

# spotlight

## **Stony Brook University Cancer Center** **Stony Brook, N.Y. | Bringing together** **cutting-edge clinical care and innovative research**

**E**stablished in 2001, the 65,000-square-foot Stony Brook University Cancer Center (SBUCC) is an essential component of Stony Brook Medicine. Located on Long Island, N.Y., the cancer program is accredited by the American College of Surgeons Commission on Cancer as a Teaching Hospital Cancer Program and received the Commission's Outstanding Achievement Award. Under the leadership of director Yusuf A. Hannun, MD, who also serves as vice dean of Cancer Medicine and the Joel Kenny Professor of Medicine, SBUCC seeks to further the center's level of excellence. "I strongly believe that academic medical centers have a unique obligation to push the envelope on cancer medicine," said Hannun.



### **Providing World-Class Cancer Care**

Cancer services are provided within the medical campus, and SBUCC's outpatient cancer services include the Carol M. Baldwin Breast Care Center, Medical Oncology, Pediatric Hematology/Oncology, and Surgical Oncology. SBUCC is located on the Stony Brook University Hospital campus and is immediately adjacent to the Ambulatory Surgery Center.

The cancer center boasts an ultra-modern design, with the Ambulatory Infusion Center located on the second-floor. Patients receive chemotherapy in private areas, equipped with a television and room for visiting family and friends. Other available on-site services for patients are imaging, pharmacy, and laboratory.

As a part of a larger, vibrant medical campus, SBUCC has access to several areas of exciting cancer-related research. For example, an affiliation with Brookhaven National Laboratory (BNL) has allowed SBUCC to develop an in-vivo imaging program, which provides new discoveries for cancer diagnosis and treatment. Stony Brook has recently installed a fully integrated PET/MRI machine, which became operational in September 2013. Stony Brook is only the tenth site in North America to offer this state-of-the-art technology. The use of the PET/MRI will further research, and benefit patients by providing exceptional image quality and diagnostic capabilities along with the convenience of having two imaging procedures performed simultaneously with low-dose radiation.

The focus of the collaboration with BNL is to explore opportunities for research involving heavy-ion radiation and other new ways to deliver radiation therapy.

In 2009 the Carol M. Baldwin Breast Care Center became the first center in New York State to earn NAPBC-accreditation. In April 2012, the center achieved re-accreditation. The Breast Care Center serves as a research center and contains its own imaging center.

The radiation oncology department (located in the main hospital) uses state-of-the-art technologies such as MammoSite® brachytherapy and stereotactic body radiation therapy.

Surgical oncology makes use of the latest robotic technologies such as the da Vinci® Surgical System.

### **A Team-Based Approach**

The cancer program at Stony Brook includes 12 disease-specific, multidisciplinary disease management teams. Team members include surgeons, medical hematology/oncology physicians, radiation oncologists, pathologists, radiologists, registered nurses, nurse practitioners with specialized cancer training, social workers, and additional medical professionals.

Patients are initially screened by their disease management team, and then referred and assigned a navigator or nurse practitioner to help with care coordination. The desire of the cancer center is to provide holistic care, from treatment to psychosocial or other supportive care needs.



### Select Support Services

- Resource library
- Survivorship program
- Palliative care services
- Genetic risk assessment and counseling
- Nutrition services
- Pastoral care
- Social work services
- Number of new analytic cases seen in 2011: 3,070

### Robust Navigation & Support Services

In 2006 when Stony Brook started its nurse navigator program, this service was only available for lung cancer patients. Today, navigation services are offered for breast, urologic, head and neck, colorectal, gynecologic oncology, stem cell transplantation and hematologic malignancy, upper gastrointestinal, orthopedic oncology and sarcoma, and melanoma disease sites. In addition to coordinating appointments and serving as the main contact point for patients and families during treatment, the navigators also participate in tumor boards and other disease management team meetings and help match patients to available clinical trials.

Every cancer patient that comes through SBUCC leaves with a survivorship plan. A nurse practitioner works with each patient in order to establish a comprehensive care plan at the end of treatment. At that time, the goal is to identify if the patient is in need of additional resources or services. In 2009, the Survivorship and Supportive Care Program received the National Consensus Project Quality in Palliative Care Leadership Award.

As part of a large academic medical center, SBUCC provides many opportunities for the surrounding community to be involved in cancer center activities. Many of the community education groups and citizen advisory groups are disease-based, and the center employs a director of Patient Advocacy and Community Outreach to coordinate activities with both local and national entities.

### MART Building & Expansion

Dr. Hannun is confident that the construction of the new 240,000-square-foot Medical and Research Translation (MART) building will enhance the center's interdisciplinary approach to delivery of care and additionally, triple capacity for outpatient services.

Funding for the MART building was provided in part from the Simons Gift, which allocated \$50 million to the project. An additional \$35 million was secured through the approval of Stony Brook's SUNY 2020 Challenge grant application and the support of New York State Senator Kenneth P. LaValle (R-Port Jefferson). With plans to open in 2016, the MART building will include a 30-room cancer clinic, a 30-station infusion center, and 25 cancer biology-oriented labs. The lower level of the MART building will house a Cyclotron and a radiochemistry lab.

In addition to increased research space, two floors will be dedicated to outpatient clinical activity, and a half-floor will be reserved for bio-informatics.

"We're very excited about the MART building as a prototype of how we will be doing clinical and translational oncology in the next 10-20 years," said Dr. Hannun. He added that the proximities of different disease teams were designed for collaboration with joint meetings, seminar rooms, and conference rooms. To emphasize cross disciplinary interaction, the MART building's layout will cater more toward a disease-related configuration instead of traditional separate departments.

Indeed, multidisciplinary team members

had significant input into the design of the MART building, and met frequently with the architectural firm. Doctors, nurses, and administrative staff all had a say in the colors and design. The vision for the new building includes an improved flow of services as well as optimized patient throughput. To help achieve this ideal, mock patient rooms were available for all staff to test out, surgeons gave input into ambulatory suites, and physicians who write chemotherapy orders helped design infusion suites for a smoother flow of work.

"We aspire to be totally patient-centered," said Dr. Hannun. "The goals are at multiple levels focusing on the patient, finding the spectrum of clinical issues that the patient may develop or that would arise during the treatment course or encounter between all professions."

Rose Cardin, MSN, RN, associate director for Cancer Services, said that one of the main goals is for the MART building to not only be staff- and patient-centered, but to exceed patients' expectations. Cardin is also optimistic that the maximized use of electronic medical records will streamline patient flow through the care continuum. 