Transformative Care in Unprecedented Times
At NorthShore University HealthSystem (NorthShore) Kellogg Cancer Center, our collaborative teams of physicians, nurses and other specially trained clinicians are dedicated to providing the highest level of personalized care to each patient.

Like healthcare institutions across the country, we faced new and significant challenges this year brought on by the pandemic. But our group of committed and compassionate caregivers worked to maintain a sense of normalcy while adopting new practices to maintain patient and staff safety. We have focused on minimizing risk of exposure for patients and staff while still offering essential care to improve patient outcomes.

We continue to leverage our strengths with our advanced molecular pathology and diagnostics laboratory capabilities, and we’re developing a comprehensive immunotherapy program to ensure that our patients benefit from the latest technology and sophisticated treatment options.

As NorthShore has become a national leader in the integration of complex genomic information into clinical care, we’re now establishing a groundbreaking program to incorporate the latest in genomic testing and science for our advanced cancer patients. The Kellogg Cancer Genomic Initiative reflects our commitment to personalized medicine and superior care.

Our academic affiliation with the University of Chicago Pritzker School of Medicine enables us to help train the next generation of physician leaders and brings benefits to patients through shared clinical and research initiatives.

NorthShore is certified by the American Society of Clinical Oncology (ASCO) Quality Oncology Practice Initiative (QOPI) as a premier medical provider for practicing the highest standards of quality cancer care. NorthShore is recognized in U.S. News & World Report’s Best Hospitals Survey as the #3 Hospital in Chicagoland and the state of Illinois. We are of course proud of these and other accomplishments, but we’re most grateful for positive patient outcomes.

We offer our sincere thanks and gratitude to our donors. Charitable contributions are essential to our ongoing research and patient support programs, and we are especially honored by the generosity of so many patients and their families.

We remain committed to advancing efforts to prevent, diagnose and treat even the most complex cancers. We invite you to learn more about our team’s shared mission to provide transformative care through the highlights in this report.

Bruce Brockstein, MD
Medical Director, NorthShore Kellogg Cancer Center, Head, Division of Hematology/Oncology, Kellogg-Scanlon Chair of Oncology

David J. Winchester, MD
Chairman, NorthShore Cancer Committee, Associate Director for Surgical Specialties, NorthShore Kellogg Cancer Center Board of Directors, David P. Winchester, MD, Chair of Surgical Oncology

We are pleased to welcome our new colleagues at Swedish Hospital and look forward to ongoing collaboration in clinical and research initiatives aimed at advancing prevention, diagnosis and improved cancer treatment for all our patients.

Swedish Hospital
Part of NorthShore
Cancer Care During a Pandemic

Delivering lifesaving cancer care in the face of the COVID-19 pandemic required important adaptations and flexibility for the entire Kellogg Cancer Center team. New workflows and practices were quickly put in place to limit exposure and protect both patients and staff.

Patients were screened with calls before visits to the Kellogg Cancer Center, and clinical spaces were decompressed with some staff working from home and empty exam rooms used for staff nurses and treatment.

A no-visitor policy was implemented—and while initially very difficult for patients, it was ultimately well received as patients and families understood the importance of protecting their safety and limiting exposure to the virus.

Patients were individually assessed to determine the need for ongoing/immediate treatment versus the risks associated with potential exposure in a clinic visit as well as the risk of chemotherapy or radiation treatment for patients with COVID-19.

When possible, physician visits were conducted via telehealth and video calls with expanded virtual education efforts from the Kellogg Cancer Center nursing team. Video visits also enabled family members to be “present” and involved in their loved one’s care.

An education video was developed to help patients safely disconnect infusion pumps at home, and many other services—including simple injections and prescription pick-ups—were offered as a drive-thru option. Blood draws and lab work were done the day before treatment to minimize wait time at the cancer center.

Bolstering staff resilience was another important element of care during the pandemic. Regular staff well-being check-ins were initiated, and stress management techniques were offered by licensed clinical social workers. “Breathe” sessions became part of staff meetings, and Kellogg Cancer Center leadership and many grateful patients and families provided countless lunches and healthy snacks for physicians, nurses and the entire Kellogg Cancer Center team.

Elective operations and many cancer screening procedures were put on hold or canceled, creating another major challenge for oncology caregivers and patients. Various algorithms were used to weigh the risk of treatment with delaying treatment for individual patients. To optimize the care of patients when operations had to be delayed, hormone therapy or sometimes chemotherapy was used to bridge the gap until surgery could be safely performed.

While ongoing research and COVID-19-related studies were a challenge, most clinical trials and studies continued throughout the pandemic, with the emphasis on therapeutic interventions that show the greatest promise for patients.

As the Kellogg Cancer Center multidisciplinary team continues to rise to the many challenges associated with COVID-19, some of the new COVID-initiated processes are now being implemented long term, leveraging the learning from the pandemic. Collectively, the Kellogg Cancer Center team learned how to implement and adapt novel processes efficiently and effectively, remaining dedicated to patient safety and best outcomes.

Medical Oncology continues to see 85% of cancer patients in person and is operating at 95% of pre-COVID capacity, with extra safety precautions in place.

One of the most important initiatives was developed by Kellogg Cancer Center Medical Director Bruce Brockstein, MD.

Just hours after the governor announced the stay-at-home order in March, Dr. Brockstein pulled together a coalition of Chicago-area leaders in cancer care to meet virtually and brainstorm best practices to keep patients and staff safe while also optimizing cancer-related outcomes.

The “C5” (Chicago Cancer Center COVID-19 Coalition) met through tele- or videoconference on Sunday mornings—and when necessary, by email. They continue to communicate collaboratively sharing important advances, data and advice to best serve patients in the Metropolitan Chicago area. C5 participants are from large academic medical centers and large hospital based community practices, including Advocate Aurora Health, Edwards-Elmhurst Health, Loyola University Medical Center, Northwestern Medicine, Rush University Medical Center, The University of Chicago Medicine and The University of Illinois joined NorthShore in C5.

The spirit of collaboration was celebrated by Dr. Brockstein and his colleagues who continue to use the group resource as the pandemic persists.
Immunotherapy has had a positive impact on a growing majority of cancers including lung, melanoma, head and neck, genitourinary and specific blood cancers. One form of immunotherapy—CAR T, which involves extracting disease-fighting T cells from the patient’s body, reengineering in a lab and then infusing back into the body—has been especially effective with leukemia. CAR T is very expensive, but demonstrated results have led to more private insurance companies and Medicare covering its use. While its use has been largely relegated to a few specialized university-based centers, we aim to incorporate these and similar therapies as they move into community-based cancer centers.

The extreme costs of many immunotherapy treatments have made Kellogg Cancer Center’s patient financial advocates critical members of care teams as they work to secure coverage or industry donations for patients. Kellogg Cancer Center nurses, pharmacy teams and more have been specially trained in the complex therapies. Immunotherapy efforts at NorthShore have been led by Kellogg Cancer Center Medical Director Bruce Brockstein, MD, and Thoracic Oncology Co-Director Thomas Hensing, MD, MS. By the end of 2021, close to a third of Kellogg Cancer Center patients will be treated with immunotherapy. And research, often in collaboration with major cancer centers and leading physician scientists across the country, continues to be an important part of the program to ensure that patients have access to life-changing and lifesaving therapies. Today, more than a third of Kellogg Cancer Center’s clinical research activities are immunotherapy-focused.
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John Medel, like so many cancer patients, had a rough go with chemotherapy to treat sarcoma that had spread from his arm to his back and other areas. “I felt sorry for my wife; I was never in a good mood,” recalled the 69-year-old active sports fan.

While the chemotherapy initially stopped the rare cancer’s growth, it began growing again when the treatment was completed. Fortunately, Medel has joined the growing number of patients who are successfully treated with immunotherapy drugs that have not only kept his cancer at bay, but have come with minimal to no side effects.

“One of the key challenges in this patient population has been deciding who will most benefit from immunotherapy and whether it should be combined with traditional chemotherapy,” explained Dr. Hensing. Findings from the study have proved beneficial for patients at NorthShore and beyond.

Further insights related to the specific biology of individual patient tumors have also helped improve our cancer care, said Dr. Hensing, who presented results of the study at the American Society of Clinical Oncology international conference and expects to expand the findings with further research. Oncologist Nicholas Campbell, MD, helped enroll many of the patients involved in the study and continues to champion clinical research as a way to provide the best possible care for Kellogg Cancer Center patients.

Advancing Vital Research

Innovative research continues to drive improvements in clinical care and outcomes for patients at Kellogg Cancer Center. NorthShore patients have access to a broad range of clinical trials and potentially lifesaving treatments. As immunotherapy remains a growing source of optimism in the battle against cancer, research is particularly crucial in optimizing the evolving field of treatment.

Oncologist Thomas Hensing, MD, MS, was the principal investigator for the NorthShore-led multisite national trial that evaluated the sequencing of immunotherapy medication and standard chemotherapy in patients with metastatic non-small cell lung cancer.

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Multidisciplinary Team Supports New Studies

Dr. Hensing (pictured left) leads NorthShore’s COVID-19 Clinical Trials Scientific Review Committee, which has followed the paradigm established with our clinical research in oncology—namely, focusing on the studies that will best benefit patients today.

In addition to oncology, the multidisciplinary group includes representation from infectious disease, pulmonary care, intensive care, hospitalists and more. “We’ve been able to leverage our experience at Kellogg where we’ve developed a very effective way for our patients to quickly have access to important trials,” said Dr. Hensing.

Lifesaving Treatments Keep Him in the Game

John Medel, like so many cancer patients, had a rough go with chemotherapy to treat sarcoma that had spread from his arm to his back and other areas. “I felt sorry for my wife; I was never in a good mood,” recalled the 69-year-old active sports fan.

While the chemotherapy initially stopped the rare cancer’s growth, it began growing again when the treatment was completed. Fortunately, Medel has joined the growing number of patients who are successfully treated with immunotherapy drugs that have not only kept his cancer at bay, but have come with minimal to no side effects.

“I’ve been very, very lucky,” said Medel who receives regular infusions at the NorthShore Highland Park Hospital Kellogg Cancer Center for nearly two years and is cared for by oncologist and Kellogg-Scanlon Chair of Oncology Bruce Brockstein, MD.

Medel was referred to Dr. Brockstein from University of Chicago Medicine orthopaedic oncologist Rex Haydon, MD. “We thought very highly of him, and he spoke very highly of Dr. Brockstein,” said Medel. “There was no doubt that I was with the right doctor.”

“Immunotherapy is providing lots of new options for treatment, and in many cases helping us cure patients or give them many years of quality life,” said Dr. Brockstein. “In the past, sometimes our only option was to give chemotherapy as a palliative treatment or in hopes of buying some time.”

“It’s gratifying to see patients like John doing so well and able to live life to the fullest,” said Dr. Brockstein, who is impressed by Medel’s drive. “It’s been great to see him doing so well and tolerating treatment so well that we can concentrate much of our time together on important things like curing the flaws of Chicago sports teams.” An avid bowler, Medel had to teach himself to bowl with his left hand following surgery to remove the first tumor in his arm. He also taught himself to pitch with his left hand and hopes someday to coach his grandson’s Little League team.

Medel has high praise for the entire Kellogg Cancer Center team and is also grateful for help he received in securing his treatment drugs from the pharmaceutical company after being denied by his insurance.

Patient Financial Advocate Kendall Ward works with patients like Medel and has the critical role of coordinating efforts with insurance companies and manufacturers to ensure that patients get the right treatment without delay.

“It’s really a joy—I get to call patients and give them good news,” said Ward. “It’s a blessing to be part of the Kellogg team, and I enjoy working with patients and knowing that they can focus on getting better without worrying about the financial aspects of care.”
For more information, visit northshore.org/cancer or call (847) 570-2112

Defeating Cancer with Genetic Testing

When Sandra McPherson decided to take advantage of the DNA-10K test offered by NorthShore, she looked forward to finding out about her ancestry. She never expected to learn that she carried a genetic mutation that put her at higher risk for breast and ovarian cancer.

Her first instinct was to ignore the results and the fact that she had the BRCA2 mutation, but her 24-year-old daughter Ali Oliveros insisted she take action. Following meetings with a genetic counselor and medical oncologist Allison DePersia, MD, who specializes in caring for high-risk patients with genetic mutations, McPherson quickly decided to undergo a bilateral mastectomy and a hysterectomy to dramatically reduce her risk of developing cancer.

Dr. DePersia walked McPherson, a fourth grade teacher and mother of three, through the options including increased mammography screening and surveillance or preemptive surgery. “While there are clear guidelines that take into account other factors, including a patient’s age and family history, it’s also a very personal decision,” noted Dr. DePersia.

On the other side of both successful operations at NorthShore, 49-year-old McPherson is grateful for the lifesaving information and the opportunity to secure her future. “With surgery, I don’t have to worry about getting cancer,” said McPherson. “I’m a proactive person. If there’s a problem, I find the solution.”

Dr. DePersia suggested that Oliveros also consider genetic testing. While Oliveros knew her odds, she admitted it was still a bit of a shock to learn that she has the BRCA2 mutation. “I was hoping for better results, but I’m glad to know and can do something about it,” she said. Dr. DePersia said Oliveros is young enough to follow guidelines for annual MRIs and breast exams every six months for now.

One of seven children born and raised in Colombia, South America, McPherson shared her DNA results with her siblings in the hope they, too, will consider genetic testing.

This knowledge is powerful,” she said. “I try to live in the moment, but I need to do what I can to protect my future and my family’s future.”
Compassionate, Comprehensive Support for Patients

Cancer patients and their families need more than expert diagnosis and treatment of their disease. At NorthShore, a full range of support services help patients throughout their cancer journey. From social workers to specially trained dietitians and patient financial advocates to an entire Integrative Medicine team, Kellogg Cancer Center offers a comprehensive array of programs to help patients heal and thrive during and after treatment. Specialized oncology nurses are a critical element of Kellogg Cancer Center’s ability to provide compassionate care.

Our Myra Rubenstein Weis (MRW) Living in the Future (LIFE) Cancer Survivorship Program helps ensure the long-term health and quality of life for cancer survivors.

Psychosocial Support

Kellogg Cancer Center’s Psychosocial Oncology Program provides services to help patients and their families navigate a myriad of emotional and practical needs brought on by a cancer diagnosis. The COVID-19 pandemic created further challenges for many cancer patients, and the psychosocial team worked tirelessly to provide additional support. Patients struggled with increased financial challenges, emotional isolation (including being alone for treatments due to necessary visitor restrictions at Kellogg Cancer Center), parenting, and anxiety due to COVID-19 vulnerability.

A middle-aged male patient with non-Hodgkin’s lymphoma who lost his job during the COVID-19 pandemic was one of the patients to benefit from the team’s additional support. Patient financial advocate Marrissa Wiley was able to help the patient secure help with his hospital bills while the team also secured him a patient grant to help with expenses, all of which reduced his anxiety and led him to express his gratitude for all the support he received.

An elderly, lower income female patient with B-cell acute lymphoblastic leukemia was connected to reliable transportation to treatment and to the North Shore Senior Center for additional help at home. Anxious at treatment without the support of her husband who was unable to accompany her due to COVID-19, the woman was comforted with regular, supportive check-ins from the Social Work intern.

