





PATIENT GUIDEBOOK



WELCOME

Explore this guidebook for insights into radiation treatment at Alliance Cancer Care. Discover details about your visit, our care team, insurance, financial assistance, and treatment timeline. We're here to guide you through your cancer journey with dedicated support and advanced care.



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WELCOME

Welcome to Alliance Cancer Care

When faced with cancer, you want compassionate care and the best treatment available. Alliance Cancer Care ensures that's exactly what you get, with state-of-the art technology conveniently close to home. We are here to guide you through your cancer journey, with experienced and caring staff. Thank you for choosing Alliance Cancer Care.

What to Expect from Alliance Cancer Care

We are dedicated to providing you with sophisticated radiation treatment in a caring and comfortable environment. Our team of physicians, nurses, radiation therapists, and staff are committed to meeting your physical, emotional, and all other needs. We are here to answer your questions and guide you through the process of radiation.

Most patients receive radiation treatment as an outpatient. This means you will come and go for your radiation treatments and will likely not require a hospital stay.

What is Radiation Therapy?

At Alliance Cancer Care, we treat early-stage, recurrent, and advanced cancers using radiation therapy. Physicians have safely and effectively used radiation therapy to treat cancer for more than 100 years. It is a very common and highly successful cancer treatment. Radiation therapy used alone or along with other treatments often leads to cancer remission. In more advanced cancers, radiation may improve a patient's quality or length of life.

Radiation therapy uses high-energy particles or waves to destroy or damage cancer cells. Radiation kills cancer cells or slows their growth by damaging their DNA. When the DNA is damaged beyond repair, the cell stops dividing or dies. Dead cells are broken down and removed by the body. Non-cancerous cells in the area can also be affected by radiation, but most recover and continue functioning normally.

We have five convenient locations to serve you.



Blackwell Medical Tower 201 Sivley Rd SW, Suite 10 Huntsville, Al 35801 256-319-5400



Decatur Office 1312 7th St SE Decatur, AL 35601 **256-355-0370**



Clearview Cancer Institute 3601 CCI Dr NW, Suite 10 Huntsville, AL 35805 256-319-5400



Singing River Cancer Center 180 Cox Creek Parkway, Suite A Florence, AL 35630 256-760-1150



Crestwood Medical Pavilion 1 Hospital Drive Southwest, Suite 100 Huntsville, AL 35801 256-319-5400

YOUR FIRST VISIT

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How to Prepare for Your Visit:

- » Save time by completing paperwork ahead of your appointment
- » Read over our Frequently Asked Questions (FAQs) and Questions for your Doctor (see page 12 & 13).
- » Confirm the date, time, and clinic location of your visit.
- » Consider bringing a trusted family member or friend, to help listen, take notes, and/or support you.
- » Read our clinic specific details to find out where to park, how to find our clinic, etc.
- » Ensure you have the following to bring to your visit:
 - · Photo ID
 - Insurance card(s)
 - · Updated medication list
 - · Consider printing the "First Visit Worksheet" to bring for taking notes (see page 10)

What to Expect:

- » Save time by completing paperwork ahead of your appointmenttreatments and will likely not require a hospital stay.
 - · Please arrive on time for your visit.
 - Check in at our front desk to start your new patient registration.
 - ♦ Copies of photo ID and insurance cards are made, photo obtained for identification purposes.
 - · Your nurse will review your medical history and any symptoms you are having.
 - You will meet your doctor who will review your test results, perform a physical exam, and discuss your diagnosis and personalized treatment recommendations. The First Visit Worksheet is a good place for writing notes as you discuss treatment with your doctor.



alliancecancercare.com/for-patients/preparing-for-your-visit/

5 TABL**YOURGENEWSE**

OUR TEAM

MEET OUR TEAM

We are committed to fostering a supportive and collaborative environment where every team member plays an integral role in your healing process.



Hoyt A. "Tres"
Childs, III, MD
RADIATION ONCOLOGIST



Curtis Clark
Ph.D., MD
RADIATION ONCOLOGIST



Elizabeth
Falkenberg, MD
RADIATION ONCOLOGIST



Ashlyn Seeley
Everett, MD
RADIATION ONCOLOGIST



John F. "Jack"
Gleason, Jr., MD
MEDICAL DIRECTOR
RADIATION ONCOLOGIST



Whitney
Hotsinpiller, MD
RADIATION ONCOLOGIST



Harry James "Jim"
McCarty, III, MD
RADIATION ONCOLOGIST



Richard
Pearlman, MD
RADIATION ONCOLOGIST

YOUR CARE TEAM

Doctor: Green scrubs or professional dress

Advance Practice Providers: Professional dress



Therapists: Teal scrubs

Front Desk: Gray scrubs











Our team members wear uniforms. To help you identify each person's role, here is a guide to our uniforms at Alliance Cancer Care.

7 YOUR CARE TEAM

THE RADIATION ONCOLOGY TEAM

During the time you will spend at the Alliance Cancer Care, you will meet many important members of the radiation oncology team. All of these individuals play a very special role in the care that you will receive under our care.

Radiation Oncologists

Radiation oncologists are the doctors directing your radiation therapy treatments. These physicians work with the other members of the radiation oncology team to develop your treatment plan and make sure that each treatment is given accurately. Your radiation oncologist will also monitor your progress and adjust the treatment as necessary to make sure the radiation is hitting its target while minimizing side effects.

Radiation oncologists have completed at least four years of college, four years of medical school and four years of residency or specialty training in radiation oncology. They have extensive training in cancer medicine and the safe use of radiation to treat disease. After passing a special examination, they are certified by the American Board of Radiology.

Your radiation oncologist will also monitor your progress throughout your treatment. The radiation oncologist will see you once weekly while undergoing radiation treatments. Before, during and after your radiation therapy treatments, your radiation oncologist will work closely with other cancer doctors, such as medical oncologists and surgeons to make sure the radiation is most effective.

Radiation Oncology Nurses

Radiation oncology nurses work together with radiation oncologists and radiation therapists to care for you and your family at the time of consultation, during treatment and during your follow-up care. They will explain the possible side effects you may feel and help you manage them. They will assess how you are doing during treatment and can help you cope with the changes you may experience.

Radiation Therapists

Radiation therapists work with the radiation oncologist to deliver the daily radiation treatments that your doctor prescribes. They maintain daily records and regularly check the treatment machines to make sure they are working properly. Radiation therapists also closely follow you during treatment to alert your doctor to any problems.

Dosimetrists

Once you've made the decision to undergo radiation therapy, your doctor works with the dosimetrist to create a treatment plan. They use computers to develop a number of treatment plans to most effectively destroy the cancer while sparing normal tissue. Treatment plans are often very complex so dosimetrists work with the radiation oncologist and medical physicist to create a treatment plan that is right for you and your cancer.

Medical Physicists

Medical physicists work directly with your radiation oncologist during treatment planning and delivery. They are responsible for developing and directing quality control programs for equipment and procedures. They also make sure the equipment works properly by taking precise measurements of the radiation beam and performing other safety tests regularly. Medical physicists also oversee the work of the dosimetrist and help to ensure that complex treatments are properly tailored for each patient.

Front Desk

When first entering the radiation oncology department, you will be greeted by the front desk staff. The front office staff answer phone calls, assist patients with questions, schedule appointments, and provide additional patient assistance when necessary. The front desk staff communicates with all staff throughout the department to ensure that patients are prepared for their appointments.

Patient Services Department

The patient services department handles all billing information and claims processing for Alliance Cancer Care. Any questions regarding the payment of your medical claims or billings can be directed to this department. The contact number is 256.327.5724.

Any questions regarding your insurance benefits or insurance coverage may be directed to the patient benefits coordinator. The contact number is 256.319.5450.

Social Services

Throughout the course of your treatment, you may work with other healthcare professionals. These individuals are here to ensure that all of your physical and psychological needs are met. To get more information please contact Gennell Moore at 256-319-5424.

ABOUT RADIATION THERAPY

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Our Technology



State-of-the-art software and machinery



Delivers high quality treatments



Provides a customized treatment plan for your unique needs

Radiation therapy, sometimes called radiotherapy, is the use of various forms of radiation to treat cancer and other diseases safely and effectively. Doctors use radiation therapy to try to cure cancer, to control the growth of the cancer or to relieve symptoms, such as pain. It can be used to treat cancer in almost any part of the body.

During cancer treatment, the radiation oncology team members carefully focus X-rays, gamma rays and other sources of radiation directly on the tumor site in the body. The radiation works by damaging the DNA within cancer cells and destroying the ability of the cancer cells to reproduce. When these damaged cells die, the body naturally eliminates them. Normal cells are also affected by radiation, but they can repair themselves in a way that cancer cells cannot.

The goal of radiation therapy is to kill the cancer cells without damaging surrounding healthy tissue. The radiation therapy team works together to plan each treatment and direct the radiation to the precise cancer location. Targeting the radiation directly on the cancer allows the radiation oncology team to minimize the damage to the patient's normal cells.

