



PORTNEUF CANCER CENTER

PATIENT GUIDE

Portneuf.org/Cancer



Welcome

At the Portneuf Cancer Center, we understand that you are beginning a personal journey. While many of your needs will be similar to other patients, your experience is your own. As southeast Idaho's only comprehensive oncology clinic, we strive to personally deliver an array of resources for you and your family during this important time in your life.

A significant part of your care will be learning about cancer itself and how your treatments will affect you. We encourage strong interaction and questions from you about your care. We are here to answer any and every question you or your family may have.

One thing that you will find invaluable to your care at our center is the ability to meet all your needs in one location. Our team of experienced caregivers is prepared to assist you in a wide variety of areas including navigating insurance and financial assistance options, diet, and emotional well-being. Our center is comprised of all the knowledge our team has gained from patients who have passed through our doors. Together we offer that collective insight to you. We promise to do everything possible to help you on this journey.

We are here to answer any and every question you or your family may have.



Physician and Staff Letter

Dear Patient,

We want you to know that at the Portneuf Cancer Center, all of our staff are here to partner with you and your caregivers through your treatments and beyond. Along with the Cancer Center physicians, nurses, and therapists, we have a strong support staff to assist you and your family with problems, questions or concerns. We are on your team.

Your diagnosis may require the consultation with one of our medical oncologists. These physicians specialize in the diagnosis, management and surveillance of hematological disorders, cancers of the blood or lymph system, and solid tumors. Should chemotherapy be recommended for your treatment, our staff includes Certified Oncology Nurses that have more than 150 years of combined experience delivering this care.

Your diagnosis may require a consultation with a radiation oncologist. Should radiation therapy be recommended as part of your treatment, our physicians and their team of radiation therapists, dosimetrist, and physicist will use their extensive training and state of the art equipment for your care.

We are on your team.

In some cases, our clinic has the ability to schedule combined appointments with both a medical oncologist and radiation oncologist. This is a unique option not available to many patients nationwide, but you can have it available here in Pocatello.

Should you have any questions or concerns during your course of treatment, please do not hesitate to alert any of the Cancer Center staff. Our goal is to not only meet your expectations, but to exceed them. We also welcome your suggestions for improving our patient care.

Best Regards,

***Physicians & Staff,
Portneuf Cancer Center***



Mission, Vision, Values

Mission Statement:

The mission of Portneuf Medical Center is simple: World class care, every patient, every time.

Vision:

We have adopted this mission statement to help us focus on what truly matters: You. And our commitment is to make sure our patients receive amazing care every time they have contact with Portneuf Medical Center.

Core Values:

» **Confident**

We draw on knowledge and compassion to provide the highest level of care.

» **Uncompromising**

We work together to do the job right

» **Resourceful**

We seek out ideas, tools, and solutions to deliver a better patient experience.

» **Respectful**

We treat our patients and each other with dignity and respect.

» **Generous**

We give of ourselves and give back to our community

How to Make the Most of Your Visit:

After a cancer diagnosis, visits with your care team may feel overwhelming.

Below are some tips for making the most out of your visit with your physician:

- » Make a list of questions to ask prior to your appointment. It is common to forget these questions during visits, and a list can help ensure all of your questions are answered
- » If possible, bring a support person with you who can help take notes and ask questions
- » Keep an updated list of your prescriptions
- » Be honest with your physician about any concerns you may have
- » Before the appointment ends, make sure you have a clear understanding of what the next steps are. If you are unsure, ask!

Here are some key questions you may want to ask at the start of your cancer journey:

- » What is my diagnosis and how soon do I need to start therapy?
- » What are my treatment options, what's involved, and how long will each treatment take?
- » What are the benefits of the recommended treatment?
- » What are its potential risks and side effects?
- » Should I consider participating in a clinical trial?
- » How will treatment affect my daily routine? Can I continue to work through treatment?
- » Will treatment impact my fertility? If so, is there anything I can do to protect my ability to have children in the future?
- » What should I do if I develop new symptoms after I begin treatment?
- » What support resources are available to help me cope with my diagnosis?
- » Whom should I call if I have additional questions after I leave the office?

Clinic Policies

Here at Portneuf Cancer Center, our desire is to make your visit and overall experience as smooth and comfortable as possible. Please refer to the following policies to aid us in this process:

Same Day Appointments

If you believe you need to be seen urgently, please call our office at **208-239-1720** and ask for the nurse triage line or select option 2 on the phone tree. Our nurses will be able to determine whether you need to come in to the office, go to the Emergency Department, or can be treated at home. **We are not able to facilitate walk-ins**, so we recommend calling the triage line to speak to a nurse and determine which option is right for you

Appointment Cancellation

Please give at least a 24 hour notice of cancellation by calling our office at **208-239-1720**

Late Arrivals

Please call us as soon as you know you may be late. Depending on how late you arrive (15 minutes or more), we will attempt to work you in to the schedule or depending on the circumstances, or you may be asked to reschedule for another day.

Prescriptions

Please allow a 48 hour notification for prescription refills, including narcotics.

Follow Up Appointments

At the conclusion of your visit, you'll check out at the front desk. You will receive a document called the "After Visit Summary" which includes information about the care you've received, your next appointment, and any changes to your medications.

MyChart

Portneuf MyChart, a feature that comes with our electronic medical record system, is a great resource for our patients.



MyChart enables you to easily access your health records and can connect our cancer center to other facilities around the region where you may have received care at another time.

