



BREAST CENTRES NETWORK

Synergy among Breast Units

Surgical Oncology/Clinical Center Sarajevo - Sarajevo, Bosnia and Herzegovina

General Information



New breast cancer cases treated per year

200

Breast multidisciplinarity team members

24

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

Clinical Director: Šefik Bešlic, MD

The full name of the Clinic is 'Oncology and Glandular Surgery Clinic'. At the beginning, in 1956, the Clinic was made up of just the surgery division that then became wards and department. Since then, the Clinic has been evaluated in many ways, treating patients even during the three and a half year long siege of the city of Sarajevo. After the new organization of our Clinical center, the Clinic was transferred to the location of "Old Surgery" where it is based now. Since 2003, Primaries Dr. Šefik Bešlic has been nominated as the Head of the Clinic and the Clinic itself, along with all previous activities, has developed its range of operational treatments regarding oncology surgery. Within the Clinic there are two standard patient wards with 29 beds, half intensive care department and one suit. For outpatients we have a specialist ambulance for examinations. Clinic has its own operational theatre with corresponding equipment.

Surgical Oncology/Clinical Center Sarajevo

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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

FNAB

Clinical Research

☑ Dedicated Radiologists	1
Mammograms per year	2000
✓ Breast radiographers	
Screening program	
✓ Verification for	
non-palpable breast lesions	
on specimen	
Axillary US/US-guided	

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 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)	420
✓ Dedicated Breast Surgeons	6
☑ Surgeons with more than 50 surgeries per year	3
☑ Breast Surgery beds	29
✓ Breast Nurse specialists	15
☑ 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 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 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 **Medical Oncology** Dedicated Breast Medical Oncologists 3 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	(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
✓ Positron Emission Tomography (PET)	
☑ PET/CT scan	Medical Oncologist
Rehabilitation	☐ Breast Surgeon ☐ General Surgeon
	General Surgeon Gynaecologist
Prosthesis service	_
Physiotherapy	Genetic Testing available
☑ Lymph-oedema treatment	\square Surveillance program for high-risk women
	Data Management
	☑ Database used for clinical information
	☐ Data manager available

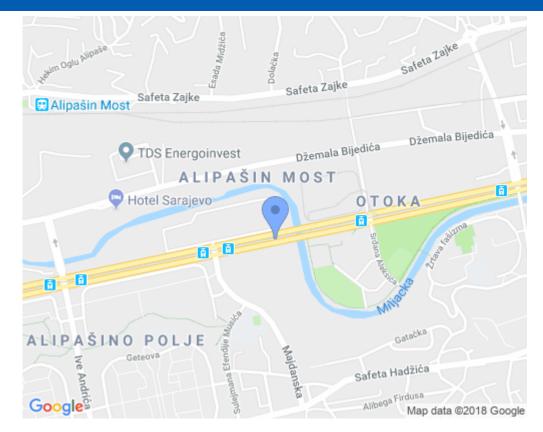
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How to reach us



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From airport:

At Sarajevo airport take a taxi to reach the Clinical Center (30 min).

By train:

Railway station is located close to the Clinical center (15 min. walk or take a taxi).

By bus or sub-way/underground:

Bus number 14 and 17 will take you directly from the city center to the Clinical Center.

By car:

Arriving from Zenica (Northwest) take Alipašina street, then turn left to Bolnicka st.

Direction Mostar (west) take Meša Selimovic blvd. and straight ahead to Zmaja od Bosne, Hiseta st. turn left in Alipašina st. and then turn right to Bolnicka st.

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