Beyond Pink TEAM
Cedar Valley Cancer Committee

TOUCH OF COURAGE

CONNECTION NEWSLETTER

IN THIS ISSUE

AI IN BREAST CANCER RESEARCH: PROMISE, PROGRESS, & WHAT PATIENTS SHOULD KNOW

BY LORI SEAWEL, SURVIVOR & BEYOND PINK TEAM ADVOCATE

Artificial intelligence (AI) is becoming an increasingly valuable tool in breast cancer research. While AI can seem mysterious or intimidating, at its core it is simply a way for computers to identify patterns in large amounts of data. Used appropriately, AI can help researchers and clinicians make better, faster decisions. It does not replace expertise, judgment, or evidence. Instead, it supports efforts to improve outcomes and, ultimately, help end breast cancer.

How AI Is Helping Breast Cancer Research Today

One of the most promising applications of AI is **improving cancer detection**. Researchers are studying AI systems that assist radiologists by highlighting areas on mammograms that may warrant closer examination. These tools can sometimes identify subtle changes that are difficult for the human eye to detect, particularly in dense breast tissue. AI is not a replacement for expert review, but when used responsibly, it may help improve early detection and reduce missed cancers. Researchers must also ensure these tools do not contribute to overdiagnosis, which can expose people to treatments they may not need.

AI is also helping scientists better **understand breast cancer biology**. Modern research generates enormous amounts of information, including pathology images, genomic data, treatment histories, and long-term outcomes. AI can analyze these datasets quickly, identifying patterns across thousands of cases. This may help uncover new biomarkers, improve understanding of how tumors behave, and guide more personalized treatment strategies.

Another important role for AI is **accelerating scientific discovery**. Thousands of breast cancer studies are published each year, making it impossible for any researcher to read them all. AI tools can scan large volumes of research, summarize findings, and help identify knowledge gaps or promising directions. While scientific judgment and peer review remain essential, AI can help researchers work more efficiently.

The Promise Ahead

Although AI is already contributing to research, its greatest potential may lie in the future.

One area of promise is **personalized care**. By combining information from imaging, pathology, genetics, and clinical records, AI may help researchers better understand which treatments are most effective for specific patients. This could lead to more targeted therapies and fewer unnecessary side effects.

AI may also improve **clinical trials**. Recruiting participants, predicting enrollment

CONTINUED ON PAGE 4

MAKING THE MOST OF MY LIFE

SURVIVOR STORY BY BEV BAUER

I had always gone faithfully for Pap smears and breast exams, so at the age of 64, when I went to my primary doctor in January of 2016, she checked my breasts and felt nothing alarming. A month later, I suddenly remembered I was scheduled for my regular mammogram the next day. Sadly, I also realized that at the same time as my mammogram, there was a funeral visitation we wanted to attend! So, I decided I would go early to the Breast Center and just take a chance that they could "squeeze me" in --no pun intended! The staff was very understanding, and I was able to get in and go to the church for the visitation.

Since I had been checked a month before and had no symptoms or family history of breast cancer, I wasn't expecting anything unusual with this mammogram. However, after the funeral, I realized I had a voicemail that said I needed to come in again for another mammogram on one side. It was too late to get back to them that day, so the earliest I could get in was three days later. Sometimes the "waiting" is the worst part! Unfortunately, that second mammogram confirmed something was amiss, so they did an ultrasound and then a biopsy. My husband wasn't with me for all of this, so I told him after I got home that it was a bit concerning. We would get the official diagnosis the next day. Interestingly, he had recently retired from his job, and his retirement party was also planned for the very next day! All our daughters/family gathered in the metro area and in our home to attend that party. My husband and I went in together to see the radiologist, and of course the news wasn't good, but by then it was no surprise!