Additional benefits of MyChart include:



Schedule appointments



View test results



Request medication refills



Pay bills



Contact health care providers

To sign up, simply ask our front desk staff and they will gladly help you set up your account.


mychart

How to Interpret Lab and Radiology Results

What you need to know about lab and radiology reports

As part of our commitment to your care, we strive to ensure that all information regarding your health is available to you, the patient. For this reason, you may see lab and radiology reports in your MyChart page. These results are often posted at the same time that your physician receives them, so it is possible that you may receive them prior to discussing them with your provider. The following may help you understand these results better:

Labs:

- » As part of your medical treatment, your provider may order blood tests. These are generally panels meant to evaluate the health of certain organs or systems.
- » These results can often be complex and difficult to assess. Your medical provider has been trained in how to interpret these results. Some results may be more important than others, especially if there are only minor differences between normal results, and the ones on your report
- » If you have any questions regarding your lab reports, please discuss them with your provider at your next appointment

Radiology:

- » Radiology refers to imaging studies that make detailed pictures of the inside of your body. Examples include x-rays, CT scans, PET scans, or MRI scans. These results can help make a diagnosis, plan a treatment, or evaluate how well a treatment is working.
- » Each imaging study is reviewed by a physician called a radiologist. They interpret the images and generate written reports with the results of the scan. This is in turn sent to your provider who will review the report and may examine the images themselves.
- » Often, a report will include comments on benign or minor findings that do not impact your treatment or diagnosis. Please ask your provider to review the report with you if you have any questions

Pathology:

- » A pathology report refers to the study of a sample of tissue (biopsy) or blood that was removed from your body
- » Each specimen is analyzed by a physician called a pathologist. The pathologist then writes up a report for the medical provider who ordered the test. This helps the provider determine a diagnosis and treatment.
- » Pathology reports are often complex and refer to a number of different tests done on each specimen. They should be interpreted by a trained medical professional. If you have questions, please ask your provider to review this with you at your next appointment.

Meet Your Team

RADIATION ONCOLOGY

Physician Biography -

Michael Callaghan, M.D.



Dr. Callaghan, a native of Butte, Montana, was raised in and around the Intermountain West. As an undergraduate, he attended Westminster College in Salt Lake City, majoring in biology. While at Westminster, he played on the varsity soccer team. He graduated from the University of Utah Medical School, which was followed by a residency in radiation oncology at the Indiana University Medical Center in Indianapolis. Dr. Callaghan established his practice in Pocatello in 1997. He is board-certified in radiation oncology and is president of Intermountain Radiation Oncology. He is married to Cheryl Callaghan, M.D., a retired Pocatello gynecologist. The Callaghans have two adult children. He enjoys outdoor recreations. Dr. Callaghan is an advocate of a collaborative approach to the practice of medicine; one that embraces the participation of physicians, support staff, and facilities in optimizing the care of the patient.

Meet Your Team

RADIATION ONCOLOGY



Physician Biography -

Calvin McAllister, M.D.

Dr. Calvin McAllister was born and raised in Salt Lake City, Utah. As an undergraduate student at the University of Utah, Dr. McAllister studied diverse subjects ranging from psychology to physics. After graduating with a Bachelors of Science degree he earned his Doctor of Medicine from the University of Utah School of Medicine.

Dr. Calvin McAllister completed a transitional year internship at LDS Hospital in Salt Lake City. He then traveled to California to complete his residency in Radiation Oncology at the Loma Linda University Medical Center. Upon completion of his residency training Dr. McAllister was offered a position in South-East Idaho with Intermountain Radiation Oncology.

Dr. McAllister is board certified by the American Board of Radiology in Radiation Oncology. He has served as Medical Director of Radiation Oncology at EIRMC. He is a member of the American Society for Radiation Oncology. He is licensed to practice medicine in both Idaho and Wyoming. Dr. McAllister is truly one of the leading radiation oncologists in the area.

Meet Your Team

RADIATION ONCOLOGY

Physician Biography -

Steven Todd, M.D.



Dr. Todd is a radiation oncologist who has joined Intermountain Radiation Oncology and is practicing with Drs. Michael Callaghan and Calvin McAllister. He received his medical degree from the University of Utah School of Medicine and did his family practice internship at the University of North Dakota Family Practice Center. Dr. Todd completed radiation oncology training at Loma Linda University in Loma Linda, California. He and his family moved to Southeast Idaho from Helena, Montana, where he worked at the St. Peter's Hospital Cancer Treatment Center. Dr. Todd sees patients at both the Portneuf Cancer Center in Pocatello and in Idaho Falls.

Meet Your Team

MEDICAL ONCOLOGY

Physician Biography -

Michael Francisco, M.D.



Dr. Francisco, a native of the East Coast, predominantly the New York region, came to Pocatello in the early 90s when he joined the Pocatello Clinic of Internal Medicine. He established a full-time practice with the Portneuf Cancer Center in January 2005. Dr. Francisco completed his undergraduate studies at State University of New York at Potsdam, New York, majoring in biology. He attended medical school at the University of Liege in Belgium. This was followed by an internal medicine residency at Bridgeport Hospital in Bridgeport, Connecticut. Dr. Francisco was a fellow in hematology and oncology at the University of Massachusetts Medical Center, Worcester, Massachusetts, prior to his moving to Pocatello. Dr. Francisco is board-certified in internal medicine, hematology, and oncology. From 1995-1996 he served as the Chief of Medicine at Bannock Regional Medical Center. He was the Medical Director of the Portneuf Cancer Center in 2007. Dr. Francisco, his wife, and two children are an avid outdoor family who enjoys tennis, skiing, and gardening.

Meet Your Team

MEDICAL ONCOLOGY

Physician Biography -

David Ririe, M.D.



David W. Ririe, M.D. is originally from Salinas, California. After graduating from Brigham Young University in 1985, Dr. Ririe entered active duty military service, attending the Uniformed Services University of the Health Sciences (USUHS). He earned his medical degree from USUHS in 1989. He did internal medicine training at Wright-Patterson Air Force Base in Dayton, Ohio, followed by a fellowship in hematology and medical oncology at Wilford Hall Medical Center in San Antonio, Texas.

While in San Antonio, Dr. Ririe led the stem cell transplant service for over 10 years. At the time of his retirement, he was serving as chief of the hematology and medical oncology service at the Air Force's medical center in San Antonio. Additionally, he served as chief of the medical staff on two separate tours at the largest DoD hospital in Iraq in 2005 and again in 2008. Dr. Ririe has particular interests in leukemia, lymphoma, and myeloma. However, his practice at Portneuf includes all areas of hematology and medical oncology.

Dr. Ririe is married with 4 children. He enjoys the outdoors and exercise of all kinds. He considers eastern Idaho a "home away from home" because of many family relations that reside in the area.

Meet Your Team

MEDICAL ONCOLOGY

Physician Biography -

Doug Andersen, D.O.



Douglas Anderson, D.O. is a board certified oncologist. He attended medical school at Michigan State University, completed his residency at Midwest University, Verde Valley Medical Center and finished his fellowship at Cancer Treatment Centers of America in Tulsa, Oklahoma.

