

# THE READING ROOM

WINTER 2007

Welcome to Tower Saint John's Imaging's quarterly newsletter. We hope you enjoy the view from inside **The Reading Room**.

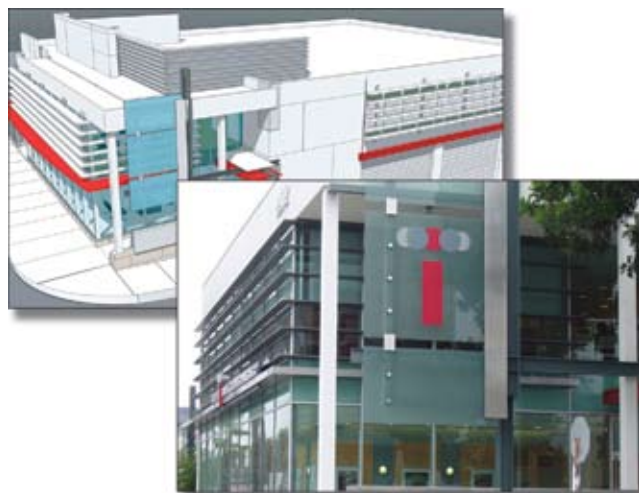
## CELEBRATING OUR SECOND ANNIVERSARY

When the administration of Saint John's Health Center and the Tower Imaging Radiologists agreed on the concept of partnering to establish a free standing outpatient imaging center in Santa Monica in 2002, we had no idea that it would take almost three years before the project came to fruition. We think that all the work and patience required to see Tower Saint John's Imaging become a reality two years ago was well worth it!

The tremendous support from the medical community these past two years has been gratifying, and all of the physicians and staff at TSJI greatly appreciate your support. We are proud to have been able to bring the innovations and improved services discussed in past issues of this newsletter to our patients and referring physicians over these past two years.

As 2007 begins we look forward to continuing our mission to provide the best patient care and service, ease of scheduling and access, and the highest quality imaging technology and medical expertise available anywhere in the world. Our staff and physicians look forward to many more rewarding years of working with all of you. Happy New Year.

**Arnold L. Vinstein, MD, MBA**  
Executive Director  
Tower Saint John's Imaging



From concept to completion, Tower Saint John's Imaging is realized. More photos on page 3.

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- Ultrasound Screening for Abdominal Aortic Aneurysm Page 4

# LOW DOSE SCREENING CHEST CT FOR DETECTION OF LUNG CANCER

BY IRA SMALBERG, M.D.

Low dose chest CT (computed tomography) screening for lung cancer refers to asymptomatic individuals without known disease undergoing a rapid, pain-free, and noninvasive CT scan of the chest in the hopes of detecting small lung cancers that are not visible on a chest x-ray, but are potentially curable by immediate surgical resection.

## LUNG CANCER STATISTICS AND RISK FACTORS

Lung cancer is the #1 cause of cancer death in the United States, accounting for more deaths than cancers of the breast, cervix, colon, and prostate combined. In the United States, approximately 173,000 persons are diagnosed with lung cancer and 164,000 deaths are related to lung cancer annually. Because individuals with early-stage lung cancer are typically asymptomatic, over 85% of lung cancers are discovered only after symptoms occur, following progression to an advanced stage with very little chance of cure. In contrast, the 5 year survival rate for lung cancer detected early (Stage IA) is 85-100%.

Risk factors for developing lung cancer include smoking and increasing age, as well as exposure to second hand smoke or environmental/occupational carcinogens (such as asbestos, beryllium, uranium, or radon) and lung scarring.

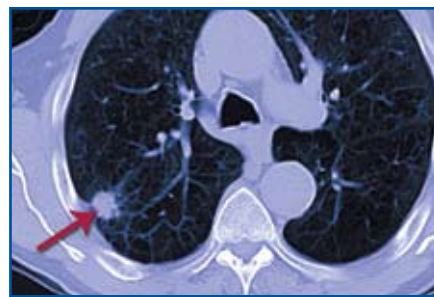
## RESEARCH

Recent research has demonstrated that annual low dose chest CT screening can

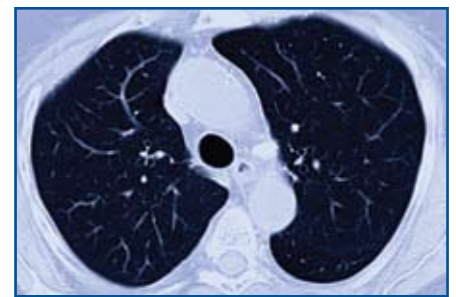
find 85% of lung cancers in their earliest, most curable stage. Patients diagnosed with lung cancer as a result of annual CT screening have an overall 10-year survival rate of 80%, regardless of stage and type of treatment. If treated promptly with surgery, the 10-year survival rate is 92%.

nodes, and musculoskeletal structures of the chest.

If a pulmonary nodule is identified on your scan, then additional testing may be warranted. Follow up options include evaluation by a lung specialist, short-term



Right upper lobe spiculated nodule suspicious for cancer, on a background of emphysema.



Normal lung CT

## LOW DOSE SCREENING CHEST CT TECHNIQUE

Low dose screening chest CT is performed at Tower Saint John's Imaging on a modern helical (spiral) 16 channel GE Light Speed CT scanner using a single 20 second breath hold, thereby allowing for complete imaging of the lungs. A lower radiation dose is used than for a standard chest CT scan, comparable to that of a mammogram and less than the average background radiation a person receives in the United States. Following the procedure, individuals can immediately return to their regular routine. A board-certified, experienced radiologist analyzes each CT scan and provides your doctor with an immediate report.

## FINDINGS

Early lung cancers are identified as tiny spots on the lungs (called "nodules"). The lungs are also assessed for emphysema, pneumonia, and other pulmonary conditions. Additionally, the evaluation also includes a basic evaluation of the heart, main blood vessels, lymph

interval repeat chest CT scan, positron emission tomography (PET scan), and/or biopsy. Frequently, the nodules are determined to be the residua of infection or inflammation rather than due to cancer.

Although research is ongoing, there is now compelling evidence that low dose chest CT screening should be recommended to everyone, particularly high risk individuals and that this technique can supplement or replace screening chest x-rays. Low dose chest CT screening is a rapid, pain-free, and noninvasive test that can potentially save lives by detecting lung cancer at an early curable stage. If you are interested in having a low dose chest CT screening examination, you should discuss the benefits and risks with your physician so that it is a shared, informed decision.

To schedule an appointment for a low dose screening chest CT at Tower Saint John's Imaging, please call 310-264-9000.

## IMAGING BY SPECIALISTS

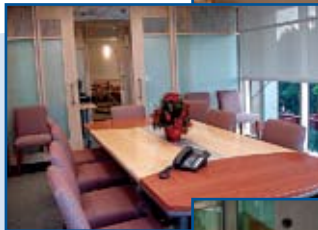
**D**r. Ira Smalberg received his Medical Degree at the UCLA School of Medicine, and performed his Internship in Internal Medicine and Residency in Radiology at North Shore University Hospital in Manhasset, NY. Dr. Smalberg also completed a fellowship in Abdominal Imaging at the New York University School of Medicine.



His focus on emergency and trauma radiology led Dr. Smalberg to join the Department of Radiological Sciences at UCLA as an Assistant Professor, where he cofounded the Medical Center's NightHawk Emergency Radiology program. Dr. Smalberg has presented scientific exhibits and has spoken at national radiology conferences, notably in the field of emergency radiology.

## CONCEPT TO COMPLETION

**T**ower Saint John's Imaging took on an awesome transformation beginning in 2002 when the vacant building on the corner of Wilshire Boulevard and 22nd Street in Santa Monica got a major makeover. Take a visual trip down memory lane with us of that progress.



**on the front**  
*A view of the Santa Monica Pier  
as the sun sets.*



## GETTING TO KNOW US

### CT Department



#### BARBARA

Born and raised in Sydney, Australia, Barbara, RT, OT, received her education at Sydney University and training at St. Vincent's Hospital in Sydney. Following her training, she traveled the

world working in her field as a radiology and orthopedic technologist in London and New York, and moved to Los Angeles 2 years ago where she joined Tower Imaging.

#### BECKY

Becky, RT (R), brings 30 years of diagnostic imaging experience to Tower Saint John's Imaging. She worked for Saint John's Health Center for 25 years prior to joining Tower Imaging in Beverly Hills



and then TSJI in Santa Monica. In her free time, she enjoys reading, watching movies and spending time with her two daughters, 25-year old Noelle, and 21-year old Lauren.

#### TOM



Following college ambitions of being a pro-football player in Syracuse, NY, Tom moved to California and began his career in diagnostic imaging. Tom, CT, RT (R), trained at Daniel Freeman

Hospital and has 12 years of experience in hospital and outpatient imaging center settings. In his free time, he enjoys spending time with his 3 1/2 month old daughter, Eryn.

# ABDOMINAL AORTIC ANEURYSM

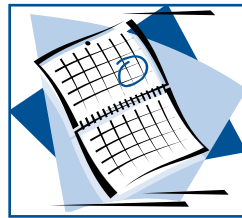
Beginning January 1, Medicare began providing for a one-time ultrasound screening to detect Abdominal Aortic Aneurysms, also known as AAA. An abdominal aortic aneurysm can develop in anyone, but it is most frequently seen in males over 60 with one or more risk factors. The exact cause of AAA is unknown, but risk factors for developing an aortic aneurysm include: high blood pressure, smoking, high cholesterol, obesity, emphysema, genetic factors and male gender.

Patients who either have a family history of AAA or who are male and are 65 - 75 years old and have smoked at least 100 cigarettes in their lifetime, or who display other risk factors may qualify for this one-time screening. Contact TSJI for more information about AAA or to schedule an appointment.

**Inside  
THE NEXT READING ROOM:**

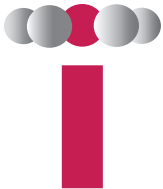
**Tower Saint John's  
Imaging bridges the gap  
in PACS technology.**

## THE WEEKEND IS YOURS



Tower Saint John's Imaging has been meeting your imaging needs on Saturdays with MRI, CT and Digital Screening Mammography. Now, we want to be here for you on Sundays,

too. Beginning on Sunday, February 11, MRI studies will be available. As always, we have a physician on-site to perform contrast injections for all MRI and CT studies. Weekend hours are 8am - 4pm. To schedule call 310-264-9000.



**TOWER  
SAINT JOHN'S  
IMAGING**

*Imaging by Specialists*

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