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Nota di contenuto	FrontMatter -- Reviewers -- Acknowledgments -- Contents -- List of Boxes, Figures, and Tables -- Executive Summary -- 1 Introduction -- 2 Concepts, Methods, and Data Sources -- 3 Preventing Cancer -- 4 Detecting Cancer Early -- 5 Diagnosing Cancer -- 6 Treating Cancer -- 7 Crosscutting Issues in Assessing the Quality of Cancer Care -- 8 Looking Ahead to the Implementation of Quality-of-Cancer-Care Measures -- APPENDIXES -- APPENDIX A Sources of Cancer-Related Clinical Guidelines and Quality Indicators -- APPENDIX B Sources of Data: Surveys and Datasets -- APPENDIX C Glossary, Abbreviations, and

## Acronyms.

### Sommario/riassunto

Shortly after 1998, leading members of Georgia's government, medical community, and public-spirited citizenry began considering ways in which some of Georgia's almost \$5 billion, 25-year settlement from the tobacco industry's Master Settlement Agreement with the 50 states could be used to benefit Georgia residents. Given tobacco's role in causing cancer, they decided to create an entity and program with the mission of making Georgia a national leader in cancer prevention, treatment, and research. This new entity--called the Georgia Cancer Coalition, Inc. (GCC)-- and the state of Georgia subsequently began implementing a far-reaching state cancer initiative that includes five strategic goals: (1) preventing cancer and detecting existing cancers earlier; (2) improving access to quality care for all state residents with cancer; (3) saving more lives in the future; (4) training future cancer researchers and caregivers; and (5) turning the eradication of cancer into economic growth for Georgia. Assessing the Quality of Cancer Care identifies a set of measures that could be used to gauge Georgia's progress in improving the quality of its cancer services and in reducing cancer-related morbidity and mortality.