As a former engineering student, Dr. Andersen enjoyed working on design projects with physicians. This experience encouraged him to pivot towards the field of medicine.

Douglas feels that he has been led by God to be pursue Oncology. He loves what he does, and he is grateful for the opportunities he has to care for his patients and their families in the most difficult times of their life.

Dr. Andersen was drawn to Pocatello when he saw the strong community that existed. He is anxious to explore the endless outdoor opportunities that the area has to offer.

Douglas stays busy with his four daughters and son and comes from a large family himself; growing up with 7 brothers. When he is not practicing medicine, he enjoys dancing with his wife, playing with his five children, running and biking.

Meet Your Team

Staff Biography -

Jennifer Robinson, PA-C, MPAS



Jennifer L. Robinson, PA-C, MPAS has worked in Portneuf's Cancer Center since 2002 as a nationally certified Physician Assistant. She spent seven years working in the Radiation Oncology department before transitioning to the Hematology/Medical Oncology department. As a physician assistant, her duties include meeting with established patients, ordering and interpreting lab or radiologic tests, and prescribing medications including chemotherapy all with physician oversight. She works closely with the other members of the health care team within Portneuf Cancer Center.

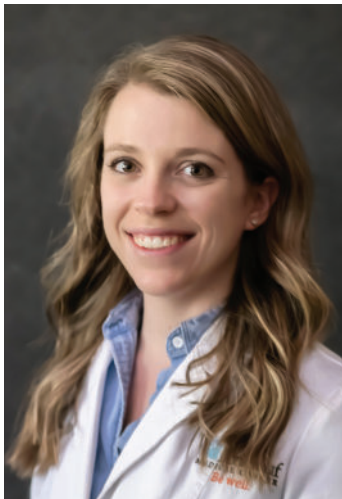
Jennifer also co-facilitates the HOPE Cancer Survivor Support Group.

She received her undergraduate training at ISU, earning a BS in Health Education. She then completed the ISU PA program in 2002. She went on to complete her Master's in Physician Assistant Studies through Oregon Health Science University in 2007. When she is not practicing medicine, she enjoys spending time with husband and three children.

Meet Your Team

Staff Biography -

Natalie Miller, PA-C, MPAS



Natalie grew up in both Alaska and Montana. She attended Montana State University in Bozeman, Montana, majoring in Cell Biology and Neuroscience. She moved to Pocatello in 2012 and attended the Physician Assistant Program at Idaho State University, graduating with a Master's of Physician Assistant Studies. She and her husband are both avid travelers and outdoors lovers, and enjoy hunting, camping, and exploring the area with their two boys.

Natalie also co-facilitates the HOPE Cancer Survivor Support Group.

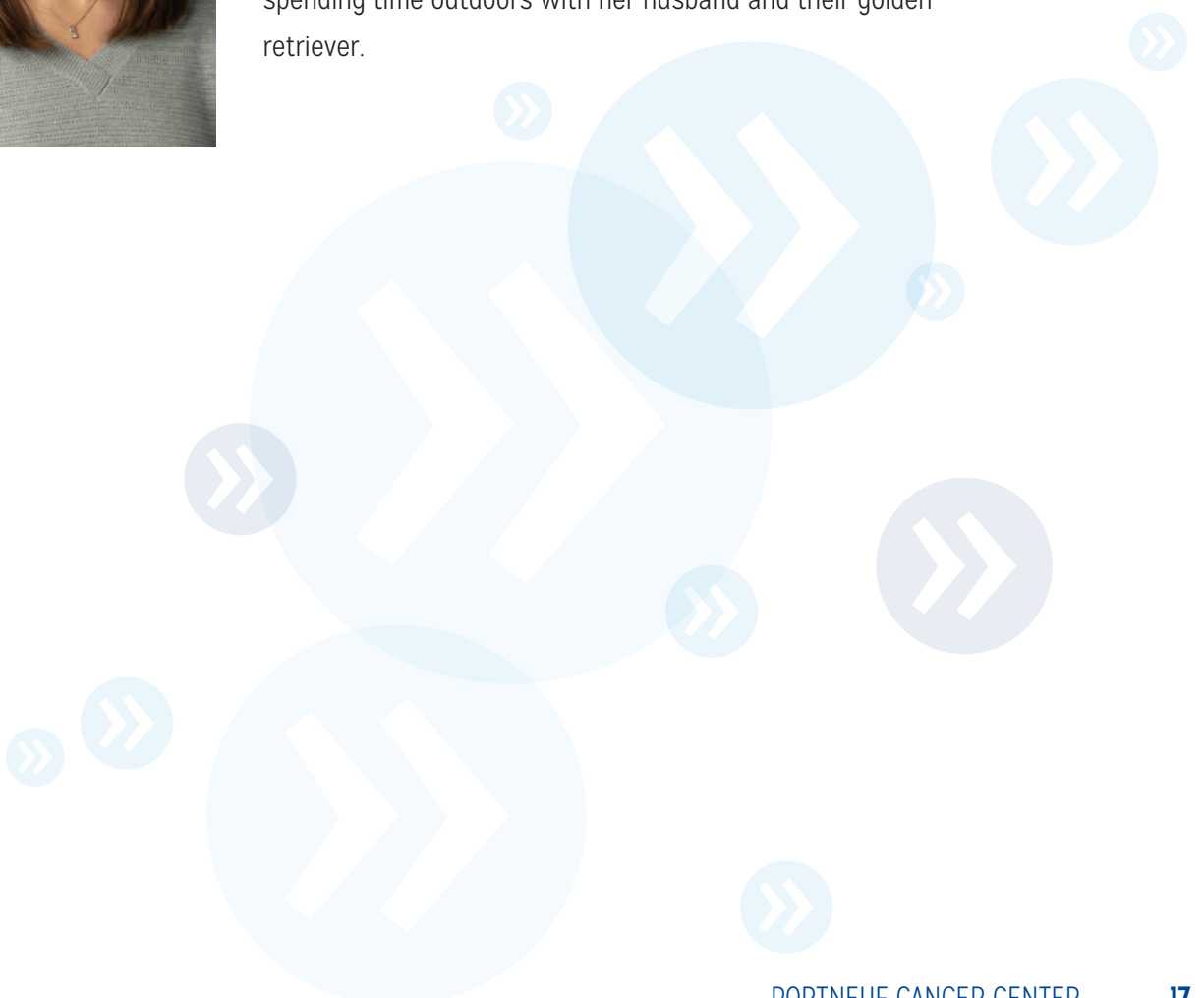
Meet Your Team

Staff Biography -

Kelsey Smith, NP



Kelsey is an Idaho native who grew up in Idaho Falls. She attended Boise State University for her undergraduate degree in nursing and Northern Illinois University where she obtained her Master's degree as a Family Nurse Practitioner. She has extensive experience as an oncology certified nurse, working in both the inpatient as well as outpatient cancer settings. In her free time, she enjoys spending time outdoors with her husband and their golden retriever.



Physician Collaboration

Tumor Conferences

Quality health care provided by a team of knowledgeable professionals includes cross-discipline collaboration. In addition to staff at our cancer center, the oncologists participate in tumor conferences. Tumor conferences are meetings that take place 2-4 times per month in which more complex patient cases are discussed between oncologists, surgeons, pathologists, and radiologists so that a consensus can be reached in regards to the best plan of care for a patient. These conferences allow for sharing of information and experience of many professionals to maximize the best treatment course for some patients.

Rural Oncology Clinics

Another aspect of collaborative care spearheaded by our oncology physicians are satellite cancer clinics in rural areas. As a clinic, we are aware that many of our patients must travel great distances to receive care at our facility. Our physicians have collaborated with medical facilities in Malad, Salmon, Soda Springs, and Montpelier to provide onsite oncology services to these areas. Chemotherapy can be administered at these clinic sites as well. This is a great service to patients who would otherwise have to travel long distances frequently to get the care they need. By bringing cancer treatment to these rural communities, our team at Portneuf Cancer Center can reduce the burden of an already difficult experience.

To coordinate with one of our rural clinics, please contact our office at 208-239-1720 and ask to speak with the Nurse Navigator.

Support Services

Cancer doesn't just impact a person's physical health but affects them emotionally and financially. The team at Portneuf Cancer Center is committed to providing support that addresses this impact for our patients and for their caregivers. On the following pages, you will find more information about the services offered at Portneuf Cancer Center that go beyond traditional care.

Our center employs **financial advocates** who help patients understand the costs of treatment and insurance coverage. Also on staff is an **oncology certified registered dietician** that can answer questions regarding best dietary practices for patients going through treatment. A registered dietician is beneficial to patients who may have special dietary needs or who have alternative nutritional supports such as a feeding tube.

Additionally, our **oncology nurse navigator** who can facilitate the implementation of a treatment plan as agreed upon by the patient and physician. This navigator can schedule important appointments, provide initial education, and help authorize interventions or further tests. We also have a dedicated **oncology pharmacist** who not only works with the medical team to cancer treatment medications, but is also available to counsel patients regarding these treatments.

Last but not least, we have a dedicated **licensed clinical social worker** who provides counseling services and mobilizes resources for patients and their families.

Also available to our patients is the support of the Cancer Patient Assistance Fund. This is a fund made possible by the generous donations of patients, caregivers, and community members with the purpose of providing financial support to those getting treatment for cancer who may need help with expenses apart from medical bills, such as rent, gas, food and utilities. This has been a great asset to patients in dire circumstances and is a testament to the compassion of southeast Idaho residents.

Please see the following pages for more information on the professionals here at the Portneuf Cancer Center who may be able to help you or your loved ones along this journey.



Meet Your Team

**ONCOLOGY CERTIFIED
REGISTERED DIETICIAN**

Staff Biography -

Jessica Strange RDN, CSO, LDN



Jessica Strange RDN, CSO, LDN received her Bachelor of Science in Dietetics from Idaho State University in 2014 and then completed her Dietetic Internship in 2015. She is board certified in oncology nutrition (CSO) and has worked at Portneuf Cancer Center since 2016. Jessica helps patients navigate nutrition during cancer treatments, understand their nutritional goals, help ease side effects, and improve overall quality of life.

Jessica grew up in the small Idaho town of St. Anthony and came to Pocatello for school. She loved Pocatello and decided it was a great place to stay. She loves spending time with her husband, daughter, and dogs by going on adventures.

Meet Your Team

PHARMACIST

Staff Biography -

Kirsten Blair, PharmD



Kirsten Blair, PharmD has been a pharmacist with Portneuf Medical Center since 2018. She transitioned into the oncology pharmacist position in March of 2021. She works closely with the medical oncology providers in caring for patients. Her specific roles include: providing patient education, managing oral chemotherapy, and reviewing chemotherapy treatment plans for correct dosing, pre-medications, and cost-saving interchanges, if applicable.

Kirsten was born and raised in Pocatello and is now married and raising a family of her own in Pocatello. She attended Idaho State University's College of Pharmacy where she graduated with her Doctor of Pharmacy degree in 2017.

Meet Your Team

ONCOLOGY NURSE NAVIGATOR

Staff Biography -

Cassandra Myers, RN, BSN, OCN



Cassie Myers received her Bachelor of Science in Nursing from the University of Washington in Seattle in 2010. She is an Oncology Certified Nurse and has spent the entirety of her nursing career in Oncology from caring for the patient at the bedside, to outpatient infusion and now as a Navigator.

Cassie and her husband have always talked about relocating to Idaho and finally made the move with their two young children in Spring of 2020. They are truly enjoying their new community and taking advantage of all there is to offer in this beautiful part of the state. As a family, their favorite activities include camping, hiking and exploring new places together.

Meet Your Team

LICENSED CLINICAL SOCIAL WORKER

Staff Biography -

Robb Dye, LCSW, MSW



I am a Licensed Clinical Social Worker at the Portneuf Cancer Center in Pocatello, ID. I received a Master of Social Work degree from New Mexico State University in Las Cruces and have been working with cancer patients and their families since 2008. I have a fabulous wife, an amazing son, and a wonderful daughter that provide great joy and support. I value faith, family, friends, freedom, and fajitas. I enjoy mountain biking, back country skiing, food, humor, and music.

