

THE PATH AHEAD

INTEGRATED ONCOLOGY PROGRAM
ANNUAL REPORT
WITH STATISTICAL DATA FROM 2013



Physicians Leading the Way

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.

When I think about the Integrated Oncology Program, I first think back to the journey our group took to start the program. Before we could begin building the program, we had to lay the groundwork for the idea of the program and the need for complementary services and equipment. At the time, our oncology department was small and DuPage Medical Group (DMG) lacked the resources to support a high-end integrated program. DMG has always been a multi-disciplinary group of physicians working together, but how could we create a program that would evolve to provide multidisciplinary cancer care? Our physicians would need to build a program that would meet the needs of the community and physicians, while providing cancer care that aligns with DMG's core values of quality, efficiency and access.

Building a comprehensive oncology cancer program is not a simple task. And it is not a task that can be done alone. From gathering consensus among our physician shareholders to garnering approvals for the program and building, to the physical construction of a new medical office building that would be the cornerstone of our program; we were met with hurdles and difficulties around every turn. Each time, we persevered and became stronger, as we headed down the path to build this phenomenal program. Based on the needs of our community, we created a goal to develop a centralized, integrated oncology program that could provide all services under one roof. From that point on, our physicians and administrators worked together to bring the most advanced technology, innovative methods of treatment and caring staff members together for the purpose of providing cohesive, patient-friendly cancer care across all services.

The Integrated Oncology Program launched with the opening of the Lisle Medical Office Building; DMG physicians and patients are already experiencing this high quality program. I am honored that our physicians worked together to bring these services to our patients and community. This program is like a symphony orchestra; with all of our instruments playing in unison to the tune of exceptional patient care.

I am exceptionally proud of the work we have done to create the Lisle Medical Office Building and the Integrated Oncology Program. Most importantly, we have been able to impact the lives of our patients and their families who we have the honor and privilege of accompanying throughout their treatment journey.

Paul Merrick, MD
President
DuPage Medical Group



Paving Our Way

When we designed the layout for the Lisle Medical Office Building, we wanted to both maximize collaboration between multiple physicians and provide a unique patient experience. First and foremost, we wanted to provide patients with a convenient central location for all of the needed services and treatments. Upon arrival, patients have easy access to complimentary valet parking, a receptionist or greeter at each building entrance to help direct visitors, a café and also integrated technology that includes wireless Internet service. The building has an Internal Medicine office, but it also includes specialists from more than 15 areas that are available to treat patients on a daily basis. Many specialists see patients in the same suite – allowing easier communication and collaboration among doctors who may often be treating the same patient. The physicians and staff can communicate through our shared electronic medical record, but the environment creates more in person conversations.

The technology available to our patients is nothing short of amazing. Our new imaging equipment includes a 64-slice CT machine, a 3.0 T MRI, 3D Mammography and a linear accelerator. The building also includes state-of-the-art video conferencing equipment; which allows our physicians and our clinical staff to engage in conversation and collaborate quickly and seamlessly. The first floor of the building houses offices for nurse navigators and our cancer resource center. The navigators work with patients and their families to provide the non-clinical support that is often necessary with a cancer diagnosis. Cancer rehabilitation, nutrition counseling and genetic counseling are some of the support services available to patients. Additionally, financial counselors work with patients to help provide clarity about medical expenses. A schedule of classes is available to patients and their caregivers to aid in the healing process. The American Cancer Society Wig Boutique offers personalized wig fittings for women and a selection customized for men and children upon request.

Each week, several cancer conferences occur. Physicians across multi-disciplinary specialty areas treating patients with breast, lung, gastrointestinal and head/neck cancer meet to review patient labs, imaging and treatment plan options. They discuss the course of treatment for patients that will yield the best possible outcome – and the greatest chance for survival. For our patients, it is akin to receiving a second and even third opinion, as all of the experts are in the room together working through a personalized plan for the patient. I am extremely proud and confident of the team we have in place for our cancer patients and their families. Whether it is our physicians working directly with the patient, or the nurses, therapists and clerical staff behind the scenes, I know everyone has the same goal: to deliver the best care to help our patients survive and thrive, both physically and emotionally, throughout a diagnosis and treatment plan.

I'd like to extend a thank you to all of our patients, their families and our community for the warm welcome to Lisle and for allowing DMG to be part of your cancer journey.

Dennis Fine
COO
DuPage Medical Group



First Steps of Our Journey

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.

In December 2012, we took a big step towards reaching those goals when DuPage Medical Group (DMG) opened the Lisle Medical Office Building. The building serves as the hub for DMG's Integrated Oncology Program with physicians working together from several medical specialty areas including Medical Oncology, Pulmonary and other surgical sub-specialties. This site is equipped with the latest state-of-the-art imaging technology, which allows patients to have all their imaging completed at the same location where they see their physician. It is also the site of DMG's first academic affiliation relationship with Rush University Medical Center. A few months later, in February 2013, we enhanced our technology and treatment options with the opening of Radiation Oncology. Striving to continually enhance our services to patients, in 2013 we opened a pharmacy to allow onsite access to medications.

I am always amazed when I walk through our Lisle Medical Office Building. Our dedicated physicians and employees work tirelessly and collaboratively with their peers to explore treatment options. Some of the patients receiving services at this facility are among the most sick of our patient population, but they are also the most grateful for the existence of a program in their community that also gives them the benefits of additional academic medical expertise.

We are proud to be able to provide these services for our patients and look forward to continuing to increase survival of cancer patients in suburban Chicago.

Mike Kasper
CEO
DuPage Medical Group



Our Journey

Our journey begins-but not the work. That began long ago. The physicians at DuPage Medical Group (DMG) have a history of providing comprehensive cancer care to the local community. The latest step forward is through the development of the Integrated Oncology Program. It is a program built around delivering high quality, accessible care. This patient-centered approach to care is designed to address all of our patients' needs and to provide coordinated care by a highly experienced and caring team of healthcare professionals. The team focuses on quality of life through treatment, eliminating barriers to care and utilizing state-of-the-art technology to create the best-individualized treatment plan for each patient.

Coordination of care begins at the start of a patient's journey. From screening to diagnosis, treatment and recovery to survivorship, we can expect better outcomes and a better patient experience when we focus our efforts on well-coordinated care. Here are a few examples of DMG programs and initiatives that have had a significant impact on our patient-centered care approach.

Breast Program Steering Committee

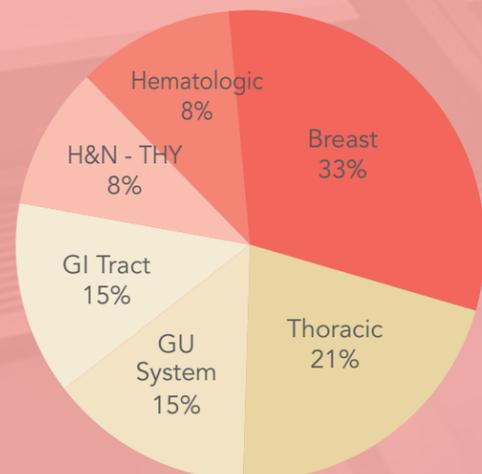
The founding members of the DMG Integrated Oncology Program evolved to become the Breast Program Steering Committee after a select group of specialists realized the great need to create a formalized multidisciplinary care team to better serve breast cancer patients. The team worked to establish the Breast Program after researching comprehensive integrated breast programs, and visiting a successful breast program on the east coast.

New workflows shaped the program as it exists today. The first breast nurse navigator was hired in July 2012 and began program development with the team. The team focused on patient navigation, multidisciplinary cancer conferences, genetic counseling and a cross-functional team approach in overall patient care. Additional support services, including cancer rehabilitation and a high risk breast clinic were added as enhancements to the program. In January 2013, the first Breast Cancer Conference and DMG's Breast Program was launched, paving the way for other cancer programs to follow the leadership and hard work of this team.

MULTI-DISCIPLINARY CANCER CONFERENCES 2013

BREAST	135
THORACIC	85
GASTROINTESTINAL (GI SYSTEM)	60
GENITOURINARY (GU TRACT)	59
HEAD & NECK THYROID (H&N - THY)	33
HEMATOLOGIC	34

SPECIALTY CANCER CONFERENCES 2013



Prospective cases discussed exceeds CoC recommends target rate of 75%

Establishing a Cancer Registry

Establishing a Cancer Registry was the next step in developing a comprehensive program; the registry serves as a mechanism to compile accurate data and help us better understand the cancer burden for the population we serve. We know statistical information is necessary to measure our performance; our focus on quality outcomes can now be quantified, summarized and reported. We look forward to benchmarking our quality reporting with National Cancer Database quality measures.

Creation of Formal Cancer Committee

Establishing a group of committed leaders is the key to managing a comprehensive program. Our cancer committee is comprised of a group of clinical and non-clinical professionals who were carefully selected to participate and includes members from all major specialty groups.

This comprehensive group was given the responsibility of identifying opportunities to improve patient care and outcomes, developing goals to enhance our program, and monitoring our progress towards achieving the Commission on Cancer Accreditation. Providing high quality, compassionate and comprehensive care in compliance with the Commission on Cancer standards is the driving force that guides every decision made by the DMG cancer committee.

Cancer Conferences

The next key step was to engage our clinical professionals in the establishment of multidisciplinary Cancer Conferences. These interactive conferences are integral to the multidisciplinary physician collaboration to discuss optimal cancer management and treatment plans with a patient-centered approach.

Highlights of the Program

Development of a High Risk Breast Clinic

Research has shown that certain health and family history factors increase the risk of developing breast cancer. For those at high risk for breast cancer, taking advantage of certain medical options may detect cancer at an earlier stage – or decrease the risk for breast cancer development.

The team at DMG's High Risk Breast Clinic provides comprehensive breast cancer screening, genetic risk evaluation and counseling for those at an increased risk of breast cancer.

The High Risk Breast Clinic team is composed of radiologists, surgeons, oncologists, nurse navigators, plastic surgeons and a genetic counselor all specializing in breast cancer and prevention.

A patient's first appointment includes the completion of a detailed questionnaire about personal and family health history as well as a physical exam by a surgeon. The team works together to suggest a comprehensive care plan that is tailored to each patient.

A patient visit generally lasts one hour and includes:

- A clinical breast exam
- Review of medical and family history
- Discussion about risk and risk-reducing strategies available
- Genetic counseling and testing services
- Information about additional programs provided by DMG

Nurse Navigator

Establishing Nurse Navigator services was an important step to providing truly patient-centered care. The role of a nurse navigator is to be an easily accessible, clinical point of contact for each patient, aide them in better understanding their diagnosis and assist them in navigating the complex healthcare system efficiently. Navigators provide the support and education patients need to make care-related decisions.

They provide comprehensive care coordination throughout our multidisciplinary program, and can help identify barriers to care and make connections to additional resources or services that might be beneficial to the patient and/or their loved ones. Our nurse navigators are highly trained healthcare professionals with many years of clinical oncology experience and work diligently to ensure all of our patients have the support and guidance they need throughout their cancer journey.





Radiology provides many advanced imaging services including:

Digital Breast Tomosynthesis (3D mammography) is an advanced imaging tool that may lead to improved cancer screening and reductions in recalls and breast biopsies, especially in women with dense breasts. DMG also offers "no order" mammography, which allows women aged 40 and older to easily get their yearly screening mammogram without a physician order.

Pre-Operative Breast MRI offers a powerful diagnostic tool working adjunct to breast mammography.

PET/CT allows physicians to pinpoint the location of cancer within the body before making treatment recommendations. PET/CT detects the biology of disorders at the molecular level. This helps physicians identify abnormalities in cellular activity at a very early stage, generally before anatomic changes are visible. The PET/CT program also participates in the National Oncologic PET Registry. This participation helps to ensure Medicare reimbursement for certain types of PET/CT scans.

Low Dose CT Screening (LDCT) helps identify the earliest stages of lung cancer by detecting tiny lung nodules. LDCT uses less than a quarter of the radiation of a conventional CT scan.

Lymphoscintigraphy is a diagnostic imaging procedure used to identify the sentinel lymph node, or the first draining lymph node nearest cancer cells.



Progress Towards Achieving Excellence in Breast Cancer Screening, Prevention & Diagnosis

DMG was the first to offer 3D mammography (Breast Tomosynthesis) in Chicago's western suburbs and has continued to upgrade existing equipment to offer patients enhanced imaging options for both screening and diagnostic procedures. Currently, DMG has nine locations with ten 3D mammography machines with additional sites hosting digital mammography.

Radiology has also expanded services to include upright tomosynthesis stereotactic biopsy equipment, wire localization procedures and added lymphoscintigraphy services. We know our efforts to bring leading-edge technology to our patients are being recognized in the industry. We currently have two Breast Imaging Centers of Excellence (BICOE) accreditations along with an additional site currently under review for accreditation.