I remember saying, "I don't want to be a part of this breast cancer group of women!" However, I guess that didn't matter — I was joining it after all —but I can honestly say it hasn't been the worst thing that ever happened to me. God has used it in my life in many ways, and so for that, I'm grateful. Also, the fact that my diagnosis came a couple of hours before my husband's retirement party was actually a blessing because our family could process the news together in person rather than by phone or text! In addition, even though we weren't going to mention my diagnosis at the retirement party, it still became known to some close friends. Then more folks heard about it, which was fine, since a few of them who had endured breast cancer diagnoses were there and encouraged me! Thank You, Lord Jesus, for the absolute 'perfect' timing of my cancer diagnosis!

Here's my diagnosis: "invasive lobular carcinoma grade 2"—"Estrogen receptor positive and progesterone receptor positive: HER-2/neu negative," to be more exact! My surgery was completed1.5 months after my diagnosis because two surgeons had to be scheduled for it, due to my desire to have reconstruction. However, after months of undergoing "expanding" of my breast tissue for the reconstruction, I had contracted mastitis, so the plastic surgeon was unable to do an implant after all. In late March of 2016, I had my mastectomy, and in late March of 2017 I had the infected expander removed. In between those two surgeries, I did not have to have chemotherapy intravenously. I started taking Arimidex (anastrozole) in July and took it for almost five years. I didn't have any serious effects while taking the drug, but I'm sure it has affected my bones, since earlier this year I was diagnosed with osteoporosis. Because of the large size of my tumor (7 cm), which was against my chest wall, I was told that I needed to have radiation for 35 days. That wasn't fun, but it also was not the worst thing I've endured. I was quite surprised, however, at how tired it made me!

I often wonder if the two different stressful jobs I had from 2005 to 2015 contributed to my cancer. I also probably wasn't eating the healthiest foods. I guess I'll never know for sure what caused my cancer; however, one of my daughters really encouraged me to stay away from sugar, as she had heard that sugar feeds cancer. She also helped me start juicing some healthy green foods twice a day, and I lost quite a few pounds, which was great!

Since my surgery, I have attended many of the Touch of Courage meetings on the first Monday of each month. At those gatherings with fellow survivors, I have received lots of encouragement and helpful tips about health, fitness, nutrition, medicines, doctors, treatments, etc. During those meetings, we often make little heart-shaped pillows, which are given to those having mastectomies, etc. I have used mine to replace my missing breast when I sleep or cushion my chest while driving. I also enjoyed walking while I participated in the Pink Ribbon Run.

It's now 2026, and I'm over 10 years out of my diagnosis, and so far, there's been no recurrence. I have since undergone open-heart surgery at Mayo for severe mitral valve prolapse. The cancer and heart surgeries have made me consider more deeply exactly what I'm doing with my life—realizing my life is possibly quite close to being over, and I better make the most of it while I'm still here, since we are never guaranteed a certain number of years. (Psalm 90:10 & 12)

Bev Bauer

Yvonne Blohm

FACING THE HARSH REALITY OF TREATMENT

SURVIVOR STORY BY YVONNE BLOHM

I had my annual mammogram early last December, in the midst of the festive holiday season. That celebratory atmosphere soon collided with a new reality: the mammogram showed a mass on my right breast. A follow-up diagnostic 3D mammogram and ultrasound confirmed breast cancer.

I had a biopsy on Dec. 22 and received results the next day – two days before Christmas. The procedure identified invasive ductal carcinoma (IDC), grade two, plus associated ductal carcinoma in situ (DCIS), estrogen receptor positive.

January was a blur of bloodwork, appointments, and tests, including a breast MRI and CAD, which revealed additional areas of enhancement, one on the outside of each breast. At that point, wanting all the cancer gone, I scheduled a bilateral mastectomy without reconstruction for Feb. 19.

In the meantime, my daughter, an ER nurse, had suggested I reach out to Mayo Clinic for a second opinion. I met with the team in Rochester for three hours on Jan. 28.

Dr. Kebede explained that lumpectomy plus radiation would have the same recurrence rate for me – 5% - as a double mastectomy, which could result in disfigurement, chronic pain, and nerve issues.

I felt like a weight lifted from my shoulders. The bilateral mastectomy had always felt like a "snap decision" made while panicking after the new diagnosis, as well as fear and a rough time through the holidays dealing with it.

