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Other titles in this series
How To Get Better Value Healthcare, 2nd edition
How To Build Healthcare Systems

In preparation
How To Practice Population Medicine
How To Create The Right Healthcare Culture
How To Manage Knowledge In A Health Service
About the Authors

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Dr Max Dahele is a radiation oncologist at the VU University Medical Center in Amsterdam. Dr Dahele combines expertise in a wide range of radiotherapy technologies and treatment techniques with an understanding of clinical systems and successful implementation strategies. He has consulted in these areas and worked/trained in the UK, Canada and the Netherlands.

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Professor Sir Muir Gray Kt, CBE, DSc, MD, FRCPGlas, FCLIP

Sir Muir is currently the co-Director of the UK Department of Health QIPP (Quality, Innovation, Productivity and Prevention) Right Care programme and the Director of Better Value Healthcare (BVHC), the latter being established to help healthcare professionals gain the knowledge and skills to increase their health service’s value. Muir was born, raised and educated in Glasgow, earning his medical degree from Glasgow University. He moved to the UK National Health Service (NHS) in 1974 after arriving in Oxford a few years previously and during his over 35-year career he has held various positions including Director of Research and Development for Anglia and Oxford Regional Health Authority; Director of the UK National Screening Committee, where he helped pioneer Britain’s breast and cervical cancer screening programmes; Director
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He was knighted in 2005 for the development of the foetal, maternal and child screening programme and the creation of the National Library for Health.

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Professor David Kerr is currently the Chief Medical Officer of Oxford Cancer Solutions. He advises the British government on health, is Professor of Cancer Medicine at Oxford, where he has worked with colleagues to build a new Institute for Cancer Medicine and is Adjunct Professor of Medicine at Weill-Cornell College of Medicine.
David has an international reputation for the treatment of and research into colorectal cancer and is developing new approaches to cancer treatment that involve novel biomarkers. He has published over 350 articles in peer-reviewed journals and has contributed to many books on cancer. David has made a significant contribution to reforming the NHS as a Founding Commissioner for Health Improvement; Chair of the National Cancer Services Collaborative, Instigator of the Department of Health’s networked approach to clinical cancer research and developed a 20-year plan for the future of the NHS in Scotland, the ‘Kerr Report’. He served as the Chief Research Adviser to HH Sheikha Mozah in the Qatari Supreme Council of Health and has established a series of major international collaborations, including INDOX (http://www.indox.org.uk/) and AfrOx (http://www.afrox.org).
David has received several international prizes and elected membership to several international societies. He was appointed Commander of the British Empire in 2002.

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Dr Rachel Midgley MBChB, PhD
Dr Rachel Midgley studied Medicine at the University of Birmingham. After completing her general medical training in Birmingham and gaining Membership to the Royal College of Physicians, she was awarded a competitive Medical Research Council Personal Fellowship to carry out research towards her PhD in Cancer Studies, specifically immunotherapy, while commencing oncology training. Subsequent to this she was awarded two further personal fellowships sponsored by the UK Department of Health, one as a Clinician Scientist (2002–2007) and one as a Clinical Senior Lecturer (2007–2012). She currently works as a Consultant in Medical Oncology and Senior Lecturer in Cancer Studies at the Churchill Hospital in Oxford and the University of Oxford. She is Director of the Oncology Clinical Trials Office at the University and oversees all the Cancer Trials activity. She has assisted in attracting grants totaling more than £7M and authored over fifty publications in cancer research.

Professor Peter Naredi MD, PhD
Professor Peter Naredi is professor of surgery at the Sahlgrenska university hospital in Gothenburg, Sweden. He is subspecialised in surgical oncology with main interests in Hepatopancreatobiliary surgery and Malignant melanoma. After his Ph. D. in Surgery 1992 at the Gothenburg University he did a postdoctorial period at the Cancer Center at UCSD in San Diego, California. He returned to Sahlgrenska university hospital before he moved to Umeå in Northern Sweden in 1997. In 2003 he became the professor and chair of the Department of Surgery at Umeå University hospital and he stayed at this position until 2012. Peter has been the initiator and Principal Investigator of several global clinical studies with immunotherapy in melanoma and renal cell carcinoma. Presently his research focus is on cancer chemotherapy resistance and the interaction of tyrosine kinase inhibitors and platinum based cytostatics. Recently, Peter has been involved in developing the Northern Swedish regional cancer center (RCC North), part of the Swedish national cancer plan. Peter is President of the European Society of Surgical Oncology (ESSO) and the immediate past president of the Swedish surgical society.