In addition to adding new technology, DMG also made a few program changes to mammography services to enhance the patient experience. DMG wants to make getting a mammogram as easy as possible for patients. A "no order mammography" program was created to remove barriers to care so any patient (meeting certain criteria) can get a mammogram without a physician order. A yearly reminder program to encourage eligible patients to schedule their yearly screening mammogram was also implemented to encourage early intervention.

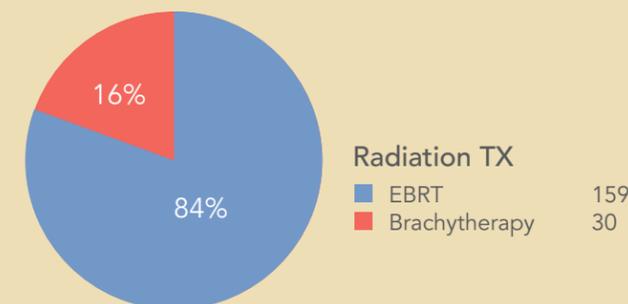
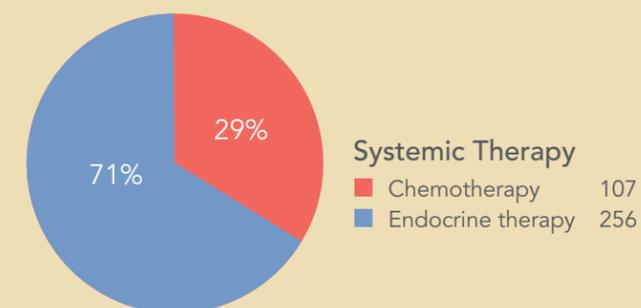
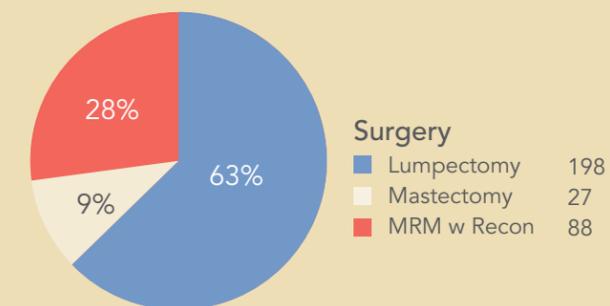
We also created a process to acquire previous images from other local institutions for new patients so that radiologists have prior scans at the time of review. This process resulted in fewer callbacks because old images were available for comparison.



2013 DMG BREAST CANCER EXPERIENCE

AJCC Stage at Diagnosis

Breast Cancer Total Cases = 340



Highlights of the Program (Cont.)

Advanced Imaging

Advanced imaging is a crucial element in cancer treatment. DMG is committed to delivering high quality imaging to support the Integrated Oncology Program and works in close cooperation with disease and specialty boards to detect stage and assess response to therapy. Radiology services are all accredited by the American College of Radiology and all imaging procedures are conducted under the supervision of board-certified and sub-specialty trained radiologists.

DMG sites utilize low-dose equipment for procedures that have ionizing radiation and have established protocols to ensure high quality imaging with the lowest radiation dose possible.



Radiation Oncology Services

DMG's board-certified physicians, physicists, radiation therapists and nurses use their specialized training and experience to help patients fight their disease with the most advanced therapies available. DMG aims to deliver precise radiation treatment for every patient, every day. This team provides evidence-based treatment and is set up to also deliver the best possible patient experience.

State-of-the-Art Technology & Treatment

DMG acquired a linear accelerator for radiation therapy through which treatment can be delivered with unparalleled ease, precision and speed. The system's sophisticated architecture synchronizes imaging, patient positioning, motion management, beam shaping and dose delivery. Most importantly, it's accurate. The system performs accuracy checks every ten milliseconds for a targeted treatment.

As we have incorporated innovative technologies we established a protocol for High Dose Rate (HDR) Brachytherapy for breast and skin cancers. For breast cancer, Accelerated Partial Breast Irradiation (APBI) is an alternative to the standard whole breast radiation, a patient may be offered a shorter course of breast radiation using a radiation delivery device inserted into the lumpectomy cavity. This highly effective dose of radiation greatly reduces treatment times for patients compared to other therapies, with treatment taking place twice a day for five days.

In addition, the Radiation Oncology team works to coordinate the comprehensive care of patients with head and neck cancer per national standards and protocol, which includes: dietary, dental, physical therapy to prevent lymphedema, speech and swallow evaluations, and GI evaluations as needed.



Medical Oncology Services

DMG's five board-certified oncologists/hematologists provide a wide range of services in a caring and comfortable environment at five different locations. Our specialists manage chronic and acute non-malignant blood disorders, leukemia and lymphoma and solid tumor treatments. Our physicians keep current in changes in clinical advances and modify their practice by adhering to the latest in cancer care by following National Comprehensive Cancer Network® (NCCN) guidelines on treatment and surveillance.

At the heart of our oncology care are the oncology nurses; a team of highly-skilled nursing professionals who compassionately care for their patients and the families of those patients. They spend their days helping people who are faced with life threatening diagnoses and provide them with the care, compassion and clinical excellence they need to help them through their cancer journey. Patients are treated as family here and the nurses celebrate when patients complete treatment and mourn the loss of others.

Our nurses pride themselves on knowing that they made a difference. They are highly regarded by the patients and their families and are recognized as being special caretakers who provide a sense of calm during an extremely frightening time. The role of the oncology nurse during cancer treatment is essential to establishing a good patient and family experience within the oncology department.

DMG CANCER STATS BY ANATOMICAL SITE

SITE	#	%
Breast	340	29
Prostate	220	19
Digestive System	145	13
UGI	43	
Colorectal	102	
Lung & Bronchus	122	10
Lymphoma HD & NHL	51	4.5
Nodal	35	
Extranodal	16	
Thyroid	51	4.5
Skin-Melanoma	51	4.5
Leukemia all Types	31	3
Kidney/Urinary Bladder	41	3.5
Head and Neck	31	3
Myeloma	19	1.5
Miscellaneous – GU/GYN/Other	51	4.5

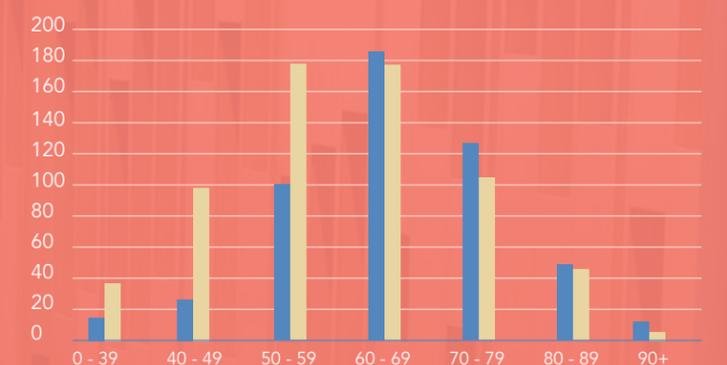
% may not equal 100 due to rounding

Statistical data compiled by DMG Cancer Registry.

ALL CASES AGE AT DIAGNOSIS BY GENDER

AGE GROUP	MALE	FEMALE
0 - 39	17	37
40 - 49	26	98
50 - 59	101	177
60 - 69	184	172
70 - 79	127	106
80 - 89	49	46
90+	10	4
	514	640

AGE AT DIAGNOSIS BY GENDER





Infusion Center

Infusion Center services are integral to our medical oncology services. The four infusion centers are staffed with experienced certified in chemo and biotherapy, who are specially trained to administer all chemo-toxic drugs and monitor patients while in treatment. All patients receive a customized treatment plan for their infusion needs and the care is monitored by the dedicated nurses every step of the way. Additionally, onsite lab services are available at each location.

To enhance our medical oncology patient experience we have an infusion pharmacy member as part of the care team. Our infusion pharmacy is staffed by PharmDs and certified pharmacy technicians with special expertise in chemotherapeutic agents. Our onsite pharmacists help to increase the safety and efficacy of prescribed chemotherapies. The pharmacists calculate appropriate chemotherapy doses based on BSA, weight, and renal function and assess possible drug interactions and contraindications to therapy. This quality initiative reflects the highest level of integrated, patient-centered care.

DMG has the highest commitment to advanced technology and continues to show this through the use of a closed system device. Oncology pharmacists oversee the preparation of chemotherapy in USP 797 approved clean rooms where therapy is prepared using the most advanced sterile techniques with the use of closed system transfer devices (CSTD). This process significantly reduces the chance of any exposure to hazardous materials leading to absolutely no exposure of chemotherapy to staff.

DMG has also opened The Pharmacy of DuPage Medical Group at the Lisle Medical Office Building in order to provide easy access to medications for patients who need oral-oncology. The pharmacy is aligned with the oncology department financial counselor and the national Patient Assistance Network in order to help patients gain access to drug assistance (if necessary) and to ensure their out-of-pocket expense is as low as possible.

In addition, our highly specialized care team has implemented a clinical quality measure around antiemetic schedules. Revised Antiemetic Schedules have been adapted to all chemotherapy patients' profiles based on Multinational Association of Supportive Care in Cancer (MASCC™). We now use the MASCC screening tool to evaluate the effectiveness of our antiemetic regimens. Based on analysis, we translate those outcomes into improved patient care and better quality of life for patients during treatment.

Nutrition Counseling

DMG dietitians provide expert care through comprehensive nutrition assessment, education and supplementation. Our goal is to prevent malnutrition, reduce side effects, promote positive, healthy eating habits and enhance overall well-being and quality of life – especially while undergoing treatment.

Dietitians work with patients to create a personalized meal plan for optimal health and to help lessen the side effects of treatment. While meeting with a dietitian soon after diagnosis can be an important step to early intervention, patients have access to a licensed dietitian at any point during their cancer experience.



Oncologic Palliative Care

Palliative care is evidence-based, specialized medical care shown to improve pain and symptom control for those with serious illnesses. We offer palliative care services to oncology patients through an advanced practice nurse (APN) at all clinic locations. Working with the patient's oncologist, and healthcare team, the palliative care APN provides consultation on symptom management and care-planning needs to improve the quality of life during any phase of a patient's illness. DMG APNs combine nursing and medical management for patients with complex needs. Through diagnostic skills, pharmacologic knowledge, and clinical judgment, the APN is able to formulate a care plan specific to a patient's needs.

Genetic Counseling

DMG's genetic counseling program is another part of our commitment to providing comprehensive oncology services to the patients and communities we serve. This service is available to individuals who are at an increased risk for a hereditary cancer syndrome. Genetic counseling helps patients make informed medical decisions based on their own personal risk assessment. Genetic counseling can also help to provide the patient's family with important cancer risk information. A consultation with a genetic counselor can have a significant impact on a person's life by allowing them to better manage their health and reduce their risk of developing cancer through increased awareness, screening and management.

Our licensed Genetic Counselor sees patients and families with many different types of cancer. DMG is committed to providing a comprehensive plan to help assist patients and their families with all aspects of the risk assessment and testing process including surveillance, surgical decision-making and follow-up care.



Lab, Pathology & Histology

The laboratory provides testing for many types of cancer. The highly sensitive lab tests are conducted by skilled testing personnel, along with key partners, to provide quality services for patients. The laboratory offers processing for biopsies of the breast, colonoscopy, prostate, pap smears, thin preps and skin.

For our quality measure we adopted Hemocult ICT testing, for colorectal screening criteria, this method provides a higher sensitivity. The ICT testing is an immunochemical fecal occult blood test, which has a three-day collection kit for the patient, versus a one-day collection. DMG utilizes the three-day collection kit as it offers an improved detection rate.

DMG's Histology lab, along with our partnership with Edward Hospital's pathology department and clinical pathologists, provides professional services for all of the subgroups of cancer giving a more convenient level of care for patients. The DMG Histology lab and Edward Hospital pathology are both accredited through the College of American Pathologists (CAP). The CAP is a leading organization in laboratory quality assurance and accreditation is awarded only to facilities that adhere to the highest levels of quality in laboratory practices and commitment to patient care.

Psychosocial Services & Distress Screening

As part of our commitment to patient-centered care, we recognize our patients will have more than just physical needs that need to be met throughout their cancer treatment. We have the team and tools in place to address the psychosocial needs of our patient population and to make the appropriate connections to a variety of support services. We assess these needs through a comprehensive distress screening process, based on NCCN guidelines that are facilitated by an oncology social worker. Our patients and their families can be confident that our support extends to them beyond just their physical diagnosis and treatment plan.



Surgical Services

What can you expect from the surgery department? DMG surgeons provide a multidisciplinary approach to cancer diagnosis and treatment and perform hundreds of surgical cases each year. Dedicated to cancer care, surgeons trained in surgical oncology, breast, colorectal and endocrine cancers are on staff at five area hospitals: Advocate Good Samaritan Hospital, Adventist Hinsdale Hospital, Elmhurst Memorial Hospital, Edward Hospital and Central DuPage Hospital.

