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Oncology Rehabilitation: A Partner in Cancer Care

Northside Hospital Rehabilitation Services offers a comprehensive Oncology Rehabilitation Program designed to optimize patient recovery and improve quality of life for individuals undergoing cancer treatment. This program provides one-on-one, personalized treatment plans delivered by experienced oncology-trained clinicians. Rehabilitation is beneficial at various stages of cancer care, including before, during and after treatment.

Key Benefits of Oncology Rehabilitation:

- **Improved Physical Function:** Patients can experience increased pain-free movement, enhanced flexibility, improved physical abilities, performance and independence. The program also helps patients regain strength, energy and participation in activities, while restoring or improving balance.
- **Enhanced Self-Care & Mobility:** Rehabilitation maximizes independence with daily self-care tasks, such as dressing, hygiene and bathing, and provides training on specialized equipment, like wheelchairs, walkers and dressing aids.
- **Symptom Management:** The program actively works with patients to reduce swelling, increase circulation, regain communication and safe swallowing skills, and minimize hearing loss and its effects.

Our Multidisciplinary Approach:

Our team of therapists collaborates closely with each patient and their physician to address cancer-related symptoms. Services offered before, during and after cancer surgery and/or treatment include:

- **Physical Therapy:** Focuses on strength and conditioning, balance and coordination training, and pain management.
- **Occupational Therapy:** Addresses strength and conditioning, fatigue management, equipment and vision training.
- **Speech-Language Pathology:** Provides services for speech and swallowing difficulties, comprehension, communication, voice and cognition.
- **Audiology:** Offers hearing evaluations and balance function testing, along with services related to hearing aids.

Specialty Oncology Services:

Certified or specialized clinicians provide a range of advanced services, including:

- Aquatic therapy
- Head and neck rehabilitation
- Lymphedema management
- Pelvic health rehabilitation (all genders)
- Wound care
- Specialized swallowing assessments
- Vestibular rehabilitation



A physician referral is required for participation in the program.

Northside Hospital's Oncology Rehabilitation Program stands as a dedicated partner in cancer care, committed to fostering recovery and enhancing the well-being of patients through every stage of their treatment journey.

We have a variety of locations throughout the Atlanta region to serve the needs of our community.

To learn more, visit northsiderehabilitation.com/services/oncology-rehab.

Clinical Trials and Research

New and Ongoing Cancer Clinical Trials

Disease Site	Sponsor, Protocol Number and Study Title	NCT Identifier
Breast	STEMLINE STML-ELA-0422 ELEGANT ; Elacestrant Versus Standard Endocrine Therapy (ET) in Women and Men with Node positive, Estrogen Receptor-positive, HER2-negative, Early Breast Cancer with High Risk of Recurrence - A Global, Multicenter, Randomized, Open-label Phase 3 Study	NCT06492616
Study Design <ul style="list-style-type: none"> This is a phase 3, global, multicenter, randomized, open-label, study in participants with node-positive, ER-positive/HER2-negative, early breast cancer who have received at least 2 years of adjuvant ET, including AI or tamoxifen with or without CDK4/6i and are currently receiving ET; and are considered at high risk of recurrence and are recurrence-free 2-6 years after curative surgical resection of the primary tumor. Eligible participants will be randomized in a 1:1 ratio to either switch to elacestrant monotherapy (experimental arm) or continue their current SoC endocrine monotherapy (control arm). 		
Genitourinary	MERCK MK5684-004 A Phase 3, Randomized, Open-label Study of MK-5684 Versus Alternative Abiraterone Acetate or Enzalutamide in Participants with Metastatic Castration-resistant Prostate Cancer (mCRPC) That Progressed On or After Prior Treatment with One Next-generation Hormonal Agent (NHA)	NCT06136650
Study Design <ul style="list-style-type: none"> This is a Phase 3, randomized, active-controlled, parallel-group, multisite, open-label study of MK-5684 plus HRT versus alternative abiraterone acetate or enzalutamide in participants with mCRPC that progressed on or after prior treatment with one NHA for HSPC or nmCRPC. Eligible participants will be randomly assigned in a 1:1 ratio to receive treatment with either MK-5684 plus HRT or alternative abiraterone acetate or enzalutamide. 		
Gastrointestinal	AMGEN 20210081 CodeBreak 301 ; Phase 3 Multicenter, Randomized, Open-label, Active-controlled Study of Sotorasib, Panitumumab and FOLFIRI Versus FOLFIRI With or Without Bevacizumab-awwb for Treatment-naïve Subjects With Metastatic Colorectal Cancer With KRAS p.G12C Mutation	NCT06252649
Study Design <ul style="list-style-type: none"> This is a phase 3, multicenter, randomized, open-label, active-controlled study to evaluate efficacy and safety of the experimental arm and the control arm in treatment-naïve mCRC patients with KRAS p.G12C mutation. Approximately 450 treatment-naïve subjects with mCRC with KRAS p.G12C mutation will be enrolled and randomized 1:1 to receive either the experimental arm or the control arm. Experimental Arm: Sotorasib + Panitumumab + FOLFIRI Control Arm: FOLFIRI with or without bevacizumab-awwb		

AI = aromatase inhibitor; CDK4/6i = cyclin dependent kinase 4/6 inhibitor; ER = estrogen receptor; ET = endocrine therapy; FOLFIRI= leucovorin calcium, 5-fluorouracil and irinotecan; HER2 = human epidermal growth factor receptor 2; HSPC = hormone sensitive prostate cancer; mCRC = metastatic colorectal cancer; NHA = novel hormonal agent; SoC = standard of care.

Our Research Team with Dr. Rodrigo Maegawa



To learn more about Clinical Trials at Northside Hospital Cancer Institute, visit our [Cancer Research and Clinical Trials page](#) or call **404-303-3355**.

IN THE NEWS: Update for Clinicians

Highlights from the American Society of Clinical Oncology (ASCO) 2025 Annual Meeting

ROSELLA Study: Advancing Treatment for Platinum-Resistant Ovarian Cancer

Relacorilant is a novel, selective glucocorticoid receptor antagonist (SGRA) that restores the sensitivity of cancers to chemotherapy. The phase 3 ROSELLA study^{1,2} compared relacorilant in combination with nab-paclitaxel versus nab-paclitaxel monotherapy in 381 patients with platinum-resistant ovarian cancer.

Key findings from the study include:

- **Improved progression-free survival (PFS), overall survival (OS), objective response rate (ORR) and clinical benefit rate (CBR):**
 - Patients who received relacorilant + nab-paclitaxel had a statistically significant improvement in median PFS versus patients who received nab-paclitaxel monotherapy (6.54 months versus 5.52 months; HR 0.70; 95% CI: 0.54–0.91; P=0.0076).
 - At the interim analysis, a statistically significant and clinically meaningful difference in OS was seen in patients who received relacorilant + nab-paclitaxel versus those who received nab-paclitaxel monotherapy (15.97 months versus 11.50 months; HR 0.69; 95% CI: 0.52–0.92; P=0.0121).
 - The ORR was 36.9% for patients who received relacorilant + nab-paclitaxel versus 30.1% for nab-paclitaxel monotherapy.

- The CBR was 51.1% for patients who received relacorilant + nab-paclitaxel versus 38.9% for nab-paclitaxel monotherapy (P=0.016).

- **Favorable Safety Profile:**

- The combination of relacorilant and nab-paclitaxel was well-tolerated, with a safety profile comparable to previously reported data, with no new safety signals identified. Grade ≥3 adverse events occurred in 75% of patients who received relacorilant + nab-paclitaxel versus 60% in the nab-paclitaxel monotherapy arm.
- Patients receiving relacorilant plus nab-paclitaxel experienced a lower unadjusted incidence of ascites (3% versus 5%) and a lower rate of abdominal paracenteses (7% versus 13%) compared to nab-paclitaxel monotherapy.

These results suggest that intermittently dosed relacorilant combined with nab-paclitaxel offers an efficacious treatment regimen for women with platinum-resistant ovarian cancer, without the need for a biomarker.

References:

1. Olawaiye A, et al. *J Clin Oncol*. 2025;43 (suppl 17):LBA5507.
2. Olawaiye A, et al. *Lancet*. 2025;405(10496):2205–2216.



Expert Commentary from Rachel Brightwell, MD:

The results of the ROSELLA study offer us another tool with an acceptable safety profile to use in our armamentarium in the landscape of platinum-resistant ovarian cancer. OS was improved by 4.5 months over single agent nab-paclitaxel. While traditionally we have been focused on PFS and OS, more modern thinking deems a “win” for our patients as not just disease regression but disease stability. Therefore, a 12% increase in CBR is a great step forward for this difficult-to-treat subset of patients. Furthermore, patients had less ascites and therefore lower rate of paracenteses, which improves quality of life and decreases potential complications from these interventions. These positive results underscore the importance of enrolling patients on clinical trials where appropriate to continue to move science forward.



Neoadjuvant Immunotherapy for Stage III Melanoma Shows Promising Results in a Community Setting

By Nicole Kounalakis, MD

We conducted a retrospective analysis to evaluate outcomes for patients with resectable clinical stage III cutaneous melanoma treated with neoadjuvant immunotherapy. We reviewed characteristics and outcomes of 44 patients diagnosed between 2018 and 2024, all with biopsy-proven lymph node metastases +/- up to three in-transit lesions, and all treated with immunotherapy followed by surgical resection.

- 68% of patients received two cycles of ipilimumab (1 mg/kg) and nivolumab (3 mg/kg).

- Median follow-up was 16 months, with an 84% event-free survival rate.
- Pathological response breakdown:
 - 67% achieved a major pathological response (≤10% viable tumor)
 - 5% had a partial pathological response (>10–50% viable tumor)
 - 29% had a pathological non-response (>50% viable tumor)

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Neoadjuvant Immunotherapy for Stage III Melanoma Shows Promising Results in a Community Setting

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- Recurrence-free survival rates:
 - 96% for patients with a major response
 - 100% for partial responders
 - 67% for non-responders
- Grade 3–4 adverse events occurred in 16% of patients within the first 3 months.
- Two patients did not proceed to surgery:
 - One due to disease progression during treatment
 - One due to treatment-related toxicity resulting in death

These findings emphasize the feasibility and effectiveness of neoadjuvant immunotherapy in the community oncology setting, with outcomes comparable to those seen in clinical trials. Our findings also reinforce the growing role of neoadjuvant strategies in improving long-term control of advanced cutaneous melanoma.

Highlights from the International Conference on Malignant Lymphomas (ICML)



SUNMO Study: Subcutaneous Mosunetuzumab + Polatuzumab Vedotin Improves Outcomes in Transplant-Ineligible R/R LBCL

By Rodrigo Maegawa, MD, MBA

Results of the SUNMO phase 3 trial, which were released as a late-breaking oral presentation at the ICML, showed that subcutaneous mosunetuzumab combined with polatuzumab vedotin significantly improves outcomes in patients with relapsed or refractory diffuse large B-cell lymphoma (DLBCL) who are ineligible for transplant. In this first positive phase 3 trial without a conventional chemotherapy arm in this setting, the novel study regimen demonstrated:

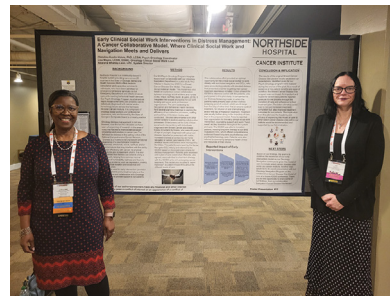
- 59% reduction in the risk of progression or death
- Tripling of median progression-free survival
- Doubling of the complete response rate

The combination also had the lowest reported incidence and severity of cytokine release syndrome (CRS) among T-cell-engaging therapies:

- 96% of patients experienced no significant CRS
- Delivered as a fixed-duration, outpatient regimen
- Combines a bispecific antibody with an antibody-drug conjugate

These findings may expand access to effective outpatient therapies for patients with relapsed or refractory, transplant-ineligible DLBCL, potentially changing the treatment landscape in this patient population.

Highlights from the 2025 AOSW Conference



Northside Hospital Cancer Institute recently sponsored the Welcome Reception at the 2025 Association of Oncology Social Work (AOSW) Conference, which welcomed more than 350 oncology social workers from across the U.S.

Bryan Miller, LCSW, OSW-C, Director of Psychosocial Support Services at Atlanta Cancer Care, delivered the opening keynote, *From Spark to Ember: Together We Ignite Hope and Nourish Healing*. His presentation focused on the current landscape of cancer health inequities and social determinants of health, including emerging efforts to address unmet needs through partnerships with community

organizations. He also spoke about the sustaining power of hope and resilience throughout a social work career.

Northside's Christina Austin-Valere, PhD, LCSW, and Lisa Mayes, LCSW, OSW-C, presented their poster entitled, *Early Clinical Social Work Interventions in Distress Management: A Cancer Collaborative Model, Where Clinical Social Work and Navigation Meets and Delivers*. Dr. Austin-Valere also spoke on a panel entitled, *Lunch & DEI Committee Panel: Inclusive Cancer Care: Meeting People Where They Are Within an Evolving Policy Landscape*.

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Highlights from the 2025 AOSW Conference (continued from page 4)

Atlanta Cancer Care social workers Rochelle Schube, LCSW, OSW-C, and Erin Edgeworth, LCSW, OSW-C, presented a session entitled *Blue Genes: The Psychosocial Impact of Hereditary Cancer*. They explored the emotional and social complexities faced by patients with genetic cancer syndromes, including anxiety, family conflict and identity challenges. Their talk emphasized how cultural beliefs shape decision-making around genetic testing and highlighted effective, evidence-based interventions like narrative therapy and support groups.

Bryan Miller and Lijo Simpson, MD, also presented a session entitled *A Non-Profit Foundation's Preliminary Use of Artificial Intelligence to Identify Factors Predicting an Increased Need for Patient Financial Assistance*. The session provided an overview of artificial intelligence (AI), machine learning and an example of a non-profit cancer foundation's preliminary use of predictive AI to analyze data from their financial assistance applications.

Pembrolizumab Plus Chemotherapy Demonstrates Efficacy in Advanced Endometrial Cancer Regardless of Mismatch Repair Status

The phase 3 NRG GY018 trial showed that adding pembrolizumab to first-line paclitaxel and carboplatin significantly improved progression-free survival (PFS) in patients with both mismatch repair-proficient (pMMR) and mismatch repair-deficient (dMMR) advanced or recurrent endometrial cancer. Among 810 patients randomized 1:1 to pembrolizumab or placebo plus paclitaxel-carboplatin followed by maintenance pembrolizumab or placebo for up to 24 months, those receiving pembrolizumab plus chemotherapy showed improved PFS per Response Evaluation Criteria in Solid Tumors (RECIST) v1.1 by blinded

independent central review. Based on these findings, the regimen received U.S. Food and Drug Administration approval in 2024.

A recent publication in *Nature Medicine*,¹ evaluated the updated overall survival data, which remain immature. Although the hazard ratios favored pembrolizumab in both cohorts, the results were not statistically significant.

- pMMR: 0.79 (0.53–1.17); P = 0.1157
- dMMR: 0.55 (0.25–1.19); P = 0.061

Reference:

1. Eskander RN, et al. *Nat Med*. 2025;31(5):1539-1546.

**Expert Commentary from Guilherme Cantuaria, MD:**

My interpretation of the data does not “further support” pembrolizumab plus chemotherapy regardless of MMR status as stated in the conclusion of the paper. The survival data, although immature, do not reach statistical significance in either cohort, notably in pMMR, where the one-sided P value falls well short of conventional thresholds (pMMR: HR 0.79 (95% CI 0.53–1.17); one-sided nominal P = 0.1157). It is well established that crossover or subsequent therapies may confound overall survival outcomes, however, in the pMMR cohort, the clinical benefit of up to 2 years of maintenance pembrolizumab is marginal, and not cost-effective by usual standards. Maintaining pembrolizumab for up to 24 months exposes patients to potential immune-related toxicities and quality-of-life implications which are often underreported in clinical trials. From a pragmatic standpoint, reserved use of pembrolizumab in the frontline to dMMR tumors may be more justifiable, while in pMMR it should be reconsidered or refined, possibly by leveraging other regimens or molecular markers.