MRI-guided biopsies showed that the other two areas were benign, thankfully. None of my tests showed lymph node involvement, either. So, I decided to cancel my local surgery and move forward with the plan at Mayo.

At a Feb. 12 appointment, I talked with the breast cancer surgeon about oncoplastic. That's where they use your own breast tissue to fill in the divot from the lumpectomy and then reshape the breast to look "normal." I could also have a reduction on the other breast to match the reconstructed breast.

Just a week later, I spent six hours in surgery and several hours in recovery but was released from the hospital late that night. I moved to a hotel room with my husband and daughter. I had minimal pain the first two days because of nerve blocks. I returned home with two drains that had to be emptied until they were removed several days later.

Recovery proceeded smoothly for the first week. Then I developed skin degradation under both breasts, with an open wound at the bottom of the anchor scar where the skin met. Mayo requested photos and prescribed an antibiotic ointment.

At my follow-up appointment on March 3, the care team decided I needed to pack the wounds twice a day with wet/dry packing. I did that for two weeks before they changed my dressings to a "gold gauze" with an antibiotic in it. I sent additional photos several times through the patient portal and made three more trips for in-person appointments.

It took more than seven weeks of treatment for the wounds to fully heal, a requirement before radiation could begin. Mayo recommended a stronger five-day dose of radiation that clinical trials have shown is as effective as treatments that take three or four weeks.

I went for a simulation appointment where they explained what would happen during radiation, even demonstrating how the padding and support foam would mold to my body to keep me comfortable while holding the required position. This greatly reduced my fear.

Radiation finally began May 18, and the next day the oncologist determined I had cellulitis and lymphedema. Great! I was given a breast binder to wear 24/7 to reduce the lymphedema and an antibiotic for cellulitis.

Thankfully, despite the hiccups along the way, I finished radiation on May 22 and rang the bell! My skin continued to redden, as expected, and my tiredness peaked about three weeks later.

I've been prescribed estrogen blocker medication for the next five years, and I've also had therapy appointments at Mayo, which helpfully focus on a patient's mental health and how to get support during the difficult journey of treatment and its aftermath.

Now I'm anticipating many celebrations during the upcoming holidays with a newfound gratitude, very thankful that treatment is behind me.

FALL MEDICARE ANNUAL ENROLLMENT

The fall Medicare annual enrollment period from October 15 to December 7 applies to Medicare Advantage and Part D drug plans – not Medicap supplements.

State Health Insurance Assistance Program (SHIIP) provides one-on-one local counseling that is completely independent and not tied to any insurance company.

The local office for Black Hawk County is located at MercyOne Waterloo Medical Center, 2055 Kimball Ave, Suite 320, Waterloo, IA 50702. You can schedule an appointment by calling 319-272-7857. To learn more, visit shiip.iowa.gov.

Note: You can change your Medicare Supplement (Medigap) insurance at any time during the year. There is no restricted window like there is for Medicare Advantage.

VOTING WITH BREAST CANCER ISSUES IN MIND

Breast cancer affects families in every community and on both sides of the political aisle. Elected officials at both the state and federal levels decide the policies that shape research funding, screening access, insurance protections, and support for patients. These decisions directly affect prevention, treatment, and survivorship.

Beyond Pink TEAM does not endorse candidates or political parties. Our role is to ensure that everyone in our community has the information they need to understand how public policy affects people facing breast cancer.

As you prepare to vote on November 3, we encourage you to learn where candidates stand on issues that matter to breast cancer patients and survivors. Consider questions such as:

- Do they support strong, sustained funding for breast cancer research?
- Do they back policies that improve access to screening and diagnostic services?
- Do they support protections for people in treatment or living with metastatic disease?
- Do they listen to the needs of patients, survivors, and advocates in their community?

These are not partisan questions — they are about saving lives.

You can review how Iowa's current congressional delegation voted on key breast cancer issues over the past year on the chart on page 5. Your vote is your voice, and informed voters help shape policies that improve outcomes for everyone affected by breast cancer.

If you need to register or update your voter information, visit the Iowa Secretary of State's website:

https://sos.iowa.gov/elections/voterinformation/voterregistration.html.

CONTINUED FROM PAGE 1

challenges, and identifying people who may benefit from particular studies are all areas where AI could make trials more efficient and inclusive. Better-designed trials can help bring effective treatments to patients more quickly.

AI could also help **translate research into practice** faster. As new evidence emerges, AI tools may assist clinicians in interpreting information and applying it in real-world settings, helping patients benefit from advances sooner.

Important Cautions

Despite its potential, AI also brings important challenges.

First, **AI is not perfect**. It can make mistakes, particularly when trained on limited or unrepresentative data. A system that performs well in one setting may be less accurate in another. Human oversight remains essential.

Second, **AI cannot replace clinicians or researchers**. It does not understand individual circumstances, personal values, or the trade-offs involved in treatment decisions. AI can support decision-making, but it should never be allowed to make decisions on its own.

Third, **bias is a significant concern**. If AI systems are trained primarily on data from certain populations, they may not perform equally well for everyone. This is one reason diverse participation in research and clinical trials remains critical. Equity must be considered from the beginning.

Finally, access to AI technologies is not equal. Not all clinics and research centers have the same resources. As AI becomes more common, it will be important to ensure advances benefit all communities, not only those in settings with significant access to resources.

Tips for Using AI for Health Information

Many people are already using AI tools to learn about symptoms, understand test results, or explore treatment options. Used wisely, AI can be a helpful starting point.

- **Use AI as a starting point**, not a final answer. Confirm information with your oncologist and trusted organizations.
- **Ask for sources**. Reliable information should rely on evidence-based guidelines and reputable health organizations.
- **Protect your privacy**. Avoid entering personal medical information, insurance details, or genetic test results into AI tools.
- **Use AI to prepare for appointments**. It can help explain terminology, summarize articles, and generate questions for your healthcare team.
- **Check the date of the information**. Breast cancer research changes quickly. Currency in conjunction with evidence-based information matters.

AI is a powerful tool, but like all tools, it must be used responsibly. When grounded in science, guided by experts, and used responsibly and thoughtfully, AI has the potential to support the research and advocacy needed to end breast cancer—an outcome that aligns closely with the missions of Beyond Pink TEAM and the National Breast Cancer Coalition.

Sources: This article draws on current evidence from peer-reviewed medical journals, major breast cancer research trials, and guidance from reputable organizations including the National Cancer Institute, the National Comprehensive Cancer Network, and the American Cancer Society.

STATUS OF SUPPORT FOR NBCC PUBLIC POLICY PRIORITIES IOWA CANDIDATES FOR GOVERNOR, U.S. SENATE, AND U.S. HOUSE — 2026 GENERAL ELECTION

(Yellow highlight indicates they have not returned an endorsement as of yet.)

The following data reflects the status of candidate support as of August 30, 2026.

Office for which Candidate is Running/Name/Incumbent or Current Position in Congress	DOD Breast Cancer Research Program *	Metastatic Breast Cancer Access to Care Act **	Endorsement Signed ***
Governor:			
Zach Lahn (R)	*	**	Chose not to endorse
Rob Sand (D)	*	**	Yes
Nicholas Gluba (L)	*	**	Yes
U.S. Senate			
Ashley Hinson (R) – *Currently represents U.S. House District 2*	****	Yes	***
Josh Turek (D)	*	**	No response
Thomas Laehn (L)	*	**	No response
U.S House District 1			
Mariannette Miller-Meeks (R) - *Incumbent*	Yes	Yes	***
Christina Bohannan (D)	*	**	Yes
Michael Bridgford (I)	*	**	Yes
U.S. House District 2			
Joe Mitchell (R)	*	**	Yes
Lindsay James (D)	*	**	Yes
Rick Stewart (L)	*	**	Chose not to endorse
Dave Bushaw (I)	*	**	Yes
U.S. House District 3			
Zach Nunn (R) - *Incumbent*	Yes	Yes	***
Sarah Trone Garriott (D)	*	**	No response
Marco Battaglia (L)	*	**	No response
U.S. House District 4			
Chris McGowan (R)	*	**	No response
Dave Dawson (D)	*	**	No response
Jermaine Decker (I)	*	**	No response