I think that the most important and fulfilling aspect of my work is providing counseling to cancer patients and their families. Although depression, anxiety, loss, and relationship issues are common for cancer patients, people should know that there is help and that they don't need to face it on their own. Throughout our lives each of us face a variety of demands, losses, and challenges that test our ability to cope. A diagnosis of cancer can be overwhelming with all of its physical, emotional, and financial demands and seeing its impact on loved ones. In these situations, I offer professional counseling to help strengthening a person's existing coping mechanisms and developing some new coping strategies.

I have personally felt the effects of cancer in my own life and I consider it a privilege to be able to help others through this difficult journey.

As an oncology social worker I would be glad to help you and your family:

- Learn new ways to cope with cancer
- Manage emotions such as anxiety or sadness
- Improve communication with your health care team
- Talk to your family about cancer
- Find reliable information
- Find useful resources in your community
- Manage financial challenges
- Maximize your existing support system
- Adjust to illness
- Work through end-of-life issues
- Deal with grief and loss
- Make decisions for future medical care (advanced directives)
- Face the challenges of caregiving

Social Work Services

Robb Dye, LCSW, is also able to assist with the following:

Emotional Care - Cancer patients often experience depression and anxiety as they adjust to life with cancer and face issues in survivorship. Our social worker is qualified and experienced in providing counseling to patients and/or family members whose lives have been impacted by cancer. Our social worker works closely with your medical team to assist in the treatment of depression, anxiety, or other behavioral health needs. If you or a family member experience depression or anxiety please notify your physician, social worker, or nurse.

Relationships - The affects of cancer and its treatment can have an impact on relationships given the increase in stress and the changes in roles. Counseling to address these issues can be beneficial for the patient and for family members whose relationships have been affected.

Support Group - The cancer support group meets on Mondays from 5:00 - 6:30 p.m. in the lobby of the cancer center. Our group is made up of cancer patients, supporters, and caregivers of different ages and with many different types of cancer.

Advanced Directives for Health Care - The social worker can help you understand and complete a Living Will and Durable Power of Attorney.

Living/Care Facilities - The social worker can help with placement needs for patients and family. They will work with the patient and family to find an appropriate placement including transitional care, skilled nursing facility, long term care, or assisted living.

Guest House - PMC's Guest House is available for patients and family members who are from out of town and need a place to stay during treatments. The house provides comfortable accommodations in close proximity to the Cancer Center and the hospital.

Home Health and Hospice - The social worker is available to help you understand the home health and hospice programs and how they may be beneficial to you. The social worker is able to help set up any of your home health needs including nursing care, physical therapy, occupational therapy, speech therapy, aide care, or hospice.



Financial Support Services

Our financial advocates are here to help you navigate the financial side of cancer care. Their goal is to help our patients focus more on getting well, and less on financial matters.

We can help you understand the benefits of your insurance policies. Cancer treatment can be costly. It is always in a patient's best interest to understand what their responsibility will be concerning the cost of treatment. We can help explain co-pays, deductibles, and the maximum out of pocket cost associated with insurance policies. This can also help determine other resources for which a patient may be eligible to access.

It is best to address financial concerns early during cancer care. If you do not have insurance coverage, we can advise of other forms of assistance that may help cover the costs of treatment. There are government programs as well as lost cost insurance plans available through the insurance exchange, Medicaid, and Medicare. Portneuf Cancer Center has trained professionals that will help to determine your best option. To visit with one of our financial support staff, please call **208-239-1720** and select option 4 on the phone tree

Clinical Trials

Clinical trials are an important aspect of cancer treatment. Clinical trials help to move scientific research from the laboratory into treatments for people. By evaluating the results of these trials, we can find better ways to prevent, detect, and treat cancer. Clinical trials often compare the most accepted cancer treatment (standard of care) with a new treatment that researchers are hopeful will yield better treatment options. We can assist with a referral to participate in clinical trials that are available outside of the Portneuf Cancer Center, including Huntsman Cancer Institute. If you are interested in participating in a trial, please discuss this with your physician.

H.O.P.E. Support Group

Welcome,

You are in for the ride of your life, but hang on – a cancer diagnosis is not necessarily the death certificate you might feel it to be. We know. We've been there. We've come out on the other side and have news for you!

We are the members of the H.O.P.E. Cancer Support Group, and we would like to take this opportunity to welcome you as a survivor of cancer. Once you are diagnosed with any type of cancer, you are at that moment a survivor. You are now one of us. You are not alone.

Our group is made up of many different people, of different ages, and with many different types of cancer. Some of us have completed treatment years ago, while others of us are just beginning. Some of us jumped at the opportunity to join a group; some of us had to be prodded to come to just one session. It only took one though, and we all found H.O.P.E. Many of us now believe that group is just as vital to a successful treatment regimen as making a daily radiation therapy or having your next chemotherapy treatment.

Group is unique in that we all share a common bond not understood by those without a cancer diagnosis. We consider ourselves similar to a family who can laugh together, share with each other, and grow alongside one another through this experience. Each one of us contributes to the healing of each other and everyone has something to gain. Group is also a safe haven for others affected by cancer diagnosis: your family and friends.

We invite you to feel the same encouragement, strength, and support that we all do when we meet together. Give it a try just once and you'll see what we are talking about. Currently group meets every Monday evening, 5:00 to 6:30, in the Bannock Creek Conference Room at Portneuf Medical Center. For more information, contact our group facilitators, Robb Dye, LSW at 208-239-1754.



Treatment

The Portneuf Cancer Center is the only comprehensive cancer treatment center in southeast Idaho. This means that we provide medical and radiation oncology and important patient support services like infusion therapy all in one location.



ASCO QOPI Certification Program

Our center has earned certification through the Quality Oncology Practice Initiative, or QOPI, the leading national organization recognizing high-quality care for outpatient hematology and oncology practices. In order to achieve this certification, Portneuf Cancer Center has met or exceeded national benchmarks in areas that affect patient care and safety. By choosing to receive your care here, you know that you've selected a practice that is committed to delivering high-quality cancer care.

A multidisciplinary approach implements the most current guidelines in cancer therapy. Personal care plans, coordinated by a team of physicians, may include chemotherapy, radiation therapy, immunotherapy, oral medications, hormone therapy or a combination of treatments. The number of treatments you need depends on the size and type of cancer, where the cancer is, how healthy you are, and what other treatments you are getting.

It is the impact on the body's normal systems that manifest as side effects. The following pages may help you understand and prepare for some of those side effects. You will also have opportunities to discuss your regimen with a medical professional to review side effects unique to your treatment before starting as well as throughout your therapy course. Please note that at any time you have questions or concerns, do not hesitate to contact our staff at **208-239-1720**.

Common Types Of Treatment

Your physician will help determine which types of treatment can be used based on many factors, including your specific type of cancer and baseline physical health. It is common to have questions about certain treatments you may have seen advertised. Rest assured that our physicians consider all treatment options and follow national guidelines when determining which types of treatment to use.

Radiation Therapy - A treatment that delivers radiation through various methods to kill cancer cells.

External Beam: Beams of intense energy (radiation/xrays) which are targeted at the cancer site. These are delivered with a machine outside of the body and directed through the skin and other tissues to the cancer and immediate surrounding area to destroy the tumor.

Brachytherapy: A source of radiation that is placed inside of or just next to a tumor, often a complement or additional option with external beam radiation but can be used as a primary treatment for certain cancers.

Systemic Radiation: Radioactive drugs are given to the patient, which then travel through the bloodstream to treat certain types of cancers

Chemotherapy - This generally refers to medications that are designed to attack rapidly dividing cells. This can be administered intravenously (IV), orally, or with injections.

Targeted Therapy - These medications are used to identify and attack specific types of cells, which may mean fewer effects on non-cancer cells. These can be IV, oral, or injection drugs.

Immunotherapy - This type of therapy uses specific drugs to activate your immune system to identify and attack cancer cells. These are administered through an IV.

Genetic Testing

Approximately half of all men and one third of all women in the United States will develop cancer during their lifetime. The majority of these cancers (60%-85%) are sporadic, meaning they are not a result of inherited genes, but instead occur by chance or may be influenced by environmental factors. Only about 5%-10% of all cancers are hereditary. This means that changes or mutations in a gene are passed down from one blood relative to another. Inheriting one of these mutated genes may increase a person's chances of getting certain types of cancer.

Your physician may recommend genetic testing for one of the following reasons:

- » Breast, colorectal, or uterine cancer diagnosed before age 50
- » More than one type of cancer
- » Certain rare types of cancer
- » Two or more diagnoses of cancer on the same side of your family

Genetic testing can provide many benefits, including influencing treatment decisions, increasing screening for certain types of cancer, or providing valuable information to family members.

If you have questions about whether you may be a candidate for genetic testing, please ask your physician.

Nutrition During Treatments

As a patient of the Portneuf Cancer Center, you have a variety of supportive care options available to you. One of the most important and easy to access is the supportive care of our oncology certified dietitian who is available to answer your questions and to provide you with some of the tools you will need to successfully combat cancer.

General Nutrition During Chemotherapy and Radiation

Treatments - Nutrition is important to consider when you're getting cancer treatments. Cancer and treatments can change the way you eat, impact your tolerance to foods, and change the way your body uses nutrients. Eating well throughout cancer treatments can help you feel better, maintain strength and energy, maintain weight, maintain your body's store of nutrients, tolerate treatment, and recover faster.

Importance of Eating Well and Maintaining Weight

- Many patients hear that cancer treatment can lead to weight loss and say "Great, I could stand to lose a few pounds". Weight loss during your treatment can have significant consequences including loss of muscle mass, decreased tolerance of treatments, and slower recovery. Eating well means trying to eat a variety of foods to promote weight maintenance and good health during treatment. Sometimes it is difficult to eat well during your treatment and your diet may need to be customized by the dietitian for the duration.

Special Diets - You may need to follow a special diet during your treatment to help minimize side effects some foods may cause. For example, a soft diet may be recommended if you have a sore throat, mouth, or

esophagus to eliminate the discomfort of chewing and to minimize the abrasion to your mouth and throat. Other special diets include lower fiber, high calorie/protein, clear liquid, and full liquid. The dietitian will provide the diet instruction if a special diet is recommended. Also, please let the dietitian know if you follow a special diet at home (i.e., diabetic, cardiac).

Nutritional Supplements - Nutrition supplements can play a helpful role in meeting your nutritional goals if you are having a difficult time meeting those needs through food alone. The dietitian can assist you by providing education and samples of nutritional supplements. These supplements will provide the calories and protein that your body needs but is unable to get from your current intake of foods. A wide variety of commercial nutrition supplements are available at your local supermarket or pharmacy. Examples include Carnation Instant Breakfast®, Ensure®, and Boost®.

Vitamins and Minerals - There is no scientific research that shows that vitamins/minerals prevent or stop cancer from reoccurring. In fact, during your treatment, large doses of antioxidants are usually not recommended because they may affect your treatment by protecting cancer cells as well as healthy cells. Examples of antioxidants include vitamin C, vitamin E, beta-carotene, and selenium. Please discuss any vitamins or herbal supplements with your health care team.

Survivorship

survivorship (ser-VY-ver-ship) - In cancer, survivorship covers the physical, psychosocial, and economic issues of cancer, from diagnosis forward. It includes issues related to the ability to get health care and follow-up treatment, late effects of treatment, second cancers, and quality of life.

Definitions vary, but survivorship is a unique journey for each person. There is no single definition for true or correct survivorship. But there are many more survivors than people realize. There are approximately 12 million Americans alive with a history of cancer—some considered cured, others in remission or receiving treatment. Each person with a diagnosis of cancer believes their lives to be changed. How it is changed can depend upon their approach to “survivorship.”

A cancer diagnosis often leads to a change in priorities, relationships, goals, or spirituality. Survivors speak of a greater appreciation of life, a greater acceptance of self, and a greater appreciation of others. Many survivors choose to focus on the good that has resulted from their cancer experience rather than the bad. Many survivors describe their journey after cancer as a daily experience rather than staying alive until their next doctor checkup. Whatever your definition of survivorship, it can greatly affect how you see your life taking course after cancer treatment.