Additionally, the psychosocial team provided ongoing support to Kellogg Cancer Center staff during the COVID-19 crisis. This support was both informal and structured with things like staff meditation sessions and deep breathing exercises at team meetings. Kellogg Cancer Center support groups were switched to virtual meetings this year due to COVID-19 allowing these groups to continue to offer support while maintaining safety.

Integrative Medicine Benefit Success

The third annual benefit concert supporting integrative medicine services for Kellogg Cancer Center patients was the biggest success to date, raising close to $70,000.

The January 2020 sold-out event at Metro in Chicago featured the acclaimed band, Sons of the Silent Age performing David Bowie’s “The Rise and Fall of Ziggy Stardust and the Spiders from Mars” and “Station to Station.” The band was once again joined on stage by actor Michael Shannon.

The benefit helps provide scholarships for integrative medicine services including acupuncture, massage therapy, nutrition guidance, talk therapy, and integrative physician consults for pediatric and oncology patients who would not otherwise have access to these important treatments.

Kellogg Cancer Center patients benefit from a range of integrative medicine services including acupuncture and Traditional Chinese Medicine and bodywork that can help offset side effects, increase energy and relaxation, and add to the healing process. Acupuncturist Rena Zaid (left) is one of the Integrative Medicine team members who works with patients throughout their cancer journey.
During the pandemic, scholarship patients have continued to receive therapies to help manage their symptoms while also optimizing their immune function and the relaxation response.

**Oncology Nutrition Services**

Kellogg Cancer Center dietitians continued to expand their reach with the “Healthy Eating During Treatment” presentation on NorthShore’s website while also providing additional information through the Healthy You blog. Registered dietitian-nutritionists (RDNs) with expertise in oncology support patients and their families as maintaining good nutrition helps improve patient outcomes, as well as managing symptoms such as unintended weight gain or loss, nausea, taste changes and bowel changes.

Phone consultations were implemented during the pandemic to ensure that patients had continued access to critical information and nutrition counseling during treatment. Kellogg Cancer Center RDNs also work with support groups and patients beyond treatment. This year, our dietitians presented at a survivorship program in March, a SPOHNC (Support for People with Oral and Head and Neck Cancer) support group in June, and the NorthShore Prostate Education and Us TOO Support Group in October.

**Community Partners**

Kellogg Cancer Center maintains an important array of partnerships and collaborations with community organizations. The staff assists with virtual programs and support groups and stays connected in the immediate community and beyond to ensure that ongoing education and advocacy efforts have stayed strong even during the pandemic.

Kellogg Cancer Center team members participated in many virtual community outreach events this year with Cancer Wellness Center, Imerman Angels, American Cancer Society, Lungevity Foundation, Respiratory Health Association, Lung Cancer Research Foundation, Us TOO and others as a way to come together safely as a community.

Patients and caregivers were supported throughout COVID-19 with access to cancer-related webinars, support groups, classes and tips on staying connected virtually.

A partnership with Niles Township High School District 219 brought virtual cancer prevention and education classes to students. Carol Rosenberg, MD, Director of Preventive Health Initiatives at NorthShore, taught “Top 10 Real Truths about Cancer Prevention” designed to help participants learn to differentiate science from rumor regarding the role that food, body weight, supplements, alcohol, smoking and other lifestyle strategies play in cancer prevention.

**Your Support Makes a Real Difference**

At the Kellogg Cancer Center, our dedicated team of outstanding physicians, nurses and other care providers aggressively pursue the latest in novel treatments and highly effective care plans—ones that are equal to or rival nationally recognized cancer centers across the country. Compassion in an environment that promotes best practices through advanced research, clinical trials, personalized medicine and many years of collective experience is paramount and drives the work we do every day.

Kellogg Cancer Center’s patient-centered approach is at the core of everything we do, and philanthropy plays an integral role in its success. Advances in science and technology are moving faster than ever before. Having access to critical resources is key to staying in front and nimble enough to respond to these lifesaving discoveries.

When you donate to Kellogg Cancer Center, you help ensure that everyone receives the best care possible with personalized care plans tailored specifically for the individual using the latest in diagnostics and treatments. As a result, you help save and improve the lives of thousands of patients annually—family, friends and your neighbors. Your impact is enormous.

The good news is more people are beating cancer than ever before thanks to new discoveries, advances in genetics, screening, and targeted therapies like immunotherapy and advanced chemotherapy. Patients have more options now, delivering better outcomes and brighter futures.

We are proud of how far we’ve come and know we still have a ways to go in our pursuit to find a cure. Without question, donors are helping move the needle in the right direction.

To learn more about how you can support Kellogg Cancer Center, please call (224) 364-7200 or visit foundation.northshore.org.
2020 Clinical Trials

Brain Tumors
A071101 Phase II randomized trial comparing the efficacy of heat shock protein-90 peptide-complex 96 (HSPC-96) (NCT #725085, Alliance IND #15380) vaccine given with bevacizumab versus bevacizumab alone in the treatment of surgically resectable recurrent glioblastoma multiforme (GBM)
A221101 Phase II randomized, double-blind, placebo-controlled study of armodafinil (Nuvigil) to reduce cancer-related fatigue in patients with glioblastoma multiforme
Tocagen/Tg S11-15-01 A Phase II/III randomized, open-label study of Toca 511, a retroviral replicating vector, combined with Toca FC versus standard of care in subjects undergoing planned resection for recurrent glioblastoma or anaplastic astrocytoma
ICT 107 STING Study of Immunotherapy in Newly Diagnosed Glioblastoma A Phase III randomized, double-blind, controlled study of ICT 107 with maintenance temozolomide (TMZ) in newly diagnosed glioblastoma following resection and concomitant TMZ chemotherapy
A071102 A Phase II/III randomized trial of veliparib or placebo in combination with adjuvant temozolomide in newly diagnosed glioblastoma with MGMT promoter hypermethylation
Abbvie/M13-813 A randomized, placebo-controlled Phase IIIb study of ABT-414 with concurrent chemoradiation and adjuvant temozolomide in subjects with newly diagnosed glioblastoma multiforme (GBM) with epithelial growth factor receptor (EGFR) amplification (Intellance 1)
CDX110-05 Expanded access (compassionate use) treatment protocol, midosoglutin (CDX-110)
Abbvie Preapproval Access Preapproval access of ABT-414 for treatment of glioblastoma multiforme (GBM)

Breast Cancer
A0011401 Randomized Phase III Trial Evaluating the Role of Weight Loss in Adjuvant Treatment of Obese and Obese Women with Early Breast Cancer
A0011502 A randomized Phase III double-blind placebo-controlled trial of aspirin as adjuvant therapy for node-positive, HER2-negative breast cancer: The ABC Trial
S1418/BR006 A Randomized Phase III Trial to Evaluate the Efficacy and Safety of MK-3475 (Pembrolizumab) as Adjuvant Therapy for Triple-Receiver-Negative Breast Cancer with > 1 cm Residual Invasive Cancer or Positive Lymph Nodes (pN1mi, ypN1-3) After Neoadjuvant Chemotherapy