Expanded Physician Services

Surgical Oncology recently expanded its surgical services to include the following cancer focus: breast, colorectal, endocrine, hepato-biliary, pancreatic, skin and soft tissue and gastrointestinal cancers. Surgical Oncology physicians participate in physician-driven discussions in multidisciplinary steering committees to identify quality initiatives that may improve treatment outcomes.

Growth of Robotic-Assisted Surgery Offerings

Many of our physicians/surgeons are trained and credentialed to perform robotic-assisted surgeries at local hospitals. DMG surgeons routinely perform robotic-assisted laparoscopic techniques including:

- Radical Nephrectomy
- Partial Nephrectomy
- Cystectomy
- Prostatectomy
- Colectomy
- TransOral Robotic Surgery (TORS)

DMG Ambulatory Surgery Center

DMG has its own Ambulatory Surgery Center where credentialed physicians can perform out-patient procedures. Surgeons perform diagnostic and staging procedures that relate to all types of cancer including head and neck, pancreas, thyroid, colorectal, genitourinary system, and wide excision of melanoma as well as the capability to perform lymphatic mapping and sentinel lymph node biopsy (SLNB).

Some of the specific screening procedures and surgeries performed include:

- Colonoscopy
- Esophagogastroduodenoscopy
- Breast biopsy/breast lumpectomy
- Cystoscopy with TURBT or bladder biopsy



Sophisticated Technology for Breast Reconstruction

DMG Plastic Surgeons use the SPY Elite Intraoperative Perfusion Assessment System to capture images during breast reconstruction surgeries to help evaluate blood flow in vessels and circulation in tissue. Both are important aspects in reaching a successful outcome for patients. SPY imaging helps in surgical decision making by gathering the needed information when using tissue expanders and performing flap reconstructions.

Independent studies in breast reconstruction have demonstrated that the use of SPY decreases rates of post-operative tissue death and non-healing wounds, returns to surgery and prolonged hospital stays. New techniques such as use of acellular dermal matrix, negative pressure wound management and autologous fat grafting, are also used during breast reconstruction surgeries.

New Procedural Offerings

In the past two years, DMG has developed a comprehensive program for diagnosing and staging of esophageal, gastric, pancreatic and colorectal cancer via endoscopic ultrasound (EUS). Under the leadership of an interventional gastroenterologist radiofrequency ablation (RFA) and endoscopic mucosal resection (EMR), new technologies in the area of esophageal cancer treatment, are now offered. Last year DMG physicians performed nearly 30 of each new procedure. In addition, self-expandable metal stents are being placed endoscopically to palliate obstructive symptoms induced by either esophageal, gastric, duodenal, biliary or colonic malignancies.

DMG surgeons started performing transanal minimally invasive surgery (TAMIS) and transanal endoscopic microsurgery (TEMs) over the past year, two of the newest minimally invasive colorectal options for patients with rectal tumors. These procedures allow surgeons to excise large polyps and masses that cannot be completely removed during a routine colonoscopy.

DMG also offers minimally invasive diagnostic techniques such as endobronchial ultrasound (EBUS) and navigational bronchoscopy for the diagnosis and staging of lung cancer.



Colorectal Cancer Screening

Colonoscopy is the preferred screening mechanism for colorectal cancer. DMG gastroenterologists performed nearly 12,000 of these procedures in the last year. During the year we also tracked the monthly colonoscopy adenoma detection rates as part of a quality initiative.

TOPIC	MEASURE	GOAL	DMG STATUS
Colorectal Cancer	Adenoma detection rate minimum detection rate of 23% for adequate cancer	100%	Met Goal

Lung Cancer Prevention/Screening

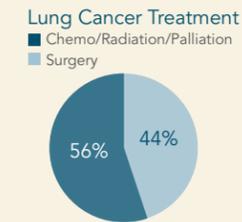
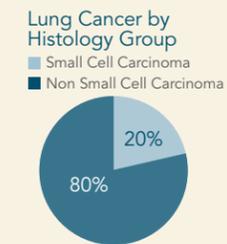
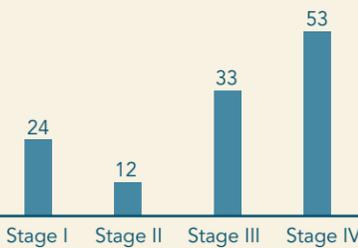
DMG follows the U.S. Preventive Services Task Force recommendations for screenings. This includes patients who are age 55 to 80 years, have a 30 pack/year smoking history, and currently smoke or have quit within the past 15 years. Additionally, positive CT scans are monitored according to the "Fleischer Society" guidelines. These guidelines offer suggestions for the frequency of follow-up imaging based on the size of lung nodules and risk factors of the patient.

Smoking Cessation is a critical component of overall health and well-being. DMG physicians offer smoking cessation counseling during appointments for anyone who currently smokes. Additionally, one-on-one or group smoking cessation classes are offered with a certified instructor.

LUNG CANCER | Diagnosed and/or Treated at DMG

HISTOLOGY GROUP	#OF PTS
Non Small Cell Carcinoma	98
Small Cell Carcinoma	24

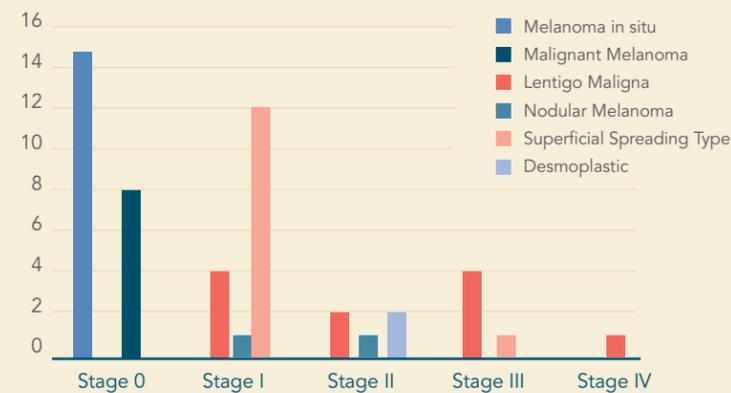
TX TYPE	#OF PTS
Surgery	54
Chemo/Radiation/Palliation	68



Skin Cancer Screening

With regular screening and prevention practices, and prompt attention to skin lesions of concern, DMG has been fortunate in catching and treating melanomas at an early stage. Melanoma represents less than 2% of skin cancers but results in the most deaths and incidence has been increasing over the past four decades.