** Applicable only for candidates currently in office, this column indicates whether or not the member of Congress signed the Dear Colleague Letter of Support for funding the DOD Breast Cancer Research Program in the 119th Congress at the level requested by NBCC.*

*** Applicable only for candidates currently in office, this column indicates whether or not the member signed on as a cosponsor of the Metastatic Breast Cancer Access to Care Act (H.R. 2048/S. 3442) in the 119th Congress.*

**** Applicable only for candidates NOT currently in office, this column indicates whether or not the candidate signed a statement of support, endorsing the National Breast Cancer Coalition's Breast Cancer Public Policy Platform. Otherwise, it is noted that there was either no response from that office or the candidate informed us he/she chose not to endorse.*

***** As representative of Iowa District 2 in the 119th Congress, Rep. Hinson declined to sign the letter because she serves on the Committee of Jurisdiction. Her office reports that she supports the funding in committee.*

UPCOMING OPPORTUNITIES TO SUPPORT THE BPT

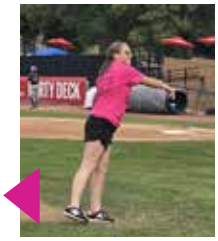
AMVETS Ladies Auxiliary Steak Night – October 3, beginning at 5:30 pm at AMVETS Post 49, 1934 Irving Street, Cedar Falls. Proceeds go to the BPT.

Grundy Center's Girls Night Out – October 8, 4:30-7:30. Stop by our table and learn more about BPT and what it is doing for the community.

Laurel Boutique Shopping For a Cause, 106 Main Street, Cedar Falls – Thursday, November 5 – All Day, 10 am to 8 pm. Get an early start on your holiday purchases and support the Beyond Pink TEAM.

BPT IN OUR COMMUNITIES

On June 13, the **Jesup Dairy Cone** hosted a FREE ice cream social. Dairy Cone owner (Ron Rogers) and Tournier's Recycling (Dean and Cody Tournier) in Independence donated ice cream. Free-will donations went to BPT.



On July 24, the Annual **Waterloo Bucks** hosted an online Jersey auction to benefit the Beyond Pink TEAM. BPT member and survivor, Katy Baumgardner threw out the first pitch. BPT members were on hand to share the BPT mission and how they support breast cancer survivors in the area.

BPT members were on hand at the **Pridefest** event sharing their mission and how they support breast cancer survivors in the area.

A VOLUNTEER'S CONNECTION TO BEYOND PINK TEAM

BY JULIE BURGART

My connection to the Beyond Pink TEAM began with my cousin, who has been a breast cancer survivor for over 20 years. When she was first diagnosed, I wanted to find a way to show my support, so I participated in the Susan G Komen 3-Day Walk. That experience opened my eyes to how many people and families are affected by breast cancer.

Shortly after my cousin's diagnosis of breast cancer, she became a member of the Beyond Pink TEAM. As I listened to her talk about the organization and all the positive things they do in the community, I became interested in getting involved. I joined the organization last fall.

Earlier this year, I agreed to become the Beyond Pink TEAM Liaison. Taking on this role allows me to give back and support those whose lives have been affected by breast cancer. Although I have not personally experienced breast cancer, I believe everyone has a role to play in supporting survivors, their families, and those currently facing a diagnosis.

The Beyond Pink Team raises awareness, provides education, offers support, advocates for those affected, and promotes prevention throughout the community. I'm grateful to be a part of this organization and hope that, with enough volunteers and community support, we can grow the Beyond Pink TEAM's reach and make an even greater impact!

Monetary gifts received from July 1, 2016, through August 31, 2026, by the Beyond Pink TEAM.