Gastrointestinal Cancer
NRG-G004/SWOG-S1610 Colorectal Cancer Metastatic dMMR Immuno-Therapy (COMMIT) Study: A Randomized Phase III Study of mFOLFOX6/Bevacizumab Combination Chemotherapy with or without pembrolizumab in patients with dMMR metastatic colorectal cancer
EA2165 A Randomized Phase II Study of Nivolumab After Chemotherapy and pembrolizumab as Adjuvant Therapy for Patients with Stage III Colon Cancer and Deficient DNA Mismatch Repair (dMMR) Metastatic Colorectal Cancer
A021502 A Randomized Trial of Standard Chemotherapy Alone or Combined with Atezolizumab as Adjuvant Therapy for Patients with Stage III Colon Cancer and Deficient DNA Mismatch Repair
UC14-0594 PERICOL-FOLRINH: A Pilot Trial of Peripheric Gastrointestinal Tumor Type (FTT16s/15d/64) Concomitant with Gemcitabine and Nab-Paclitaxel for Front-Line Treatment of Locally Advanced Gastroesophageal Adenocarcinoma
Novocure: Panova-3 Pfizer, Randomized, Open-Label Study of Tumor Treating Fields (TTFs) 15d/64 Concomitant with Gemcitabine and Nab-Paclitaxel for Front-Line Treatment of Locally Advanced Pancreatic Adenocarcinoma
RTG 1112 Randomized Phase III Study of Sorafenib Versus Steriotactic Body Radiation Therapy Followed by Sorafenib in Hepatocellular Carcinoma
A021703 Randomized, Double-Blind Phase III Trial of Vitamin D3 Supplementation in Patients with Previously Untreated Metastatic Colorectal Cancer

Genitourinary Cancer
AFT-19 A Phase II Study of Androgen Ablation in High-Risk Biochemically Relapsed Prostate Cancer
PCCCT c16-168 A Randomized Phase II Trial of Abiraterone, Olaparib, or Abiraterone + Olaparib in Patients with Metastatic Castration-Resistant Prostate Cancer with DNA Repair Defects
EA8163 Cabazitaxel with Abiraterone versus Abiraterone Alone Randomized Trial for Extensive Disease Following Docetaxel: The CHARTED 2 Trial
Johns Hopkins J1557 Overcoming Drug Resistance in Metastatic Castration-Resistant Prostate Cancer with Novel Combination of TGF-B Receptor Inhibitor LY2157299 and Erザドラム: A Randomized Multi-Site Phase II Study
EA8143 A Phase 3 Randomized Study Comparing Perioperative Nivolumab vs. Observation in Patients with Renal Cell Carcinoma Undergoing Nephrectomy (PRESERV RCC)

Gynecologic Cancer
NRG-GY005 A randomized Phase III trial of the combination of cediranib and olaparib compared to cediranib or olaparib alone, or standard of care chemotherapy in women with recurrent platinum-resistant or -refractory ovarian, fallopian tube or primary peritoneal cancer
GOG0264 A randomized Phase II trial of paclitaxel and carboplatin versus bevacizumab and cisplatin for newly diagnosed advanced-stage and recurrent chemo-naive stage sex cord-stromal tumors of the ovary
UC13-1235 Randomized, placebo-controlled Phase II trial of metformin in conjunction with chemotherapy followed by metformin maintenance therapy in advanced-stage ovarian, fallopian tube and primary peritoneal cancer adjuvant treatment
Pilot Study Pilot study of the impact of early palliative care on quality of life in recurrent ovarian, fallopian tube and primary peritoneal cancer
AGGT1531 A Phase III Study of Active Surveillance for Low-Risk and a Randomized Trial of Carboplatin Versus Cisplatin for Standard-Risk Pediatric and Adult Patients with Germ Cell Tumors
NRG-GY009 A Randomized Phase III Study of Pegylated Liposomal Doxorubicin and CTEP-Supplied Atezolizumab (IND 13447) Versus Pegylated Liposomal Doxorubicin/Bevacizumab and CTEP-Supplied Atezolizumab Versus Pegylated Liposomal Doxorubicin/Bevacizumab in Platinum-Resistant Ovarian Cancer
GOG-3026 A Phase II Trial of Ribociclib (LEE011) Plus Letrozole in Women with Recurrent Low-Grade Serous Carcinoma of the Ovary or Peritoneum NRG-GY020: Randomized Phase III Trial of Radiation +/- MK-3475 (Pembrolizumab) for Newly Diagnosed Early-Stage High Intermediate Risk Mismatch Repair Deficient (dMMR) Endometrioid Endometrial Cancer (NCT# 04214067)
NRG-GY020 Randomized Phase III Trial of Radiation +/- MK-3475 (Pembrolizumab) for Newly Diagnosed Early-Stage High Intermediate Risk Mismatch Repair Deficient (dMMR) Endometrioid Endometrial Cancer (NCT# 04214067)
NRG-GY018 A Phase III Randomized, Placebo-Controlled Study of Pembrolizumab (MK-3475) in addition to Paclitaxel and Carboplatin for Measurable Stage II or IVA, Stage IVB or Recurrent Endometrial Cancer
NRG-GY014 A Phase II Study of Tazemetostat (EPZ-6438) in Recurrent or Persistent Endometrioid or Clear Cell Carcinoma of the Ovary, and Recurrent or Persistent Endometrioid Endometrial Adenocarcinoma

Head and Neck Cancers
HCN Tissue bank tissue/body fluid procurement and clinical data collection for patients with malignancies of the head and neck area and/or premalignant changes
Merck 3475-688 A Phase III Randomized, Open-Label Study to Evaluate Pembrolizumab as Neoadjuvant Therapy and in Combination with Standard of Care as Adjuvant Therapy for Stage III-IIIA Resectable, Locoregionally Advanced Head and Neck Squamous Cell Carcinoma (LA HSNC)
Enzymech EC-18-202 A Phase 2, Multicenter, Randomized, Double-Blind, Placebo-Controlled Study to Evaluate the Safety and Efficacy of EC-18 in Altering the Severity and Course of Oral Mucositis in Patients Being Treated with Concomitant Chemoradiation Therapy for Cancers of the Mouth, Oropharynx, Hypopharynx and Nasopharynx
EA3163 Phase II Randomized Trial of Neoadjuvant Chemotherapy Followed by Surgery and Postoperative Radiation Versus Surgery and Postoperative Radiation for Organ Preservation of T3 and T4a Nasal and Paranasal Sinus Squamous Cell Carcinoma

Lung Cancer
LungMAP A Master Protocol to Evaluate Biomarker-Driven Therapies and Immunotherapies in Previously-Treated Non-Small Cell Lung Cancer
S1900A A Phase II Study of Rucaparib in Patients with Genomically LOH High and/or Deleterious BRCA 1/2 Mutation Status or Recurrent Non-Small Cell Lung Cancer (Lung-MAP Sub-Study)
S1800A A Phase II Study of Ramucirumab Plus MK3475 (Pembrolizumab) Versus Standard of Care for Patients with Previously Treated Immunotherapy for Stage IV or Recurrent Non-Small Cell Lung Cancer (Lung-MAP Non-Matched Sub-Study)
EA5163/S1709 INSIGNA A Randomized, Phase III Study of Firstline Immunotherapy Alone or in Combination with Chemotherapy Induction/Maintenance or Post-Progression in Advanced, Non-squamous, Non-Small Cell Lung Cancer (NSCLC) with Immunobiomarker SIGNature-Driven Analysis
NRG LU003 A Biomarker-Driven Protocol for Previously Treated ALK-Positive Non-Squamous NSCLC Patients: The NCI-NRG ALK Master Protocol
E4512 A Phase III double-blind trial for surgically resected early-stage non-small cell lung cancer: Crizotinib versus placebo for patients with tumors harboring the anaplastic lymphoma kinase (ALK) fusion protein
EH15-122 Adjuvant Lung Cancer Enrichment Marker Identification and Sequencing Trial (ALDEMIAT)
A081105 Randomized, double-blind, placebo-controlled study of erdafitinib or placebo in patients with completely resected epithelial growth factor receptor (EGFR) mutant non-small cell lung cancer (NSCLC)
S1900C A Phase II Study of Talizumab Plus Avelumab in Patients with Stage IV or Recurrent Non-Squamous Non-Small Cell Lung Cancer Bearing Pathogenic STK11 Genomic Alterations (Lung-MAP Sub-Study)

continued >
Breast Surgery

EH15-297 A randomized Phase III trial comparing axillary lymph node dissection to axillary radiation in breast cancer patients (cT1-3 N1) who have positive sentinel lymph node disease after neoadjuvant chemotherapy—Alliance A011202

