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Letter from Liaison Physician

The past year has seen a number of advancements within the UF&Shands Jacksonville Cancer Center.

- Minimally invasive and robotic surgical procedures have continued to advance the surgical boundaries, achieving faster recovery while maintaining established oncologic principles.
- The breast surgical service has moved to the Shands Jacksonville Breast Health Center in order to evaluate patients in close proximity to breast radiology.
- On-site genetic counseling.
- The UF Proton Therapy Institute continues to expand clinical indications for a wider scope of malignant diseases.

The true measure of success in battling this devastating disease is not only measured in length of survival, but in the confidence and peace of mind that patients describe during their treatments. This is enhanced by the closely integrated care provided by the many specialists, both physician and non-physician, who participate in every patient’s treatment plan.

John W. Kilkenny III, MD, FACS
Cancer Liaison Physician
American College of Surgeons Commission on Cancer
At the UF&Shands Jacksonville Cancer Center, multidisciplinary teams of University of Florida physicians work together using the latest diagnostic and therapeutic innovations to optimize cancer treatment outcomes.

We specialize in the treatment of:

- **Bone cancers and sarcomas**
- **Brain tumors**
- **Breast cancer**

Gastrointestinal cancers, including:
- Gastroesophageal cancer
- Colon and rectal cancer
- Hepatic tumors
- Pancreatic cancer

Genitourinary cancers, including:
- Bladder cancer
- Kidney cancer
- Prostate cancer
- Testicular cancer

Gynecologic cancers, including:
- Cervical cancer
- Ovarian cancer
- Uterine cancer

Hematologic cancers, including:
- Leukemia
- Lymphoma

**Lung cancer**

**Melanoma**

**Oral cancers**

**Thyroid cancer**

In addition to offering standard cancer treatment options, the UF Proton Therapy Institute which is located on the Shands Jacksonville campus, can offer patients with certain cancers cutting-edge treatment with minimal side effects.
A component of Shands Jacksonville Medical Center’s cancer program, the Cancer Registry is designed to ensure accurate and timely collection of cancer patient data. Successful operation of the Cancer Registry requires credentialed staff that is trained and knowledgeable in all aspects of oncology data collection and case abstracting. The registry is staffed by four certified tumor registrars who work with physicians and staff to obtain a complete picture of each patient’s cancer journey.

Registry data is reported to the Florida Cancer Data System (FCDS) by state law and the National Cancer Data Base (NCDB). The NCDB is a nationwide oncology outcomes database used to monitor changes and variations in patterns of cancer care and patient outcomes. The NCDB allows us to benchmark treatment and outcomes for cancer patients with other hospitals statewide, by region and nationwide. The Commission on Cancer also requires cancer programs to review and monitor the reported quality of care provided to breast and colorectal patients at their facilities using the Cancer Program Practice Profile Reports (CP3R) reporting tool.

The Cancer Registry staff coordinates Shands Jacksonville’s weekly multidisciplinary cancer conferences where physicians discuss the history, pertinent findings and staging evaluation to develop treatment recommendations and solve any dilemmas regarding management of our cancer patients. Continuing medical education credit is offered for the general tumor board as well as other site-specific oncology conferences, such as genitourinary, breast and thoracic.

During 2009, 154 conferences were held and a total of 562 cases were discussed. In 2010, 137 conferences were held and a total of 479 cases were discussed. Ninety-eight percent of the cases presented were prospective presentations. The primary site distribution table on page 5 provides an excellent overview of the cancer sites and collaborative stage (CS) that patients are presenting with.

The Cancer Registry staff strives to meet all reporting deadlines assigned by FCDS and NCDB. In recognition of exemplary work in Cancer Registries throughout Florida, FCDS presents the annual Jean Byers Award for Excellence in Cancer Registration. Shands Jacksonville has received this award each year since 2001. This award is presented to Florida hospitals for the submission of data in accordance with national standards for timeliness and completion. Below are the criteria met to receive this award:

1. **Timeliness – All deadlines met with respect to the cancer case admissions**
   - Annual caseload submission deadline
   - Death certificate notification deadline
   - AHCA audit deadline
   - No more than five percent or 35 cases, whichever number is greater, of the cancer case admissions reported to FCDS within 60 days following the deadline

2. **Completeness – All cases reported to FCDS**
   - No more than 10 percent of the cancer case admissions reported to FCDS within 12 months following the reporting deadline
## 2009-2010 Site Distribution

<table>
<thead>
<tr>
<th>SEX</th>
<th>CS STAGE GROUP</th>
<th>ALL SITES</th>
<th>Male</th>
<th>Female</th>
<th>In Situ</th>
<th>Stage I</th>
<th>Stage II</th>
<th>Stage III</th>
<th>Stage IV</th>
<th>Unknown</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Total</td>
<td>Analytic</td>
<td>Non-Analytic</td>
<td>Male</td>
<td>Female</td>
<td>In Situ</td>
<td>Stage I</td>
<td>Stage II</td>
<td>Stage III</td>
<td>Stage IV</td>
</tr>
</tbody>
</table>

### ORAL CAVITY
- Total: 103
- Analytic: 101
- Non-Analytic: 2

### LIP
- Total: 5

### TONGUE
- Total: 19

### OROPHARYNX
- Total: 4

### HYPOPHARYNX
- Total: 0

### OTHER
- Total: 75

### DIGESTIVE SYSTEM
- Total: 146

### ESOPHAGUS
- Total: 11

### STOMACH
- Total: 7

### COLON
- Total: 51

### RECTUM
- Total: 20

### ANUS/ANAL CANAL
- Total: 3

### LIVER
- Total: 17

### PANCREAS
- Total: 20

### BLOOD & BONE MARROW
- Total: 10

### RESPIRATORY SYSTEM
- Total: 188

### NASAL/SINUS
- Total: 5

### LARYNX
- Total: 13

### LUNG/BRONCHUS
- Total: 167

### OTHER
- Total: 2

### BLOOD & BONE MARROW
- Total: 31

### LEUKEMIA
- Total: 11

### OTHER
- Total: 2

### FEMALE GENITAL
- Total: 87

### OVARY
- Total: 33

### CORPUS UTERI
- Total: 30

### OTHER
- Total: 7

### BONE
- Total: 5

### CONNECT/SOFT TISSUE
- Total: 10

### SKIN
- Total: 30

### OTHER
- Total: 3

### BLOOD & BONE MARROW
- Total: 13

### LEUKEMIA
- Total: 12

### OTHER
- Total: 4

### BONE
- Total: 6

### CONNECT/SOFT TISSUE
- Total: 5

### SKIN
- Total: 30

### OTHER
- Total: 6

### BLOOD & BONE MARROW
- Total: 5

### LEUKEMIA
- Total: 10

### OTHER
- Total: 3

### BONE
- Total: 5

### CONNECT/SOFT TISSUE
- Total: 10

### SKIN
- Total: 30

### OTHER
- Total: 5

### BLOOD & BONE MARROW
- Total: 31

### LEUKEMIA
- Total: 16

### OTHER
- Total: 5

### BONE
- Total: 6

### CONNECT/SOFT TISSUE
- Total: 10

### SKIN
- Total: 30

### OTHER
- Total: 5

### BLOOD & BONE MARROW
- Total: 5

### LEUKEMIA
- Total: 10

### OTHER
- Total: 3

### BONE
- Total: 5

### CONNECT/SOFT TISSUE
- Total: 10

### SKIN
- Total: 30

### OTHER
- Total: 5

### BLOOD & BONE MARROW
- Total: 31

### LEUKEMIA
- Total: 16

### OTHER
- Total: 5

### BONE
- Total: 6

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- Total: 10

### SKIN
- Total: 30

### OTHER
- Total: 5

### BLOOD & BONE MARROW
- Total: 5

### LEUKEMIA
- Total: 10

### OTHER
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- Total: 10

### SKIN
- Total: 30

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- Total: 31

### LEUKEMIA
- Total: 16

### OTHER
- Total: 5

### BONE
- Total: 6

### CONNECT/SOFT TISSUE
- Total: 10

### SKIN
- Total: 30

### OTHER
- Total: 5

### BLOOD & BONE MARROW
- Total: 5

### LEUKEMIA
- Total: 10

### OTHER
- Total: 3

### BONE
- Total: 5

### CONNECT/SOFT TISSUE
- Total: 10

### SKIN
- Total: 30

### OTHER
- Total: 5

### BLOOD & BONE MARROW
- Total: 31

### LEUKEMIA
- Total: 16

### OTHER
- Total: 5

### BONE
- Total: 6

### CONNECT/SOFT TISSUE
- Total: 10

### SKIN
- Total: 30

### OTHER
- Total: 5

### BLOOD & BONE MARROW
- Total: 5

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- Total: 10

### OTHER
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### BONE
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- Total: 16

### OTHER
- Total: 5

### BONE
- Total: 6

### CONNECT/SOFT TISSUE
- Total: 10

### SKIN
- Total: 30

### OTHER
- Total: 5
The annual caseload for 2009 was 1,571 and 1,585 for 2010. The top five sites for both 2009 and 2010 were prostate, lung, breast, colorectal, and head and neck.

We continue to see a higher incidence of male patients from ages 60–79 due to a high volume of prostate cancer patients receiving proton therapy. (Table 1, left) A majority of the same population present with Stage II of the disease. (Graphs 1, 2)
In 2004, the University of Florida and Shands Jacksonville launched the city’s first Genitourinary Oncology Program to provide a comprehensive, multidisciplinary approach to the diagnosis and treatment of patients with genitourinary cancers (cancers of the prostate, bladder, kidney, testis and penis). In this approach, patients receive coordinated, compassionate and quality cancer care from specialists in urologic oncology, radiation oncology, medical oncology, pathology and radiology.

The program consists of University of Florida physician specialists and healthcare professionals working together to provide state-of-the-art cancer treatment. Support is also provided to patients by a group of skilled pharmacists, nurses, case workers and nutritionists.

Gynecologic Oncology

The University of Florida Division of Gynecologic Oncology provides diagnostic and patient care services to women with cancers of the reproductive organs, which are detected in various ways. A suspicious finding may be noted during an examination or imaging study, such as a pelvic sonogram or computerized tomogram (CT), or a routine Pap smear may be abnormal. A tissue sample or biopsy is obtained to determine if cancer is present. This can be done in the office or during a pelvic examination under anesthesia in an operating room.

The initial examination is most often performed by an obstetrics and gynecology specialist. If more advanced cancer is diagnosed, the patient will usually be referred to a gynecologic oncologist for further evaluation, treatment and follow-up care.

The seven main types of gynecologic cancer are malignancies of the uterine corpus (endometrial cancer), ovarian cancer, cervical cancer, vulvar cancer, fallopian tube cancer, vaginal cancer and placental cancer. Combined, this group of malignancies is the fourth most common site of cancer in women after breast, lung and colon cancers.
Hematology & Medical Oncology

University of Florida physicians in the Division of Hematology and Medical Oncology specialize in the diagnosis and treatment of solid tumors and blood disorders. They provide patient consultations in the hospital as well as the outpatient setting.

All faculty are actively involved in clinical research directed at improving the knowledge and therapy of cancer services and participate in post-graduate training of medical oncology fellows. The oncology fellowship program is highly competitive. Each year, three oncology fellows pursue their training and board certification in medical oncology.

The division operates the outpatient hematology/oncology clinic and works closely with physicians and allied health professionals from various disciplines within the hospital, including the outpatient Infusion Center, Shands Jacksonville Breast Health Center, UF Department of Radiation Oncology and the UF Proton Therapy Institute. Patient care within the Division of Hematology and Medical Oncology often requires the expertise of multiple specialists, including surgeons, radiologists, pathologists, pulmonologists and radiation therapists.

Musculoskeletal Oncology

The University of Florida Musculoskeletal Oncology program provides full services for the evaluation, treatment and surgical care of patients with tumors of the bones, muscles and soft tissues of the extremities.

These services include consultation for patients with unexpected radiographic (x-ray) findings, evaluation of “lumps and bumps” of the extremities and treatment of patients with known or suspected bone involvement or spread (metastases) from other cancers. Most often, the bone is affected by cancers spread from the breast, prostate, lung or kidney.

In addition to specific oncology services, the faculty physicians are regional experts on amputation techniques, whether for cancer or traumatic injuries. This includes patients who have poor function in the remaining portion of the amputated limb or patients with pain that prevents prosthetic fitting and might benefit from a revision of the residual limb. A multidisciplinary clinic environment for amputees provides ongoing care and maximizes their functional abilities and comfort.

Pathology

The University of Florida Department of Pathology and Laboratory Medicine provides services to Shands Jacksonville Medical Center, University of Florida clinics and other healthcare providers and facilities in Jacksonville and surrounding areas.

The pathology department offers a comprehensive range of pathology and laboratory services, as well as private consultative services in breast pathology, autopsy and toxicology. The department employs ten full-time UF pathologists and two clinical laboratory scientists whose specialties cover all areas of anatomical and clinical pathology, as well as subspecialties including molecular pathology, hematopathology, cytopathology and clinical toxicology.

In addition to clinical service, the department offers a combined anatomical pathology/clinical pathology residency training program and fellowships in cytopathology and breast pathology. Faculty members have received national and international recognition for their contributions to research, education and integrated patient care.

Services include:

- Anatomic pathology
- Bone and soft tissue pathology
- Clinical laboratory
- Flow cytometry and hematopathology
- Neuropathology
- Tumor analysis
- Immunohistochemistry
- Molecular diagnostics
Radiation Oncology

Physicians in the University of Florida Department of Radiation Oncology specialize in the diagnosis and treatment of malignant tumors (cancer) and certain benign disorders. They provide patient consultations at Shands Jacksonville as well as in the outpatient setting at the UF Proton Therapy Institute.

The department’s board-certified radiation oncologists are actively involved in clinical research directed at improving the knowledge and therapy of cancer services.

The faculty work closely with other University of Florida physicians from various disciplines including surgery, radiology, pathology, pulmonology and medical oncology, as well as health professionals in Shands Jacksonville’s Infusion Center, Breast Health Center and other multidisciplinary clinics.

Services include:

- Intensity modulated radiation therapy
- 3-D conformal radiation therapy
- Intracranial stereotactic radiosurgery
- Fractionated stereotactic radiotherapy
- Breast cancer treatments with respiratory gating

Conventional radiation therapy treatments are provided for prostate, lung, brain, breast, pelvis (colorectal & cervix), sarcomas, skin, and pediatric cancers.

University of Florida Proton Therapy Institute

Because there are currently only nine proton therapy facilities in the country, protons are a rare medical resource and the University of Florida Proton Therapy Institute is committed to making this promising technology available to as many patients as possible. With a focus on accuracy and efficiency, approximately 94,000 treatments have been delivered to more than 2,800 patients since August 2006. On a typical day, about 110 patients are treated during a 14-hour period. As a regional, national and international resource, up to 80 percent of patients live outside of Jacksonville, including 25 percent who travel more than 300 miles and five percent from overseas.

The types of cancers treated include head and neck, brain, lung, central nervous system, soft tissue (sarcoma), lymphoma, pancreas and prostate, as well as cancers in children. Proton therapy is particularly beneficial for treating cancer in children whose rapidly growing bodies are more susceptible to the harmful effects of radiation. Recent studies from St. Jude Children’s Research Hospital show that even small amounts of radiation exposure in children cause permanent damage to IQ, hinder the body’s normal growth and development, and increase risk for secondary cancers later in life. The pediatric program at the UF Proton Therapy Institute has become one of the busiest in the country, treating 15 to 20 pediatric patients each day. Thus far, more than 200 children have received proton therapy at the facility.

The facility is one of the first clinically-dedicated proton therapy centers in the world. Nearly 98 percent of all patients at the institute are on one or more protocols and clinical trials. Important areas of study include prostate cancer and pediatric cancers, Hodgkin’s lymphoma, lung and pancreas cancer, bone and soft tissue tumors in critical sites, brain tumors and cancer of the head and neck area. Early findings in prostate cancer, lung and pancreatic cancer, Hodgkin’s lymphoma, and head and neck cancers...
have been presented at national and international meetings. The UF Proton Therapy Institute is also collaborating with St. Jude Children’s Research Hospital in children’s brain tumor trials.

In the coming months, the UF Proton Therapy Institute will begin treatment in a new room designed especially for patients with eye tumors and other eye disorders. In addition, a new protocol will open for patients with advanced left-sided breast cancer. Treatment planning studies indicate that proton therapy in left-sided breast cancer can reduce the amount of radiation received in the heart and lung while delivering the highest possible dose of radiation in the cancer.

**Radiology**

The Department of Radiology collaborates with the University of Florida College of Medicine–Jacksonville and Shands Jacksonville. The department is comprised of board-certified radiologists (many with formal subspecialty training), radiology fellows, radiology residents, imaging scientists and other clinical and non-clinical staff (technologists, nurses, administrative personnel and clerical assistants). The department is rapidly growing and maturing into a full-service, subspecialized group to meet the equally expanding and developing clinical and academic needs of the other departments on the Shands Jacksonville campus.

The primary focus of the Department of Radiology has been, and will continue to be, to provide the highest level of imaging-based diagnostic and therapeutic contributions to the care of patients. A future goal is to provide increased imaging sub-specialization, supported by focused imaging and/or interventional radiology expertise. Emphasizing integrated and judicious utilization of state-of-the-art imaging technology will help to optimize results as well as minimize cost and risks for the patient.

Focused diagnostic imaging and interventional radiology expertise, combined with state-of-the-art imaging technology, will provide the basis for relevant clinical and basic imaging research. This pursuit will be greatly enhanced by the formation of partnerships between academic radiologists and imaging scientists in the department on one hand, and with external clinical and/or industrial collaborators (e.g. Master Research Agreement with Siemens Medical Solutions currently in place) on the other. Imaging-based research will be incorporated into the training of residents, fellows and faculty.

**Services include:**

- Abdominal and general body imaging
- Cardiovascular imaging
- Diagnostic and interventional neuroradiology
- Emergency and trauma radiology
- Functional and molecular imaging
- General radiology
- Musculoskeletal imaging
- Pediatric imaging
- Thoracic imaging
- Vascular and interventional radiology
- Women’s imaging
Oncology-related Specialties

Surgical Oncology

The University of Florida College of Medicine–Jacksonville Division of Surgical Oncology offers patients the latest in surgical technology to accurately diagnose and treat a wide range of cancers. The division is a key component of the multidisciplinary team of UF physicians within the cancer program. The physicians who make up the surgical oncology program have helped pioneer many surgical innovations, including minimally invasive procedures for the treatment of esophageal, gastric, adrenal, colon, liver and other cancers.

HEAD AND NECK SURGERY

The Section of Head and Neck Cancer at the University of Florida College of Medicine–Jacksonville is dedicated to providing the finest patient care. To that end, our faculty strive to be on the cutting edge of the surgical management of head and neck cancers as well as reconstructive procedures.

The goals are to provide the best possible surgical outcome and to improve the quality of life for patients. The head and neck tumor board fosters an interdisciplinary approach to treatment. The board consists of surgeons, radiation oncologists, neuroradiologists and speech pathologists dedicated to the care of head and neck cancer patients. Weekly meetings are held to discuss cases and recommend the most appropriate treatment plan.

The faculty is involved in training post-doctoral fellows in all aspects of head and neck surgery as well as complex microvascular reconstructive surgery. These specialists seek to improve the treatment of head and neck cancer through collaborative basic and clinical research projects. They also work with community physicians to provide excellent care for patients with head and neck cancer.

MINIMALLY INVASIVE SURGERY

The minimally invasive surgery techniques performed by UF surgeons at Shands Jacksonville offer advantages not found anywhere else in Northeast Florida and Southeast Georgia. Through tiny incisions, these specialists precisely perform many complex operations using the latest technologies in cryotherapy, natural orifice and laparoscopic procedures, as well as robotically assisted surgery.

Minimally invasive surgery has many advantages over traditional surgery:

- Faster recovery
- Shorter hospital stay
- Less pain and scarring
- Less risk of infection
- Less blood loss and fewer transfusions
- Decreased need for post-operative medications
- Smaller, less obvious incision
Many types of operations are now being performed using minimally invasive surgical techniques, including:

- Cardiac
- General surgical
- Gynecologic
- Urology
- Thoracic/chest

**NEUROSURGERY**

The University of Florida College of Medicine–Jacksonville Department of Neurosurgery provides inpatient and outpatient services for the diagnosis, management and rehabilitation for patients suffering from diseases of the nervous system, its supportive structures, and vascular supply, such as brain tumors, aneurysms, epilepsy, movement disorders and spine diseases.

UF neurosurgeons work in close conjunction with neurologists, neuroradiologists and neuropsychologists to provide comprehensive patient care at the Shands Jacksonville Neuroscience Institute. They also provide pediatric neurosurgery services to Wolfson Children’s Hospital. The department is nationally recognized as a premier referral center for the treatment of spasmodic torticollis.

**ORAL AND MAXILLOFACIAL SURGERY**

The University of Florida College of Medicine–Jacksonville Division of Oral and Maxillofacial Surgery provides an extensive array of specialized medical services at Shands Jacksonville. The division is comprised of nationally recognized experts with specialty and subspecialty training and certification.

The division’s UF faculty physicians offer the entire spectrum of contemporary maxillofacial surgery. They offer comprehensive facial trauma and reconstruction, pediatric craniofacial surgery, facial aesthetic surgery, TMJ (temporomandibular joint) and corrective jaw surgery, head and neck oncology and microvascular rehabilitation and reconstruction of head and neck defects. In addition, a fully accredited residency program in oral and maxillofacial surgery and a microvascular surgery fellowship are under the guidance of the division’s faculty.

**PLASTIC AND RECONSTRUCTIVE SURGERY**

The Division of Plastic and Reconstructive Surgery at the University of Florida College of Medicine–Jacksonville offers broad services in breast reconstruction, breast augmentation and reduction, craniofacial and congenital abnormalities, pediatric plastic surgery, head and neck reconstruction, microsurgical techniques, hand and extremity surgery, and free tissue transfer.

UF plastic surgeons collaborate with neurosurgeons, otolaryngologists, general surgeons, orthopaedic surgeons and other specialists to provide patients with optimal treatment.
Lung and esophageal cancers are very aggressive, so early detection is essential. Acting quickly and decisively can make the difference between a cure and a life-limiting situation. The need for a system that ensures prompt diagnosis and care of a cancer that often involves complex treatment plans with coordination of services triggered the creation of the multidisciplinary Thoracic Oncology Program at Shands Jacksonville (TOPS). This program, backed by University of Florida faculty physicians, can decrease evaluation time for patients from weeks and months to just a few days in most cases.

The program specializes in the treatment of:

- Lung cancer
- Abnormal thoracic growths
- Esophageal cancer
- Mesothelioma (cancer of the lung lining)
- Metastatic tumors of the chest (a cancer that has spread to the chest from another site)

A multidisciplinary approach ensures timely diagnosis and treatment of lung cancer. The UF thoracic surgeons, pulmonologists, medical oncologists and radiation oncologists of the Thoracic Oncology Program at Shands Jacksonville meet on a weekly basis to discuss patients and consider the best individual therapy. This ensures that patients benefit from a collaborative, academic team of specialists.
The UF and Shands Jacksonville Robotic Oncology Program is one of the most diverse multispecialty robotic oncology programs in the country. UF oncology surgeons are expertly trained and represent four different oncological specialties: gastrointestinal, urological, thoracic, and transoral head and neck.

Surgeons use the da Vinci S robot, which utilizes four robotic arms that insert surgical instruments into incisions smaller than the size of a dime. The surgeon is in complete control of the robot and guides the surgical instruments by watching the area on a high-definition monitor.