FUNDRAISERS

Waterloo Bucks Jersey Auction

SUPPORTERS

Jeff Coons
Jan Jasnowski
Rachel Kratchmer
Marty Mullnix
PEO Chapter IX
Cheryl Thayer
Joy & Rod Thorson

MEMORIAL GIFTS

In memory of Shawn Bartz
By Tim Eschweiler
In memory of Mary Aelwine
By Marian Gravlin
In memory of Leian McConeghey Kammeyer
By Donna McConeghey

The 20th Annual Pink Ribbon Run is proudly supported by our generous Warrior Sponsors: Oakridge Real Estate, Community Auto Group Gilead, UnityPoint, and Bambinos

Every dollar raised makes a meaningful difference. A breast cancer diagnosis often brings unexpected expenses beyond medical care, and your support helps ease that burden for those who need it most.

Join us on October 3 or take part virtually from October 3-10. Whether you register as an individual, form a team, or fundraise in support of the cause, every participation option helps make an impact.

- Register at: www.beyondpinkteam.org
- Registration is $40
- Packet pick-up will be held at the Community Main Street Office, 310 E 4th Street, Cedar Falls
    - Friday | October 2 | 3-7 pm
    - Saturday | October 3 | 6:30-7:15 am

RACE DAY SCHEDULE

8:00 am – Survivor Photo
8:10 am – Welcome & Survivor Story
8:15 am – Pre-race Announcements

LINE UP!

8:30 am – Race Starts
9:30 am – Post-Race Awards, Team Prizes & Thank You!

Except for packet pick-up and the location of the porta-potties, which are both at the Community Main Street Office, all race day activities will take place at River Place Plaza, 2nd and State Streets

For the safety of all participants, dogs, roller blades, scooters, and bikes are not permitted on the race route. Strollers and wagons are welcome to assist our littlest participants.

RACE CONTACT INFO
Contact Angela at pinkribbonruncf@gmail.com

DATES TO REMEMBER *OCTOBER 2026 - JANUARY 2027*

October 5, 1:30 pm
Touch of Courage
Breast Cancer Support Group
Community Foundation of NE Iowa
3117 Greenhill Circle, Cedar Falls
Pat: 319-610-4424 for information

October 6, 1:30 pm
Care & Share Cancer Support Group
MercyOne Cancer Treatment Center
200 E Ridgeway Ave, Waterloo
Sarah: 319-272-2816 for meeting info

October 13, 6:30 pm
Waverly Breast Cancer Support Group
Waverly Health Center
Tendrils Rooftop Garden
312 9th St. SW, Waverly
Emily: 319-352-4926 for information

October 24, 1:30 pm
All Cancer Social Group
New Aldaya, Main Street Bar/Cafeteria
7511 University Ave, Cedar Falls
Carol: 319-610-3250 for information

November 2, 1:30 pm
Touch of Courage
Breast Cancer Support Group
Community Foundation of NE Iowa
3117 Greenhill Circle, Cedar Falls
Pat: 319-610-4424 for information

November 3, 1:30 pm
Care & Share Cancer Support Group
MercyOne Cancer Treatment Center
200 E Ridgeway Ave, Waterloo
Sarah: 319-272-2816 for meeting info

November 10, 6:30 pm
Waverly Breast Cancer Support Group
Waverly Health Center
Tendrils Rooftop Garden
312 9th St. SW, Waverly
Emily: 319-352-4926 for information

November 21, 1:30 pm
All Cancer Social Group
New Aldaya, Main Street Bar/Cafeteria
7511 University Ave, Cedar Falls
Carol: 319-610-3250 for information

December 1, 1:30 pm
Care & Share Cancer Support Group
MercyOne Cancer Treatment Center
200 E Ridgeway Ave, Waterloo
Sarah: 319-272-2816 for meeting info

December 7, 1:30 pm
Touch of Courage
Breast Cancer Support Group
Community Foundation of NE Iowa
3117 Greenhill Circle, Cedar Falls
at: 319-610-4424 for information

December 8, 6:30 pm
Waverly Breast Cancer Support Group
Waverly Health Center
Tendrils Rooftop Garden
312 9th St. SW, Waverly
Emily: 319-352-4926 for information

January 4, 2027, 1:30 pm
Touch of Courage
Breast Cancer Support Group
Community Foundation of NE Iowa
3117 Greenhill Circle, Cedar Falls
Pat: 319-610-4424 for information