EH15-308 Using genetic risk scores to assess the efficacy of mammography screening among women diagnosed with breast cancer

EH16-063 Germline genetic profiles associated with contralateral breast cancer patients

EH14-020 Plotting an In-Visit Decision Aid for Surgical Decision-Making in Breast Cancer Patients

EH17-026 A Database of Contralateral Breast Cancer at NorthShore University HealthSystem

EH17-045 Impact of an In-Visit Decision Aid on Uninformed Decision-Making for Contralateral Prophylactic Mastectomy

EH16-343 Retrospective Review of HER2/neu Positive Breast Cancer Patients to Examine Loco-Regional Recurrence Rates

EH18-203 Mindfulness-Enhanced Decision Intervention to Aid Treatment Election—Breast Cancer

EH17-072 Comparison of Operative to Monitoring and Endocrine Therapy (COMET) Trial for Low-Risk DCIS

EH17-209 Genetic Determinants of Cooperative Interactions on Breast Cancer Intratumor Heterogeneity

EH18-243 Tell Me Where It Hurts: The Ergonomic Effects of Mastectomy on the Operating Surgeon

EH10-081-ACOSOG Z1071 A Phase II Study Evaluating the Role of Sentinel Lymph Node Surgery and Axillary Lymph Node Dissection Following Preoperative Chemotherapy in Women with Node Positive Breast Cancer (T0-4, N1-2, MO) at Initial Diagnosis

EH08-077 The Establishment and Maintenance of the NorthShore University HealthSystem Comprehensive Data Registry for Breast Surgeries and Breast Tissue Bank

EH19-218 Development of a Value Preference Scale for Patients Undergoing Breast Cancer Surgery


EH20-171 CROWN Study: COVID-19-Related Oncologist’s Concerns about Treatment Delays and Physician Well-Being

EH18-074 MarginProbe System U.S. Post-Approval Study Protocol CP-07-001

EH18-074 A Prospective, Multicenter Investigation of the da Vinci Xi Surgical System in Nipple-Sparing Mastectomy (NSM) Procedures

EH20-348 Retrospective, Multicenter Study of Open Nipple-Sparing Mastectomy (NSM)

Colorrectal Surgery

EH12-498 N048 A Phase III trial of neoadjuvant FOLFOLX with selective use of combined modality chemoradiation versus preoperative combined modality chemoradiation for locally advanced rectal cancer patients undergoing low anterior resection with total mesorectal excision

Head and Neck Surgery

EH17-116 Lipid Tissue from Head and Neck Cancer

Pancreatic Cancer

EH18-265 A Phase III Multicenter, Open-Label, Randomized, Controlled Trial of Cefoxitin Versus Piperacillin-Tazobactam as Surgical Antibiotic Prophylaxis in Patients Undergoing Pancreato-duodenectomy

EH08-1977 Clinical pancreatic cancer database

EH13-433 Comprehensive Assessments for Clinical Care and Surgical Management Among Individuals with Pancreatic Pathology

EH02-186 The Pancreatic Sample Repository

EH17-132 Assessment of Tumor and Treatment Factors as Predictors of Venous Thromboembolism in Patients with Pancreatic Adenocarcinoma Undergoing Pancreaticoduodenectomy, and Efficacy of Pharmacologic Prophylaxis

Lung and Esophageal Cancer

EH98-136 Establishment and maintenance of a comprehensive thoracic tumor data registry and biorepository

EH15-121 E5412 A Phase II double-blind trial for surgically resected early-stage non-small cell lung cancer: Crizotinib versus placebo for patients with tumors harboring the anaplastic lymphoma kinase (ALK) fusion protein

EH15-122 Adjuvant Lung Cancer Enrichment Marker Identification and Sequencing Trial (ALCHEMIST)

EH15-123 A081105 Randomized, double-blind, placebo-controlled study of erlotinib or placebo in patients with completely resected epidermal growth factor receptor (EGFR) mutant non-small cell lung cancer (NSCLC)

EH16-268 EAS142 Adjuvant nivolumab in resected lung cancers (ANVIL): A randomized Phase III study of nivolumab after surgical resection and adjuvant chemotherapy in non-small cell lung cancers

EH18-162 Inherited Cancer Panel Performance in Predicting Outcomes Among Patients Diagnosed with Lung Cancer

EH16-356 Clinical Characteristics of Anti-PD-1/PD-L1 relapses in Non-Small Cell Lung Cancer (NSCLC)

EH16-079 Retrospective chart review study to look at adequacy of lymph node staging in patients undergoing curative anatomic resection for non-small cell lung cancer

EH16-362 Natural History of Indeterminate Lung Nodules

Thyroid Surgery

EH14-058 The establishment of a multidisciplinary comprehensive database of patients for thyroid nodular disease

Genitourinary Cancer

EH09-043 A multi-phase study of active surveillance for men with clinical stage T1c or T2a localized prostate cancer

EH10-089 Periprostatic fat as a predictor of prostate cancer progression

EH10-379 Three-dimensional transrectal ultrasound for prostate cancer diagnosis and surveillance

EH13-049 Compliance and outcomes with penile rehabilitation in men after prostate cancer treatment

EH13-088 Mind-body health in uro-oncology

EH13-250 Cancer susceptibility: The ICGP study (International Consortium for Prostate Cancer Genetics)

EH13-446 A retrospective review of patients who have been removed from study EH09-043: A multi-phase study of active surveillance for men with clinical stage T1c or T2a localized prostate cancer

EH14-133 The Lived Experience of Men with Sexual Dysfunction After Prostate Cancer Treatment

EH15-240 Urologic oncology: Costs and complications

EH14-206 Nanotechnology to mitigate overdiagnosis of prostate cancer

EH14-361 SP0RE Project 1: Impact of Germline Genetic Variants and Failure of Active Surveillance in Prostate Cancer

EH16-009 Clinical validation of a urine-based assay with genomic and epigenomic markers for predicting recurrence during non-muscle-invasive bladder cancer surveillance

EH16-183 Evaluation of the utility of the prostate health index in routine clinical practice

EH16-202 Detecting copy number alterations (CNAs) of MYC and PTEN in biopsy samples to predict clinical outcomes in prostate cancer

EH16-222 Trends in upper tract urothelial treatment

EH16-240 Timing of artificial urinary sphincter placement

EH15-124 Reducing the Effects of Active Surveillance Stress, Uncertainty, and Rumination thru Engagement in Mindfulness Education (REASURE ME)

EH15-403 Mindfulness online for symptom alleviation and improvement in cancer of the prostate (MOSAC-C-P)

EH16-236 Novel genetic markers for predicting clinical outcomes in patients with high-grade superficial bladder cancer

EH16-239 The impact of using genetic risk scores (GRS) for inherited risk assessment of prostate cancer

EH16-237 A Randomized Study of Eraluzamide in Patients with Localized Prostate Cancer Undergoing Active Surveillance (ENACT)

EH16-387 Risk-Stratification of Prostate Cancers via Field Carcinoembryonic Nanotechnology


Boocheer BM, Xiao AU, Espin SA, Holder-Murray J, Zureikat AH. Hogg ME. ASO Author Reflections: Serum CA19-9 Response to Neoadjuvant Therapy regimen on survival outcomes in immunohistochemical sub-

Singhi A, Bahary N, Zureikat AH. Impact of adjuvant chemother-
apathy regimen on survival outcomes in immunohistochemical sub-

Hogg ME, Zeh HJ. Zureikat AH. Long-term outcomes in immunohistochemical sub-


Dietz JR, Moran MS,...Helson, Yao KA. Recommendations for pri-


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continued >

Nardi F, Fitchev P, Brooks K, Franco OE. Cheng K, Hayward W, Wells R, Mallo F, Crawford SE. Lipid droplet volume is a microvi-


continued >
Academic Leadership Roles and Awards
2019–2020

Bruce Brockstein, MD
• Member, Head and Neck Committee, Eastern Cooperative Oncology Group, 2000-present

Editorial:
• Manuscript Reviewer: Head and Neck, Annals of Surgical Oncology
• Grant Reviewer: Cancer Research UK
• UpToDate (Online Textbook), Chapter Editor, Head and Neck Cancer, 2000-present

Nicholas Campbell, MD

Editorial:
• Reviewer: Clinical Lung Cancer, Case Reports

Claus Fimmel, MD, CPE
• Advisory Board, American Liver Foundation, Chicago Chapter, 2008-present

Editorial:
• The Open Proteomics Journal (ISSN 1875-0397) (2008-present)
• Liver Cancer Review Letters (2009-present)

David Grinblatt, MD
• Community Oncology Committee, Alliance for Clinical Trials in Oncology, 2010-present

Editorial:
• Ad Hoc Reviewer, Annals of Oncology, 1996-present

Brian Helfand, MD
• Principal Investigator, Prostate Cancer SPORE project concerning genetics underlying active surveillance failures
• Visiting Professorships in Shanghai, China
• Member, Bladder Cancer Consortium and Guideline Committee
• Member, Relative Value Scale Update Committee (RUC)
• 45 peer-reviewed publications this year

Thomas Hensing, MD, MS
• Respiratory Health Association, Lung Cancer Initiative Advisory Council, 2005-present
• Alliance for Clinical Trials in Oncology, Respiratory Committee Member, 2010-present

Melissa Hogg, MD, MS
• Co-Chair of the HPB Task Force, SAGES
• Co-Chair of the HPB Disease Site Working Group, SSO
• Associate Editor, “Surgical Techniques” Division, Journal of Surgical Oncology
• Chair of the Training and Implementation Committee for the International Evidence-Based Consensus Guidelines of Minimally Invasive Pancreas Resections
• Founding Member of the International Consortium on Minimally Invasive Pancreatic Surgery

Karen Kauf, MD, PhD
• American Board of Pathology: Appointed Trustee, 2011-present; ACGME Residency Program Review Committee, 2012-present; Secretary, Executive Committee, 2015-present; Communications Task Force, 2012-present; Chair, Test Development & Advisory Committee for Molecular Genetics, 2012-present; Vice President, Executive Committee, 2017; President, Executive Committee, 2018; ABP/PROD Entrustable Professional Activities Task Force, 2017; Maintenance of Certificate Committee, 2012-present; Credentials Committee, 2012-present; ACGME Milestones 2 Committee, 2018-present
• College of American Pathologists, Member, Executive Advisory Board, Archives of Pathology & Laboratory Medicine, 2015-present
• ProCDS (Pathology Residency Program Directors), Member ProCDS Council, 2009-present; Council of Medical Specialty Societies/OPDA representative, 2009-present; Training Residents in Genomics (TRIG) Joint Committee, 2010-present
• Association of Pathology Chairs, Member, 2012-present; elected Chair, GME Committee, 2015-2018; Executive Council, 2015-present
• Ad Hoc Member, NIH/NCI P01 reviewer, 2001-present
• SBIR Review Panels, various (Panel Chairperson, 2010-present), 2008-present
• Peer Reviewer, Prostate Cancer Foundation, 2010-present
• Peer Reviewer, University of Chicago CTSA Pilot Program, 2011-present
• Chair, NorthShore Auxiliary Breast/Ovarian Research Program, 2013-present

Editorial Activities:
• Editorial Board, Annual Review of Pathology, 2011-present
• Associate Editor, Academic Pathology, 2014-present
• Executive Advisory Board, Archives of Pathology & Laboratory Medicine, 2015-present
• Ad Hoc Reviewer: Cell Growth and Differentiation, Pediatric Pathology, Cancer, Clinical Microbiology Reviews, Tubercle, Chest, Archives of Pathology & Laboratory Medicine, Clinical Chemistry, American Journal of Clinical Pathology, 1990-present

Janardan Khadekar, MD

Editorial:
• Reviewer: JAMA Oncology, Journal of National Cancer Institute
• Associate Editor, Journal of Surgical Oncology

Katherine Kopkash, MD
• Oncoplastic Surgery Committee for the American Society of Breast Surgeons
• Chair of Oncoplastic Breast Surgery for Beginners Curriculum Committee, American Society of Breast Surgeons
• Chicago Surgical Society Young Surgeons Committee

Seth Krantz, MD
• Invited Question Writer, Self-Education Self-Assessment in Thoracic Surgery (SEATS) XIII (13), American Board of Thoracic Surgery

Editorial:

Robert Marsh, MD
• Eastern Cooperative Oncology Group, GI Committee

Editorial Work:

Leslie Mendoza Temple
• Guest Editor: Complementary Therapies in Medicine special issue of Medical Cannabis, for 2021 publication

Catherine Pesce, MD
• Young Surgeons Committee of the Chicago Surgical Society

Richard Prinz, MD
• Editorial Review Board: Surgery, Langenbeck’s Archives of Surgery

Gustavo Rodriguez, MD
• Member, Cancer Prevention and Control Committee, Gynecologic Oncology Group/NGI, 1997-present
• Advisory Board, Gilda’s Club, Chicago, IL, 2004-present

Carol Rosenfield, MD
• Chair of 2018 Cancer Survivorship Symposium, ASCO-AAP-AAFP Advancing Care and Research—A Primary Care and Oncology Collaboration
• Patient-Centered Outcomes Research Initiative (PCORI) National Comparative Effectiveness Evaluation of Survivorship Programs in the United States, LIFE Site Project Supervisor—LIFE Program Participant Program
• Research Investigator, Women’s Health Initiative study, National Institutes of Health (NIH), 1999-present

Awards:
• Myra Rubenstein Weis Life Program Grant Award Recipient: Myra Rubenstein Weis Health Resource Center Foundation, NorthShore University HealthSystem, May 2019

Prem Seth, PhD
• Editorial Board, Cancer Gene Therapy
• Editorial Board, Molecular Therapy—Oncolytics

continued >

For more information, visit northshore.org/cancer or call (847) 570-2112

Kellogg Cancer Center physicians are active in a broad range of regional and national organizations.
Academic Leadership Roles and Awards (continued)

Daniel Shewin, MD  
- Director, Advocacy Core Prostate SPORE, Northwestern University, 2003-present  
- Medical Director, NorthShore Chapter of Us TOO Prostate Cancer Support Group, 2002-present  
- Board Member, Cancer Wellness Center, Northbrook, IL, 2010-present  
- Member, National Cancer Institute (NCI) GU Steering Committee, 2014-2017

Mark Sisco, MD, FACS  
- Program Committee, Breast Subsection, American Society of Plastic Surgeons, 2015-present  
- In-Service Examination Committee, American Society of Plastic Surgeons, 2016-present

Katharine Yao, MD  
- Member, Patient-Reported Outcomes Working Group, American Society of Breast Surgeons  
- Member, Publications Committee, American Society of Breast Surgeons  
- Member, Practice Advocacy Committee, American Society of Breast Surgeons  
- Alliance for Clinical Trials, Prevention Committee, 2014-present  
- Vice Chair, AHPBA Member at Large—Executive Council  
- Secretary/Treasurer and Executive Committee of Chicago Urological Society  
- Society of Surgical Oncology, Foundation Board of Directors, 2014-2019; Chairman, Corporate Relations Committee, 2017-2019; Chairman, Local Arrangements Committee, 2017-2018  
- Western Surgical Association, Membership Committee, 2012-present; Treasurer, 2012-present; Elected President, 2017-2018  
- Americas Hepato-Pancreato-Biliary Association, 2018-2020; Finance Committee, 2019-2021; AHPBA Member at Large—Executive Council

