NAPBC Best Practices Webinar Series: Quality in Action

Optimizing Breast Conference

January 26, 2021

Webinar Series Chair:
Colette Salm-Schmid, MD, FACS

Moderator:
Mehra Golshan, MD, MBA, FACS
Webinar Logistics

- All participants are muted during the webinar

- Questions – including technical issues you may be experiencing – should be submitted through the question pane

- Questions will be answered as time permits; additional questions and answers will be posted on the website

- Please complete the post-webinar evaluation you will receive via email

- Recorded content will be available through the ACS Learning Management System
CONTINUING MEDICAL EDUCATION CREDIT INFORMATION

Accreditation
The American College of Surgeons is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

AMA PRA Category 1 Credits™
The American College of Surgeons designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credit™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.
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In accordance with the ACCME Accreditation Criteria, the American College of Surgeons must ensure that anyone in a position to control the content of the educational activity (planners and speakers/authors) has disclosed all financial relationships with any commercial interest (see below for definitions).

**Commercial Interest:** The ACCME defines a “commercial interest” as any entity producing, marketing, re-selling, or distributing health care goods or services used on or consumed by patients. Providers of clinical services directly to patients are NOT included in this definition.

**Financial Relationships:** Relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. ACCME considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

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The ACCME also requires that ACS manage any reported conflict and eliminate the potential for bias during the educational activity.

- Any conflicts noted below have been managed to our satisfaction.
- The disclosure information is intended to identify any commercial relationships and allow learners to form their own judgments.
- However, if you perceive a bias during the educational activity, please report it on the evaluation.
## Disclosure Information

### Optimizing Breast Conference - Disclosures Reported

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Role(s) in Activity (i.e. speaker, moderator, author, etc.)</th>
<th>Has Financial Relationship w/Commercial Interest* (Yes/No) - If yes, complete columns E-G</th>
<th>Name of Commercial Interest</th>
<th>What was Received?</th>
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<tbody>
<tr>
<td>Mehra</td>
<td>Golshan</td>
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<td>Lauren</td>
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This activity is designed for:

- Cancer committee members
- Navigators
- Nurses
- Physicians
- Program leadership (cancer program administrators, breast program directors, breast program leaders)
- Registrars

Learning Objectives

- Describe the current challenges with managing breast conferences, including logistics and operational issues (participation, scheduling) as well as the process to identify the best treatment options that respect the needs of the patient.
- Discuss successful strategies used to improve the breast conference discussion and patient care recommendations, and the engagement of both physicians and allied health professionals.
- Compare and contrast options to improve breast conferences and the successful experiences in a variety of health care settings with an eye toward identifying the best methods to address breast conferences in their own NAPBC-accredited center.
Introducing Our Moderator

Mehra Golshan, MD, MBA, FACS
Deputy Chief Medical Officer for Surgical Services
Director of the Breast Cancer Program for the Yale Cancer Center,
Smilow Cancer Hospital and Smilow Cancer Hospital Care Centers
New Haven, CT
Introducing Our Presenters

**Edith Asbury, MLS, AHIP**
Medical Librarian/Informationist
Penn State Health Holy Spirit Medical Center
Camp Hill, PA

**Veronica Campos, DNP, RN, NE-BC, OCN**
Past President of the ONS San Antonio Chapter
Director Oncology Navigation
San Antonio, TX
Introducing Our Presenters

Nikki DeLano, MSN, RN, ONN-CG
Clinical Oncology Nurse Manager for Breast, Gynecology Oncology, and Head and Neck cancers at Sarah Cannon
Nashville, TN

Lauren Turza, MD, FACS
Chief of the Breast Care and Research Center at
Walter Reed National Military Medical Center (WRNMMC)
Bethesda, MD
Optimizing Breast Conference

The Embedded Librarian
Edie Asbury, MLS, AHIP
Member of Breast Cancer Case Conferences
Penn State Health Holy Spirit Medical Center
Penn State Health Breast Care Center

- Located near Harrisburg, Pennsylvania
- NAPBC accredited since 2018
- Weekly Breast Cancer Case Conferences include breast surgeons, radiologists, pathologists, medical oncologists, radiation oncologists, plastic surgeon, physician assistant, and nurse navigator
Best Practice
Embedded Librarian at Breast Conference

• A librarian attends the weekly breast cancer case conferences, where she is readily available to take requests for follow-up literature searches on questions that arise from the discussions.
• Searches with abstracts of evidence-based articles are emailed, usually in the same day, to all members.
Rationale

• Best-practice, evidence-based studies are needed to assist in decision-making for complex cases.
• Barriers to providers answering clinical questions:
  – access to electronic information resources
  – skills in searching information resources
  – clinical question tracking
  – time factors
Implementation

- Librarian began attending weekly meetings in 2017.
- Quality project – survey for 8 topics researched
  - 21 responses found the information beneficial
  - 2 indicated that it changed their practice
- Each year 16 or more topics have been requested for follow-up.
- Benefits of librarian’s presence at meetings
Value Added Examples of topics

- Retreatment radiation therapy?
- Value of Oncotype testing in deciding whether to administer radiation therapy in DCIS patients?
- BRCA and panel genetic testing for two different cancers in the same breast?
- Radiation postmastectomy for close margin DCIS?
- Can the axilla be cleared with preop antiestrogen?
- In invasive and DCIS, does HER2 match or are they discordant?
- What is the homogeneity of HER2 in invasive cancer?
- What is the significance of HER2 in DCIS (predictivity or treatment)?
- MRI in high-risk breast cancer patients: frequency and length of follow-up screening
Planting Seeds for the Future

- Easy to implement
- Hospital librarians are eager to participate in meeting clinical needs—other breast care programs can benefit from the support of library services too.
- Involving a librarian positively impacts the care of patients.
Resources: Key Research Tool

Medline database

• National Library of Medicine
• 26 million records from 5,200 medical journals
• 1966 to present
• Searchable in PubMed (or Ovid or EBSCO Medline)
• Uses MeSH terms or keywords
Contact Information

Edie Asbury, Librarian
Penn State Health Holy Spirit Medical Center
(including the Breast Care Center)

easbury@pennstatehealth.psu.edu

(717)763-2664
Collaboration Across the Enterprise

Veronica Campos DNP, RN, OCN, NE-BC, BCT Member
Nikki DeLano, RN, MSN, ONN-CG, Program Manager
Methodist Hospital Breast Cancer Program

- NAPBC: accredited since 2014
- CoC: accredited since 1981
- Comprehensive Community Cancer Program
- 2019 analytic breast cases: 263
Best Practice
Create a National Breast Cancer Conference

- Utilize a multidisciplinary approach
- Participation from physicians and licensed experts from across the enterprise
Rationale
Comprehensive Treatment Planning

- Present complex breast cases
- Experts with varying experiences
- Review evidence-based guidelines
- Availability of clinical trials
- Identify most appropriate treatment options
- Increase patient confidence
Implementation

Plan
- Stakeholder identification
- Figure out logistics

Develop
- Virtual meeting guidelines
- Standardize agenda and slide deck
- WebEx resources

Execute
- Virtual WebEx meeting, quarterly at 7:30
- Email invitations
- Call for cases
- Completion of slide deck
- Promote attendance

The 1st conference was held in 2016

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Barriers of Implementation

- **WebEx**
  - Technological difficulties

- **Scheduling conflicts**
  - 4 different time zones

- **Engagement**
Value Added

- Comprehensive treatment planning
- Physician collaboration and engagement
- Development and/or modification of treatment pathways
- Identify best practices for conducting national meetings
- Implemented in 8 other solid tumors
- Improve patient outcomes

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Planting Seeds for the Future

• Ease of implementation: 6 out of 10
• Applicable for other programs or service lines
• Significance
  – Improve patient outcomes
  – Expanded network and integrated system
  – Access additional resources
  – Improves standardization across the enterprise
• Success
  – 560+ peer network of physicians participating
  – 22 pathways developed
  – 14,400+ patients impacted
Resources

2021 Breast Tumor Conference
Meeting Schedule

<table>
<thead>
<tr>
<th>Meeting</th>
<th>Date</th>
<th>Time</th>
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<tbody>
<tr>
<td>Q1 National Tumor Board</td>
<td>Friday, March 19, 2021</td>
<td>7:30am - 8:30am CST</td>
</tr>
<tr>
<td>San Antonio Breast Cancer Symposium Updates</td>
<td><strong>TBD</strong></td>
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<tr>
<td>Q2 National Tumor Board</td>
<td>Friday, June 30, 2021</td>
<td>7:30am - 8:30am CST</td>
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<td>Q3 National Tumor Board</td>
<td>Friday, September 21, 2021</td>
<td>7:30am - 8:30am CST</td>
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<tr>
<td>Q4 National Tumor Board</td>
<td>Friday, December 21, 2021</td>
<td>7:30am - 8:30am CST</td>
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<td><strong>TBD</strong></td>
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Virtual Meeting Guidelines:

1. **DO NOT PLACE CALL ON HOLD**
2. If the host mutes all lines, please press # to unmute prior to speaking to the group
3. Announce your name, specialty and location when speaking (as appropriate)
4. Arrive to meeting on time and be prepared
5. Keep an open mind and focus on a national solution, not just facility or market-based ideas
6. Allow every voice to be heard without interruptions, giving time for responses
7. Be willing to find common ground with differing opinions
8. Be aware of how calls are ended, acknowledging and thanking your participants

Important Clinical Records for Breast Cancer Patients

Pathology
- Core Biopsy Results
- Histopathological slides/pictures
- Histopathological conclusive reports

Breast Radiology
- Mammography, Ultrasound, Breast MRI Results
- Needle Biopsy Findings

Radiation Oncology
- Consult Notes
- Treatment Notes (IMRT, SBRT, SRT)
- Pre/Post Treatment Notes

Medical Oncology
- Consult Notes
- Systemic Treatment Planning
- Pre/Post Treatment Notes

Breast Surgery
- Reports for: Mastectomies, Reconstructive Surgery, Sentinel Lymph Node Biopsy

Other Clinical Findings
- Genetics Testing Reports
- Palliative Care Notes
- Primary Care Notes
- Previous cancer/treatment notes

2020
Tumor Conference Topics
Q1 – Cancelled due to Covid-19
Q2 – Neo-Adjuvant Breast Cancer
Q3 – Open to All Types of Cases
Q4 – Challenging Cases

Division & Presenter Participation
Continental – Joyce Moore
Continental – Stephanie Miller
Gulf Coast – Susan Escuder
West Florida – Alene Wright
West Florida – Jose Erbella
TriStar – Erika Hamilton
TriStar – Richard Geer

Do we want to dedicate one of our quarterly meetings to provide a quarterly update on current changes in Breast Cancer care?
Contact Information

Veronica V. Campos DNP, RN, NE-BC, OCN
Sarah Cannon Cancer Institute at Methodist Healthcare
Veronica.Campos@SarahCannon.com
D 210.575.0636 | M 210.627.0088

Nikki DeLano, RN, MSN, ONN-CG
Sarah Cannon, The Cancer Institute of HCA
Nicole.Delano@SarahCannon.com
D 615.329.6855 | M 615.426.7923
Optimizing Breast Conference

Multidisciplinary Breast Cancer Clinic and Conference

Lauren C. Turza, MD, FACS
Breast Program Director, Cancer Liaison Physician
Walter Reed National Military Medical Center
Walter Reed National Military Medical Center

NAPBC accredited since 2012

CoC accredited since 1951

CoC category: Academic Comprehensive Cancer Program

Analytic breast cancers 2019: 124

Disclaimer: The views expressed in this presentation are those of the presenter and do not necessarily reflect the official policy of the Department of Defense or the U.S. Government.
Best Practice

• Our multidisciplinary clinic (MDC), preceding the cancer case conference, is designed to efficiently expedite the evaluation and management of newly diagnosed breast cancer patients in order to create a tailored, individualized cancer treatment plan shortly after their breast cancer diagnosis.
Rationale