Elevating the Patient Experience**Northside Recognized for Excellence in Lung Cancer Surgical Outcomes**

Northside Hospital Cancer Institute has earned a “Better than Expected” rating, the highest possible quality designation, from the Society of Thoracic Surgeons for its outstanding patient care and lung cancer surgical outcomes. The rating places Northside among the top thoracic surgery programs in the United States and Canada, reflecting exceptional performance in key areas, including mortality, complications and overall patient outcomes following lung cancer surgeries.

“This recognition is the culmination of our longstanding commitment to patient care,” said Dr. John W. Gouldman of Northside Thoracic Surgery. “It is made possible by the dedication of our nurses, therapists, physicians and hospital leadership.”

Northside Integrates Breast Cancer Risk Assessment with Screening Mammograms

Now available at all Northside imaging locations, a new screening service helps identify women at elevated risk of breast cancer who may benefit from enhanced surveillance or prevention strategies.

Key Details:

- Risk assessment is offered at no cost with screening mammograms.
- Patients complete an electronic survey prior to their appointment, covering personal and family history.

- Breast density is evaluated during the mammogram and combined with survey data to generate a lifetime breast cancer risk score.
- Results are shared with both the patient and the referring provider.
- Patients with a $\geq 20\%$ lifetime risk are referred to their provider or Northside's High Risk Clinic for additional services that may be beneficial.

To refer or learn more, call [404-851-6577](tel:404-851-6577) or visit northside.com/mammogram.

Northside Hospital Cancer Institute Patient and Care Partner Education Conference

Northside Hospital Cancer Institute welcomed approximately 200 attendees to the Patient and Care Partner Conference, held Saturday, August 9, 2025, at The Hotel at Avalon in Alpharetta. Key presentations at this conference included:

- Navigation Recalibration
- Complementary and Alternative Medicine and Cancer: Show Me the Proof!
- The Unseen Battle: Prioritizing Mental Health in Survivorship
- Heart Health
- Bone Health

The event featured presentations by Northside-affiliated providers and external experts. Thank you to all who attended and helped make this event a valuable experience for patients and care partners. Save the date for next year: September 12, 2026!



Around Our Campuses

Clinic Updates

Northside is pleased to announce the opening of several new clinics across the Atlanta region:

- **Surgical Specialists of Atlanta – Tucker** is located at 1462 Montreal Road, Suite 303, Tucker, GA, 30084. To learn more, visit surgicalspecialistsofatlanta.com/locations/tucker.
- **Northside Macon PET Imaging** is located at 3902 Northside Drive, Suite C-1, Macon, GA, 31210. To learn more, visit northside.com/locations/northside-macon-pet-imaging. The ribbon cutting for this location will be on Wednesday, October 1, 2025 at 2 p.m. We can't wait to celebrate with you!
- Northside Hospital Cancer Institute has acquired **five radiation oncology clinics** from The US Oncology Network, including Radiotherapy Clinics of Georgia. The new clinics and their physicians are:
 - **Blairsville:** 308 Deep South Farm Road, Suite 100, Blairsville, GA, 30512
 - **Conyers:** with Drs. James Benton & Ratna Sajja at 1293 Wellbrook Circle, Conyers, GA, 30012
 - **Covington:** with Courtney Pollard, III at 7174 Wheat Street, Covington, GA, 30014

- **Decatur:** with Drs. Mark Merlin & James Benton, at 2349 Lawrenceville Highway, Decatur, GA, 30033
- **Snellville:** with Dr. Tracy McElveen, at 1770 Presidential Circle, Snellville, GA, 30078

To learn more, visit northside.com/services/cancer-institute/cancer-treatment-options/radiation-therapy.

"Radiotherapy Clinics of Georgia's affiliation with Northside Hospital will allow us to grow and enhance productivity and efficiency. We will continue to provide the highest quality of oncological care that our patients have come to expect for over 45 years and put patient care at the center of all we do."

- As of August 7, 2025, Northside's **Lung Nodule Clinic** expanded to Atlanta, operating Thursday mornings at Pulmonary and Critical Care of Atlanta (PCCA), staffed by Drs. Silverboard and Lakshminarayanan. Additional Northside Lung Nodule Clinics are also in Canton, Cumming and Lawrenceville.

