



BREAST CENTRES NETWORK

Synergy among Breast Units

Clinical Centre 'Kragujevac' - Kragujevac, Serbia

General Information

Image: Clinical Centre 'Kragujevac'

New breast cancer cases treated per year 170

Breast multidisciplinarity team members 16

Radiologists, surgeons, pathologists, medical oncologists, radiotherapists and nurses

In our Center the up-to-date treatment of breast cancer is applied, in accordance with the consensuses and guidelines of the relevant global and European associations, such as St. Gallen Conference, ESSO, ESMO, ASCO and others. For every breast cancer patient the decision on the treatment module is made by the multidisciplinary team composed of medical oncologist, surgeon, radiologist, radiotherapist and pathologist, gathering twice a week. Breast surgery in our Center is performed since 1980, and the doctors have been educated in the relevant domestic and international centers. In 2005 the biopsy of sentinel lymph nodes, breast conserving surgery, the consulting with the plastic surgery specialists and primary breast reconstruction was introduced. Our Center is applying all the diagnostic methods of palpable and non-palpable breast lesions, together with the invasive procedures such as CORE biopsy and SVAB biopsy, performed by six educated radiologists. End of 2014 and beginning of 2015, the doctors in our Center started independently to introduce, as a routine procedure, neoadjuvant therapy of breast cancer.

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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 ROLL: radio-guided occult lesion localization	Available breast tissue sampling equipment Stereotactic Biopsy (Mammography guided) Core Biopsy (Tru-cut) Vacuum assisted biopsy Iltrasound-guided biopsy Fine-needle aspiration biopsy (FNAB, cytology) Vacuum assisted 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 ar	nd malignant) 206 Primary techniqu	e for staging the axilla
✓ Dedicated Breast Surgeons	4	e ioi staying the axilla
✓ Surgeons with more than 50 surgeries p		node dissection
☑ Breast Surgery beds	8 Sentinel lymph	node biopsy:
☐ Breast Nurse specialists	☐ Blue dye tech	nique
Outpatient surgery	Radio-tracer t	rechnique
✓ Intra-operative evaluation of sentinel no	ode ☑ Blue dye + Ra	adio-tracer

☐ Axillary sampling

☐ Reconstruction performed by Breast Surgeons

Clinical Research

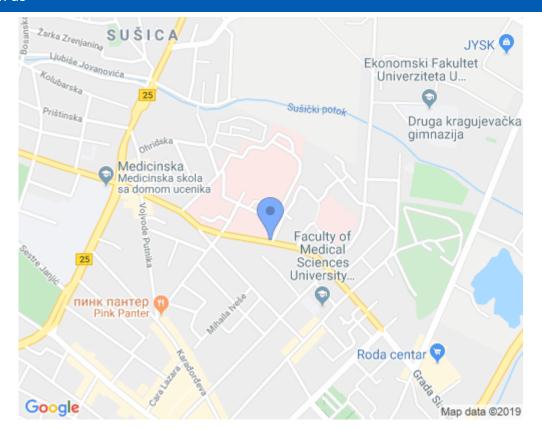
Reconstructive/Plastic Surgery Reconstructive/Plastic surgeons Type of breast reconstructive surgery available ✓ Immediate Reconstruction available Remodelling after breast-conserving surgery ☑ Reconstruction after mastectomy: Two-stage reconstruction (tissue expander followed by implant) ✓ One-stage 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 3 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 ✓ perineural invasion, stromal desmoplasia, periductal elastosis **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)
Similar Research	₩ Whole-Breast RT (WBRT)
	✓ Whole-breast RT (WBRT) ✓ Partial breast irradiation (PBI):
	External beam PBI
	☐ Interstitial brachytherapy
	☐ Targeted brachytherapy (MammoSite, SAVI applicator, other devices)
	\square Intra-operative RT (IORT)
Multidisciplinary Meeting (MDM) / Tumour Board	(ТВ)
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
Further Services and Facilities	
Nuclear Medicine	Genetic Counselling
✓ Lymphoscintigraphy	Specialist Providing Genetic Counselling/Risk assessment
✓ Bone scan	service: Dedicated Clinical Geneticist
\square Positron Emission Tomography (PET)	Medical Oncologist
PET/CT scan	☐ Breast Surgeon
Rehabilitation	General Surgeon
Dreathagis garving	Gynaecologist
Prosthesis service	
M Physiotherapy	Genetic Testing available
Lymph-oedema treatment	☐ Surveillance program for high-risk women Data Management
	Database used for clinical information
	Data manager available

Contact details

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How to reach us



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From airport:

The distance between the International Airport Nikola Tesla in Belgrade and Clinical Centre 'Kragujevac' is about 155 km by road E75 and about 128 km by roads 25 and E75.

By train:

From the central train station Kragujevac to the Clinical Centre 'Kragujevac' is about 1.5 km.

By bus or sub-way/underground:

From the central bus station Kragujevac to the Clinical Centre 'Kragujevac' it is about 1.5 km.

Last modified: