

2010-2011 Annual Report
**AVERA ST. LUKE'S
CANCER PROGRAM**

Avera 
St. Luke's Hospital

Look no further.

Honored for Outstanding Achievement by the Commission on Cancer

Avera Mission Statement

Avera is a health ministry rooted in the Gospel.

Our mission is to make a positive impact in the lives and health of persons and communities by providing quality services guided by Christian values.

2010 Cancer Committee Members

- ◆ Eric Mendoza, MD
Chairperson
Radiation Oncology
- ◆ Richard Conklin, MD
Vice Chairperson
Oncology/Hematology
- ◆ Christopher Larson, MD
CoC Cancer Liaison Physician
General, Thoracic, and Vascular Surgery
- ◆ Larry Alexander, MD
Pathology
- ◆ Jack Vonk, MD
Radiology
- ◆ Ty Hanson, DO
Dermatology
- ◆ Jean Gerber, MD
Surgery
- ◆ Tage Born, MD
Obstetrics and Gynecology
- ◆ Paul Eckrich, MD
Urology
- ◆ Sara Hernberg, MD
Family Practice
- ◆ Robert Cihak, MD
Otolaryngology, Head, Neck Surgery
- ◆ Farook Kidwai, MD
Neurosurgery
- ◆ Josie Hornaman, RHIT, CCS
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- ◆ Jaye Wilson, LSW
Social Work Services
- ◆ Heather Traphagen, RN
Inpatient Nursing
- ◆ Carna Atherton-Pray, RN
Outpatient Services
- ◆ Jerry Drees, Pharm D
Pharmacy
- ◆ Tina Winther, RHIT, CTR
Cancer Registry
- ◆ Rhonda Dell, LPN
Quality/Services
- ◆ Lee Ann Tople, BSRT (R)(M)
Cancer Care Director
- ◆ Jolynn Zeller, RN, BS, CIC
Quality Services
- ◆ Eileen Damgaard, RN
Education Department
- ◆ Cindy Senger, RN, MS
Home Health/Hospice
- ◆ Jill Ireland, MPA
American Cancer Society

American College of Surgeons, Commission on Cancer Accreditation of Cancer Program

Avera St. Luke's Cancer Program has received an Outstanding Achievement Award from the Commission on Cancer (CoC) of the American College of Surgeons, as a result of an onsite evaluation and survey performed during 2010. Avera St. Luke's is one of a select group of 90 accredited cancer programs from across the United States receiving the honor.

This award recognizes cancer programs that strive for excellence and demonstrate a "Commendation" level of compliance with seven standards: cancer committee leadership, cancer data management, clinical management, research, community outreach, and quality improvement.

"Avera St. Luke's is dedicated not only to providing innovative and up-to-date cancer care, but to keeping our community as cancer free as possible," says Dr. Eric Mendoza, a radiation oncologist and chairman of Avera St. Luke's Cancer Committee. Cancer services start with prevention programs, such as breast cancer and prostate screening clinics, and include education classes, diagnostic evaluation and continuing care and support services.

Receiving care at a CoC-accredited cancer program ensures that a patient will have access to the full quality spectrum of comprehensive cancer care close to home. In addition, cancer patients' data is reported to the CoC's National Cancer Data Base, a joint program with the American Cancer Society. This data accounts for approximately two-thirds of all newly diagnosed cancer cases in the U.S. each year, and is used regularly to monitor the quality of patient care delivered in CoC-accredited cancer programs and to improve cancer care outcomes.

Cancer Survivors Invited to 'Awaken' Exercise Class

Vicki Holley, Certified Personal Trainer



"Awaken," a new hour-long exercise class for cancer survivors, is being offered Monday and Wednesday afternoons in monthly four-week sessions by Avera St. Luke's Hospital at its Midland campus in Aberdeen.

Vicki Holley, an American Council on Exercise (ACE) certified personal trainer with a Cancer Exercise Specialist advanced qualification, leads the classes. Holley has more than 30 years of experience at Avera St. Luke's, and also teaches other fitness classes, including Tai Chi, Ai Chi and Laughter Yoga. Awaken classes feature deep breathing, stretching and light chair aerobics for half an hour, then low impact aerobics, stretching and strengthening, ball workout/ Theraband, and laughter yoga/restorative yoga.

The benefits of exercise during cancer treatment include increased stamina, function, strength and self-esteem; improved treatment tolerance; a decrease in pain and depression; fewer problems sleeping; and less fatigue during and after chemotherapy and radiation. Exercise also helps recovery from surgery, increasing strength and flexibility, improving posture and providing cardiovascular conditioning.

Interventional Radiology Treatments Help Cancer Patients

Doctors treat most cancers with surgery, chemotherapy, radiation therapy, or some combination of these treatments, depending on the type and stage of a patient's cancer. Interventional radiologists are able to perform a variety of procedures to treat many cancer patients and improve their quality of life.

Dr. Les Lenter, an interventional radiologist at Avera St. Luke's Hospital, performs a variety of procedures, including those that can help cancer patients.

Here are some of the interventional radiology procedures for cancer patients available at Avera St. Luke's Hospital: biliary drains, filters for blood clots, PICC lines (peripherally inserted central catheters), venous access ports, and stenting for tumor displacement.

CancerJourney Follows Patient's Progress

Cancer patients shouldn't have the additional burden of trying to remember all of the essential information related to their journey. The CancerJourney was created at Avera St. Luke's Hospital to lessen the burdens faced on a daily basis by these patients, by being a "one-stop" reference tool.

In essence, the CancerJourney was created to address results generated from a Cancer Patient Needs Surveys conducted over time. Our goal was to glean information needed for trending. Once we identified trends, these needs were addressed:

- Patients need to access information, services and equipment following their cancer diagnosis. There are many psycho-social and financial issues, in addition to the actual cancer diagnosis and medical issues.
- Following diagnosis, patients were not able to understand delays experienced prior to treatment initiation.
- Patients need to know that all providers are aware of their entire medical issues, to avoid having to tell their story over and over.

As a result, we drafted our CancerJourney, a timeline that will follow the patient throughout their progress. We are now using this concept to "feed" entire process, starting with diagnosis, and "walking the journey" with the patient. The Journey will be captured in a bound notebook similar to a journal, encompassing not only the actual timeline, but explaining the essential steps along the way to make the walk easier.

We want to assist the cancer patient in remembering essential information, including:

- The patient's initial diagnosis and subsequent steps along the path
- Appointment notes, including places to document lab results, questions, concerns, physician instructions, etc.
- References to essential educational information
- Medication entries, with room to document rapidly changing medication lists, as well as other appointment-related information
- Hospitalization summaries
- Journal pages, for noting the patient's inner thoughts, concerns and fears

The CancerJourney will also address future cancer treatment standards through integration of "survivorship plans" documented by the physician with the patient.

Cancer Liaison Physician



Dr. Christopher Larson serves as the cancer liaison physician (CLP) for Avera St. Luke's and plays an integral part in the cancer program approval by the American College of Surgeons Commission on Cancer. There is a

network of more than 1,600 physician volunteers filling the role of CLP nationwide.

Dr. Larson provides leadership and direction to improve the quality of cancer care; promulgate Commission on Cancer initiatives at the local level; and develop and strengthen relationships with the American Cancer Society.

Avera St. Luke's RN Earns Oncology Certification



Karla Johnson, a registered nurse with Avera St. Luke's Hospital and with Dr. Richard Conklin at Conklin Regional Cancer Center in Aberdeen, earned oncology certification in 2011 from the Oncology Nurses Certification Corp.

Oncology nursing certification reflects a level of professional achievement that indicates a nurse has the knowledge and expertise to competently care for patients with an actual or potential diagnosis of cancer.

Johnson, who is originally from Barnesville, Minn., has worked on Avera St. Luke's Medical Unit since 1992. She attended Moorhead State University for two years before transferring to South Dakota State University in Brookings, where she earned her bachelor of science degree in nursing.

CT Simulator Technologies Available at Avera St. Luke's

Part of the cancer treatment planning for radiation therapy requires simulation of the treatment fields to determine the exact location and size of the area to be treated and to allow for accuracy and consistent dose delivery.

When replacing current equipment, Avera St. Luke's Hospital moved to the advanced simulation techniques that Computed Tomography (CT) scanning offers. Avera St. Luke's Cancer Care Center is having its own CT simulator installed during fall 2011, providing convenient access for patients. The center's dedicated CT simulator has very specialized software and programming that allows the



radiation oncologist to accurately locate and visualize the tumor and normal structures. This makes it possible to find the most optimal treatment approach.

This new method of advanced CT simulation planning is now being done on CT scanners industry wide.

Oncology on Canvas Art Exhibit Comes to Avera St. Luke's Hospital

The first day of a cancer diagnosis begins one of life's most profound journeys. The Lilly Oncology on Canvas art competition and exhibition provides everyone affected by cancer with the opportunity to express life-affirming changes that give that journey meaning and to share their cancer journey through art.

Winning original artwork from this unique traveling art competition came to Aberdeen in June 2011. The free public exhibit, which tours nationwide, showcases select pieces of art from the 2010 Oncology on Canvas competition. The art was on display at Avera St. Luke's Hospital's southeast lobby and at Conklin Regional Cancer Center. A sneak preview and kickoff were held as part of the Relay for Life event at the Brown County Fairgrounds in Aberdeen. The local exhibit was made possible by the participation of Avera St. Luke's Hospital.



Lilly Oncology on Canvas is presented by Lilly USA, LLC, a pharmaceutical company committed to delivering innovative solutions that improve the care of people living with cancer, in partnership with the National Coalition for Cancer Survivorship. The Oncology on Canvas: Expressions of a Cancer Journey biennial art competition and exhibition were developed by Lilly in 2004 as a way to honor those who are impacted by cancer — as a patient, caregiver, friend or family member. Prizes awarded to winners consist of contributions made to their cancer-related charities of choice. The themes explored in more than 600 entries submitted to the 2010 competition ranged from hope, to fear, to the loss of individualism, to the support of family and friends, to the memory of those lost, to the perseverance of those who survive.

Hospitalist Program Started at Avera St. Luke's Hospital

Avera St. Luke's Hospital started a new hybrid hospitalist program in late 2010. Hospitalists are physicians who specialize in internal medicine and are based in the hospital, taking care of patients and assisting patients through the recovery process.

The goal is to coordinate with the primary care doctor while a patient is hospitalized, then return care to that doctor after discharge, providing needed information about the patient's hospital stay and current health condition. The hospitalist is especially helpful when a patient doesn't have a primary doctor in Aberdeen or transfers from outlying facilities.