MELANOMA | Histology by Stage



AJCC Stage at Diagnosis (n=51)

Mohs Surgery

Our experienced specialists follow specific standards of care and perform Mohs Surgery for patients with melanoma generally located on the face or neck. The Mohs microscopically controlled technique offers a cure rate of 98-99%, the highest of any technique available in the management options based on the cancer stage.

- Stage 0 – Patients with stage 0 disease is treated by excision with minimal, but microscopically free, margins
- Stage I melanomas – Excision with or without lymphnode management

TOPIC	MEASURE	GOAL	DMG STATUS
Melanoma - TX	Percentage of patients regardless of age with a new diagnosis of melanoma or a history of melanoma who received all of the established quality protocol of care within the 12 month reporting period.	100%	Met Goal
Dermatology Department Quality	Percentage of patients, regardless of age, with stage 0 or 1A melanoma, without signs or symptoms, for whom no diagnostic imaging studies were ordered.	100%	Met Goal

Radiation Tattoo Mark Removal Program

Recently, DMG adopted a new program from the American Society for Laser Medicine and Surgery, Inc. (ASLMS), "New Beginnings: Radiation Mark Removal Program." This national philanthropic campaign removes radiation treatment marks free-of-charge for cancer patients. The radiation "tattoo" marks can be removed through a simple laser surgery process. DMG has three board-certified dermatologists, who provide this service and are among 100 other board-certified ASLMS in the United States. This service is available for both DMG and non-DMG patients who have undergone radiation therapy.

Cancer Diagnosis & Treatment

Acting quickly and efficiently is a critical part of patient care. DMG offers same day appointments for anyone who has been diagnosed with an abnormal imaging or a potential cancer diagnosis. After the results are made available, usually in a couple of days, patients are then immediately referred to oncology for prompt consultation, oftentimes the same or next day.

Cancer Rehabilitation

Cancer Rehabilitation is a service to help patients cope with the physical side effects due to cancer treatment and to assist them in regaining control over the activities of daily living. We can assess the need for cancer rehabilitation through our comprehensive distress screening process and refer those patients to our cancer rehab team that includes physical and occupational therapists for a one-on-one consultation. As a team, the therapists will create an individualized treatment plan and work closely with each patient to ensure success.

Endocrine Care

Thyroid cancer is the most commonly diagnosed endocrine cancer and the fastest increasing cancer (by new diagnoses) in both men and women. Fortunately, thyroid cancer is usually treatable and is often cured with surgery. Even when thyroid cancer is more advanced, effective treatment can be available for the most common forms of thyroid cancer. Even when thyroid cancer is more advanced effective treatment, such as I131 Thyroid Cancer Ablation, can be available for the most common forms of thyroid cancer.

DMG is committed to prevention, diagnosis, and treatment of all endocrine cancers including thyroid, parathyroid, adrenal, pancreatic, pituitary, testicular and ovarian tumors. We believe that excellent treatment refers to the technical aspects of medicine and surgery and also in how we guide the patient through that process. Our care team works tirelessly to ensure patients understand each step in their care and who to contact when questions arise.

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

Timely Diagnosis & Treatment In-Office

We understand that convenience can make the difference in diagnosis and treatment. DMG provides in-office ultrasound for diagnosis and fine-needle aspiration of thyroid nodules at each location. Most of our physicians perform their own procedures, which are often at the same time as the initial consultation. This streamlined workflow allows the physician to be by the patient's side throughout the entire process: from consultation through the post-operative phase to long-term surveillance.



Non-Hodgkin Lymphoma

Non-Hodgkin Lymphomas (NHL) are a heterogeneous group of disorders that are generally divided into three groups based on their origin: from B Lymphocytes, T Lymphocytes or NK cells.

In the U.S., B cell NHL is most commonly diagnosed. According to the World Health classification of lymphoid malignancies, there are 25 different types based on their distinct morphological and immunophenotypic features and in some cases unique chromosomal and molecular changes.

Treatment is usually based on the type of lymphoma, stage at presentation and prognostic group. For example, low grade NHL that are local and have a favorable risk group can be treated with local radiation but advanced stage disease is either observed if

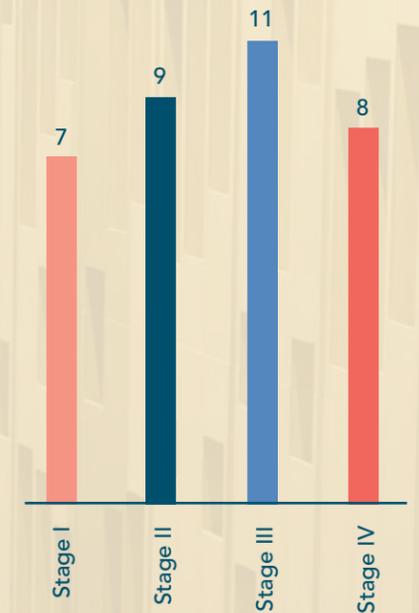
non-bulky or treated with systemic immune therapy or a combination of immune and chemotherapy. In contrast the higher-grade lymphomas are treated with intensive immuno-chemotherapy.

In the last few years, many new lymphoma treatments have been approved by the Food and Drug Administration. Patients now have more options for treatment and as a result have a greater chance at successful long term survival.

In asymptomatic patients with indolent forms of advanced NHL, treatment may be deferred until the patient becomes symptomatic as the disease progresses. When treatment is deferred, the clinical course of patients with indolent NHL varies; frequent and careful observation is required so that effective treatment can be initiated when the clinical course of the disease accelerates.

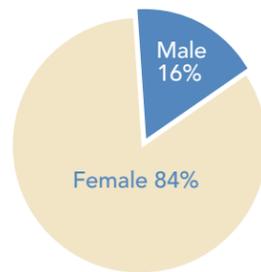


NODAL LYMPHOMA BY STAGE AT DX
N=35

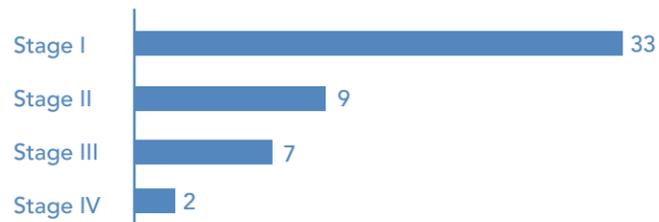


THYROID CANCER | Stage & Treatment

AJCC Stage at Dx	Thyroid Cancer (n=51)
Stage I	33
Stage II	9
Stage III	7
Stage IV	2
Male	8
Female	43



Thyroid Cancer Stage at Dx



Prostate Cancer

Prostate cancer is the most commonly diagnosed cancer among men and is the second leading cause of male cancer death. Our genitourinary team serves at risk patients with fellowship-trained physicians in urologic oncology, advanced laparoscopic and robotic oncology. DMG has launched several new programs to improve the care provided to genitourinary patients.

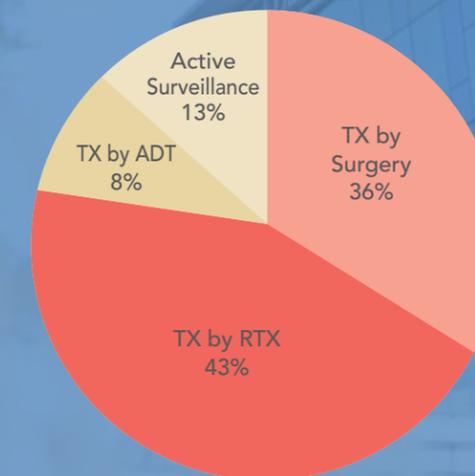
They include:

- A Bone Health Initiative for patients with bone metastases
- A salvage cryosurgery program for patients whose cancer returns after radiation therapy
- Use of MRI Prostate for active surveillance and diagnosis of prostate cancer
- Establishing multidisciplinary setting for new and emerging therapies for treating urologic cancers

PROSTATE CANCER | Treatment Modality at DMG

TX TYPE	#
TX BY SURGERY	79
TX BY RTX	94
TX BY ADT*	19
ACTIVE SURVEILLANCE	28

*hormoneTx



STAGE AT DIAGNOSIS
N=220



Measuring Quality

How do patients know if they are receiving good quality healthcare?

How do physicians and nurses identify the steps that need to be taken for better patient outcomes?

And how do insurers and employers determine whether they are paying for the best care that science, skill and compassion can provide?

Performance Measures for Breast Cancer Monitored by Commission on Cancer

Performance measures give the healthcare community a way to assess the quality of care provided against recognized standards. While quality measures come from many sources, those endorsed by the National Quality Forum (NQF) have become established as among the best. A NQF endorsement reflects rigorous scientific and evidence-based review, input from patients and their families and the perspectives of people throughout the healthcare industry.



MEASURE	BENCHMARK/ GOAL	DMG STATUS
Radiation therapy administered within 365 days after first diagnosed for woman under age 70 who received breast conserving surgery for breast cancer	90% or upper bound of the 95%CI >= 90%	100%
Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis or women under 70 with AJCC T1cN0M0, or Stage II or III hormone receptor negative breast cancer	90% or upper bound of the 95%CI >= 90%	100%
Tamoxifen or third generation aromatase inhibitor is considered or administered within 365 days of diagnosis for woman with AJCC T1cN0M0, stage II or stage III hormone receptor positive breast cancer	90% or upper bound of the 95%CI >= 90%	100%

Support Services & Resource Center

The promise of patient-centered care is to treat the whole person: body, mind and spirit. The DMG Integrated Oncology Program is committed to making sure we have the staff and resources in place to deliver on this promise through our cancer support services offerings. Our Cancer Resource Center is available to patients and their loved ones to gather and have access to free information on cancer diagnoses, treatment options, community resources etc. Trained staff members are available to assist patients and caregivers find the information they are seeking if it is not available in the resource center.

The American Cancer Society Wig Boutique is open several days a week and staffed by trained volunteers to offer personalized fittings for women and men experiencing hair loss as a result of their cancer treatment. The boutique features brand new wigs, hats and scarves and patients can select the style that works best for them, at no charge.

Regular offerings of art therapy classes, educational workshops, exercise classes, yoga, energy balancing therapies, and support groups are made possible through dedicated DMG staff as well as by local community resources including the LivingWell Cancer Resource Center and Wellness House.

Financial Counseling

Finances are often a major concern when dealing with a serious illness. Our financial counselor(s) facilitates understanding of health insurance, out-of-pocket expenses and makes connections to eligible and need-based financial assistance through various funding sources.



Community Outreach

Our community. It's where we live, it's where we work, it's where we combine our resources and it's where we build our partnerships. Working together. It's what we do. Here are the recent activities we have participated in within the community.

ACTIVITY	DATE	OVERVIEW
Cancer Prevention Study-3 (CPS-3)	September 2013	DMG worked to recruit men and women (patients/staff/etc.) at two locations with no personal history of cancer to join the research study. DMG enrolled 152 people.
American Cancer Society Black & White Ball	February 2014	Dennis Fine, COO, serves on the Leadership Council, DMG is an event sponsor
Check Your Skin event at Illinois Wesleyan Health Club	March 2014	DMG staff provided skin wellness education and checks at event
Check Your Skin event at Illinois Wesleyan Kappa Kappa Gamma Sorority	April 2014	DMG staff provided skin wellness education and checks at event
May the Fourth Be With You, Walk for Wellness House	May 2014	DMG served as an event sponsor
Cancer Survivor Day	June 2014	DMG sponsors and provides volunteers to the annual Cancer Survivor Day event
Carillon Retirement Community Health Fair	June 2014	DMG mid-level providers provided skin cancer screening to residents of the community
Relay for Life	August 2014	DMG staff members participated by forming a team to walk and serving as an event sponsor
Prostate Cancer Walk	August 2014	DMG served as an event sponsor
SPOTme Skin Cancer Screening at the Bears Family Festival Soldier Field	August 2014	DMG dermatologists provided skin cancer screenings to staff, players and families
Morton Arboretum Employee Wellness Fair	September 2014	DMG mid-level providers provided skin cancer screenings and information to Morton Arboretum staff
Making Strides Against Breast Cancer	October 2014	DMG staff members participated by forming a team to walk and serving as a flagship event sponsor
The Play Sun Smart Skin Cancer Screening	June/August 2014	DMG dermatologists provided skin cancer screenings to front office staff, and players for the Chicago Cubs

Educational Presentations

Expertise. Knowledge. Experience. Just a few of the reasons DMG's team of healthcare leaders, innovators and communicators are in demand as speakers and presenters. Below is a listing of our educational speaking engagements.