With instruments that provide better dexterity and range of motion than the human hand, the surgeon gains greater control and precision than found in traditional open operations and some laparoscopic procedures. Patients benefit by having more options for minimally invasive procedures — some not performed elsewhere in Northeast Florida and Southeast Georgia. The first oral and maxillofacial surgeon in the United States trained to perform transoral robotic surgery is a UF faculty member.

University of Florida robotic surgeons at Shands Jacksonville routinely perform the following cancer operations using the da Vinci S:

- Adrenalectomy
- Radical and partial nephrectomy
- Pancreatectomy
- Nerve-sparing radical prostatectomy
- Cystoprostatectomy
- Pulmonary lobectomy and wedge resection
- Resection of mediastinal tumors and pericardial masses
- Small intestine, colon and rectum resection
- Transoral surgery (base of tongue and hypopharyngeal tumor resection, supraglottic laryngectomy, radical tonsillectomy)
Oncology Support Services

**AMERICAN CANCER SOCIETY CANCER RESOURCE CENTER**

In partnership with the American Cancer Society (ACS), Shands Jacksonville’s on-site Cancer Resource Center provides support to cancer patients, their family members and caregivers.

The center is staffed by volunteers who are trained and certified by the American Cancer Society to offer current cancer information, cancer programs and services, as well as referrals to community resources. This includes information on educational programs, transportation to and from appointments and housing during treatment.

The center is supplied with educational materials, a lending library, hats, scarves and wigs. The volunteers visit patients in treatment areas to offer assistance and raise awareness of the ACS, Shands Jacksonville and community resources.

For around-the-clock cancer information and support, visit www.cancer.org or call the American Cancer Society at 800-227-2345.

**GENETIC COUNSELING**

Although most cancers develop by chance or through environmental exposures, as many as 10 percent of all cancers occur because of inherited genetic factors. Early detection and prevention are essential for those at risk.

*Hereditary risk factors include:*

- Multiple cases of a specific cancer in a family
- More than one type of cancer occurring in a family member
- Cancer diagnosis at an unusually young age
- Clustering of cancer within a family fitting a known pattern
- Non-cancerous findings suggesting a recognized genetic disorder
- Absence of established environmental risk factors, such as tobacco
- A known cancer-related genetic alteration in a family member

**HOSPICE SERVICE**

Physicians and other healthcare professionals are indispensable members of the Community Hospice of Northeast Florida team. The hospice team works with a patient’s personal physician to increase access to expert pain management and symptom control, coordinate necessary medications and equipment, and provide support for caregivers. Physicians may remain involved in their patient’s care or defer that care to a Community Hospice medical director.

Community Hospice of Northeast Florida provides customized care that meets patients where they are, with respect to the stage of their illness and their individual needs and goals for care. Professionals offer specialized tools, training and resources, with the goals of helping patients live better and teaching loved ones effective caregiving skills.
Community Hospice of Northeast Florida also supports hospital staff with professional education on disease-specific concerns, end-stage indicators and pain management strategies.

For information on patient referral procedures, Medicare guidelines and educational resources for healthcare professionals, contact your Community Hospice representative or call the 24/7 referral line at 800-274-6614 or toll-free at 866-253-6881.

**INFUSION CENTER**

The Shands Jacksonville Infusion Center is an ambulatory outpatient clinic that offers treatments to patients who require frequent infusions of medications, including those with central venous catheters. Center staff members complete more than 5,100 treatments each year ranging from short injections to a full-day transfusion. All of the treatments are by physician referrals and scheduled appointments. Same-day treatments can be scheduled as required by the urgency of the patient’s medical condition.

All RNs are chemotherapy-certified by the Oncology Nursing Society and there is an onsite chemo pharmacy staffed by two pharmacists and three technicians.

*Cancer-related services include:*

- Chemotherapy infusions
- Blood disorders
- Antibiotics
- Central venous catheter care
- Hydration therapy
- IV antibiotic therapy
- Intramuscular injections
- Monoclonal antibodies
- Subcutaneous injections
- Therapeutic phlebotomy
- Transfusions of blood products

**INTEGRATIVE PALLIATIVE CARE**

Incorporating palliative care into a patient’s existing treatment plans can help improve quality of life and may even slow the progress or reverse the illness. Choosing to focus on the patient’s comfort does not mean providing less care. It is simply a choice for greater quality of life.

*Benefits of palliative care include:*

- A palliative consultation saves time by managing repeated, intensive patient-family communications, coordination of care across settings, and discharge planning activities.
- The palliative care team assists with bedside management of pain and the distress of very symptomatic and complex cases.
- Palliative care promotes patient and family satisfaction with the clinician’s quality of care.
- Palliative care helps patients complete prescribed treatments.
- Palliative care improves quality outcomes.

Palliative care assistance can be provided for the following:

- Complex, chronic or advanced conditions with symptoms and/or stress related to a patient’s condition
- Complex decision-making and establishing goals of care as needed by the patient, family and/or physician
- Psychosocial or spiritual issues
- Prolonged hospital stay
- Recurrent visits to the Emergency Department
- Prolonged ICU stay or poor prognosis

To schedule an educational in-service or to learn more about Integrative Palliative Care, contact the project manager for Community Palliative Consultants at 904-608-4042.
Oncology Support Services

OUTPATIENT REHABILITATION SERVICES

The Shands Jacksonville Outpatient Rehabilitation Services department uses a multidisciplinary team approach to providing individualized and comprehensive care. Staff addresses the rehabilitation needs of each patient with a variety of diagnoses to best improve an individual’s mobility, independence and quality of life.

Outpatient rehabilitation services are offered for adult patients in need of:

- Hand therapy
- Lymphedema therapy
- Neurologic rehabilitation
- Orthopaedic and sports medicine rehabilitation
- Speech language pathology
- Wheelchair evaluation
- Women’s health

The multidisciplinary team consists of:

- Physical therapists who assist patients in maximizing and restoring functional mobility and independence
- Occupational therapists who promote independence with activities of daily living and improved upper extremity function
- Speech language pathologists who help patients improve their ability to speak clearly, swallow, recall memory, concentrate and communicate effectively

PAIN MANAGEMENT

The Shands Jacksonville Pain Management Center is a comprehensive, multidisciplinary program that helps patients cope with the debilitating effects of pain.