This is another way that patients will receive consistent and coordinated care while they are hospitalized at Avera St. Luke's. It's an added service for both patients and their doctors.

The primary physicians involved with this program are Dr. Natalia Lazik, Dr. Fatima Kidwai and Dr. John Adams. On weekends, these physicians rotate through the call schedule with other designated physicians.

Cancer Committee Report

Dr. Eric Mendoza, Chairman



Avera St. Luke's is proud of the "Outstanding Achievement" recognition the cancer program received from the Commission on Cancer in October 2010. Avera St. Luke's is one of only 90 approved cancer programs in the United States presented with this honor in 2010. This number represents 17 percent of programs surveyed during this period. Avera St. Luke's remains diligent

in continuing to provide high quality cancer care that exemplifies the criteria worthy of such an award.

There are several components of the cancer program that the Cancer Committee oversees, including setting annual goals. Offering VitalStim therapy to our patients with dysphagia was a clinical goal. The equipment was available and staff was trained in April 2010. Community outreach goals included a radio awareness campaign on colorectal cancer and plans for a hospice residence house. The radio campaign was correlated in March, the colon awareness month. Quality improvement goals established in 2010 were increasing treatment guideline presentation at cancer conference and chemotherapy administration timeliness, both of which continue to be monitored. The committee updated cancer patient materials and addressed new staging requirements to meet its programmatic endeavor goals.

A new patient lodging program sponsored by the American Cancer Society was coordinated with local

hotels in Aberdeen. Avera St. Luke's introduced a new financial consultant service to patients seen in our cancer care center. Surgery went through a complete renovation. The Wound Care Team expanded to include a registered nurse with certification as a Wound Ostomy Continence Nurse (WOCN), along with a physical and occupational therapist who are both Wound Care Certified (WCC). Another new program developed in 2010 was a Hospitalist Program, which addresses the needs of patients transferred from outlying facilities who do not have a local primary care physician.

The cancer committee meets quarterly and has begun preparing for the revised requirements being proposed by the Commission on Cancer with an anticipated implementation date of 2012.

The year was full of a wide range of performance improvement studies focusing on cancer care patient education, satisfaction and ORRO quality compliance; palliative care outcomes; end of life pathway documentation, hospice care satisfaction and volunteer service; chemotherapy time study; compliance with CP3R measures; prevention and assessment of skin reactions from radiation therapy, palliative care patient comfort and hospice care in extended care facilities. A site-specific study on bladder cancer is illustrated in this report, covering cases from 2004 – 2009.

Monthly cancer conferences continue, with the majority of cases being presented prospectively and include major cancer sites seen at Avera St. Luke's, along with less common primary cancers.

Please take time to review the many valuable developments to our cancer program that are featured in this report. We are proud to continue our commitment to providing exceptional care to our patients.

Cancer Registry Report

Tina Winther, RHIT, CTR



The Cancer Registry, a component of Avera St. Luke's Cancer Program, is responsible for recording and reporting a wide range of demographic and medical information on patients diagnosed with cancer, malignant blood disorders and benign central nervous system neoplasms and/or initially treated with such diagnoses at Avera St. Luke's,

according to the guidelines outlined by the Commission on Cancer. The ultimate purpose of the Cancer Registry is to provide a valuable resource for research, education and administration of services that positively impact the care provided to our patients. Reporting of the Cancer Registry data to the South Dakota Cancer Registry and National Cancer Data Base is required.

In 2010, a total of 294 cases were accessioned, an approximate 10% increase from 2009. The five most frequent sites in 2010 were, in order of frequency, breast, lung, prostate, colon and bladder. The American Cancer Society estimated the most common cancer sites for 2010, in order of frequency, were lung, prostate, breast, colon/rectum and bladder.

In contrast to last year's statistics, male malignancies (51%) in 2010 were slightly higher than female malignancies (49%). The most frequent age at diagnosis in 2010 was between 60 and 69 years of age, followed by age category 80-89. Demographics show 51% of our patients reside in Brown County. There was a slight increase in North Dakota residents from last year, with 2010 statistics showing 7.8% residing in North Dakota.

Lifetime follow-up is performed by the Cancer Registry on more than 2,900 living patients. A 95.5% successful follow-up rate is maintained since the Cancer Registry reference date of Jan. 1, 1990, and a 98.7% follow-up rate on patients diagnosed within the last five years. The Commission on Cancer requires 80% follow-up success on all patients and 90% success on patients diagnosed within the last five years.

