



# **BREAST CENTRES NETWORK**

Synergy among Breast Units

# MAMARJ. CLINICA DE MASTOLOGIA - Nova Iguaçu, Brazil

# General Information

Image: MAMARJ. CLINICA DE MASTOLOGIA

New breast cancer cases treated per year

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

Clinical Director: CARLOS RICARDO CHAGAS, PhD

MAMARJ. CLÍNICA DE MASTOLOGIA. RIO DE JANEIRO -BRAZIL BREAT CANCER CENTER.

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+5521999515007 E-MAIL: carlosricardochagas@gmail.com DIRECTION: CARLOS RICARDO CHAGAS PHD

PLAY AN ACTIVE ROLE IN PROPOSAL OF BREAST CANCER GUIDELINES, CONTRIBUTE TO THE

PROCESS OF TRAINING ACTIVITIES AND STANDISING BREAST CANCER CARER. A GREAT INTEREST

FOR HUMANIZATION ATTENTION AND PRECOCES DIAGNOSIS.

### MAMARJ. CLINICA DE MASTOLOGIA

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### Available services

- ✓ Radiology
- ✓ Breast Surgery
- ☑ Reconstructive/Plastic Surgery
- ✓ Pathology
- Medical Oncology
- ✓ 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**
- ✓ Clinical Research

# Available imaging equipment

- Mammography
- ✓ Ultrasound
- Magnetic Resonance Imaging (MRI)

# 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

5

60

1

ROLL: radio-guided occult lesion localization

# Available breast tissue sampling equipment

- Stereotactic Biopsy (Mammography quided)
  - ☑ 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
- ☐ Vacuum assisted biopsy

### **Breast Surgery**

- ☑ New operated cases per year (benign and malignant) 136
- ✓ Dedicated Breast Surgeons✓ Surgeons with more than 50 surgeries per year
- ✓ Breast Surgery beds
- ☑ Breast Nurse specialists
- ✓ 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

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## Reconstructive/Plastic Surgery Reconstructive/Plastic surgeons 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 ✓ Transverse rectus abdominis (TRAM) ☐ Free-flaps (free TRAM, DIEP, SIEA, gluteal, etc.) Surgery on the contralateral breast for symmetry **Pathology** Dedicated Breast Pathologists 2 Other special studies available Available studies ✓ 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 Core biopsy ✓ Pathology stage (pT and pN) ✓ Frozen section (FS) ✓ Tumour size (invasive component in mm) ✓ Surgical specimen Mistologic type ✓ Sentinel node ✓ Tumor grade Immunohistochemistry stain (IHC) ✓ ER/PR receptor status Estrogen receptors ✓ HER-2/neu receptor status Progesterone receptors Peritumoural/Lymphovascular invasion ☑ HER-2 Margin status ✓ Ki-67 ☑ PATHOLOGIC COMPLET RESPONSE **Medical Oncology** Dedicated Breast Medical Oncologists Outpatient systemic therapy Clinical Research

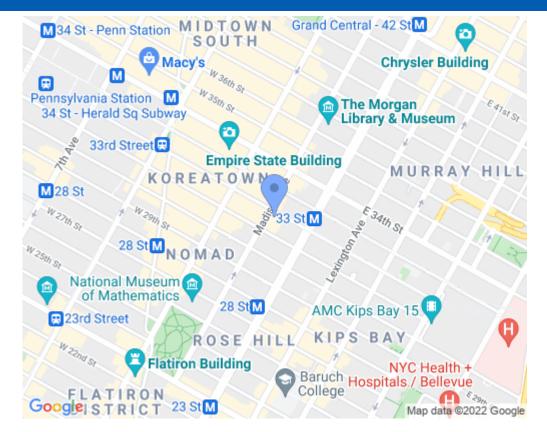
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adiotherapy	
<ul><li>✓ Dedicated Radiation Oncologists</li><li>✓ Clinical Research</li></ul>	Available techniques after breast-conserving surgery (including experimental)
	✓ Whole-Breast RT (WBRT)
	Partial breast irradiation (PBI):
	External beam PBI
	☐ Interstitial brachytherapy
	$\square$ Targeted brachytherapy (MammoSite, SAVI applicator, other devices)
	$\square$ Intra-operative RT (IORT)
lultidisciplinary Meeting (MDM) / Tumour Board	(ТВ)
Regular MDM/TB for case management discussion	Specialties/services participating in MDM/TB
☐ Twice a week	<b>☑</b> 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
	☑ NUCLEAR MEDCINE, INTERATIVE MEDICINE, BREASR SURVIVORS
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
✓ Physiotherapy  ✓ Lymph-oedema treatment	Surveillance program for high-risk women
	Data Management
	☑ Database used for clinical information
	Data manager available

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From airport:

YES

By train:

YES

By bus or sub-way/underground:

YES

By car:

YES

Last modified: