endoscopic and robotic procedures. Our program includes one of the few physicians in the Chicago area trained in robot-assisted surgery for the head and neck. Transoral Robotic Surgery (TORS) is available for the treatment of oral cancers in the throat, base of the tongue and tonsils that would otherwise be challenging to reach. TORS can provide additional benefits such as reduced recovery times, fewer complications, less risk of infection and no visible scarring. 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.

In 2019, we expanded our otolaryngology (ENT) department to include an additional board-certified physician trained in head and neck cancers, as well as a new south suburban location in Joliet.

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 multiple 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 including 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 and can be used along with surgery or as an alternative treatment option 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 and other endocrine-disrupting and/or carcinogenic compounds.

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 works diligently to ensure patients feel confident in their treatment plan and understand each step in their care.

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 one of our convenient radiology locations. Low-dose CT scans can aid in detecting cancers earlier, before they have had a chance to spread and when they are easier to treat. 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.

"It's never too late to quit smoking. But why wait? The benefits of quitting extend for years to come. I encourage my patients to participate in smoking cessation programs and other tools to help them maintain a smoke-free lifestyle."

**Matthew Baugh, MD,
Pulmonary Medicine**

LUNG CANCER SCREENING

Our radiology department is designated as a Lung Cancer Screening Center through the American College of Radiology. 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 a LDCT scan is the leading method for early detection of lung cancer and is recommended by the United States Preventive Services Task Force. 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.

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, average of one pack per day for 30 years

This testing is also available for patients with commercial insurance or on a self-pay basis. In 2019, we provided low-dose CT screenings to approximately 1,500 patients.



LUNG CANCER TREATMENT

Based on the diagnostic results and cancer staging, our skilled team of pulmonary physicians works alongside a multi-disciplinary team to evaluate all available treatment options and select the most appropriate treatment plan for each patient's needs, including innovative radiation therapies and surgical techniques. In 2019, we expanded our team by adding a pulmonologist and a new south suburban location in Tinley Park.

Our pulmonologists utilize 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 traditional methods, provides real-time imaging and lets the physician easily view difficult-to-reach areas. Pulmonary specialists also routinely use advanced bronchoscopy 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 a free six-week smoking cessation course to support patients in their efforts to quit smoking. The Courage to Quit® program was developed by the Respiratory Health Association and is offered at our Lisle and Tinley Park locations in the spring and fall. The program provides participants with the education and support needed to lead a smoke-free life and is available to assist patients, employees and other members of the community.

Members of our Integrated Oncology Program committee have also advocated on behalf of the updated tobacco sale legislation known as Tobacco 21. This important legislation, which was formally passed earlier this year, shifted the age individuals can legally purchase tobacco products to 21 rather than 18. We also continue to monitor the harmful effects of vaping and are committed to providing ongoing patient education to encourage a smoke-free lifestyle.

Beginning 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 CANCER CARE

Non-Small Cell Lung – Quality Improvement Measure – Required Performance Rate – 85% DMG Performance Rate

Systemic 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%**

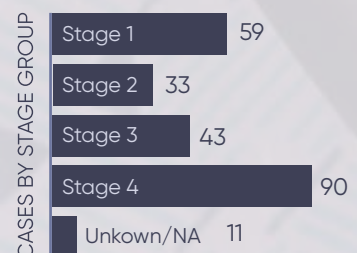
Surgery is not the first course of treatment for cN2, M0 lung cases LNoSurg **100%**

2018 Lung Cancer by Type

Non-small cell carcinoma	185 cases
Small Cell carcinoma	7 cases
Other	24 cases

2018 Lung Cancer by Stage Group

Stage 1	59 cases
Stage 2	33 cases
Stage 3	43 cases
Stage 4	90 cases
Unknown/NA	11 cases



| SKIN & SOFT TISSUE CANCER

Our skin and soft tissue program provides a wide-range of diagnostic services and treatment options for those diagnosed with skin and soft tissue cancers, including malignant melanomas. Select skin and soft tissue cancer cases are reviewed monthly during our multi-disciplinary case conferences, to provide patients with treatment consensus from our team of experts.

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 offer skin cancer spot checks free-of-charge throughout the year to various community groups. These complimentary screenings help identify any skin abnormalities or suspicious lesions as early as possible.

Abnormal lesions identified during a physical examination are biopsied to determine whether or not they are cancerous. During a biopsy, all or part of the suspicious lesion is removed and sent to a laboratory for further evaluation. If cancer is identified, the biopsy can be used to determine the cancer staging as well.

In some cases, additional diagnostic testing may be used to identify soft tissue sarcoma including X-ray, CT or MRI, ultrasound and PET/CT scans. Treatment plans for skin and soft tissue cancers are tailored to each patient and take into consideration their cancer stage, overall health and ability to tolerate therapy. Treatment options may include surgical procedures such as Mohs micrographic surgery, excision, curettage and desiccation as well as non-surgical methods like chemotherapy, immunotherapy, or radiation therapy or a combination of therapies.