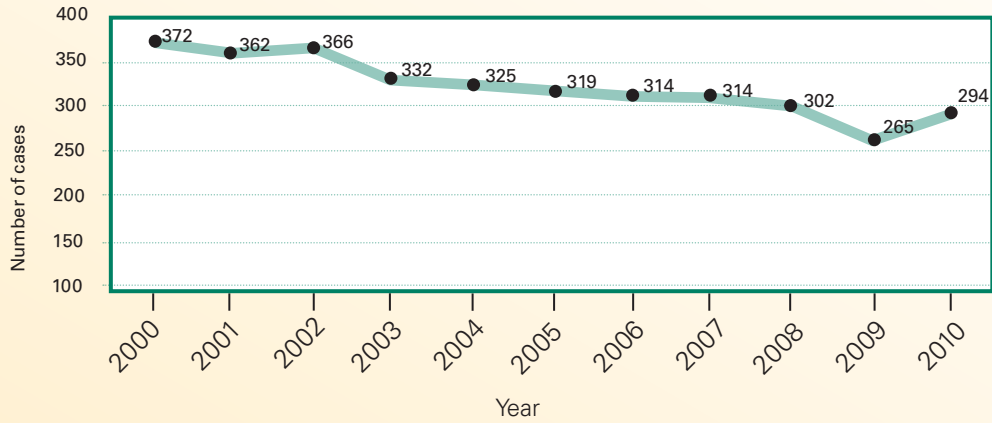
Class of Case definitions changed in 2010 to further detail where patients are being diagnosed and treated. The Cancer Registry will now be able to report if a patient was diagnosed at a staff physician's office versus Avera St. Luke's, and also if all or part of the patient's treatment was here or elsewhere. The coding of treatment at a staff physician office was also changed with cases diagnosed in 2010 and is now considered treatment elsewhere and NOT treatment here. This change noticeably impacts the percentage of class of case code 00, "Initial diagnosis at the reporting facility AND all treatment or a decision not to treat was done elsewhere." Comparing cases in this category from 2009 to 2010 shows an approximate 9% increase in 2010.

The Cancer Registry's performance improvement activities included casefinding monitoring, abstracting timeliness, data collection accuracy, staging completion and accuracy, CP3R (Cancer Program Practice Profile Reports) reconciliation, and bladder study. The cancer committee provides quarterly review of Cancer Registry elements, and results are reported to the cancer committee and quality council. Review was conducted on 17.8% of the analytic cases.

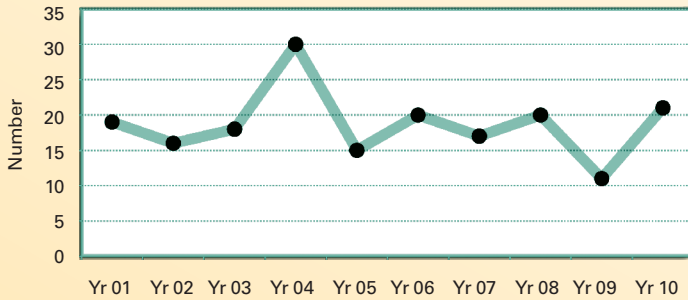
The Cancer Registry sincerely thanks Avera St. Luke's Cancer Committee, Cancer Program Workgroup, Administration, Medical Staff and ancillary departments for their support of the registry. Please direct any requests you may have for the Cancer Registry to tina.winther@avera.org or call Tina at (605) 622-5194.

2010 Statistical Analysis

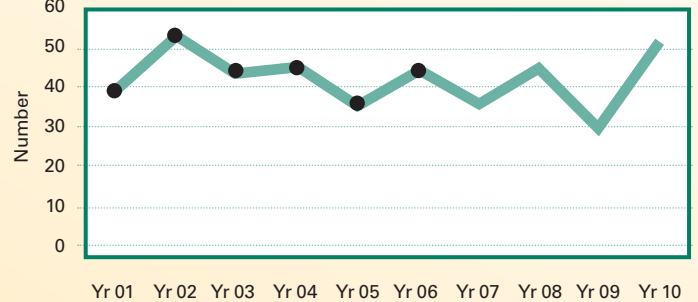
**Avera St. Luke's Hospital
Annual Cancer and Benign CNS Incidence
2000 - 2010**



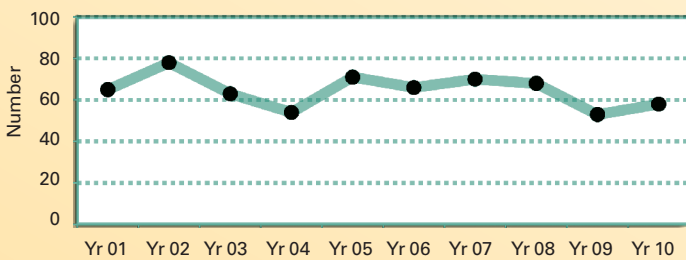
2001 - 2010 Bladder Cancer Incidence



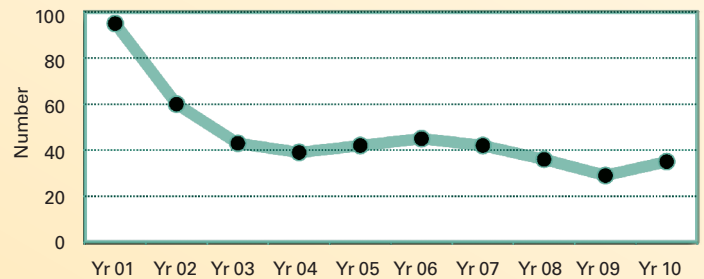
2001 - 2010 Lung Cancer Incidence



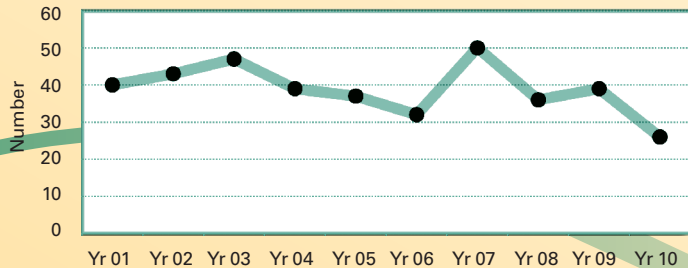
2001 - 2010 Breast Cancer Incidence



2001 - 2010 Prostate Cancer Incidence

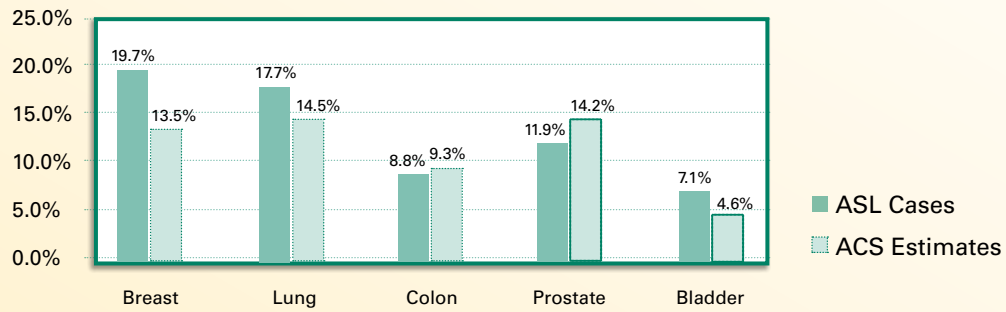


2001 - 2010 Colon Cancer Incidence

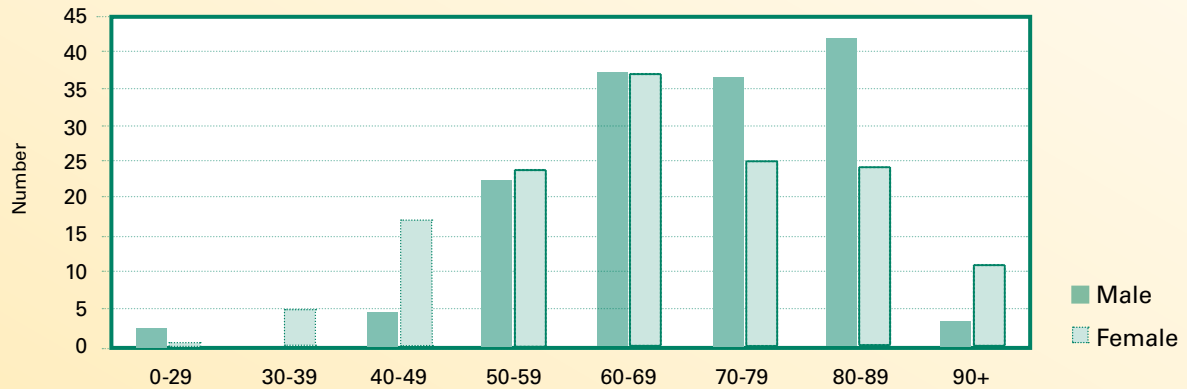


2010 Statistical Analysis

2010 Avera St. Luke's Major Cancer Cases and 2010 Estimated New ACS Cancer Cases

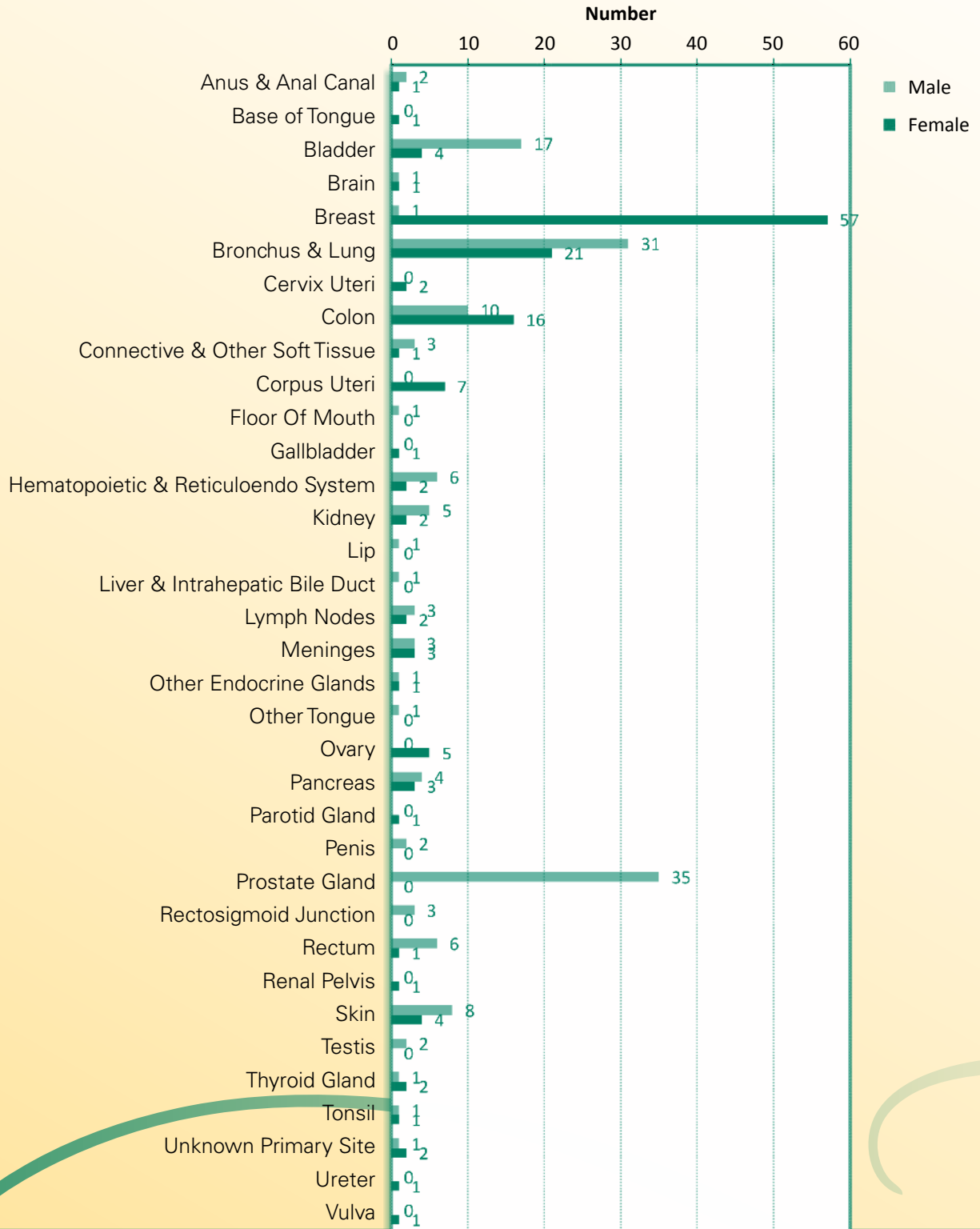


2010 Cancer Incidence by Age and Sex



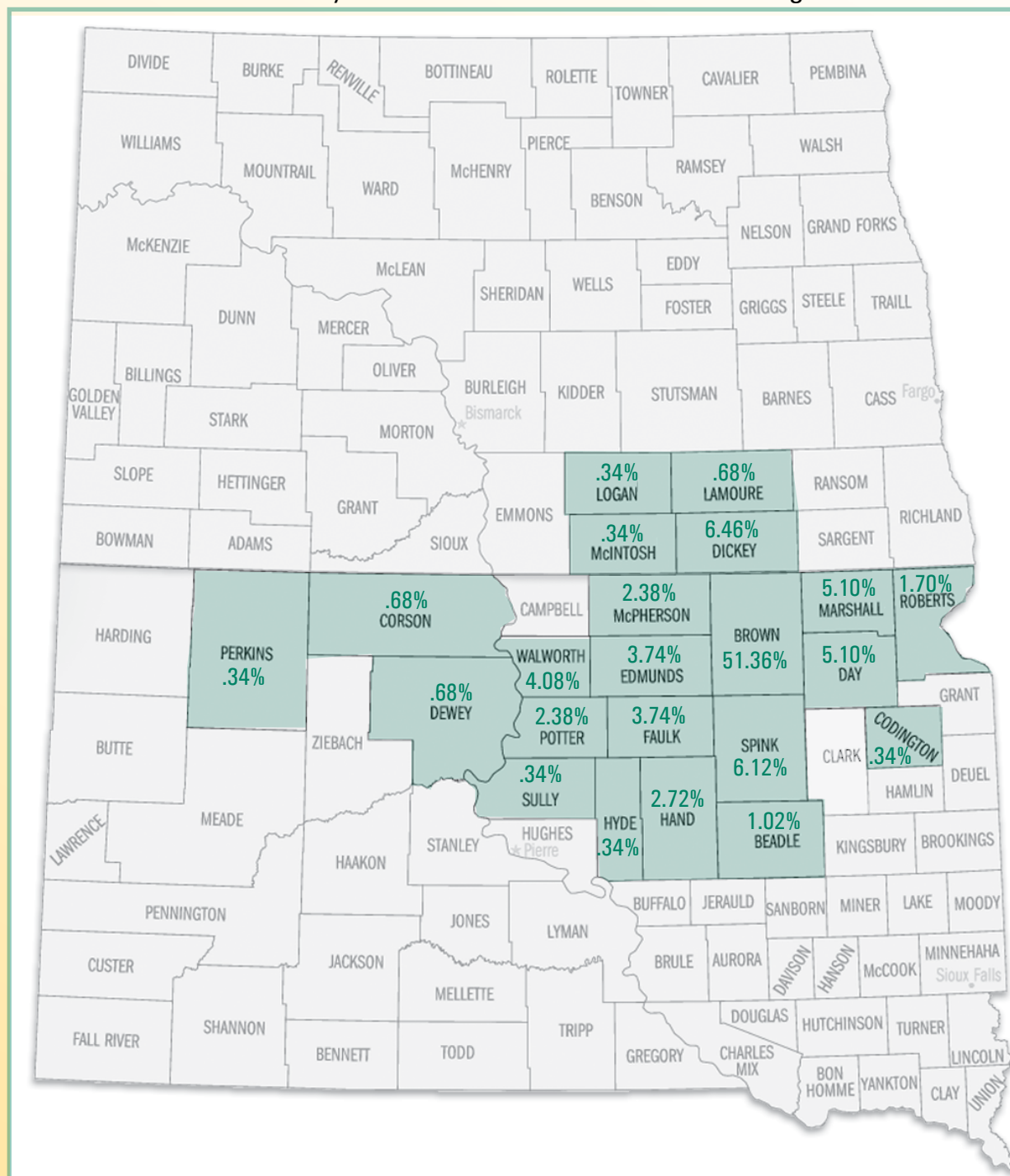
2010 Statistical Analysis

Avera St. Luke's Cancer Incidence including benign CNS tumors
 January - December 2010
 Total Cases: 294 (150 Male and 144 Female)



2010 Statistical Analysis

2010 County of Residence at Time of Cancer Diagnosis



2004-2009 Bladder Cancer

Dr. Paul Eckrich



Urinary bladder cancer is the fifth most common cancer nationally, as cited by the American Cancer Society. The incidence is four times higher in men than in women; however, there has been a slight increase in women over the past two decades as opposed to rates remaining stable in men. A total of 70,530 new bladder cancer cases in the United States was estimated in 2010, with

230 of those cases occurring in South Dakota.

One of the most important risk factors for bladder cancer is smoking. Study results showed 56.2% of the total 112 cases were smokers or users of smokeless tobacco currently or prior to diagnosis.

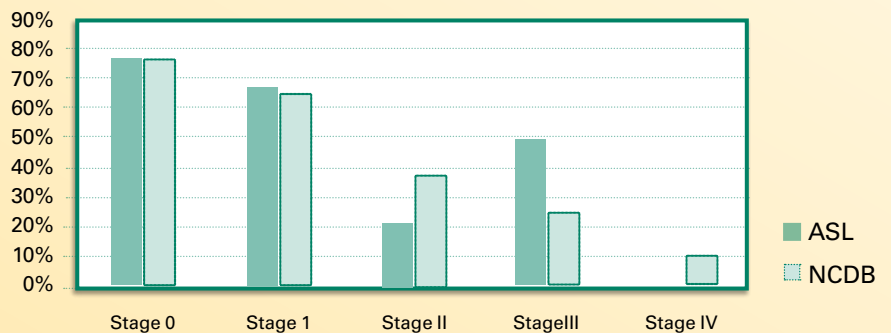
Outlined in this report are bladder cancer incidence and management at Avera St. Luke's from 2004 – 2009, totaling 112 cases. This study shows comparisons between Avera St. Luke's and the National Cancer Data Base, Commission on Cancer.

Source: Cancer Facts and Figures 2010

Bladder Cancer by First Course Treatment 2004 - 2009 ASL vs 2000 - 2008 NCDB

First Course Treatment	ASL %	NCDB %
Surgery Only	82.14	70.89
Surgery, Chemo	0	8.6
Surgery, BRM	1.79	7.26
Other	14.28	9.33
None	1.79	3.92
Total	100	100

Five Year Observed Survival for Bladder Cancer Avera St. Luke's 1998 - 2002 and NCDB 1998 - 2002



Our study follows the national trend with 81.25% of the cases occurring in males and 18.75% in females.

The majority of patients presented with hematuria. According to the American Cancer Society, there is not a screening test for bladder cancer. All cases except one were confirmed histologically.

According to the National Cancer Data Base (NCDB), the highest percent (32.75%) of cases occurred in the age range of 70 – 79. Avera St. Luke's highest percentage (37.50%) of cases was in the 80 – 89 age range.

Predominantly (49.11 %) non-invasive papillary transitional cell carcinoma was the histologically proven cell type, followed by invasive papillary transitional cell carcinoma at 34.82%.

Half of Avera St. Luke's cases were diagnosed while the tumor was in situ or noninvasive, Stage 0. This is evidenced also in the American Cancer Society research data and is slightly higher than the NCDB aggregate data showing 46.05% Stage 0 cases. Localized disease (Stage I and II) compromised 41.08% of our cases followed by 1.79% regional (Stage III) disease, 5.36% distant (Stage IV) disease and 0.89% unknown stage of disease.

Preferred treatment of bladder cancer is surgery, alone or in combination with other treatments. Surgery alone was the predominant choice of therapy at Avera St. Luke's and also in the nation, according to the NCDB.

Avera St. Luke's 2004-2009 Bladder Cancer Study

Age at Diagnosis (in years) Report		
2004 - 2009 ASL Bladder Cancer vs 2000 - 2008 NCDB Bladder Cancer		
Age at Diagnosis (in years)	ASL %	NCDB %
0 - 29	0	0.25
30 - 39	0	0.9
40 - 49	1.79	4.2
50 - 59	6.25	12.86
60 - 69	18.75	23.51
70 - 79	25.9	32.75
80 - 89	37.5	22.15
90+	9.8	3.38
Total	100	100

Gender Report		
2004 - 2009 ASL Bladder Cancer vs 2000 - 2008 NCDB Bladder Cancer		
Gender	ASL %	NCDB %
Male	81.25	74.7
Female	18.75	25.3
Total	100	100

Histology Report		
2004 - 2009 ASL Bladder Cancer vs 2000 - 2008 NCDB Bladder Cancer		
Histology	ASL %	NCDB %
Transitional Cell Carcinoma	14.29	27.82
Papillary Transitional Cell Carcinoma	83.93	65.57
Other	1.79	6.61
Total	100	100

Behavior Report		
2004 - 2009 Bladder Cancer vs 2000 - 2008 NCDB Bladder Cancer		
Behavior	ASL %	NCDB %
In situ	50.89	46.38
Invasive	49.11	53.62
Total	100	100

Best CS/AJCC Stage Report		
2004 - 2009 Bladder Cancer vs 2000 - 2008 Bladder Cancer		
Best CS/AJCC Stage	ASL %	NCDB %
0	50.89	46.05
I	26.79	21.2
II	14.29	11.2
III	1.79	5.1
IV	5.36	6.49
Unknown	0.89	9.82
Not applicable	0.00	0.15
Total	100	100

Source: National Cancer Data Base, Commission on Cancer, ACoS, Benchmark Report

2010-2011 Cancer Program

Prevention Programs

- ◆ Breast Cancer Screening
- ◆ Prostate Screening Clinic
- ◆ Nutritional Services Programs
 - Medical Nutrition Therapy (individual consults)
 - Lower Your Count Program
- ◆ Tobacco Cessation
 - SD Dept of Health Quit Line 1-866-SDQUITS
- ◆ Wellsource Health Risk Appraisal (includes cancer risk component)
- ◆ Public Awareness Events/Media Communications
- ◆ Smart Movers Program
- ◆ Eight Weeks to Wellness
- ◆ Business Health Programs
- ◆ Weight Watchers at Work
- ◆ Health Fairs

Treatment Services

Surgery

- ◆ Gynecology
- ◆ Otolaryngology
- ◆ General Surgery
- ◆ Surgical Oncology
- ◆ Oral Surgery
- ◆ Ophthalmology
- ◆ Urology
- ◆ Neurosurgery
- ◆ Orthopedics
- ◆ Plastic and Reconstructive Surgery
- ◆ Thoracic

Chemotherapy

- ◆ Clinical Trials
- ◆ Cancer & Leukemia Group B (CALGB) Research Protocol
- ◆ Cancer Trial Support Unit (CTSU)

Biological Therapy

- ◆ Monoclonal Antibody
- ◆ Colony-Stimulating Factors
- ◆ Interferons
- ◆ Vaccines

Radiation Therapy

- ◆ Varian 21EX Linear Accelerator
- ◆ Cesium 137
- ◆ Strontium 89
- ◆ 3-D Conformal Radiation Therapy
- ◆ Intensity Modulated Radiation Therapy with Multileaf Collimation and Digital Portal Imaging
- ◆ I-Beam Therapy Localization

Pain Management

- ◆ Celiac Plexus
- ◆ Intrathecal Opioid Pumps
- ◆ Nerve Blocks
- ◆ Medication Management

Treatment Education

- ◆ Chemotherapy Education
- ◆ Radiation Therapy Education
- ◆ Radiation Therapy Care Conference
- ◆ Oncology Care Conference
- ◆ Cancer and Cancer-Related Care Education

Diagnostic Evaluation

Avera St. Luke's participates in the South Dakota Breast and Cervical Cancer Control Program, "All Women Count" and SD Colorectal Screening Program.

- ◆ Endoscopy
- ◆ Laboratory and Cytology Services
- ◆ Histology
- ◆ Diagnostic Imaging
 - Computed Tomography
 - Positron Emission Tomography
 - Nuclear Medicine Scans
 - Angiograms
 - Ultrasounds
 - Magnetic Resonance Imaging
 - Interventional Radiology
- ◆ ACR Accredited Mammography
 - Stereotactic Breast Biopsy
 - Mobile Mammography Services
- ◆ Lymphatic Mapping and Sentinel Node Biopsy

Continuing Care/Support Services

- ◆ Pain Management Center
- ◆ Interventional Cardiology
- ◆ Social Work Services
- ◆ Home Health Care Program
- ◆ Hospice Program
- ◆ Palliative Care Program
- ◆ Bereavement Support
- ◆ Therapeutic Massage
- ◆ Enterostomal Therapy
- ◆ Chaplaincy Department
- ◆ Meals on Wheels (sponsored by Avera St. Luke's and Aberdeen Senior Center)
- ◆ Cancer Support
- ◆ Ride Line (sponsored by Avera St. Luke's and Aberdeen Senior Center)
- ◆ Medical Nutrition Therapy
- ◆ Rehabilitation Team (includes physical therapy, occupational therapy, recreation therapy and speech therapy)
- ◆ Freedom Fitness Exercise Program
- ◆ Physician/Hospital Staff In-service Education
- ◆ Auxiliary Guest House
- ◆ Select Hotel Courtesy Rates available
- ◆ Lymphedema Therapy
- ◆ Tai Chi, Ai Chi
- ◆ Acupuncture
- ◆ Guided Imagery
- ◆ Warm Water Pool Therapy
- ◆ Cancer Exercise

American Cancer Society Programs

- ◆ Cancer Resource Network: 1-800-227-2345
- ◆ Reach to Recovery
- ◆ Look Good, Feel Better
- ◆ Patient Lodging Program in Aberdeen

Notes of Appreciation

Thanks to Avera St. Luke's Auxiliary
for funding turbans and knitted hats
for our patients.

Thanks to Avera St. Luke's Foundation
for the handcrafted cancer awareness bracelet project.
All proceeds go to a fund established
to directly benefit our patients with cancer.



Avera 
St. Luke's Hospital

Look no further.

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