

BREAST CENTRES NETWORK

Synergy among Breast Units

Hospital Universitario De Salamanca - Salamanca, Spain

General Information



New breast cancer cases treated per year 230

Breast multidisciplinarity team members 13 Radiologists, surgeons, pathologists, medical oncologists, radiotherapists and nurses

Clinical Director: Manuel Ramos Boyero, MD, PhD

The Breast Unit of Salamanca University Hospital is part of the surgical department and provides multidiscipliary integrated breast cancer care since 1995. A team of breast oncoplastic surgeons, radiologists, medical oncologists, radiotherapy oncologists, pathologists, nurses, nuclear specialists, pathologists, radiologist, reconstructive plastic surgeons, geneticists, breast nurses and a psycho-oncologist treats patients according to most up to date international guidelines and clinical paths. In our Breast Unit we assist all the cases coming from the programme of breast cancer screening. Last year, we have treated 230 patients with newly diagnosed breast cancer disease, along with surgery for benign breast disease, while our outpatient diagnostic section saw about 5500 patients. All patients are discussed in the multidisciplinary (MDM) meeting before treatment starts, and in the postoperative MDM after surgery. Breast-conserving surgery is our goal with the aid of oncoplastic tecnics and intraoperative ultrasound. In selected patients, when a mastectomy is necessary, we indicate skin-sparing or nipple-sparing mastectomy wiht immediate reconstruction.

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Available services

Vuclear Medicine Social Workers Radiology Rehabilitation Mutritional Counselling Breast Surgery Reconstructive/Plastic Surgery Genetic Counselling Survivorship Groups Z Data Management Sexual Health Counselling **Pathology** Supportive and Palliative Care Medical Oncology Psycho-oncology **Radiotherapy** Breast Nurses Integrative Medicine Radiology **V** Dedicated Radiologists 3 Available imaging equipment Available breast tissue sampling equipment Mammograms per year 9000 Mammography Breast radiographers Stereotactic Biopsy (Mammography VItrasound Screening program quided) Core Biopsy (Tru-cut) Magnetic Resonance Imaging (MRI) Verification for non-palpable breast lesions Vacuum assisted biopsy Available work-up imaging on specimen equipment 🗹 Ultrasound-guided biopsy Axillary US/US-guided Fine-needle aspiration biopsy Computer Tomography **FNAB** (FNAB, cytology) **VItrasound** Clinical Research Core Biopsy Magnetic Resonance Imaging (MRI) Vacuum assisted biopsy V PET/CT scan MRI-guided biopsy Primary technique for localizing Core Biopsy non-palpable lesions Vacuum assisted biopsy Hook-wire (or needle localization) Charcoal marking/tattooing ROLL: radio-guided occult lesion localization

Breast Surgery

- New operated cases per year (benign and malignant) 430
 Dedicated Breast Surgeons 4
 Surgeons with more than 50 surgeries per year 3
 Breast Surgery beds 4
 Breast Nurse specialists 1
 Outpatient surgery
 Intra-operative evaluation of sentinel node
 Reconstruction performed by Breast Surgeons
- Clinical Research

Primary technique for staging the axilla

- Axillary lymph node dissection
- Sentinel lymph node biopsy:
- Blue dye technique
- Radio-tracer technique
- V Blue dye + Radio-tracer
- Axillary sampling

Reconstructive/Plastic Surgery

Reconstructive/Plastic surgeons	1 Type of breast reconstructive surgery available	
Immediate Reconstruction available	Remodelling after breast-conserving surgery	
	Reconstruction after mastectomy:	
	Two-stage reconstruction (tissue expander followed by implant)	
	One-stage reconstruction	
	Autogenous tissue flap	
	🗹 Latissimus dorsi flap	
	Iransverse rectus abdominis (TRAM)	
	🗹 Free-flaps (free TRAM, DIEP, SIEA, gluteal, etc.)	
	Surgery on the contralateral breast for symmetry	
	Oncoplastic breast conserving surgery	

Pathology

Dedicated Breast Pathologists	1 Other special studies available
Available studies	M Fluorescence in-situ Hybridization for HER-2 gene (FISH)
🗹 Cytology	🗹 Oncotype Dx (21-gene assay)
🗹 Haematoxylin & eosin section (H&E)	MammaPrint (70-gene microarray)
Surgical specimen	Prediction Analysis of Microarray 50-gene set (PAM 50)
Sentinel node	Parameters included in the final pathology report
Frozen section (FS)	Pathology stage (pT and pN)
Surgical specimen	M Tumour size (invasive component in mm)
Sentinel node	Mistologic type
✓ Immunohistochemistry stain (IHC)	🗹 Tumor grade
Estrogen receptors	Kerver version and the second status Kerver and the second status Kerver and the second status statu
Progesterone receptors	MER-2/neu receptor status
HER-2	Meritumoural/Lymphovascular invasion
✓ Ki-67	Margin status
	Size and weight of spcimen

Medical Oncology

- Dedicated Breast Medical Oncologists 2
- Outpatient systemic therapy
- Clinical Research

Radiotherapy

- Dedicated Radiation Oncologists
- Clinical Research

Available techniques after breast-conserving surgery (including experimental)

Whole-Breast RT (WBRT)

- Partial breast irradiation (PBI):
- External beam PBI
- Interstitial brachytherapy

Targeted brachytherapy (MammoSite, SAVI applicator, other devices)

□ Intra-operative RT (IORT)

Multidisciplinary Meeting (MDM) / Tumour Board (TB)

Regular MDM/TB for case management discussion	Specialties/services participating in MDM/TB
Twice a week	🗹 Radiology
🗹 Weekly	Marast Surgery
Every two weeks	🗹 Reconstructive/Plastic Surgery
Other Schedule	M Pathology
Cases discussed at MDM/TB Preoperative cases	Medical Oncology
	🗹 Radiotherapy
	Genetic Counselling
Postoperative cases	Marast Nurse Service
	V Psycho-oncology

Further Services and Facilities

Nuclear Medicine

- V Lymphoscintigraphy
- 🗹 Bone scan
- Positron Emission Tomography (PET)
- V PET/CT scan

Rehabilitation

- Prosthesis service
- 🗹 Physiotherapy
- V Lymph-oedema treatment

Genetic Counselling

Specialist Providing Genetic Counselling/Risk assessment service:

- Dedicated Clinical Geneticist
- 🗹 Medical Oncologist
- Breast Surgeon
- General Surgeon
- Gynaecologist
- Senetic Testing available
- Surveillance program for high-risk women

Data Management

- ☑ Database used for clinical information
- 🗌 Data manager available

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Radiotherapy			
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How to reach us



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From airport:

From Barajas Airport (Madrid) there is a direct bus service to the city of Salamanca.

By train:

From Madrid you can use the middle-distance train from the Railway Station of Madrid-Chamartin, c/ Agustín de Foxa, s/n.

By bus or sub-way/underground:

From Madrid you can use the buses of the Avanza line, which have their Bus Station at Barajas Airport (Madrid) or Bus Station (Estacion Sur, Madrid), c/ Méndez Álvaro, 83.

By car:

From Madrid you can use the Highway A-6, AP-51 and AP-50. **Last modified:** 13 November 2015