At the completion of treatment, the “safety net” of regular

contact with your health care team ends. Anxieties may surface as you try to adjust and live with uncertainty. Fear of your cancer coming back is normal for cancer survivors. It is simply hard to know what is “normal” and what needs to be reported to your doctor. Remember that your oncology team is still available to help. Discuss your concerns with them and attend your scheduled follow-up visits so that your journey is not directed by feelings of anxiety and helplessness. Often times, your oncology team can provide you with information that can be empowering so you can live life without worry, knowing that your team is watchfully behind you. The Portneuf Cancer Center interdisciplinary team will provide you with a Treatment Summary and Survivorship Plan as you finish your cancer treatments. The plan provides a summary of your cancer treatments, recommended follow-up appointments, and support staff contact information.

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

National Cancer Institute

Survivorship

Relationships

Relationships with family and friends may be tested during this transition. Some friends may become closer, while others distance themselves. Families can become overprotective, or may have exhausted their ability to be supportive. Marital problems that may have been ignored before cancer can surface. The entire family is changed by the cancer experience, but may not recognize the positive or negative changes. Open communication is key to adapting to life and shifting relationships after cancer.

Getting Back to “Normal”

Returning to work is a sign of returning to normal and away from the role of being sick. Most people need their job and the medical insurance it provides. Eighty percent (80%) of people with cancer return to work after a cancer diagnosis. Studies show little, if any, difference in the work performance of survivors. Although outright discrimination has decreased, there may be subtle discrimination. When planning your return to work, it may be helpful to anticipate questions from coworkers, and decide how to answer these questions in advance. Coworkers may want to help, but not know how. It may be up to you to start the conversation and set the limits. Disclosing a diagnosis is a personal decision. The oncology social worker would be glad to help you work through these challenges. The H.O.P.E Cancer Support group is also a good resource to consider as you face these survivor issues.

Sharing Your Story

Each cancer survivor has a story to share when the time or situation is right. Some are more inclined to share information about their cancer diagnosis and its treatment. Others may prefer to keep details private or may feel uncomfortable discussing certain parts of the body. Or, the topic may be too painful or too recent to discuss. Telling other people about a cancer experience involves sharing personal information. This is an individual choice. It is always your decision how much to share, regardless of any probing or intrusive interest or questions.

Retreats

Many cancer survivors benefit from participation in a cancer survivor retreat. Below you will find some local retreat options. If you have questions or would like more information you can visit the website of each retreat or contact Robb Dye, LCSW at (208) 239-1754 or robbd@portmed.org.



Idaho 2 Fly is an Idaho registered non-profit organization using fly-fishing related activities as a basis for bringing men with cancer and other life impacting illnesses together to be supported and improve their outlook on life. We are 100% volunteer supported and 100% contribution funded. We offer fly-fishing retreats, support groups, and are working to build a community of men who can support, be supported and add values to each other's lives. Retreats include meals, lodging, and fly-fishing equipment and are offered at no cost to the participants. Contact Dick Wilson at (208-866-2415) visit: www.idaho2fly.org

REEL RECOVERY is a national non-profit organization that conducts fly-fishing retreats for men recovering from cancer. Our purpose is to help men in the recovery process by sharing with them the healing powers of the sport of fly-fishing, while providing a safe, supportive environment to explore their personal experiences with cancer, with others who share their stories. Retreats are offered at no cost to the participants and are led by professional facilitators and expert fly-fishing instructors. Reel Recovery provides all meals, lodging and fly-fishing equipment, and no previous fishing experience is required. info@reelrecovery.org 1-800-699-4490



Casting for Recovery: We provide an opportunity for women whose lives have been profoundly affected by Breast Cancer to gather in a natural setting and learn the sport of fly fishing. Just as importantly, the retreats offer an opportunity to meet new friends, network, exchange information, and have fun. Our weekend retreats incorporate counseling, educational services, and the trained facilitators that staff each retreat, including a psycho-social therapist, a health care professional (e.g., physical therapist, nurse), as well as fly-fishing instructors and river helpers. www.castingforrecovery.org

Retreats



First Descents offers young adult cancer fighters and survivors (ages 18 to 39) a free outdoor adventure experience designed to empower them to climb, paddle and surf beyond their diagnosis, defy their cancer, reclaim their lives and connect with others doing the same. For more information, find us at www.firstdescents.org

River Discovery Experience nature during this 7 day / 6 night program. Meet other adults while rafting and camping on beautiful sand beaches along the Salmon River. Hiking, swimming and kayaking are just some of the activities offered along with plenty of time to relax and enjoy the serenity found in the wilderness. No camping or rafting experience required and any fitness level is welcome; activities are customized to accommodate each participant. The program is free although an application fee of \$50 is required. www.riverdiscovery.org



Web Resources

The internet can be a helpful tool for finding information relating to your diagnosis or medical questions. However, it is important to ensure that the information is trustworthy. Here are some tips to help find online information you can trust:

- » Look at the website's address. Those ending in .gov, .org, or .edu are funded by the government, non-profit organizations, or educational institutions, and are more likely to contain unbiased information than those with a .com address, which means the website is commercial or "for profit"
- » Make sure the information is up to date. Most web pages will have a "last updated" line at the top or bottom. Be skeptical of information that is more than a few years old
- » Look for information that is based in facts and evidence. Citations to other scientific articles may be helpful. Beware of "miracle cures" or information being presented as fact based on a few personal experiences
- » Online forums and support groups can be great resources for information and shared experiences, but should not be used as trusted sources for medical advice.

Below are some trusted websites to help in your search:

General

American Cancer Society	www.cancer.org
Leukemia and Lymphoma Society	www.lls.org
MedlinePlus	www.medlineplus.gov
National Comprehensive Cancer Network	www.nccn.org
Oncolink	www.oncolink.com
American Society of Clinical Oncology	www.cancer.net
National Cancer Institute	www.cancer.gov
Radiation Therapy	www.rtanswers.org
Chemotherapy	www.chemocare.org

Support

Cancer Support Community	www.cancersupportcommunity.org
CANCER Care	www.cancercare.org

For the Caregiver

Strength for Caring: A place for caregivers	www.strengthforcaring.com
Well Spouse Association	www.wellspouse.org

Survivorship

Cancer Survivor Network	www.csn.cancer.org
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Commonly Used Terms

Acute: Having the abrupt onset of symptoms and a short course – not chronic.

Adjuvant therapy: Treatment given after the primary treatment to increase the chances of a cure. Adjuvant therapy may include chemotherapy, radiation therapy, or hormone therapy.