Patients receive radiation therapy in one of two ways: externally or internally. During external radiation, a beam of radiation is directed through the skin to the tumor and

immediate surrounding area in order to destroy the tumor and any nearby cancer cells. The beam can be made up of photons, electrons or neutrons.

Internal radiation, or brachytherpy, is the placement of radioactive sources in or just next to a tumor. To position the sources accurately, special catheters or applicators are used. Radiation sources are placed very close to the tumor to allow the radiation oncologist to deliver a large dose of radiation directly to the cancer cells with minimal exposure to normal healthy tissue.

Radiation has been used to treat cancer for more than a century; however, the past 20 years have seen enormous technological improvements. These improvements allow the radiation oncologist to better target tumors, resulting in higher cure rates with fewer side effects.

Side effects from radiation therapy vary from person to person and are dependent on the area being treated.

Side effects could include fatigue, skin changes, change in bowel or bladder function, or hair loss in the treatment area, depending on the treatment your doctor prescribes.

Generally, side effects do not occur until the second or third week of treatment. Many side effects are self-limiting and should resolve gradually after completion of treatment. Your radiation oncologist will monitor these side effects on a weekly basis.

9 ABOUT RADIATION THERAPY

FIRST VISIT WORKSHEET

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CANCER TYPE	STAGE						
MY TEAM							
MY DOCTOR	NURSE PRACTITIONER						
NURSE(S)	MEDICAL ASSISTANT(S)						
NEVT	CTERC						
NEX I	STEPS						

10 FIRST VISIT WORKSHEET

QUESTIONS FOR YOUR DOCTOR

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Questions to Ask your Cancer Doctor(s):

- 1. What is the goal of treatment? Cure or living longer or help with symptoms?
- 2. Why do you recommend this and what are the chances it will work?
- 3. What are the side effects of this treatment?
- 4. How do we know treatment is working?
- 5. Are there other treatment options?
- 6. What type of cancer do I have? Can I have a copy of my pathology report? Is there information I can read or a particular website that can give my family and I more information about my cancer?
- 7. Exactly where in my body is my cancer located? Has this cancer spread to any other areas? What is the stage of my cancer?
- 8. What is the prognosis?
- 9. Will I need surgery, chemotherapy, radiation therapy, or a combination? What is the game plan for treating this cancer?
- 10. What options do I have for different treatments?

If you need radiation therapy:

- 1. How long will each treatment last? How often will I receive treatment? How many treatments will I need? What is the goal of my treatments?
- 2. Will I be able to work during treatments?
- 3. What are the main side effects of treatment? Is there anything I can do to prevent side effects or help keep myself healthy during treatments?
- 4. What number should I call or who should I email with questions about my treatments? Is there an emergency phone number?

Other General Questions:

- 1. Do I need genetic testing?
- 2. Who should I speak with about my insurance questions?
- 3. Is there a social worker to help me with support services?
- 4. Who should I speak to about transportation issues or concerns?

How to Contact Us:

- » Noona, the patient portal
- » Call our office at 256-319-5400 and leave a message for the nurse.
- » Call 911 if you are having an emergency.

11 QUESTIONS FOR YOUR DOCTOR

FREQUENTLY ASKED QUESTIONS

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Q: What is radiation treatment?

A: Radiation therapy is a form of cancer treatment using X-rays to kill cancer.

Q: Why do I need radiation?

A: Radiation can be used for curative or palliative reasons. It is often used alongside other treatments such as chemotherapy or surgery.

Q: How is radiation given?

A: A common form of radiation therapy is external beam radiation therapy (EBRT). This is where a machine delivers invisible beams of radiation focusing on the cancer location.

Q: Does it hurt?

A: Most patients do not experience pain, but each patient reacts to radiation treatment differently.

Q: How many treatments?

A: Your unique situation determines the exact treatment schedule. Most patients have treatments daily, Monday through Friday, over the course of several weeks.

Q: Are there side effects?

A: Side effects vary depending on the area being treated and the individual. Most patients experience some fatigue, but are able to do normal daily activities. Some patients may have more severe side effects, which your radiation oncologist will discuss in detail.

Q: Will I be radioactive?

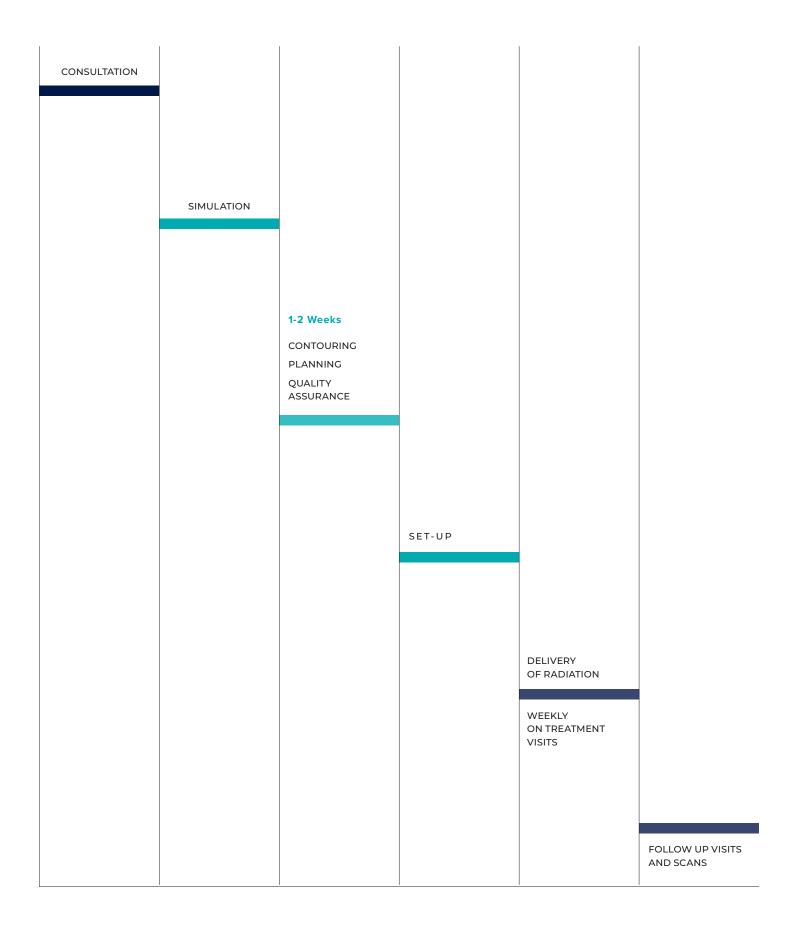
A: No, this type of radiation treatment does not cause "radioactivity". This means you are safe to be around family and friends without restrictions.

Q: How do I know the treatments are working?

A: Patient response varies, but your radiation oncologist only recommends treatments that have been proven to be effective, and will monitor your progress appropriately.

12 FREQUENTLY ASKED QUESTIONS

RADIATION TREATMENT TIMELINE



13 RADIATION TREATMENT TIMELINE

SIMULATION APPOINTMENT

What Is Simulation?

Simulation is the process of positioning your body in a way that is comfortable and can be reproduced each day for radiation treatments. Sometimes we will make a mold or a mask to help keep you in the correct position during treatments. This appointment includes a CT scan, which your doctor will use to create your radiation plan. This will take 30 minutes to 1 hour.

How Do I Prepare For Simulation?

Sometimes, your doctor will ask you to prepare in a special way for simulation. Follow your doctor's specific instructions, which may include the following:

- ☐ Bladder Preparation: At the time of your simulation, you will be instructed on how to fill your bladder.

 You will follow the same instructions for your daily treatments.
- ☐ Prostate Preparation: See separate details.
- ☐ IV Contrast: You will arrive and the nurse will start an IV. If you are allergic to contrast, are diabetic, or have kidney disease, please notify the nurse or therapist.

Interested in having a better understanding of your treatment plan, technical aspects of treatment, or reasoning behind CT scans and MRIs? Ask your care team to schedule a consultation with our physics team.

What Will Happen During Simulation?

- We will find the best position for you to replicate during radiation treatment.
- The therapist will place marks on your skin using a marker or possibly a very small tattoo and cover them with waterproof, latex-free stickers. These marks need to stay on your body until you start your treatments. Please do not soak in a bathtub, swimming pool, or hot tub.
- We will take pictures with a camera to chart and document your exact position for treatment.
- We will obtain a CT scan of your body to outline where your doctor will give radiation. We will send the scan to the planning team.
- Before you leave, we will schedule your next appointment.



Scan the QR code to watch Dr. Everett explain the simulation process.





14 SIMULATION APPOINTMENT

HOW TO MANAGE COMMON SIDE EFFECTS

Radiation therapy can cause a variety of side effects that depend on the area being treated, the dose of radiation,

and individual patient factors. Here are some common side

1. Skin Changes

effects and possible treatments:

- **Description**: Skin in the treatment area may become red, dry, itchy, or tender. It can range from mild redness to a more severe sunburn with peeling or blistering.
- When it Occurs: Typically starts 2-3 weeks after beginning radiation therapy and usually improves 3-4 weeks after treatment ends.

Management:

- · Keep the skin clean and dry.
- · Use mild, fragrance free soaps and lotions daily
- Avoid rubbing or scratching the area and wear loose-fitting clothing.
- Apply doctor-approved moisturizers like aloe vera or fragrance free moisturizing creams.

2. Fatigue

- Description: Feeling unusually tired or lacking energy.
 This is due to the body spending energy repairing itself from radiation treatment effects.
- When it Occurs: Typically starts 1-2 weeks after beginning radiation therapy and usually improves 4-6 weeks after treatment ends.

Management:

- Get plenty of rest and take breaks when needed.
- Try to get physical activity (e.g., short walks) to help combat fatigue.
- · Eat healthy and stay hydrated.

3. Hairloss

- **Description**: Hair loss may occur **only in the treated** area, not all over the body. For example, radiation to the scalp can cause hair loss on the head, but radiation to the chest won't affect head hair.
- When it Occurs: Typically starts 2-3 weeks after beginning radiation therapy and may be temporary or permanent, depending on the radiation dose.

Management:

• Use mild shampoos and avoid harsh chemicals as hair regrows.

4. Gastrointestinal Symptoms

- **Description**: Includes nausea, vomiting, diarrhea, or loss of appetite, depending on the location treated.
- When it Occurs: Typically starts 2-3 weeks after beginning radiation therapy and usually improves 3-4 weeks after treatment ends.

· Management:

- Anti-nausea medications, or small, frequent meals to help nausea.
- · A bland diet may help with diarrhea.
- Diarrhea treatments like immodium may help with symptom control.

5. Mouth and Throat Changes

- Description: Radiation to the head and neck area can cause mouth sores (mucositis), dry mouth (xerostomia), sore throat, and changes in taste.
- When it Occurs: Usually develops 2-3 weeks into treatment. Taste loss occurs week 1.

· Management:

- · Use oral rinses with salt and baking soda.
- · Avoid spicy, acidic, or rough-textured foods.
- Sipping water frequently and using saliva substitutes, like Biotene products, may help with dry mouth.

6. Bladder and Urinary Changes

- Description: Patients receiving radiation to the pelvis may experience increased frequency, urgency, discomfort, or burning during urination.
- When it Occurs: Often starts 2-3 weeks into treatment.
- Management:
 - Increase fluid intake to dilute urine. Cranberry juice or Gatorade may also help decrease burning or stinging.
 - Avoid caffeine and alcohol, which can irritate the bladder.
 - Discuss using medications if symptoms are severe. AZO works well but speak to your doctor first.

7. Radiation-Induced Pain and Swelling

- Description: Pain or swelling can develop in the treated area due to inflammation or tissue changes.
- When it Occurs: Can occur during treatment and may take weeks or months to fully resolve.

Management:

- Use prescribed pain relievers or anti-inflammatory medications.
- · Apply cool compresses if it's comfortable.
- Elevate the affected area if possible (e.g., legs for pelvic radiation).

8. Long-Term and Late Effects

• Description: These are side effects that occur months or even years after radiation therapy. These are rare, but serious if they occur. Your doctor will discuss these risks specific to your individual treatment. They may include fibrosis (scarring and stiffness in the treated area), lymphedema (swelling due to lymphatic system damage), or secondary cancers (occur 7-10 years after radiation).

· Management:

 Your doctor will monitor for these effects during follow-up visits.

SKIN CARE GUIDELINES

During radiation, you may notice skin and hair changes in the treatment area 2-3 weeks after beginning treatment. Your skin may become pink or tanned, or develop itching, tenderness, or peeling. You may experience hair loss in the treatment area. These reactions occur due to the radiation passing through the skin to reach the location being treated. In some cases, the skin in the treatment area may remain darker and/or firmer than before treatment.

Skin reactions from radiation treatment are usually most noticeable 1-2 weeks after completing radiation, and then begin to heal after that point. Skin healing often takes 3-4 weeks.

Skin Care Guidelines During Treatment:

1. Keep your skin clean.

- Bathe or shower with warm (not hot) water and a mild, moisturizing, unscented soap.
- Be gentle with your skin. Avoid scrubbing the area where you are being treated.
- · Rinse your skin well and pat dry with a soft towel.

2. Do not wash off any marks.

Keep marks that are placed on your skin during simulation or treatment. These marks are important for your daily treatment.