• Under the federal law, NNMC and WRAMC underwent a BRAC (Base Alignment and Closure) in September 2011
• Needed to merge two Breast Centers
• Wanted good patient care with good patient satisfaction

• How we did it:
  – Leadership meetings between breast center chiefs at both facilities
  – Identify Barriers: frequency of clinic, date, time of conference and clinic, cultural change, availability of providers
  – Ability of nurse navigators/admin support to run clinic
Implementation

Snap Shot of Our Hospital

- 250 bed academic medical center
- Inpatient/Outpatient
- Co-location of breast imaging and breast surgery
- Clinical specialists to practice at main hospital
- Nurse navigators to contact patients within 48 hours of diagnosis
- Arrange an MDC clinic date (every Thursday morning)

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<thead>
<tr>
<th>Time</th>
<th>Service</th>
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<tr>
<td>0800-0845</td>
<td>General Surgery</td>
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<tr>
<td>0845-0930</td>
<td>Support Services</td>
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<tr>
<td>0930-1015</td>
<td>Physical Therapy</td>
</tr>
<tr>
<td>1015-1100</td>
<td>Medical Oncology</td>
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<tr>
<td>1100-1145</td>
<td>Radiation Oncology</td>
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<tr>
<td>1145-1230</td>
<td>Cancer Genetics</td>
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<tr>
<td>1230</td>
<td>Research / Blood Draw</td>
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Patient 1

How we do it

1. Weekly MDC Conference (Thursdays at 3pm) ~ VIRTUAL
   - Led by medical oncology or breast surgery
   - Participants: Breast surgery, Oncology, Radiation Oncology, Radiology, Pathology, PT, Social Work, Nurse Navigators
   - All cases presented prospectively by surgery or oncology fellow
   - Review imaging, pathology slides
   - Each discipline presents recommendations on newly diagnosed patients
   - Review national guidelines and clinical trials

2. Breast tumor board (follows MDC Conference) ~ VIRTUAL
   - Present all pathology after surgery or new biopsies
   - Changes in clinical course or imaging for patients on treatment
Value Added

• Clinic
  • Improves efficiency of implementing treatment plans
  • Decreases appointment fatigue of patients
  • High overall satisfaction from patients
• Conference
  • Comprehensive evaluation of all patients
  • Improves communication between providers
  • Adherence to guidelines
  • Improves referrals to clinical trials
Planting seeds for the future

- Ease of implementation: 7

- We were able to show that patient satisfaction was excellent with this change. Patient Satisfaction Surveys (2018)
  - Facility, length of clinic, length of appointments, evaluation of clinical and research staff (1 - 5 rating)
  - 44 voluntary surveys returned in 2018
  - Average satisfaction score 99%
  - Vast majority of categories rated as 5 (rare 4s in time waiting between providers and length of appointments)

- Incorporation of Plastic Surgery

- Why would another program want to try this?
  - Streamlines and expedites patient care with high patient satisfaction
Resources

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- Patient appointment template
- Educational binder

NAPBC Best Practices Webinar Series: Quality in Action
Contact Information

Lauren C. Turza, MD, FACS
Walter Reed National Military Medical Center
Breast Care and Research Center
lauren.c.turza.mil@mail.mil
301-943-3588
Questions
NAPBC Best Practices Webinar Series: Quality in Action

- Innovations in Patient Care – February 9, 2021
- Program Activities – Optimizing Time and Talent – February 16, 2021

*All webinars are 12:00 noon–1:00 pm Central time.*
Cancer Program Webinar Series

• Better Data; Better Quality; Better Outcomes Webinar Series – 8 webinars

• Cancer Research Program (CRP) Educational Series – 5 webinars

To view and register for the webinars go to: https://www.facs.org/quality-programs/cancer/events
Thank you for joining the webinar today!

• Please help us improve the webinar by completing the evaluation being sent 1 hour after the webinar.

• CME, CE, and CNE instructions included in post webinar email.

• Webinar available through ACS learning management system – learning.facs.org