Aggressive: A fast-growing cancer.

Angiogenesis: Blood vessel formation. Tumor angiogenesis is the growth of blood vessels from surrounding tissue to a solid tumor. This is caused by the release of chemicals by the tumor.

Antibody therapy: Treatment with an antibody, a substance that can directly kill specific tumor cells or stimulate the immune system to kill tumor cells.

Aspiration: Removal of fluid from a cyst or cells from a lump, using a needle and syringe.

Average risk: A measure of the chances of getting cancer without the presence of any specific factors known to be associated with the disease.

Benign: Not cancerous – cannot invade neighboring tissues or spread to other parts of the body.

Biomarkers: Substances sometimes found in an increased amount in the blood, other body fluids, or tissues and that may suggest the presence of some types of cancer.

Biopsy: The removal of a sample of tissue or cells for examination under a microscope for purposes of diagnosis.

Brachytherapy: A procedure in which radioactive material sealed in needles, seeds, wires, or catheters is placed directly into or near a tumor. Also called internal radiation, implant radiation, or interstitial radiation therapy.

Cancer: A general name for more than 100 diseases in which abnormal cells grow out of control. Cancer cells can invade and destroy healthy tissues, and they can spread through the bloodstream and the lymphatic system to other parts of the body.

Carcinoma: Cancer that begins in tissues, lining, or covering the surfaces (epithelial tissues) of organs, glands, or other body structures. Most cancers are carcinomas.

Carcinoma in situ: Cancer that is confined to the cells where it began, and has not spread into surrounding tissues.

Chromosomes: Structures located in the nucleus of a cell, containing genes.

Computed tomography (CT) scanning: An imaging technique that uses a computer to organize the information from multiple x-ray views and construct a cross-sectional image of areas inside the body.

Core needle biopsy: The use of a small cutting needle to remove a core of tissue for microscopic examination.

Cyst: Fluid-filled sac.

Excisional biopsy: The surgical removal (excision) of an abnormal area of tissue, usually along with a margin of healthy tissue, for microscopic examination.

False negative: Test results that miss cancer when it is present.

False positive: Test results that indicate cancer is present when the disease is truly absent.

Fine needle aspiration: The use of a slender needle to remove fluid from a cyst or clusters of cells from a solid lump.

Commonly Used Terms

Frozen section: A sliver of frozen biopsy tissue. A frozen section provides a quick preliminary diagnosis but is not 100 percent reliable.

Gene: Segment of a DNA molecule and the fundamental biological unit of heredity.

Higher risk: A measure of the chances of getting cancer when factor(s) known to be associated with the disease are present.

Hormones: Chemicals produced by various glands in the body, which produce specific effects on specific target organs and tissues.

Hyperplasia: Excessive growth of cells.

Incisional biopsy: The surgical removal of a portion of an abnormal area of tissue, by cutting into (incising) it, for microscopic examination.

Infection: Invasion of body tissues by microorganisms such as bacteria and viruses.

Infiltrating cancer: Cancer that has spread to nearby tissue, lymph nodes, or other parts of the body (same as Invasive cancer).

Inflammation: The body's protective response to injury (including infection). Inflammation is marked by heat, redness, swelling, pain, and loss of function.

Invasive cancer: Cancer that has spread to nearby tissue, lymph nodes, or other parts of the body (same as Infiltrating cancer).

Lymphatic system: The tissues and organs that produce, store, and transport cells that fight infection and disease.

Magnetic resonance imaging (MRI): A technique that uses a powerful magnet linked to a computer to create detailed pictures of areas inside the body.

Malignancy: State of being cancerous. Malignant tumors can invade surrounding tissues and spread to other parts of the body.

Margin: The edge or border of the tissue removed in cancer surgery. The margin is described as negative or clean when the pathologist finds no cancer cells at the edge of the tissue, suggesting that all of the cancer has been removed. The margin is described as positive or involved when the pathologist finds cancer cells at the edge of the tissue, suggesting that not all of the cancer has been removed.

Monoclonal antibody: Laboratory-produced substances that can locate and bind to cancer cells wherever they are in the body. Many monoclonal antibodies are used in cancer detection or therapy; each one recognizes a different protein on certain cancer cells. Monoclonal antibodies can be used alone, or they can be used to deliver drugs, toxins, or radioactive material directly to a tumor.

Mutation: A change in the number, arrangement, or molecular sequence of a gene.

Needle biopsy: Use of a needle to extract cells or bits of tissue for microscopic examination.

Palpation: Use of the fingers to press body surfaces, so as to feel tissues and organs underneath.

Pathologist: A doctor who diagnoses disease by studying cells and tissues under a microscope.

Permanent section: Biopsy tissue specially prepared and mounted on slides so that it can be examined under a microscope by a pathologist.

Commonly Used Terms

Positron emission tomography (PET scanning): A technique that uses signals emitted by radioactive tracers to construct images of the distribution of the tracers in the human body.

Rad: A unit of measure for radiation. It stands for radiation absorbed dose.

Radiation: Energy carried by waves or by streams of particles. Various forms of radiation can be used in low doses to diagnose disease and in high doses to treat disease. (See X-rays).

Radiologist: A doctor with special training in the use of diagnostic imaging such as CT, MRI, PET, and ultrasound, to image body tissues and to treat disease.

Risk: A measure of the likelihood of some uncertain or random event with negative consequences for human life or health.

Risk factors (for cancer): Conditions or agents that increase a person's chances of getting cancer. Risk factors do not necessarily cause cancer; rather, they are indicators, statistically associated with an increase in likelihood.

Surgical biopsy: The surgical removal of tissue for microscopic examination and diagnosis. Surgical biopsies can be either excisional or incisional.

Tumor: An abnormal growth of tissue. Tumors may be either benign or cancerous.

Tumor markers: Proteins (either amounts or unique variants) made by altered genes in cancer cells that are involved in the progression of the disease.

Ultrasound: The use of sound waves to produce images of body tissues.

X-ray: A high-energy form of radiation. X-rays form an image of body structures by traveling through the body and striking a sheet of film.



Treatment Calendar

Name: _____ Month: _____

Treatment Calendar

Name: _____ Month: _____

Treatment Calendar

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Treatment Calendar

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