David J. Winchester, MD  
- Director, Rice Foundation, 1998-present  
- American Joint Committee on Cancer (AJCC), 2004-present; Vice-Chairman, 2011-present; Committee, 2008-present; Education and Promotions Committee, 2007-present  
- Member, Alliance ACS Clinical Research Program, 2012-present

Norman Smith, MD  
- Member, American Urological Association Relative Value Scale Update Committee (RUC) (2016-present); Coding and Reimbursement Committee (2016-present); Public Policy Council (2015-present)  
- Vice Chair, AMA/Specialty Society Relative Value Scale Update Committee (RUC) Relativity Assessment Workgroup (2019-present)  
- Secretary/Treasurer and Executive Committee of Chicago Urological Society  
- Society of Surgical Oncology, Foundation Board of Directors, 2014-2019; Chairman, Corporate Relations Committee, 2017-2019; Chairman, Local Arrangements Committee, 2017-2018  
- Western Surgical Association, Membership Committee, 2012-present; Treasurer, 2012-present; Elected President, 2017-2018  
- Americas Hepato-Pancreato-Biliary Association, 2018-2020; Finance Committee, 2019-2021; AHPBA Member at Large—Executive Council

Mark Talamonti, MD  
- Member, Corresponding Reviewer, Cancer, 2017-present  
- Editorial Board, Cancer, 2017-present

Locations

<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Zip Code</th>
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<tbody>
<tr>
<td>Evanston Breast Center (EVB)</td>
<td>2650 Ridge Avenue, Evanston, IL 60201</td>
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<tr>
<td>Evanston Hospital (EH)</td>
<td>2650 Ridge Avenue, Evanston, IL 60201</td>
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<tr>
<td>Evanston Kellogg Cancer Center (EVK)</td>
<td>2650 Ridge Avenue, Evanston, IL 60201</td>
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<tr>
<td>Evanston Specialty Suites (EV)</td>
<td>1300 Central Street, Evanston, IL 60201</td>
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<tr>
<td>Glenbrook Breast Center (GBB)</td>
<td>2050 Pfingsten Road, Suite 130</td>
<td>60026</td>
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<tr>
<td>Glenbrook Hospital (GBH)</td>
<td>2100 Pfingsten Road, Suite 128</td>
<td>60026</td>
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<tr>
<td>Glenbrook John and Carol Walter Ambulatory Care Center (GB)</td>
<td>2180 Pfingsten Road, Suite 1000</td>
<td>60026</td>
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<tr>
<td>Glenbrook Kellogg Cancer Center (GBK)</td>
<td>2180 Pfingsten Road, Suite 1000</td>
<td>60026</td>
</tr>
<tr>
<td>Glenbrook Medical Building (GBM)</td>
<td>2050 Pfingsten Road, Suite 128</td>
<td>60026</td>
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<tr>
<td>Glenview Park Center (GP)</td>
<td>2400 Chestnut Avenue, Glenview, IL 60026</td>
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<tr>
<td>Gurnee Ambulatory Care Center (GR)</td>
<td>7900 Rollins Road, Gurnee, IL 60031</td>
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<tr>
<td>Highland Park Ambulatory Care Center (HPS)</td>
<td>757 Park Avenue West, Highland Park, IL 60035</td>
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<tr>
<td>Highland Park Breast Center (HPB)</td>
<td>777 Park Avenue West, Suite B400</td>
<td>60035</td>
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<tr>
<td>Highland Park Hospital (HPH)</td>
<td>777 Park Avenue West, Room 1260</td>
<td>60035</td>
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<tr>
<td>Highland Park Kellogg Cancer Center (HPK)—Ellen Marks Ambulatory Care Center</td>
<td>757 Park Avenue West, Suite 1810</td>
<td>60035</td>
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<tr>
<td>Highland Park Medical Building (HP)</td>
<td>767 Park Avenue West, Suite B100</td>
<td>60035</td>
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<tr>
<td>Lake Bluff Medical Building (LB)</td>
<td>71 Waukegan Road, Suite 700</td>
<td>60044</td>
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<tr>
<td>Mount Prospect Medical Building (MP)</td>
<td>1329 Wolf Road, Mount Prospect, IL 60056</td>
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<tr>
<td>Northbrook Medical Building (NMB)</td>
<td>501 Skokie Boulevard, Northbrook, IL 60062</td>
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<tr>
<td>NorthShore Medical Group (SKM)—Skokie</td>
<td>9933 Woods Drive, Suite 200, Skokie, IL 60077</td>
<td></td>
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<tr>
<td>Skokie Ambulatory Care Center (SK)</td>
<td>9650 Gross Point Road, Suite 3000</td>
<td>60076</td>
</tr>
<tr>
<td>Swedish Hospital (SW)</td>
<td>5140 N. California Avenue, Chicago, IL 60625</td>
<td></td>
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<tr>
<td>Vernon Hills Specialty Suites (VH)</td>
<td>225 North Milwaukee Avenue, Vernon Hills, IL 60061</td>
<td></td>
</tr>
</tbody>
</table>

For more information, visit northshore.org/cancer or call (847) 570-2112
Katherine Kopkash, MD  
Expertise: Breast Cancer; Oncoplastic Breast Surgery; Breast Health; Breast Disease and Surgery  
Locations: EVB, GBB

Andrew Melnyk, MD  
Expertise: Medical Genetics  
Location: EV

Sangtae Park, MD, MPH  
Expertise: Prostate Cancer; Urologic Oncology  
Locations: EV, GB

Seth Krantz, MD  
Expertise: Lung Cancer; Esophageal Cancer; Minimally Invasive Thoracic Surgery  
Locations: EVK, HPK, GBB

Gregg Menaker, MD  
Expertise: Mohs Surgery; Dermatologic Surgery; Laser Surgery  
Location: SKM

Rupa Patil, MD  
Expertise: Cardio-Oncology; Clinical Cardiology  
Locations: EV, VH

Monika Krezalek, MD  
Expertise: Minimally Invasive Colon and Rectal Cancer; Colon and Rectal Bowel Disease; Anorectal Surgery; Colonoscopy  
Locations: EV, GB, HPS

Douglas Merkel, MD  
Expertise: Breast Cancer  
Locations: EVK, GBK, HPK

Nicklas Pfanzelter, MD  
Expertise: Genitourinary Cancer; Lung Cancer  
Locations: EV, GBK, HPK

Elyse Lambiase, MD  
Expertise: Oncology and Hematologic  
Location: SW

Ryan Merrell, MD  
Program Director, Neuro-Oncology  
Expertise: Brain Cancer; Brain Tumor; Neurologic Complications of Cancer; Tumor in the Central Nervous System (Brain or Spine)  
Locations: EVK, GB, GBK, SW

Catherine Pesce, MD  
Director, Surgical Breast Program  
Expertise: Breast Cancer; Breast Health; Breast Disease and Surgery  
Locations: HPB, HPK

Teresa Murray Law, MD  
Expertise: Breast Cancer; Prostate Cancer; Genitourinary Cancer  
Locations: EVK, HPK

Tricia Moo-Young, MD  
Expertise: Minimally Invasive Approaches to Endocrine Disorders; Thyroid and Parathyroid Surgery; Adrenal Disorders; Pancreatic Exocrine; General Surgery  
Locations: HPS, VH

Ariel Polish, MD  
Expertise: GI Oncology; Benign and Malignant Hematology; Genitourinary Cancer; Lung Cancer  
Locations: EVK, GBK, GBB

Ross Levy, MD  
Expertise: Mohs Surgery; Dermatologic Surgery; Laser Surgery  
Location: SKM

Elena Moore, MD  
Expertise: Gynecologic Oncology  
Locations: EVK, HPK

Richard Prinz, MD  
Vice Chair, Administration & Clinical Development, Department of Surgery  
Expertise: Endocrine Surgery with Emphasis on Thyroid, Parathyroid, Adrenal and Pancreatic Neuroendocrine Surgery  
Locations: EV, HPS, MP

Monika Krezalek, MD  
Expertise: Minimally Invasive Colon and Rectal Cancer; Colon and Rectal Bowel Disease; Anorectal Surgery; Colonoscopy  
Locations: EV, GB, HPS

Joseph Muldoon, MD  
Expertise: Minimally Invasive Colon and Rectal Cancer; Colon and Rectal Bowel Disease; General Surgery  
Locations: EV, GBK, GBM

Amit Pursnani, MD  
Expertise: Cardio-Oncology; Clinical Cardiology  
Locations: EV, SK

John Linn, MD  
Vice Chair for Surgery, Glenbrook Hospital  
Expertise: Gastrointestinal Surgical Oncology Including Stomach and Esophagus; General Surgery  
Locations: EV, GBM

Ranjeev Nanda, MD  
Expertise: Stereotactic Radiosurgery; Brain Tumors; Head and Neck Cancers  
Locations: EH, GBH

Vathsala Raghavan, MD  
Expertise: Breast Cancer; Gynecologic Oncology; Head and Neck Cancers; Thyroid Cancer  
Locations: GBH, HPK

Melissa Hachen Lippitt, MD, MPH  
Expertise: Gynecologic Oncology  
Locations: EVK, GBK, HPK

Kristian Novakovic, MD  
Expertise: Kidney Cancer; Prostate Cancer  
Locations: EV, GB

Joseph Raviv, MD  
Expertise: Endoscopic Sinus and Anterior Skull Base Surgery  
Locations: EV, NMB

Luzheng Liu, MD  
Expertise: General Dermatology; Skin Cancers  
Location: LB

Bernhard Ortel, MD  
Division Head, Dermatology  
Expertise: Skin Cancer; General Dermatology; Psoriasis; Blistering Diseases  
Location: SKM

Erwin Robin, MD  
Expertise: Benign and Malignant Hematology  
Locations: GB, HP

Robert Marsh, MD  
Section Chief, GI Oncology  
Expertise: GI Oncology  
Locations: EVK, GBK

Elyse Lambiase, MD  
Expertise: Oncology and Hematologic  
Location: SW

Rupa Patil, MD  
Expertise: Cardio-Oncology; Clinical Cardiology  
Locations: EV, VH

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Cancer Conferences

Breast Cancer Conferences
NorthShore Evanston Hospital
Kellogg Room G868, Mondays, 7:30 a.m.
NorthShore Glenbrook and Highland Park Hospitals Videocast

Colorectal Cancer Conferences
NorthShore Evanston Hospital
Kellogg Room G868
2nd and 4th Fridays, 7 a.m.
NorthShore Glenbrook and Highland Park Hospitals Videocast

Genitourinary Cancer Conferences
NorthShore Evanston Hospital
Kellogg Room G868
1st and 3rd Fridays, 7 a.m.
NorthShore Glenbrook Hospital Videocast

Gynecology Cancer Conferences
NorthShore Evanston Hospital
Kellogg Room G868
Thursdays, 7 a.m.
NorthShore Glenbrook and Highland Park Hospitals Videocast

Head and Neck Cancer Conferences
NorthShore Evanston Hospital
Kellogg Room G868
1st and 3rd Thursdays, 8 a.m.

Hematology/Pathology Conferences
NorthShore Evanston Hospital
Kellogg Room G868, Tuesdays, 8 a.m.
NorthShore Glenbrook and Highland Park Hospitals Videocast

Hepatic Biliary Pancreatic Cancer Conferences
NorthShore Evanston Hospital
Kellogg Room G868, Tuesdays, 7 a.m.
NorthShore Glenbrook and Highland Park Hospitals Videocast

Molecular Oncology Conferences
NorthShore Evanston Hospital
Kellogg Room 4818, 1st Friday, 7 a.m.

Neuro-Oncology Cancer Conferences
NorthShore Evanston Hospital
Kellogg Room G868, Mondays, 7:30 a.m.
NorthShore Glenbrook and Highland Park Hospitals Videocast

Sarcoma/Melanoma Conferences
NorthShore Evanston Hospital
Kellogg Room G868
1st and 3rd Wednesdays, 8 a.m.
NorthShore Glenbrook and Highland Park Hospitals Videocast

Thoracic Cancer Conferences
NorthShore Evanston Hospital
Kellogg Room G868, Tuesdays, noon
NorthShore Glenbrook and Highland Park Hospitals Videocast

For more information, visit northshore.org/cancer or call (847) 570-2112
## Cancer Committee 2020

### Chairman

**David J. Winchester, MD, FACS**  
Associate Director for Surgical Specialties,  
Kellogg Cancer Center  
NorthShore Cancer Committee Chairman  
Board of Directors, David P. Winchester, MD,  
Chair of Surgical Oncology

### Cancer Liaison Physician

**Seth Krantz, MD**  
Thoracic Oncology

### Physician Membership*

- **Matthew Adess, MD**  
  Medical Director, Highland Park  
  Kellogg Cancer Center
- **Bruce Brockstein, MD**  
  Medical Director, Kellogg Cancer Center,  
  Head, Division of Hematology/Oncology,  
  Kellogg-Scanlon Chair of Oncology
- **David Grinblatt, MD**  
  Director, Oncology Research Program  
  Kellogg Cancer Center
- **Thomas Hensing, MD, MS**  
  Co-Director, Thoracic Oncology Program  
  Head of Quality, Kellogg Cancer Center  
  Deputy Division Head,  
  Division of Hematology and Oncology  
  Medical Director, Evanston Kellogg Cancer Center  
  NorthShore Cancer Committee Quality Improvement Coordinator
- **Monika Krezalek, MD**  
  GI Surgery
- **Elena Moore, MD**  
  Gynecologic Oncology
- **Kristian Novakovic, MD**  
  Urologic Oncology
- **James Padgett, MD**  
  Pathology
- **Catherine Pesce, MD**  
  Surgical Oncology
- **Nick Pfanzelter, MD**  
  Clinical Research Coordinator
- **Vathsala Raghavan, MD**  
  Radiation Oncology
- **Carol Rosenberg, MD**  
  Director, Myra Rubenstein Weis  
  Living in the Future (LIFE) Cancer Survivorship Program  
  Survivorship Program Coordinator
- **Poomima Saha, MD**  
  Medical Oncology
- **Georgia Spear, MD**  
  Diagnostic Radiology
- **Lauren Wiebe, MD**  
  Palliative Care

### Ancillary Membership

- **Sabina Omercajic, MS, CCRP**  
  Outreach Coordinator  
  Kellogg Cancer Center
- **Anisha Patel, APN**  
  Clinical Coordinator,  
  Living in the Future (LIFE) Cancer Survivorship Program
- **Shayna Purcell, MS, CGC**  
  Medical Genetics
- **Denise Rehberger, RN, BSN**  
  Manager, Hospice
- **Jessica Smith**  
  Cancer Control Strategic Partnerships Manager  
  American Cancer Society Liaison
- **Irene Ziaya, LCSW**  
  Psychosocial Services Coordinator/Social Work
- **Debra Ziegler, MLIS, CTR**  
  Quality Coordinator, Cancer Registry  
  NorthShore Cancer Committee
- **Lisa Zoberman, RDN, LDN**  
  Oncology Nutrition  
  Kellogg Cancer Center

*All academic affiliations are with the University of Chicago Pritzker School of Medicine*