- Your radiation therapist will inform you about how to care for your skin around your marks.
- If the marks fade, do not attempt to redraw them.
 Instead, call our office and our radiation therapists will schedule a time to help you with the marks.
- Your skin should be clean and dry when you come in for your daily treatment.

3. Avoid skin irritation.

- Do not use any alcohol-containing products, perfume, cologne, after-shave, body oils, or home remedies on your skin in the area being treated.
- Minimize friction by wearing loose-fitting soft clothing. If receiving breast radiation, avoid underwire bras.

4. Avoid sun exposure to the treated area.

Wear loose-fitting protective clothing if in the sun, and use sunscreen with SPF of at least 30.

- Avoid shaving the area of the body under treatment (use electric razor if you must shave).
- Avoid putting anything on your skin that is very hot or cold.

5. Moisturize your skin often.

Your doctor may recommend that you start using a moisturizer when you begin treatment, or if your skin becomes irritated during treatment. Be gentle with your skin. Avoid scrubbing the area where you are being treated.

- · Apply moisturizer 2-3 times daily during treatment.
- If you experience itching or rash, you may use over-the-counter hydrocortisone 1% cream prior to applying your moisturizer cream or lotion. You may receive a prescription for topical creams to treat your skin, if necessary.
- Choose a moisturizer without fragrance or alcohol.
 Some recommended over-the counter moisturizer products include:









Udder Cream

Aquaphor

CeraVe Cream

Vaseline Intensive

These items are available at most major retailers and Amazon. Purchases made on our Amazon storefront will benefit the Dr. Jeanne Shepherd Fund, providing cancer patients financial assistance with housing needs, food, transportation, and other necessary everyday living expenses.



16 SKIN CARE GUIDELINES

NUTRITIONAL GUIDELINES

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Good nutrition is an essential part of your treatment program. Your goal is to eat in a way that will help your body throughout your cancer journey. This will be different based on your individual needs: calories, protein, vitamins and minerals. Eating well is a way for you to take an active role in your care and recovery each day. Maintaining a healthy weight is important, as being underweight and overweight can affect treatment outcomes.

Here are some general guidelines:

1. Eat a Balanced Diet

- Fruits and Vegetables: Aim for a variety of colors and types to maximize nutrient intake. They provide antioxidants, vitamins, and minerals. No limit to quantity.
- Lean Proteins: Include sources like chicken, turkey, fish, eggs, legumes, and tofu. Protein is crucial for healing and maintaining muscle mass. This should be the focus of your meals.
- Healthy Fats: Incorporate sources like avocados, nuts, seeds, and olive oil. Omega-3 fatty acids (found in fatty fish) may also have anti-inflammatory benefits.

2. Stay Hydrated

 Aim for adequate fluid intake, focusing on water, herbal teas, and broths. Dehydration can worsen side effects of treatment.

3. Small, Frequent Meals

 Eating smaller, more frequent meals can help manage nausea and loss of appetite. It may also help your metabolism. Focus on nutrient-dense foods.

4. Limit Processed Foods and Sugars

 Reduce intake of highly processed foods, sugary snacks, and beverages. These don't offer ideal nutritional value and can contribute to inflammation and weight gain.

To boost your nutrition when eating becomes difficult:

- **1. Eat soft, moist foods.** Soups, mashed potatoes, yogurt, protein shakes, puddings, etc.
- 2. Keep the temperature mild. Hot or cold temperatures may irritate your throat. Try room temperature instead, if you are sensitive to temperatures.
- Take small bites and chew thoroughly. Breaking up your food makes it easier to swallow. Avoid spicy or very crunchy/ tough foods which can irritate your throat.
- 4. Eat small, frequent meals. Try to eat something every 2-3 hours to keep up with the nutrition your body needs
- 5. Use a straw. This can help you drink fluids easily, but can also increase gas.
- **6. Sit upright while eating.** This allows gravity to assist moving food down your throat.
- Consider Nutritional Supplements. Supplements like protein shakes (Boost, Ensure, Glucerna) may be beneficial. Consult your healthcare provider to discuss specific recommendations.

17 NUTRITIONAL GUIDELINES

INSURANCE AND FINANCIAL ASSISTANCE

How much will it cost for my radiation?

This is a question most patients ask. We agree this is an important question for you to ask and have answered before you receive radiation treatment. That said, this is an incredibly complex question to answer. Because several factors influence the cost of radiation, the answer is ultimately different for each patient.

Our commitment to you is that we will work with your insurance company to help get your therapy approved and make sure you are aware of the financial obligations you may have prior to your treatment starting.

How do we figure out what radiation treatment costs?

Many factors are considered when calculating the cost of your radiation treatment.

What kind of cancer do you have and how is it best treated? Do you have insurance? What does your insurance policy cover for radiation therapy? Does your policy have a coinsurance or a daily copay? How much does your insurance allow for radiation costs?

Your radiation oncologist is going to plan the radiation treatment most beneficial for you. Some treatment types cost more than others, due to complexity. The number of treatments also influences the cost of treatment, with the number of treatments required ranging anywhere from a single treatment to 45 treatments. Depending on all the factors just described – the type of cancer, type of treatment, and the number of treatments needed to treat the cancer, the price varies for each patient and situation.

Once the physician develops your treatment plan, we work with your insurance to determine what they will cover and whether there will be any out-of-pocket expenses for you.

What does insurance cover?

Two terms we previously mentioned will determine how much you will be responsible for once your primary insurance has paid its portion for your radiation.

» Co-insurance: This is a percentage of the total amount you are responsible for paying after you meet your deductible. For example, if your policy has a deductible of \$1,000 and pays 80% of the total cost once you meet your deductible. You would be responsible for the first \$1,000 and then 20% of the remaining cost. Let's say your treatment costs \$11,000. You pay \$1,000 for your deductible, leaving \$10,000. Your plan would pay \$8,000 (80%), and you would pay \$2,000 (20%). You would be responsible for a total of \$3,000.

When you start radiation treatment, you may have already met your deductible through surgery, chemotherapy, or other medical services. If this is the case, your insurance would immediately begin covering their portion of treatment costs. Using the same numbers above, if your treatment costs \$11,000, your insurance would pay \$8,800 (80%), and you would be responsible for a total of \$2,200 (20%).

- » Daily Copay: If you have a daily copay, it means that you will be responsible for a copay each time you come in for treatment. This may be the same amount as your office visit copay, but sometimes it is different depending on the insurance plan.
- » Out-of-Pocket Maximum: This is the maximum amount you have to pay during your plan year. Take the same example from above. If your out-of-pocket maximum is \$2,500, you would only have to pay \$2,500 of the \$3,000 you were originally paying. Your insurance would then cover costs beyond the out-of-pocket maximum.

If you have already had some other medical appointments and diagnostic tests this year, your out-of-pocket maximum may have been reached for the year already. Take the example from above, assuming you already had other medical expenses. For example, if your out-of-pocket maximum is \$2,500, and surgery costs you \$2,000 you would be responsible for \$500 to meet your out-of-pocket maximum. Then your insurance would cover the remainder of your treatment costs.

We also see many insurance plans that cover radiation therapy at 100%, so it is worth checking the details of your policy.

INSURANCE AND FINANCIAL ASSISTANCE





Understanding Your Treatment Costs

We work with your insurance to determine coverage and costs.



What Will My Treatment Include?

Your plan covers treatments, imaging, and expert care.



Flexible Payment Options

Flexible plans and assistance are available.

Where do we get the amount to charge?

Once your treatment plan is approved by your physician, we submit that plan to your insurance. Each insurance company has a specific amount that they will pay for your type of treatment plan. This is called an allowable.

So, what will my treatment cost?

Depending on treatment type and duration, the total price for a course of radiation therapy can range from \$4,500 to \$50,000. For most patients, much of this cost will be paid by your insurance. The total course of treatment includes:

- » All of your treatments
- » Imaging used throughout your treatment
- » Continuous monitoring by our physicists and physicians
- » Weekly visits with your physician
- » CT Simulation
- » Expertise in planning radiation from our dosimetrists, physicists, and physicians
- » Devices or personalized molds to help keep you in the proper position during treatment

Alliance Cancer Care has multiple offices, and the physicians rotate between clinics. All daily treatment charges will be billed to your insurance company under the name of the physician who is present in the clinic on any given day. Therefore, you may see charges bulled under a physician other than your primary physician.

You may also see charges billed to your insurance company on days you are not physically in our clinic. This is due to part of the planning process being done on days when you are not physically in our clinic, as your presence is not required

Paying for Treatment

Our primary goal is to make sure you are receiving the best care for your cancer. If you have payment concerns, our office will work with you to design a plan to pay for your portion of the treatment costs. There are several options available.

- » Pay as you go. This would be for patients who have a daily copay, not co-insurance.
- » Have it billed to you and pay when you receive the bill.
- » Have it billed to you and set up a payment plan with our billing company.
- Apply for financial assistance through Alliance Cancer Care, which is based on your income level.
 This is also an option for patients who do not have insurance.

Our goal is to meet with patients who may have financial responsibility before treatment begins. We will review your benefits and provide you with an estimated total cost and total out-of-pocket cost. If you have questions about your financial responsibility or insurance, please contact our office at 256-319-5450. For billing inquires please contact our billing office at 256-327-5724.

INVEST IN YOUR HEALTH

JOIN NOONA AND STAY CONNECTED





What is Noona?

Noona helps keep you connected to your care team during radiation treatment. You can learn about what to expect at your visit, gather information about how to treat side effects, and report symptoms and information about your wellbeing throughout your treatment. This keeps your care team up to date and helps ensure you receive the best possible care. Download this secure, web-based application to your smartphone, tablet or computer today.

How To Use Noona?

- View personalized videos on what to expect before appointments.
- Send and receive messages from your care team regarding symptoms, appointments and more.
- Read about common symptoms and how they are managed.
- Complete questionnaires that are sent from your care team
- Keep a diary to track how you are doing throughout your radiation treatment.
- ✓ View your future appointments and medical records.

How Do I Get Started?

- Download the Noona app after your care team sends you an invite by email and/or text message.
- Click on the link in the email or text message to activate your account.
- Begin using Noona by downloading the app or using the web.











Your radiation oncologist will also monitor your progress throughout your treatment. The radiation oncologist will see you once weekly while undergoing radiation treatments. Before, during and after your radiation therapy treatments, your radiation oncologist will work closely with other cancer doctors, such as medical oncologists and surgeons to make sure the radiation is most effective.

20 INVEST IN YOUR HEALTH

MAKING A DIFFERENCE



The Dr. Jeanne Shepherd Fund was established to provide cancer patients financial assistance with housing needs, transportation, and other necessary living expenses. Dr. Jeanne Shepherd served as a dedicated, highly respected Oncology Counselor at the Center for Cancer Care, now Alliance Cancer Care. During this time, she was diagnosed with cancer and lived the remaining years of her life encouraging and assisting others with cancer.

Need Assistance?

If you are an ACC cancer patient, please reach out to our team below to see if you qualify. We are here to help anyway we can.

Looking to Give?

All gifts to support cancer patients with financial assistance are greatly appreciated. Your gift may be given in honor of a loved one and contributions are tax-deductible.

Amazon Storefront

Our staff may recommend products that will help you throughout your journey. These items are available at most major retailers and Amazon. Purchases made on our Amazon storefront will benefit the Dr. Jeanne Shepherd Fund. Use the link below or scan the QR code to shop.

Amazon.com/Shop/AllianceCancerCare

For More Information:

Gennell Moore | **256-319-5424** Sherry Mayes | **256-319-5427**







21 MAKING A DIFFERENCE

GLOSSARY OF TERMS

Bolus

A layer of material that helps to bring the radiation dose closer to the surface or skin.

Boost

This refers to a technique where your radiation oncologist targets a smaller area to give a higher dose of radiation. Typically, it is the same dose of radiation per day.

Brachytherapy

A form of internal radiation therapy where radioactive sources are placed inside or very close to the tumor. This is used for gynecologic cancers like endometrial or cervical cancer.

Curative

Radiation treatment used alone or in combination with surgery or chemotherapy to cure, or completely destroy all cancer.

Dose

The amount of radiation given during treatment, which is measured in a unit called Gray (Gy).

External Beam Radiation Therapy (EBRT)

Radiation therapy where radiation is delivered from outside the body using a machine called a linear accelerator. This is most used at Alliance Cancer Care.

Fraction

A treatment of radiation. Radiation is divided into multiple smaller doses (fractions) over a period of time, which helps minimize damage to healthy tissues.

Image Guidance

Either x-rays or CT scans used to align your radiation treatment accurately.

Palliative

Radiation used to relieve symptoms caused by cancer, such as pain or bleeding, rather than to cure the disease.

Simulation

A procedure to help plan radiation treatment, usually involving a CT to determine the precise location of the tumor.

Stereotactic Radiosurgery (SRS)

High dose, focused radiation to a small area of the brain.

Treatment Planning

The process of determining the appropriate radiation dose and treatment area, often involving a CT scan to visualize the tumor.

22 Glossary of Terms

SYMPTOM LOG

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SYMPTOMS	DATE	TIME

23 SYMPTOM LOG

MY RADIATION TREATMENT COUNTDOWN

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45	44	43	42	41
40	39	38	37	36
35	34	33	32	31
30	29	28	27	26
25	24	23	22	21
20	19	18	17	16
15	14	13	12	11
10	09	08	07	06
05	04	03	02	01

NOTES

25 NOTES