The center offers a full range of services for the evaluation, diagnosis and management of acute or chronic pain. University of Florida physicians are committed to providing expert treatment in a caring, comfortable and patient-focused setting.

Treatment may include medications, therapeutic injections, physical therapy, psychological counseling, medical or surgical referral and patient education about a pain management plan.

RESEARCH

The University of Florida and Shands Jacksonville campus offers all the benefits of an academic health center, including the latest in clinical oncology research. Advances in oncologic care and the development of more effective oncologic treatments depend largely on clinical research collaborations such as in-house physician-initiated trials, pharmaceutical trials and National Cancer Institute supported cooperative group trials (i.e. Radiation Therapy Oncology Group (RTOG), Southwest Oncology Group (SWOG), etc.).

The effective coordination of clinical oncology research requires the involvement of a variety of services and departments. Departments that participate in such research on this campus include: radiation oncology and proton therapy (including pediatrics), surgical oncology, medical oncology, gynecological oncology and urological oncology.
SOCIAL SERVICES

Shands Jacksonville’s social services coordinators offer a variety of support services:

• Providing immediate and long-term medication assistance through medication vouchers and pharmaceutical assistance programs
• Arranging direct assistance through the American Cancer Society for financial, transportation, lodging and basic needs
• Assisting with disability and Medicaid applications, in addition to referrals to hospital charity care program
• Making referrals to financial counselors and applying for financial assistance through foundations such as Cancer Care, American Cancer Society and the Leukemia and Lymphoma Society
• Making referrals to hospice and home health
• Ordering durable medical equipment

Additional services include:

• Providing cancer resource material
• Working with multidisciplinary teams in developing plans to direct individual cancer care and to identify and address ethical concerns
• Providing pre-admission, transfer and discharge planning, case management and community referrals for services and resources
• Offering a range of therapeutic and other interventions to foster coping, including crisis intervention, supportive counseling, education, support groups and special programs

These services are available to patients and their families.
The specialists in the University of Florida College of Medicine–Jacksonville Section of Breast Surgery focus on diagnosis and comprehensive treatment of benign and malignant diseases of the breast.

They provide a multidisciplinary, team-based approach to the evaluation and treatment of breast disease at the Shands Jacksonville Breast Health Center. In addition to providing information and support, these specialists help each patient understand her diagnosis and treatment options so she can feel comfortable about making the right decision for herself.

Services encompass the entire spectrum of patient needs which makes the team truly comprehensive. During a patient's course of treatment, she may see a board-certified, fellowship-trained breast surgeon, dedicated breast radiologists, medical oncologists, radiation oncologists and plastic surgeons. Genetic counseling and risk assessment is provided by a professional genetic counselor. Individual treatment plans are formed based on the stage of the disease, family history and risk factors, other medical conditions, age, and pathology and X-ray results, as well as a patient's social and psychological needs. Protocols followed by UF physicians for treating breast cancer are similar to those listed on the American Cancer Society’s website and in the National Comprehensive Cancer Network’s national guidelines.

Many of the breast conservation procedures are performed using oncplastic techniques, which maintain the breast shape and contour while allowing removal of the cancerous lesion. When possible, surgical scars can be hidden around the areola or crease of the breast. Breast conservation therapies as well as nipple and skin-sparing surgeries are performed by UF surgeons at Shands Jacksonville. These surgeons work closely with the UF plastic surgery team to provide a single operation and immediate reconstruction to patients who may require a mastectomy.

Individualized management plans are created for each patient during a weekly multidisciplinary breast conference. With the help of a Shands Jacksonville breast nurse navigator, appointments are efficiently coordinated to reduce the number of trips to the clinic or hospital. Additional support services from breast cancer support groups, educational material and lymphedema therapy are included in the comprehensive care plans. The UF Section of Breast Surgery is led by a board-certified, fellowship-trained breast surgeon who is certified in breast ultrasound by the American Society of Breast Surgeons.

Breast surgical services are available at Shands Jacksonville and some services are available at Emerson Medical Plaza on Jacksonville’s Southside.

Breast surgical services include:

- Diagnosis and surgical staging of breast cancer
- Evaluation and treatment of benign conditions of the breast:
  - Nipple discharge
  - Breast pain and fibrocystic changes
  - Fibroadenoma
  - Abnormal mammogram and calcifications
  - Breast lump
  - Mastitis and breast infections
  - Gynecomastia
- Surgical procedures may include:
  - Breast biopsies and breast conservation surgery
  - Lumpectomy
  - Skin and nipple sparing mastectomy
  - Simple mastectomy
  - Modified radical mastectomy
  - Nipple exploration and selective duct excision
  - Oncoplastic surgery
  - Sentinel node biopsy
  - Axillary node dissection
**RISK ASSESSMENT AND GENETIC COUNSELING**

Women with a family history of breast cancer can undergo a comprehensive evaluation to better understand their risk. Specialists in the University of Florida College of Medicine–Jacksonville Division of Surgical Oncology provide genetic counseling, close monitoring of high-risk women, and education on strategies that may help reduce one’s risk of developing breast cancer.

**BREAST HEALTH NAVIGATOR SERVICES**

Maneuvering through the healthcare system can sometimes be overwhelming for patients. Shands Jacksonville’s certified breast health nurse navigator provides support, resources and education, while a dedicated breast coordinator ensures tests and appointments are made in an efficient and timely manner. New patient referrals are handled by the nurse navigator, who ensures that a patient’s x-rays and pathology information are available for review at the time of her consultation. The nurse navigator is able to anticipate the patient’s medical and social needs to allow for an optimal patient experience.

**MANAGEMENT OF LYMPHEDEMA**

Swelling in the arm can occur in women who have had lymph nodes removed and radiation therapy to the breast and underarm area. Early detection of this condition and timely treatment can reduce and sometimes eliminate the severity of lymphedema. Certified lymphedema therapists use the latest techniques of decongestive therapy. They are passionate about helping women return to a normal, active life and minimizing the side effects of breast cancer therapy.