TOPIC	DATE	PRESENTER
Life After Prostate Cancer: Effective Treatment for Urinary Incontinence & ED	March 12, 2014	Amit Patel, MD, Urologist
Skin Cancer	March 15, 2014	Ashish Bhatia, MD, FAAD, Dermatologist
Skin Wellness	April 29, 2014	Alix Charles, MD, FAAD, Dermatologist
Managing Fatigue & Insomnia	May 6, 2014	Katherine Baker, MD, Radiation Oncologist
Nutrition During Cancer Treatment	July 14, 2014	Carolyn McCabe, MS, RD, LDN, Dietitian
Breast Cancer Update	October 14, 2014	Amrit Mangat, MD, FACS, Breast Surgeon
Thyroid Cancer: The New Epidemic?	November 17, 2014	Sara Chowdhury, MD, Endocrinologist



Groups/Classes

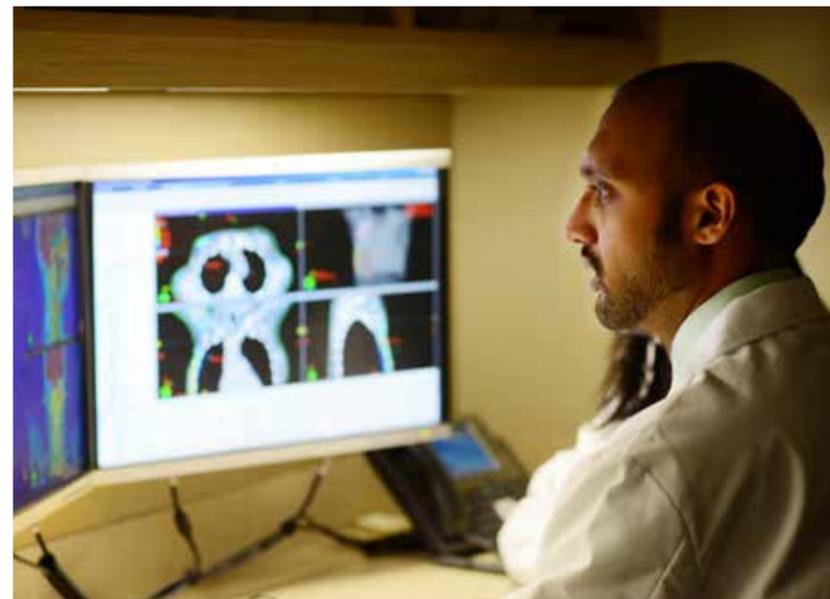
Our ongoing quarterly classes are designed to support caring for the mind, body and soul and are a key part of the integrated approach to cancer care. Below are a few of our listed offerings.

GROUP/CLASS	OVERVIEW
Yoga	A yoga class offered weekly for cancer patients and their caregivers
Massage Therapy	Free massage appointments available for those living with cancer and their caregivers
Acupuncture & Oncology	Class to learn how acupuncture can benefit cancer patients
Art Therapy	Explore self-expression through various art mediums
Energy Balancing Therapies	Relaxing energy therapy for cancer patients (Chios & Reiki)
American Cancer Society: Look Good ... Feel Better™	Licensed beauty professionals help female cancer patients cope with appearance related side effects of cancer treatment
Step Ahead in Action	A survivor support group
Brown Bag Book Club	Monthly book club focusing on health and healing

PHYSICIAN MEMBER	NAME
Committee Chair	Brian J. Moran, MD
Cancer Liaison Physician	Janet Chin, MD
Surgery	Amrit Mangat, MD, FACS
Radiology	Juliet H. Fallah, MD
Pathology	Richard Anderson, MD
Medical Oncology	Saadia Yunus, DO
Radiation Oncology	Brian J. Moran, MD
Pulmonology	Matthew J. Baugh, MD
Gastroenterology	Rameez Alasadi, MD
Otolaryngology	Griffith Hsu, MD
Urology	Amit R. Patel, MD
Surgical Oncology	Ciarán Bradley, MD, MA

PROGRAM TEAM MEMBERS

Nurse Leadership	Kathryn Wieser, BSN, MBA, OCN
Quality Professional	Kathryn Wieser, BSN, MBA, OCN
Cancer Registry Manager	Misbah Baggia, CTR, RHIT
Co-Director Integrated Oncology Program, Director Surgery & Urology	Loren Baer, CMA (AAMA), MHA
Co-Director Integrated Oncology Program, Director Radiation Oncology	Matt Matushek, RT (R)(T)
Radiology Manager	Theresa Levigne, CNMT, RT(N), BS
Nurse Navigator	Kathy Omerod, APN, AOCN, CBCN
Community Outreach	Corie Rectenwald, BS
Research Nurse	Rowie Tran, RN, BSN, CCRC
Palliative Care	Susan Hawbaker, MSN, APN, ANP
Social Worker	Rebecca Ness, MS, MSW
Oncology Pharmacy	Jigar Thakkar, PharmD
Survivorship Care	Nancy Gerum, APN, ANP-BC



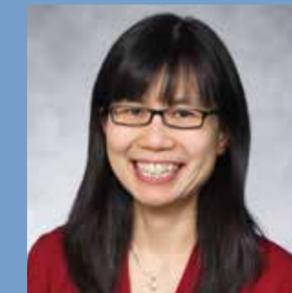
Thank You

As we have gathered data, input from physicians, medical teams, employees, patients, partners and community, we see that we are working for a common goal: for the Integrated Oncology Program to provide comprehensive cancer care in a convenient community setting. Each day, DMG is able to utilize our many resources to provide excellent multidisciplinary cancer care for all cancer types to all types of patients.

The weekly Cancer Conferences are an interdisciplinary patient management discussion where plan of care is summarized based on current standards of care, references to the national guidelines, results of completed clinical trials, and availability of open clinical trials. In 2013, our specialists discussed a total of 406 newly-diagnosed cases encompassing a wide range of cancer types. We are surpassing the Commission on Cancer's guideline on the percentage of discussed cases in a year.

DMG's physician education committee granted continuing medical education credits for this highly engaging physician educational activity. This is an important year for the DMG Integrated Oncology Program as we prepare for the accreditation process from The Commission on Cancer. From the launch of new programs, education, cancer care initiatives, new staff, additional technologies and even the anecdotal stories told by our patients, we deliver the standards established by The Commission on Cancer to ensure quality and comprehensive cancer care.

Janet Chin, MD
Cancer Liaison Physician
DuPage Medical Group





Duke Medical Group



DuPage Medical Group

| WE CARE FOR YOU

DuPageMedicalGroup.com