January 5, 2027, 1:30 pm
Care & Share Cancer Support Group
MercyOne Cancer Treatment Center
200 E Ridgeway Ave, Waterloo
Sarah: 319-272-2816 for meeting info

January 12, 2027, 6:30 pm
Waverly Breast Cancer Support Group
Waverly Health Center
Tendrils Rooftop Garden
312 9th St. SW, Waverly
Emily: 319-352-4926 for information

January 19, 5:00-7:00 pm
BPT All Cancer Survivor Group
NEW LOCATION TBD
Angela: 319-231-3143 for info & location

NEW SUPPORT GROUP Carol Menefee, a breast cancer survivor, leads an all-cancer social group at New Aldaya, 7511 University Avenue. They meet monthly on a Saturday at 1:30 pm in New Aldaya's Main Street area, near the bar or cafeteria. The meetings are informal, a time to socialize and share stories. There will be no meeting in December. The 2027 schedule is not set yet. Call Carol at 319-610-3250 for more information. ***Everyone is welcome!***

RESOURCES

Information, support, counseling, and educational materials are available from the following:

Beyond Pink TEAM is a local breast cancer organization providing a variety of services. Our website lists services we provide as well as other services available in the Cedar Valley. **beyondpinkTEAM.org**
You can also find us on Facebook.

Living Beyond Breast Cancer includes a helpline, newsletter, and information. **LBBC.org**
Survivors Helpline: 888-753-5222

Cancer Care is a national nonprofit organization offering counseling, support, financial assistance, and education to individuals with cancer and their families. **cancercare.org**

Iowa Cancer Consortium offers cancer information and links to resources in Iowa. **canceriowa.org**

American Cancer Society offers cancer information and services. **cancer.org**.

National Breast Cancer Coalition's mission is to eradicate breast cancer by focusing the government, research institutions, and consumer advocates on breast cancer. It encourages advocacy for action and change. **stopbreastcancer.org**.

National Comprehensive Cancer Network® (NCCN) provides state-of-the-art treatment information in easy-to-understand language to people with cancer and their caregivers. **NCCN.org/patients**

National LGBT Cancer Network works to improve the lives of LGBT cancer survivors and those at risk. **cancer-network.org**

National Cancer Institute offers information about cancer, breast cancer, clinical trials, cancer statistics, research and funding, and the latest news. They will also answer your questions by calling **1-800-4CANCER**. **cancer.gov**

National Cancer Institute provides dictionaries of cancer terms, genetics terms, and cancer drugs. **cancer.gov/publications/dictionaries**

Young Survival Coalition connects with other young women diagnosed with breast cancer. **youngsurvival.org**

CancerChoices is an independent, science-informed resource, helping you make sense of your choice in integrative cancer care. **cancerchoices.org**

The Cancer Journey provides short 3–5-minute videos featuring survivors, doctors, social workers, and advocates who share their experiences of diagnosis, treatment, after-treatment, living with metastatic cancer, and advocating to end this disease. **beyondpinkteam.org/the-cancer-journey**

MISSION | Beyond Pink TEAM is a nonprofit organization whose mission is to provide breast cancer prevention, education, support, and advocacy for comprehensive, quality health care for ALL in the Cedar Valley and surrounding communities.

Connect with us . . . We would love to have your energy and passion as part of the Beyond Pink TEAM! We are an all-volunteer organization, which makes us unique. It's amazing what we can accomplish working together.

To become a member of the BPT, complete the form below and send $10 to the address below. You will receive a Volunteer Opportunity Form to match you with your interests.

Financial support is always needed. If you would like to make a donation to the BPT, you can make a check payable to: **Beyond PInk TEAM** and mail to address below or use **VENMO**.

Name _____Phone_____

Address _____City _____ State _____ Zip _____

Email _____

ADDRESS
Beyond Pink TEAM
1407 Asbury Lane
Waterloo, IA 50701

VENMO
@beyondpink-jeanne

Scan here for more information on the Beyond Pink TEAM.

BeyondPinkTEAM.org