**BREAST CANCER SUPPORT GROUP**

No one understands what a woman with breast cancer is going through as well as other women with breast cancer. The experience can be traumatizing for patients as well as their families.

It can often help for a patient to listen to others’ stories and express her own journey. The Shands Jacksonville Breast Health Center offers a monthly support group where survivors can share their personal experiences. For information on meetings, call 904-244-1684.
A Focus on Breast Cancer: 2011 Outcome Study

INCIDENCE

The American Cancer Society predicts 230,480 new cases of invasive breast cancer will occur among women in the United States during 2011; about 2,140 new cases are expected in men. In addition to invasive breast cancer, 57,650 new cases of in situ breast cancer are expected to occur among women. An estimated 39,520 breast cancer deaths are expected in 2011. Thanks to current advances in detection and treatment, 90 percent of breast cancer patients will survive at least 5 years.1

In 2008, there were 140 new breast cancer patients seen at UF and Shands Jacksonville. The incidence of breast cancer during 2008 was highest in the 50-59 age range, consistent with the national experience. (Table 1) According to the National Cancer Data Base (NCDB), 37.69 percent of patients were diagnosed with Stage I breast cancer and 24.38 percent were Stage II at diagnosis. In our program, 27.86 percent of patients were Stage I and 32.86 percent of patients were Stage II. (Table 2)2

### Table 1: Age Group of Breast Cancer Diagnosed in 2008

<table>
<thead>
<tr>
<th>Age Group</th>
<th>My (N)</th>
<th>Oth. (N)</th>
<th>My (%)</th>
<th>Oth. (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 20</td>
<td>13</td>
<td>13</td>
<td>0.01</td>
<td>0.01</td>
</tr>
<tr>
<td>20-29</td>
<td>897</td>
<td>132</td>
<td>0.71</td>
<td>0.64</td>
</tr>
<tr>
<td>30-39</td>
<td>8579</td>
<td>8579</td>
<td>6.43</td>
<td>6.43</td>
</tr>
<tr>
<td>40-49</td>
<td>36474</td>
<td>36474</td>
<td>14.29</td>
<td>14.29</td>
</tr>
<tr>
<td>50-59</td>
<td>50843</td>
<td>50843</td>
<td>17.10</td>
<td>17.10</td>
</tr>
<tr>
<td>60-69</td>
<td>50059</td>
<td>50059</td>
<td>17.16</td>
<td>17.16</td>
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<tr>
<td>70-79</td>
<td>34750</td>
<td>34750</td>
<td>19.29</td>
<td>19.29</td>
</tr>
<tr>
<td>80-89</td>
<td>18524</td>
<td>18524</td>
<td>7.14</td>
<td>7.14</td>
</tr>
<tr>
<td>90 and over</td>
<td>2396</td>
<td>2396</td>
<td>0.71</td>
<td>0.71</td>
</tr>
<tr>
<td>Col. TOTAL</td>
<td>140</td>
<td>202535</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

### Table 2: Stage of Breast Cancer Diagnosed in 2008

<table>
<thead>
<tr>
<th>Stage</th>
<th>My (N)</th>
<th>Oth. (N)</th>
<th>My (%)</th>
<th>Oth. (%)</th>
</tr>
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<tr>
<td>0</td>
<td>28</td>
<td>41162</td>
<td>20%</td>
<td>20.32%</td>
</tr>
<tr>
<td>I</td>
<td>39</td>
<td>76343</td>
<td>27.86%</td>
<td>37.69%</td>
</tr>
<tr>
<td>II</td>
<td>46</td>
<td>49381</td>
<td>32.86%</td>
<td>24.38%</td>
</tr>
<tr>
<td>III</td>
<td>16</td>
<td>17584</td>
<td>11.43%</td>
<td>8.68%</td>
</tr>
<tr>
<td>IV</td>
<td>10</td>
<td>7458</td>
<td>7.14%</td>
<td>3.68%</td>
</tr>
<tr>
<td>NA</td>
<td>—</td>
<td>170</td>
<td>—</td>
<td>0.08%</td>
</tr>
<tr>
<td>UNK</td>
<td>1</td>
<td>10437</td>
<td>0.71%</td>
<td>5.15%</td>
</tr>
<tr>
<td>Col. TOTAL</td>
<td>140</td>
<td>202535</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

DIAGNOSIS AND TREATMENT

Individual treatment decisions are made after optimal treatments available for the stage and biological characteristics of the cancer, the patient’s age and preferences, and the risks and benefits associated with each treatment protocol have been considered. Most women with breast cancer will have some type of surgery. Surgery is often combined with other treatments such as radiation therapy, chemotherapy, hormone therapy, and/or biologic therapy.

A review of American College of Surgeons (ACoS) quality indicators for breast cancer treatment cases in 2008 (most recent data available) shows that 89.7 percent of eligible breast conservation surgery patients were offered and/or received radiation treatment within 365 days of diagnosis. (Table 3) The quality indicator for consideration/administration of Tamoxifen or an aromatase inhibitor for eligible hormone receptor positive breast cancer patients within 365 days of diagnosis was 83.7 percent. (Table 4) Eighty-three percent of the eligible patients who were hormone receptor negative were offered and/or received combination chemotherapy within four months of diagnosis.3 (Table 5)
Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer. [BCS/RT]