This year, we welcomed two board-certified dermatologists to our team and added a new south suburban location in Blue Island.

Melanoma Cases by Gender

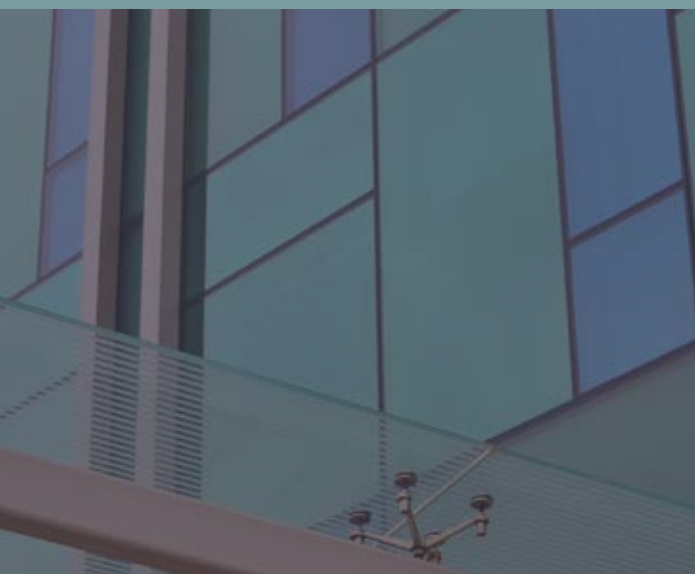
Male	128 cases
Female	113 cases

2018 Melanoma Stage at the Time of Diagnosis

Stage 0	81 cases
Stage I	116 cases
Stage II	25 cases
Stage III	12 cases
Stage IV	7 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 DMG 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.



SKIN CANCER SCREENINGS, COMMUNITY EVENTS AND EDUCATIONAL PRESENTATIONS

Melanoma Monday – May 5, 2019

Multiple DMG dermatology providers offered free skin cancer spot checks for our employees at several of our locations. Throughout the course of the day, 58 employees were screened and 19 were recommended for follow-up.

Lisle Park District Employee Sun Safety Presentation – May 5, 2019

Provider Participants: Vanessa Lichon, MD

Participants – 30

Carillon Lake Health Fair – June 12, 2019

Provider Participants: Reena Varade, MD, Chris Kelly, PA-C

Participants – 36

Recommended for follow up/biopsy – 11

This Run's for Jack 2019 – October 18-20, 2019

Provider Participants: Ainah Tan, MD, FAAD, Ashley Feneran, DO, FAAD

Shraddha Desai, MF, FAAD, Melissa Walsh, PA-C

Participants – 47

Recommended for follow up/ biopsy – 5

Several of our Dermatology providers participated in "This Run's for Jack" on October 18-20, 2019 in Glen Ellyn. The race was held by the Jack H. Marston II Melanoma Fund to support melanoma research and awareness. Our team offered free skin checks during packet pick up and at the event.

Morton Arboretum Employee Skin Checks – November 13, 2019

Provider Participants: Cara Bushemi, PA-C, Katie Flaherty, PA-C

Participants – 27

Recommended for follow up/biopsy – 5



MOHS SURGERY

At DMG, our skin and soft tissue program includes two fellowship-trained dermatologists who specialize in Mohs micrographic surgery. In 2019, we brought our Mohs surgery program to the south suburbs by offering the treatment at our Joliet location. Mohs surgery is most commonly used for skin cancers of the head and neck and is considered to be the most effective treatment option for certain types of basal and squamous cell carcinomas. Mohs surgery allows the physician to remove cancerous cells while sparing the greatest amount of healthy tissue possible. With a cure rate up to 99 percent for certain types of skin cancer, Mohs surgery has the highest cure rate out of all skin cancer treatments. Mohs surgery is performed at our Joliet, Lombard and Naperville locations.

"Our Mohs surgical team is ready to help patients with skin cancer receive the best care and treatment possible. On the day of Mohs surgery, I remove and analyze the tissue around the skin cancer, looking at 100% of the surgical margin. If I see more skin cancer cells, we continue surgery until all of the skin cancer is removed. After the patient is skin cancer free, we have a discussion together about options for reconstruction. We are very passionate about providing excellent and personal care to each patient and look forward to working with each individual during the treatment and healing process."

Vanessa Lichon, MD,
Dermatology and Mohs Surgery

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 improve upon our online scheduling capabilities. Beginning in 2017, nearly all Integrated Oncology Program providers, specialists and diagnostic services offered patients the ability to schedule their appointments online.

Additionally, patients being referred to the Integrated Oncology Program can make an appointment online utilizing an electronic ticket system in MyChart. When a referral is entered into MyChart, a ticket is generated which allows the patient to use the ticket to schedule their appointment online, providing more convenient scheduling for cancer patients. In 2019, more than 400 oncology appointments were requested through our 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 resources for patients and their families as they undergo treatment. Our team provides supportive care, classes, information and reference materials. We also partner with several community organizations, including the American Cancer Society, LivingWell Cancer Resource Center, Wellness House and the 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. We offer social work services in the south and the west suburbs. 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 practical resources.

