Submitter:	Melissa Carlton
On Behalf Of:	
Committee:	Senate Committee On Health Care
Measure, Appointment or Topic:	SB1137

My name is Melissa Carlton and I am a Board Certified Clinical Specialist in Oncologic Physical Therapy. I have over 15 years of experience working in the oncology rehabilitation field. The majority of my patients, unfortunately, have been diagnosed with breast cancer. I feel very honored and privileged to work with individuals living with a cancer diagnosis and afterwards. Throughout my career I have worked with patients that choose different options for breast reconstruction (or no reconstruction). I believe that the decision of what type of breast reconstruction, where they have this procedure(s) done and with what surgeon are very important and individual decisions. Patients undergoing care for breast care deserve the right to make an informed, educated and appropriate decision regarding their breast reconstruction. They should not have to receive services from a surgeon they do not feel confident in their skills or bedside manner. An individual's health insurance company should not dictate what type of reconstruction of patient is permitted to have. I have had patents with Medicaid that have been told by their surgeons that they are "not candidates for a reconstruction", when I know this is not due to a medical condition. They are not candidates for a reconstruction because at that time there were no plastic surgeons in the region that took this patient's insurance. Unfortunately this patient was not given the opportunity to go elsewhere, interview other surgeons or consider reconstruction out of state due to their health insurance limitations. This is only one instance, however it stands out to me as this patient underwent major surgery of a mastectomy, endured chemotherapy and radiation, all to be left with surgical scars and no option for reconstruction due to her health insurance limits.

Breast cancer treatments can be very physically and emotionally detrimental to patients. The decision regarding if, and what type of breast reconstruction is very personal, individual and complex. I have observed that my patients that have been given the opportunity to chose autologous breast reconstruction are given a step in the right direction towards physical and psychological healing. Utilizing a patient's own tissue tends to yield a more natural look and feel, which significantly improves body image and self esteem. Many of the newer techniques preserve muscle function, decreasing impairments and restoring their ability to participate in the same level they did prior to their cancer diagnosis.

I work with patients that have undergone mastectomies, reconstructions with implants and autologous reconstructions. There are many surgical advances now available to patients that weren't even being practiced a few years ago. Unfortunately, not every reconstructive plastic surgeon has the same level of training, equipment and skills and therefore advanced surgical techniques are not always performed in a patient's home city or state. Patients, regardless of their income, health insurance or level of education should equally have access to the opportunity to have the type of breast reconstruction that is appropriate for them, preserves muscle and function and restores themselves to as close to their full selves as can be done.

No one wants to be diagnosed with cancer, nor do they want to undergo a major surgery (or surgeries) that will cause physical and emotional scars and possibly limit their ability to function in daily life for the remainder of their lives. Please help give the patients undergoing breast cancer treatment the option to look elsewhere for autologous breast reconstructive surgery and help them get their lives back, as close to "normal" as it can be considering everything they have gone through. We can do better as a society to help these individuals thrive in survivorship. Thank you for your time and consideration.

Melissa Carlton PT, CLT