Professor Lowell E. Schnipper MD
Professor Lowell Schnipper is currently Theodore and Evelyn Berenson Professor of Medicine at Harvard Medical School and the Clinical Director, Cancer Center; Chief, Hematology/Oncology Division at Beth Israel Deaconess Medical Center. He also leads the American Society of Clinical Oncology (ASCO) Task Force on Cost of Cancer Care. Since joining the Harvard faculty in 1974, his responsibilities have included developing an academic and clinical program in cancer
medicine, which is regarded as a model of humane clinical care and is ranked among the nation’s top 50 cancer hospitals. His research interests are in molecular pharmacology of antiviral and antineoplastic agents; genetic instability in neoplasia; therapeutic research in cancer; and ethical issues in cancer care. He was founding chair of the ASCO Ethics Committee and led the process that culminated in revision of the Society’s policy on conflict of interest in research. He is currently Program Chair-Ethical Issues in Cancer Research for the American Association for Cancer Research. Dr Schnipper chaired ASCO’s Public Policy Committee and served on the National Institutes of Health Clinical Oncology Study Section. Dr Schnipper received ASCO’s Statesman Award in 2008 for voluntary efforts that benefit the organization, the field of oncology, and most importantly, its patients.

Editor: Dr Anant R. Jani PhD
Dr Anant Jani’s experience in health care stems from his work in Sir Muir’s QIPP Right Care programme, where he helped localities across the UK design and implement high value population-based Accountable Integrated Care Systems. In addition to this, he works in Better Value Healthcare to assist healthcare professionals across the world design, plan and build high value healthcare systems. Anant was born and raised near Chicago. He completed his undergraduate studies in the life sciences at Brandeis University, after which he researched the molecular and genetic mechanisms underlying gene regulation in B cells at the National Institutes of Health. Following this, he earned his PhD from the Immunobiology Department at Yale University where he studied the gene regulation and epigenetic mechanisms necessary for T cell development and function.
How can we make sure each patient gets the care he needs? Prostate cancer is the second most common cancer among men worldwide, after lung cancer [1]. Unfortunately, diagnosis and therapy selection are not always simple or straightforward. Many prostate cancers are indolent and unlikely to pose a life threat. This means that for a large proportion of patients, active surveillance may be a better option compared to active treatment, which can have debilitating side effects such as impotence or incontinence. Yet it is crucial to discriminate indolent prostate cancers from the more aggressive ones. Once prostate cancer has spread to distant parts of the body, value based care rewards physicians for high-quality coordinated care that produces results. ON SCREEN TEXT: VALUE-BASED CARE Rewards for Results. MAN: For example, when a physician completes preventive screenings for their patient like a colonoscopy or a mammogram, UnitedHealthcare offers the opportunity to earn a bonus, a reward for being proactive and working to keep their patients healthy. MAN: Value based care: promoting better health, better care, and lower costs for everyone. ON SCREEN TEXT: For Everyone! ON SCREEN TEXT: UnitedHealthcare. Read how coordinated care addressed medical and social needs to help Beth get her life back. From 2013 to 2015, Rhonda visited the emergency room a total of 36 times. We’re committed to providing you with the very best cancer care, and your safety continues to be a top priority. With this in mind, we’ve put in place many new procedures, including a limited visitor policy. This is just one more way of ensuring your safety and that of our staff. How to provide emotional support for the patient. Providing physical care and managing symptoms. As a caregiver, you may need to provide physical care to the patient or supervise other people who are doing it, such as a home health aide. You may also need to help the patient: Manage their symptoms, such as pain or nausea (feeling like they might throw up). Change their bandages or handle their medical equipment. The following information will help you get ready for a patient’s hospital stay.