Our social workers assess patient needs through a distress screening process, based on NCCN guidelines. Currently, our social workers are averaging 200 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.

PHYSICAL THERAPY & CANCER REHABILITATION

Our physical and occupational therapists are 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. In 2019, we expanded our cancer rehab services to be available at all 34 of our physical therapy locations.

Additionally, lymphedema therapy services are now offered. Lymphedema is a chronic condition that causes swelling, most often in the arms and legs as well as the head and neck. It may develop after removing lymph nodes, radiation therapy, trauma and other congenital conditions. For those with chronic lymphedema, treatment can help manage symptoms and maintain an active lifestyle. Our therapists who specialize in lymphedema management can provide a comprehensive evaluation and discuss your individual goals and treatment options. Treatment for lymphedema often includes decongestive therapy including a specialized massage to move lymph fluid, compression bandaging and a personalized exercise program as well as assistance with fitting compression garments if needed. Lymphedema services are available at our Glen Ellyn, Lisle, Elmhurst, North and South Plainfield, Shorewood and Wheaton locations.

In 2019, DMG physicians placed more than 450 orders for lymphedema services and nearly 80 orders for cancer rehabilitation.

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 a few of our offerings:

Cancer and Nutrition Workshops

Nutrition plays an important role in aiding recovery and helping patients manage the effects of cancer treatment. In collaboration with the Cancer Support Center, cancer patients and their caregivers were able to attend a free workshop led by a registered dietitian and learn how to optimize their diet during treatment and recovery.

Smoking Cessation

In the spring and fall of 2019, we offered two free six-week Courage to Quit® smoking cessation courses developed by the Respiratory Health Association at our Lisle and Tinley Park locations. These classes provided our patients, employees and community members with the education and support needed to lead a smoke-free life.

Beyond Cancer: Preparing for Life After Treatment

Through our partnership with Wellness House, patients in remission and their caregivers were invited to attend a complimentary three-week program designed to prepare cancer survivors for the transition from active treatment to routine surveillance. Each week presenters educated on a variety of health and wellness topics including techniques to help manage stress and self-care tips.



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 (APP) 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 339 Survivorship Care Plans.

AMERICAN CANCER SOCIETY WIG BOUTIQUE

In an effort to provide even greater access to complimentary wigs for individuals undergoing cancer treatment, the American Cancer Society launched its virtual wig boutique. The online wig boutique allows cancer patients to browse and select a wig free-of-charge.

By partnering with the American Cancer Society Road to Recovery program, we have been able to provide patients with transportation to and from treatment free of charge.

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 how 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.

Financial navigators are available in-person, by phone and on a walk-in basis at our Lisle and Tinley Park locations.



COMMUNITY OUTREACH

The DMG Charitable Fund was developed as a means to give our time, talents and expertise to our community members in need. Our physicians and staff show their commitment to the communities we serve by providing educational talks, volunteering at community events and supporting philanthropic initiatives. The fund also works with other organizations within the community that serve those in need, particularly in the areas of food, shelter and healthcare/wellness. In addition to providing financial support to these organizations, the Charitable Fund supplies in-kind donations, such as food, toys, clothing and other sundries necessary for dignified living.

Generous contributions from physicians, staff, community members and vendors are the lifeblood of the DMG Charitable Fund.



Charitable Grants

Through the DMG Charitable Fund, we provided grants, sponsorships and volunteer support totaling more than \$155,000 in 2019 to community partners who provide oncology support services, including:

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

Event Sponsorships

We both sponsored and participated in a variety of community-based events in 2019 as well, including:

June 2019 Relay for Life:

Our employees formed a team to walk and fundraise during the event. We also served as the event's flagship sponsor.

October 2019 Making Strides against Breast Cancer:

Our employees formed a team and walked together at the DuPage county event. We also served as the flagship event sponsor for DuPage County and as an event sponsor for in Orland Park.



EDUCATIONAL PRESENTATIONS

Expertise, knowledge and experience are just a few of the reasons our team of healthcare leaders and innovators are in demand as speakers and presenters. Below is a list of our community presentations in 2019:

Date	Provider	Location	Topic
03/26/19	Surekha Boddipalli, MD	Wellness House	Updates in Research & Clinical Trials
06/22/19	Rachel Benecke, APN, FNP-BC	Wellness House	Hot Topics in Breast Cancer – Symptom Management
07/09/19	Janet Chin, MD	Wellness House	Coping with a Metastatic Cancer Diagnosis
07/23/19	Stephanie Gan, MD, FAAD	Wellness House	Top Doctor Lecture: Skin Cancer Symptoms, Diagnosis and Treatment Updates
09/25/19	Karl Napekoski, MD Anand Shah, MD David Wolraich, MD	DuPage Medical Group, Lisle Medical Office Building	Update on AJCC 8th edition changes in head and neck cancers







DuPage Medical Group

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