Howard Silverboard, MD: *"The addition of lung nodule clinic will provide an additional mechanism for patients to receive comprehensive, rapid, and specialized evaluation of*
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Clinic Updates (continued from page 6)

possible lung cancer. Timeliness of care is of great importance, particularly when patients face such a serious diagnosis."

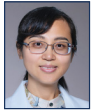
Venkatesh Lakshminarayanan, MD, PhD: "With the advancements in diagnostic tools and therapies, the need for specialized care in pulmonary medicine has never been

more evident. A Lung Nodule Clinic provides comprehensive, patient-centered care that integrates the latest research, diagnostic preventative and innovative treatment strategies. This clinic offers a multidisciplinary approach that not only focuses on the treatment of lung cancer but also early detection, patient education, and improved quality of life."

Provider Features



Ghulam Ghous, MD is an oncologist who recently joined [Georgia Cancer Specialists – Decatur](#) and [Georgia Cancer Specialists – Hillandale](#). To learn more, visit gacancer.com/ourteam/ghulam-ghous-md.



Lishi Sun, MD is a hematologist and oncologist who recently joined [Georgia Cancer Specialists – Fayetteville](#). To learn more, visit gacancer.com/ourteam/lishi-sun-md.



Justin Woods, MD is an oncologist who recently joined [Suburban Hematology-Oncology Associates](#). To learn more, visit northside.com/justin-woods.



Ammar A. Asban, MD, MAS is a thoracic surgeon who recently joined [Northside Thoracic Surgery – Lawrenceville](#), which opens September 4, 2025. To learn more, visit northside.com/ammam-asban.



Hong Anh De Sa, MD is a hematologist and oncologist who recently joined [The Blood and Marrow Transplant Group](#). To learn more, visit bmtga.com/hong-anh-de-sa-md.



Madhuri Chengappa, MD is a hematologist and oncologist who recently joined [Georgia Cancer Specialists – Douglasville](#) and [Georgia Cancer Specialists – Smyrna](#). To learn more, visit gacancer.com/ourteam/madhuri-chengappa-md.



Patti Owen, MN, RN, director of oncology services at Northside Hospital Cancer Institute for 36 years, will retire on September 5, 2025. She has helped lead NHCI to be one of the largest and most respected providers of cancer care services in the Southeast and the largest comprehensive community hospital cancer program in Georgia. She supported significant partnerships that led to major programmatic growth for NHCI, including:

- Obtaining and overseeing the NCI Community Cancer Centers Program (NCCCP) grant to reduce cancer health care disparities
- Adding the Blood and Marrow Transplant (BMT) Program
- Adding four community medical oncology practices
- Establishing the statewide National Cancer Institute Oncology Research Program (GA NCORP)

She has also served at numerous state and national oncology organizations, including Cancer Support Community Atlanta, Georgia Center for Oncology Research & Education (CORE), Association of Community Cancer Centers and Oncology Nursing Society. Patti has also published several articles in the field of oncology nursing. Please join us in thanking Patti for her many dedicated years of service to Northside Hospital and congratulating her on her retirement.

Upcoming Education and Events

CONTINUING EDUCATION

Northside Hospital Cancer Institute Oncology Lecture Series

Occurs third Thursday of each month from noon-1 p.m.

The next one will be on September 18, 2025.

For more details, please contact Northside Hospital Department of Medical Education at medical.education@northside.com or 404-236-8419.

Northside Hospital Cancer Institute 13th Annual Oncology Nursing Symposium

September 13, 2025 from 7 a.m.-2:30 p.m. @ The Hotel at Avalon in Alpharetta

pgoncology.com/nhci-oncology-nursing-symposium-2025/



CANCER SCREENING & PREVENTION

Prostate Cancer Screening

September 4, 2025 @ Northside Hospital Cancer Institute Radiation Oncology – Preston Ridge from 5:30-8 p.m.

September 25, 2025 @ The Cancer Support Center at Northside Hospital Gwinnett

October 21, 2025 @ Northside Hospital Cancer Institute Radiation Oncology – Atlanta from 6-8 p.m.

northside.com/community-wellness/health-screenings

Skin Cancer Screening

October 21, 2025 @ Northside Hospital Cancer Institute Radiation Oncology – Atlanta from 6-8 p.m.

northside.com/community-wellness/health-screenings

National Lung Cancer Screening Day

November 8, 2025 @ Northside imaging locations in Holly Springs, Atlanta, Cumming, and Lawrenceville.

Northside is partnering with the American Cancer Society National Lung Cancer Roundtable, American College of Radiology, Radiology Health Equity Coalition and U.S. Department of Veterans Affairs to raise awareness about lung cancer screening and offer low-dose CT (LDCT) lung screening on a Saturday. A physician order is required. Call [404-531-4626](tel:4045314626) to schedule an appointment.

northside.com/docs/default-source/cancer-institute/screening/lung_cancer_screening_flyer_2022-english-only.pdf

Built To Quit – Smoking and Tobacco Cessation Course

Next six-week session start date: September 9, 2025

Weekly classes include the American Lung Association Freedom from Smoking curriculum.

northside.com/community-wellness/built-to-quit



COMMUNITY EVENTS

CANCER WALKS/EVENTS – SPONSORED BY NHCI

Team Maggie's Dream 5K/10K

September 13, 2025 from 7:30 a.m.-10 a.m.

@ the River at RCCG King's Court Chapel in Roswell

teammaggiesdream.org/events

ZERO Prostate Cancer Run/Walk Atlanta

September 13, 2025 @ 8:30 a.m.

@ Piedmont Park Promenade in Atlanta

support.zerocancer.org/goto/northside

Georgia Ovarian Cancer Alliance Teal Trot 5K Walk & Run

September 20, 2025 @ 9:30 a.m. @ Chastain Park in Atlanta

raceroster.com/events/2025/103843/2025-goca-teal-trot-5k-walkrun

Southeastern Brain Tumor Foundation Race for Research

September 20, 2025 @ 7:15 a.m. @ Atlantic Station in Atlanta

sbtf.org/sbtf-race-for-research/

Georgia 2-Day Walk for Breast Cancer

October 4 @ 7 a.m. – October 5, 2025 @ noon,

starts @ Atlanta Marriott Marquis

gaabc.org/get-involved/

Colorectal Cancer Alliance's 2025 Atlanta Walk to End Colon Cancer

October 25, 2025 @ 10 a.m. @ Shirley Franklin Park in Atlanta

impact.ccalliance.org/event/2025-atlanta-walk-to-end-colon-cancer/e619301

Komen Georgia MORE THAN PINK Walk

October 25, 2025 @ 8:30 a.m. @ Lenox Square in Atlanta

secure.info-komen.org/site/SPageNavigator/mtpw_eventdetails.html?fr_id=10918

Blood Cancer United (formerly Leukemia & Lymphoma Society) Light the Night

October 4, 2025 @ 5:30 p.m. @ Piedmont Park in Atlanta

lightthenight.org/events/atlanta

Think Pink Cherokee County Breast Cancer Awareness Walk

October 25, 2025 from 9 a.m. to noon @ Historic Downtown Canton Cannon Park

Leukemia & Lymphoma Society Southern Blood Cancer Conference

October 25, 2025 @ Loews Atlanta

lls.org/article/blood-cancer-conferences

Sarcoma Strong Run/Walk 5K

November 8, 2025 @ Chastain Park @ 9 a.m.

zippy-reg.com/online_reg/?e=2167

NORTHSIDE FOUNDATION EVENTS

Tennis & Pickleball Against Breast Cancer benefiting Northside

Hospital's Breast Care Program at various locations

October 3, 2025 in North Fulton/Gwinnett

October 10, 2025 in Forsyth

October 17, 2025 in Cherokee

October 24, 2025 in North Fulton

give.northside.com/events/tabc/

Paint Gwinnett Pink 5K Walk/Run for Breast Cancer

October 18, 2025 @ 8 a.m. @ Gas South District

Support.PaintGwinnettPink.com



SIGN UP—CANCER CARE NEWS

Follow Northside Hospital:



For All For Providers

NHCI Northside



SIGN UP—SURVIVORSHIP NEWSLETTER