<table>
<thead>
<tr>
<th></th>
<th>Perf. Rate</th>
<th>95% CI</th>
<th>Cases</th>
<th>#Prog.</th>
</tr>
</thead>
<tbody>
<tr>
<td>My Cancer Program</td>
<td>89.7%</td>
<td>(78.6–100.8)</td>
<td>29</td>
<td></td>
</tr>
<tr>
<td>My State (FL)</td>
<td>79%</td>
<td>(77.5–80.5)</td>
<td>2975</td>
<td>69</td>
</tr>
<tr>
<td>My ACS Division (Florida)</td>
<td>79%</td>
<td>(77.5–80.5)</td>
<td>2975</td>
<td>69</td>
</tr>
<tr>
<td>My Census Region (Southeast)</td>
<td>86.7%</td>
<td>(86.1–87.3)</td>
<td>10933</td>
<td>255</td>
</tr>
<tr>
<td>My CoC Program Type (THCP)</td>
<td>81.8%</td>
<td>(81.2–82.4)</td>
<td>15989</td>
<td>247</td>
</tr>
<tr>
<td>All CoC Approved Programs (ALL)</td>
<td>85.3%</td>
<td>(85–85.6)</td>
<td>52392</td>
<td>1378</td>
</tr>
</tbody>
</table>

TABLE 3

Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1cN0M0, or Stage II or III hormone receptor positive breast cancer. [HT]

<table>
<thead>
<tr>
<th></th>
<th>Perf. Rate</th>
<th>95% CI</th>
<th>Cases</th>
<th>#Prog.</th>
</tr>
</thead>
<tbody>
<tr>
<td>My Cancer Program</td>
<td>83.3%</td>
<td>(72.7–94.7)</td>
<td>43</td>
<td></td>
</tr>
<tr>
<td>My State (FL)</td>
<td>65.3%</td>
<td>(63.8–66.8)</td>
<td>3911</td>
<td>69</td>
</tr>
<tr>
<td>My ACS Division (Florida)</td>
<td>65.3%</td>
<td>(63.8–66.8)</td>
<td>3911</td>
<td>69</td>
</tr>
<tr>
<td>My Census Region (Southeast)</td>
<td>79.3%</td>
<td>(78.6–80)</td>
<td>13519</td>
<td>255</td>
</tr>
<tr>
<td>My CoC Program Type (THCP)</td>
<td>79.3%</td>
<td>(74.7–75.9)</td>
<td>19079</td>
<td>247</td>
</tr>
<tr>
<td>All CoC Approved Programs (ALL)</td>
<td>78.8%</td>
<td>(78.5–79.1)</td>
<td>64174</td>
<td>1378</td>
</tr>
</tbody>
</table>

TABLE 4

Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cN0M0, or Stage II or III hormone receptor negative breast cancer. [MAC]

<table>
<thead>
<tr>
<th></th>
<th>Perf. Rate</th>
<th>95% CI</th>
<th>Cases</th>
<th>#Prog.</th>
</tr>
</thead>
<tbody>
<tr>
<td>My Cancer Program</td>
<td>83.3%</td>
<td>(62.2–104.4)</td>
<td>12</td>
<td></td>
</tr>
<tr>
<td>My State (FL)</td>
<td>79.2%</td>
<td>(76.3–82.1)</td>
<td>744</td>
<td>69</td>
</tr>
<tr>
<td>My ACS Division (Florida)</td>
<td>79.2%</td>
<td>(76.3–82.1)</td>
<td>744</td>
<td>69</td>
</tr>
<tr>
<td>My Census Region (Southeast)</td>
<td>86.3%</td>
<td>(85.1–87.5)</td>
<td>3150</td>
<td>255</td>
</tr>
<tr>
<td>My CoC Program Type (THCP)</td>
<td>83.8%</td>
<td>(82.7–84.9)</td>
<td>4335</td>
<td>247</td>
</tr>
<tr>
<td>All CoC Approved Programs (ALL)</td>
<td>86.4%</td>
<td>(85.8–87)</td>
<td>13341</td>
<td>1378</td>
</tr>
</tbody>
</table>

TABLE 5
MORTALITY RATE TRENDS

Breast cancer is the second leading cause of cancer-related deaths in women in the United States. Although the breast cancer diagnosis rate increased in the 1990s, it has decreased since 2000 and the overall breast cancer death rate has dropped steadily. The incidence of breast cancer is highest in white women, but African American women have higher mortality rates than any other racial or ethnic group in the United States. The gap in mortality between African American and white women is wider now than it was in the early 1990s.4

REFERENCES


3. American College of Surgeons Cancer Program Practice Profile Reports (CP3R), Shands Jacksonville Medical Center, www.facs.org/cancer/ncdb/cp3roerview.pdf

Important Phone Numbers

Shands Jacksonville Medical Center ......................... 904-244-0411
American Cancer Society ................................. 904-244-1994
Breast Health Nurse Navigator ......................... 904-244-5275
Breast Imaging ........................................ 904-383-1024
Breast Surgery ......................................... 904-633-0020
Cancer Center Administration ......................... 904-244-1045
Cancer Registry ......................................... 904-244-1972
Community Hospice of Northeast Florida .......... 904-407-6500
Genitourinary Oncology ............................... 904-383-1016
Gynecologic Oncology ................................ 904-244-6667
Hematology and Medical Oncology ................. 904-244-1680
Integrative Palliative Care ............................ 904-407-7700
Lymphedema Clinic .................................. 904-244-1179
Minimally Invasive Surgery ......................... 904-383-1015
Shands Jacksonville Bone & Joint Institute .... 904-383-1010
Nutrition/Dietary ........................................ 904-244-3053
Otolaryngology ......................................... 904-383-1017
Pain Management ....................................... 904-383-1020
Pathology ............................................... 904-244-4387
Physical Therapy & Rehab ............................. 904-244-1179
Physicians Direct STAT Referrals .................... 904-244-5275
Plastic & Reconstructive Surgery .................... 904-633-0130
Radiation Oncology .................................. 904-244-7810
Radiology ............................................... 904-383-1024
Risk Assessment & Genetic Counselor ............ 904-383-1015
Robotic Oncology Program ......................... 904-626-9293
or 904-477-2010
Social Services ......................................... 904-244-1684
Thoracic Oncology Program
at Shands Jacksonville (TOPS) ...................... 904-244-8677
UF Surgeons of Jacksonville at Emerson
(appointments) ....................................... 904-633-0020
UF/Shands Comprehensive Breast Clinic
(appointments) ....................................... 904-383-1015
University of Florida Proton Therapy Institute
(appointments) ....................................... 904-588-1800