



BREAST CENTRES NETWORK

Synergy among Breast Units

ASUITS - SSD Breast Unit - Trieste, Italy

General Information

The breast unit of Trieste is located in a functional women department scheduled on a multidisciplinary approach. It takes care of breast pathology from diagnosis to treatment and follow-up according to a pathway which relies on international guidelines for breast pathology, diagnosis and treatment. The breast unit of Trieste obtained EUSOMA Certification in June 2016 with confirmation in June 2019.

ASUITS - SSD Breast Unit

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CERTIFICATION(S) ACCREDITATION(S)

BCCERT - Breast Centres Certification

Expiration date: 06 June 2022



Certification document (original lang.)

Available services

- ✓ Radiology
- ✓ Breast Surgery
- ✓ Reconstructive/Plastic Surgery
- ✓ Pathology
- Medical Oncology

✓ Clinical Research

✓ Radiotherapy

- ✓ Nuclear Medicine
- Rehabilitation
- ✓ Genetic Counselling
- ✓ Data Management
- ✓ Psycho-oncology
- ✓ Breast Nurses

- ✓ Social Workers
- ✓ Nutritional Counselling
- ✓ Survivorship Groups
- ✓ Sexual Health Counselling
- ✓ Supportive and Palliative Care
- ✓ Integrative Medicine

Radiology

- ✓ Dedicated Radiologists
 ✓ Mammograms per year
 ✓ Breast radiographers
 ✓ Screening program
 ✓ Verification for
 non-palpable breast lesions
 on specimen
 ✓ Axillary US/US-guided
 FNAB
- Available imaging equipment Mammography Ultrasound Magnetic Resonance Imaging (MRI) 3D Mammography Available work-up imaging equipment Computer Tomography Ultrasound Magnetic Resonance Imaging (MRI) ✓ PET/CT scan Primary technique for localizing non-palpable lesions ☐ Hook-wire (or needle localization) Charcoal marking/tattooing ROLL: radio-guided occult lesion localization
- Available breast tissue sampling equipment

 Stereotactic Biopsy (Mammography guided)
 Core Biopsy (Tru-cut)
 Vacuum assisted biopsy
 Ultrasound-guided biopsy
 Fine-needle aspiration biopsy (FNAB, cytology)
 Core Biopsy
 Vacuum assisted biopsy
 MRI-guided biopsy
 Core Biopsy
 Core Biopsy
 Vacuum assisted biopsy
 Vacuum assisted biopsy

Breast Surgery

✓ New operated cases per year (benign and malignant)
350

✓ Dedicated Breast Surgeons
3

✓ Surgeons with more than 50 surgeries per year
2

✓ Breast Surgery beds
4

✓ Breast Nurse specialists
3

✓ 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
 - ☐ Blue dye + Radio-tracer
- Axillary sampling

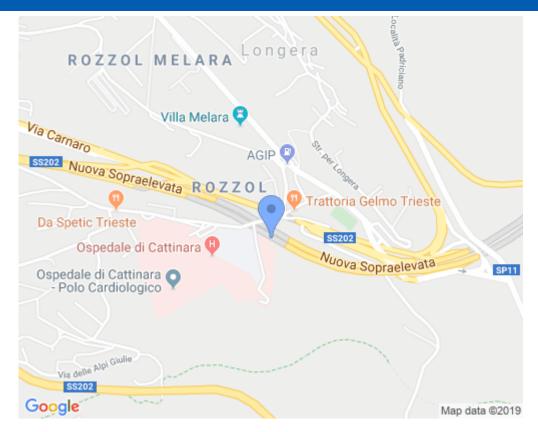
Reconstructive/Plastic surgeons	2	Type of breast reconstructive surgery available
Immediate Reconstruction available		✓ Remodelling after breast-conserving surgery
		 ✓ Reconstruction after mastectomy:
		 Reconstruction after mastectomy: Two-stage reconstruction (tissue expander followed by
		implant)
		✓ One-stage reconstruction
		Autogenous tissue flap
		Latissimus dorsi flap
		Transverse rectus abdominis (TRAM)
		✓ Free-flaps (free TRAM, DIEP, SIEA, gluteal, etc.)
		lacksquare Surgery on the contralateral breast for symmetry
thology		
Dedicated Breast Pathologists	3	Other special studies available
Available studies		☑ Fluorescence in-situ Hybridization for HER-2 gene (FISH)
✓ Cytology		
☑ Cytology ☑ Haematoxylin & eosin section (H&E)		Oncotype Dx (21-gene assay)
✓ Haematoxylin & eosin section (H&E) ✓ Surgical specimen		MammaPrint (70-gene microarray)
✓ Sentinel node		Prediction Analysis of Microarray 50-gene set (PAM 50)
✓ Core biopsy		Parameters included in the final pathology report
✓ Frozen section (FS)		☑ Pathology stage (pT and pN)
Surgical specimen		lacksquare Tumour size (invasive component in mm)
Sentinel node		☑ Histologic type
✓ Immunohistochemistry stain (IHC)		☑ Tumor grade
✓ Estrogen receptors		✓ ER/PR receptor status
✓ Progesterone receptors		✓ HER-2/neu receptor status
☑ HER-2		$ec{\mathscr{L}}$ Peritumoural/Lymphovascular invasion
		☑ Margin status
		☑TILs
edical Oncology		

adiotherapy	
☑ Dedicated Radiation Oncologists	Available techniques after breast-conserving surgery
☑ Clinical Research	(including experimental)
	✓ Whole-Breast RT (WBRT)
	✓ Partial breast irradiation (PBI):
	External beam PBI
	☐ Interstitial brachytherapy
	\square Targeted brachytherapy (MammoSite, SAVI applicator other devices)
	☑ Intra-operative RT (IORT)
lultidisciplinary Meeting (MDM) / Tumour Board	(TB)
Regular MDM/TB for case management discussion	Specialties/services participating in MDM/TB
☐ Twice a week	☑ Radiology
✓ Weekly	✓ Breast Surgery
Every two weeks	Reconstructive/Plastic Surgery
Other Schedule	✓ Pathology
Cases discussed at MDM/TB	✓ Medical Oncology
	✓ Radiotherapy
Preoperative cases	✓ Genetic Counselling
Postoperative cases	✓ Breast Nurse Service
	✓ Psycho-oncology
	✓ gynecologist
urther Services and Facilities	
Nuclear Medicine	Genetic Counselling
✓ Lymphoscintigraphy	Specialist Providing Genetic Counselling/Risk assessment service:
₩ Bone scan	✓ Dedicated Clinical Geneticist
Positron Emission Tomography (PET)	☐ Medical Oncologist
▼ PET/CT scan	☐ Breast Surgeon
Rehabilitation	General Surgeon
✓ Prosthesis service	Gynaecologist
✓ Physiotherapy	✓ Genetic Testing available
☑ Lymph-oedema treatment	☑ Surveillance program for high-risk women
	Data Management
	lacksquare Database used for clinical information
	☑ Data manager available

Contact details

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How to reach us



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From airport:

Trieste Airport (Friuli Venezia Giulia) located in Ronchi dei Legionari (40 Km from Trieste)

By train:

Trieste Central Station

By bus or sub-way/underground:

Bus n. 22 from the Railway Station

By car:

Highway following indications to Trieste - Cattinara Hopsital

Last modified: