

Conference Overview



7:00 – 8:00 AM		Pre-Conference Breakfast		
Saturday, March 14, 2009				
7:45 AM – 5:45 PM Surgical Management of Breast Disease Course	7:45 AM – 5:30 PM Hereditary Breast and Ovarian Cancer:2009 Update	7:45 AM – 5:30 PM New! Breast Cancer Navigator Certification Course	8:00 AM – 5:30 PM New! Transition to Digital Mammography 2009	8:00 AM – 5:30 PM CBE Certification Course
Sunday, March 15, 2009				
—	7:45 AM – 12:30 PM Hereditary Breast and Ovarian Cancer Course	8:30 – 10:00 AM Breast Cancer Navigator Certification Testing	—	8:00 AM – 12:00 PM CBE Certification Testing

Sunday, March 15, 2009	
12:00 – 1:50 PM	Conference Registration Begins and Exhibit Hall Open
2:00 - 2:10 PM	Presidential Address Hughes
2:10 - 2:15 PM	Conference Logistics Dizon
2:15 – 2:45 PM	Global Breast Health Initiative Anderson
2:45 – 3:15 PM	The Evolution of the Breast Center Silverstein
3:15 – 3:45 PM	A Breast Center Is... Shockney
3:45 – 4:15 PM	Can We Get Away From Breast Surgery? Emerging Technologies in Breast Treatment Whitworth
4:15 – 5:15 PM	New Technologies in Breast Cancer Diagnostics: A Focus on BSGI and Brem
5:15 – 6:15 PM	Quality Performance 2009: Results of the NQMBC's Web-Based Quality Comparison Program Shockney, Kaufman and Streed
6:15 – 6:30 PM	Oral Poster Presentations
6:30 – 7:30 PM	Wine and Cheese Poster Reception

Monday, March 16, 2009				
6:30 – 7:30 AM	Choose From One of Two Vendor-Hosted Breakfast Symposia (Conference Registration Continued)			
7:45 – 7:50 AM	Intro/Opening Dizon			
7:50 – 8:50 AM	Breast MRI as a Screening Tool Lehman			
8:50 – 9:20 AM	Hereditary Breast and Ovarian Cancer: Applying the New Genetics to Clinical Practice Hughes			
9:20 – 9:40AM	Impact and Inspiration Award Presentations			
9:40 – 10:40 AM	Break and Time to Visit Vendors in the Exhibit Hall			
	RT Track	RN Track	Clinical Track	Administration Track
10:40 – 11:10 AM	Trouble in Paradise: Improving RT/Radiologist Relations Linver and Miller	Managing Treatment-Related Symptoms and Side Effects: Chemotherapy Toxicities Schwartz	Preoperative MRI in breast cancer: the Surgeon's Perspective Shriver	Community Needs: Serving the Needs of the Uninsured and Underserved Johnson
11:10 – 11:40 AM	Understanding PACS: What You Need to Know Macarol	Endocrine Therapy: Addressing Side Effects and Sequelae Bobolis	Biopsy Techniques in the 21st Century Gittleman	
11:40 AM – 12:10 PM	Digital Positioning Coryell	Holistic Modalities in Breast Cancer O'Day	Lobular Neoplasia: Implications in Treatment Anderson	Breast Cancer Treatment Decision and Patient Tracking Tools Michaelson
12:10 – 12:40 PM	Accreditation Options and Opportunities Leffert-Paige	The Role of Pathologists in Improving the Quality of Breast Health Care Masood	Moving Beyond Excision: Ablative Technologies for Breast Cancer Kaufman	An Update on Coding/ Reimbursement: Radiology Specifics Poller
12:40 – 1:45 PM	Lunch			
	RT Track	RN Track	Clinical Track	Administration Track
1:45 – 2:45 PM	After The Mammogram: What Happens to My Patient? Gardner	Ultrasound Imaging for Nursing Mendelson	Transitioning to Digital: Problems and Promise Parikh	An Update on Coding/ Reimbursement: Clinical Care Specifics Gittleman
2:45 – 3:15 PM	Scooters, Scoliosis, and Skin Folds Miller	Breast Cancer Treatment in the 21 st Century: Beyond AC and Taxol Schwartz	Cardiac Toxicities from Radiation Therapy Taghian	Achieving Timeliness in Breast Cancer Screening Michaelson
3:15 - 3:45 PM		Patient Satisfaction with Services Provided by a Mid-Level Provider in a Breast Center Cole	Reverse Axillary Mapping Whitworth	Addressing No-Shows in a Breast Center Braner



3:45 – 4:15 PM	Break and Time to Visit Vendors in the Exhibit Hall
4:15 – 5:15 PM	Breast Ultrasound: An Update <i>Mendelson</i>
5:15 – 5:45 PM	Update on Partial Breast Irradiation (PBI) <i>Taghian</i>
5:15 – 6:30 PM	Vendor Reception in the Exhibit Hall

Tuesday, March 17, 2009				
6:15 – 7:15 AM	Choose From One of Two Vendor-Hosted Breakfast Symposia			
7:30 – 7:45 AM	Welcome and Introduction <i>Hughes</i>			
7:45 – 8:45 AM	BREAST CANCER SCREENING FOR EARLY DIAGNOSIS: THE ROAD MOST TRAVELED <i>Tabár</i>			
8:45 – 9:45 AM	DCIS <i>Silverstein</i>			
9:45 – 10:15 AM	Reconstruction Options in Breast Cancer <i>Spiegel</i>			
10:15 – 10:45 AM	BREAK TIME WITH VENDORS IN THE EXHIBIT HALL			
	CLINICAL		RT/RN	Administrative
10:45 – 11:45 AM	Medical Controversies in Breast Cancer: Pro/Con <i>Dizon</i>	10:45 – 11:15 AM	Breast Cancer: The Children's Perspective <i>Rauch</i>	Integrating PACS in Breast Centers <i>Poller</i>
11:45 AM – 12:15 PM	Contralateral Prophylactic Mastectomy <i>Bell</i>	11:15 AM – 12:15 PM	RTs and RNs: Bridging the Communication Gap <i>Rabinowitz</i>	So You Want to Start a Sexuality Program? <i>Krychman</i>
12:15 – 1:45 PM	Lunch			
1:45 – 2:15 PM	Innovations in the Management of Complications in Breast Reconstruction <i>Spiegel</i>			
2:15 – 3:15 PM	Personalized Medicine <i>Campos</i>			
3:15 – 3:45 PM	Families Get Breast Cancer: Addressing the Challenges Faced by Partners of Patients With Breast Cancer <i>Heyison</i>			
3:45 – 4:15 PM	Breast Cancer in Pregnancy: An Interdisciplinary Approach <i>Schapira</i>			
4:15 – 4:45 PM	Addressing the needs of Parents: The MGH Parenting at a Challenging Time Program <i>Rauch</i>			

Wednesday, March 18, 2009				
6:15 – 7:15 AM	Choose From One of Two Vendor-Hosted Breakfast Symposia			
7:30 – 7:45 AM	Intro / Opening—General Membership Meeting <i>Hughes</i>			
7:45 – 8:45 AM	Back to Basics, Mammographic Signs of Early Breast Cancer <i>Lehman</i>			
8:45 – 9:45 AM	Breast Cancer: A Genomic Overview <i>Shriver</i>			
9:45 – 10:15 AM	Break and Time to Visit Vendors in the Exhibit Hall			
10:15 – 10:45 AM	Addressing Multicultural and Social Diversity <i>Schapira</i>			
10:45 – 11:45 AM	Interesting Patients, Their Images and Pathology: Multidisciplinary Case Management <i>Bobolis, Tucker, Kaufman, Dizon, O'Connor, Poller, Shockney</i>			
11:45 – 12:30 PM	LUNCH			
New! The NCBC Survivorship Symposium: After Breast Cancer				
12:30 – 1:00 PM	Breast Cancer Survivorship: Past, Present and Future <i>Rowland</i>			
1:00 – 1:30 PM	Followup Guidelines After Breast Cancer Treatment <i>Bell</i>			
1:30 – 2:00 PM	What Was I Doing Again? Cognitive Function Following Breast Cancer Chemotherapy <i>Jansen</i>			
2:00 – 2:30 PM	Addressing Sex and Intimacy: I Am A Sexy Breast Cancer Survivor <i>Krychman</i>			
2:30 – 3:00 PM	Adjusting to Life as a Survivor: Stress and Coping Across the Journey <i>Rowland</i>			
3:00 – 3:30 PM	Fatigue Following Breast Cancer Therapy: Don't Take It Lying Down <i>Pinto</i>			
3:30 – 4:15 PM	Modeling a Cancer Survivorship Program at your Center <i>Damaskos</i>			
4:15 – 4:30 PM	Questions and Answers			
4:30 – 5:00 PM	Concluding Remarks			

Wednesday, Mar 18, 2009 Post-Conference Courses	
4:45 – 7:45pm	Grant Writing Course
	BSE Certification Course



Hereditary Breast and Ovarian Cancer: 2009 Update

Saturday, March 14

7:00 – 7:45 AM

Breakfast

7:45 – 7:55 AM

Welcome and Introduction

Kevin S. Hughes, MD, FACP

8:00 – 8:30 AM

Hereditary Breast and Ovarian Cancer: History and Evolution

Henry Lynch, MD

From his unique perspective as a pioneer in the field of cancer genetics, Dr. Lynch will describe the discovery of hereditary breast and ovarian cancer, the identification of the BRCA genes and current status of BRCA testing, as well as a look at the future of this field.

8:30 – 9:00 AM

Overview of Hereditary Cancer Genetics

David Euhus, MD

This session will provide a graphic and user-friendly description of genes involved in hereditary cancer development.

9:00 – 10:00 AM

What's New in Hereditary Breast and Ovarian Cancer

Steven Narod, MD

Researchers have identified features of BRCA related cancers and factors that may affect penetrance. This session will outline the latest findings regarding modifying risk factors that may help inform prevention and management strategies.

10:00 – 10:30 AM Break

10:30 – 11:20 AM

Assessing Risk With and Without Models

Victor Vogel, MD, MHS, FACP

There are several models for assessing breast and ovarian cancer risk. This session will describe the origins, strengths and limitations of the commonly used risk prediction models. Guidance will also be provided for the many circumstances when eyeball pedigree analysis may trump the models.

11:20 AM - 12:10 PM

Hereditary Breast Cancer: The Magnitude of the Problem

Kevin S. Hughes, MD, FACP

The vast majority of BRCA carriers are unaware of their status, and the majority identified to date have already had cancer. We must identify these women before they develop cancer, and develop strategies to help prevent cancer or find it at an earlier stage. The magnitude of this problem will be discussed, and some thoughts on solving this issue will be presented.

12:15 – 1:30 PM

Lunch

Deborah Lindner, MD

Dr. Lindner, a practicing obstetrician/ gynecologist, will reflect on her personal experience with BRCA testing, decision-making regarding risk reduction choices, and impact on her personal and professional life.

1:30 – 3:00 PM

How Did You Do It? Setting Up and Implementing a Risk Assessment Program

**Connie Roche, ANP, BC, APNG, Dana Dowd, MS, RNC
Larry Geier, MD and Jennifer Scalia Wilbur, MS**

Panelists from different disciplines and settings will describe the development and current status, strengths and weaknesses of their programs. Half of the session will be open for audience Q&A.

3:30 – 4:00 PM

MRI Screening for High Risk: Who, Why and How Long?

Alan Semine, MD

This session will describe rationale for use of MRI screening, identification of women for whom screening is appropriate and address whether age and breast density should be factored into decisions about screening recommendation.

4:00 – 4:30 PM

Management of Breast Cancer Risk

David Euhus, MD

This session will outline current options and rationale for management of breast cancer risk in the BRCA carrier.

4:30 – 5:00 PM

Management of Ovarian Cancer Risk

Victor Vogel, MD, MHS, FACP

This session will outline current options and rationale for management of ovarian cancer risk in the BRCA carrier.

5:00 – 5:30 PM

Patterns of Cancer, Patterns of Care

Jeffrey Weitzel, MD

Focus for BRCA mutation carriers is on risk of female breast and ovarian cancers, but males are also at increased risk for breast cancer and data suggests there may be risk for other cancers. This session will address what is known about risk for male breast cancer, melanoma, and other cancers including prostate, pancreas, colon and others. Any indicated screening and risk reduction strategies will be discussed.

5:30 – 6:30 PM Reception

"The genetics pre-conference course was extremely helpful as our facility is gearing up to begin its own high risk clinic. I also loved the variety of sessions, so many were relevant and interesting to even what I do as a nurse in the breast health care field."

*Wendi J. Whiting,
RN, BSN, OCN
Williamsburg, VA*





Hereditary Breast and Ovarian Cancer: 2009 Update

Sunday, March 15

7:00 – 8:00AM

Breakfast

Concurrent Sessions (Repeating at 9 and 10 AM)

8:00 – 9:00 AM

Nuts and Bolts of Risk Counseling

Jennifer Scalia Wilbur, MS

Establishing a cancer genetics clinic can bring with it many challenges. There are many successful programs as models, so why reinvent the wheel? This workshop will focus on the specific tools (i.e.: billing, forms, questionnaires, etc) necessary for program development.

8:00 – 9:00 AM

Clinical Management: Challenging Cases/Ask the Experts

Victor Vogel, MD and David Euhus, MD

Making clinical recommendations for high risk women is challenging as there are no textbook guidelines and many women will have uncertain risk status. Nevertheless, we are called on to advise. Participants are invited to bring challenging cases for the experts sort out and discuss.

8:00 – 9:00 AM

On the Frontline of Cancer Risk Counseling

Connie Roche, ANP, BC, APNG, Dana Dowd, MS, RNC and Larry Geier, MD

This session will be an open discussion and Q&A with the panelists and Dr. Lindner who will address challenges and solutions to provision of these services. Participants are invited to bring their own scenarios for discussions.

8:00 – 9:00 AM

Software for Risk Assessment Clinics

Kevin S. Hughes, MD, FACS, Christine Lawrence, John Sharko and Brian Drohan

The program includes the following approaches; Application of unique Information Systems technology to more efficiently gather and analyze patient and family history data which allows the identification of high risk women with minimal or no additional staff, efficiency enhancing solutions for the risk assessment counseling service that can decrease the counselors workload by 20 to 40 minutes per patient, personalized management and treatment strategies, including screening, the use of tamoxifen and other drugs to prevent cancer, and, in some cases, surgery to prevent cancer.

11:00 - 11:30 AM Break

11:30 AM – 12:00 PM

Management of Breast Cancer in the Carrier

Jeffrey Weitzel, MD

BRCA1 associated breast cancers often have pathologic features that are distinct from those of sporadic cancers. In addition, risk of recurrence and second cancers are greater. This session will address how management options are affected by these factors and address current research in this area.

12:00 – 12:30 PM

Psychosocial Issues: What Have We Learned, How We Can Help

Henry Lynch, MD

Clinical management options have been developed because of data gathered from individuals and families who have undergone genetic testing over the past fifteen years. Less defined is the psychological impact following testing. This session will review current data regarding the impact of BRCA testing on individuals and families.

12:00 - 1:50 PM Time to Visit Vendors in the Exhibit Hall

1:50 PM Conference Begins



Transition to Digital Mammography 2009

Saturday, March 14, 2009

7:00 – 8:00 AM

Breakfast

8:00 – 8:30 AM

FFDM: An Overview

Michael Linver, MD, FACR

FFDM now comprises over 40% of all breast imaging equipment in the United States. Although the imaging equipment is now quite mature, many other aspects of FFDM remain problematic, including workstation design, connectivity issues, workflow patterns and transitioning from film/screen among others. These will be addressed and elucidated as a prelude to more in-depth discussions to follow.

8:30 – 9:00 AM

FFDML QC and Accreditation

Jay R. Parikh, MD, FRCP(c), CPE, FSBI, FACPE

Following implementation of MQSA in the early 1990's the quality of screen-film mammography (SFM) has increased in the United States. Full-field digital mammography (FFDM) is gaining increased acceptance and utilization in the United States and has the potential to ultimately replace SFM. For the FFDM transition to be effective, it will need to be coupled with quality control. FFDM QC is currently a time-consuming process compared to SFM QC. Moreover, the FFDM QC process varies by vendor. Standardization of the FFDM QC process across manufacturers would translate into operational benefit for breast centers.

9:00 – 10:00 AM

Transitioning from SFM to FFDM

Rachel Brem, MD

This talk will describe the technical and workflow issues and considerations in the transition from analog to digital mammography.

10:00 - 10:30 AM Break

10:30 – 11:20 AM

FFDM: Workflow Issues

William R. Poller, MD, FACR

The basic new workflow issues will be discussed. The impact on technologists will be shown. The impact on radiologists will be discussed. The impact on patient care will be shown.

11:20 AM – 12:30 PM

Panel Discussion - Digital Imaging Units

William R. Poller, MD, FACR, Jay R. Parikh, MD, FRCP(c), CPE, FSBI, FACPE and Michael Linver, MD, FACR

The Full Field Digital units for mammography are both similar and different. A panel discussing each vendor will answer audience questions regarding these units. The problems will be discussed in an open forum with audience participation.

12:30 - 1:30 PM Lunch

1:30 – 2:20 PM

Update on Clinical Trials in Digital Mammography – Is it really better?

John Lewin, MD

There have been four large screening trials testing digital mammography against film mammography. The results of the trials have been confusing and contradictory. The latest and largest trial, the ACRIN DMIST trial, appeared to show that digital was better than film in some women, but not overall. Additional analyses of the DMIST data have been performed since the initial reporting of the results. These newer results have some good news and some not so good news for digital.

2:20 – 3:10 PM

FFDM: Financial Considerations

Michael Linver, MD, FACR

The current state of reimbursement for FFDM will be discussed. This will be placed in the broader context of the status of reimbursement throughout radiology and in the context of other financial considerations one should evaluate when purchasing digital equipment. Suggestions on how to remain financially sound in the FFDM environment will complete the discussion.

3:10 – 4:00 PM

New Technologies in Digital Mammography: Tomosynthesis and Contrast-Enhanced Mammography

John Lewin, MD

While the technical performance of digital mammography is impressive, its clinical advantage over film mammography, if any, appears to be incremental. The real advantage of digital will likely come from advanced applications. In this course we will discuss the two most promising applications, tomosynthesis and contrast-enhanced mammography, present the latest results of clinical research on these technologies, and discuss where they stand in terms of approval for clinical use.

4:00 – 5:30 pm

Panel Discussion of Clinical Applications

Michael N. Linver, MD, FACR, William R. Poller, MD, FACS, Jay R. Parikh, FRCP(c), CPE, FSBI, FACPE, Rachel Brem, MD and John Lewin, MD

An overview of the clinical applications of FFDM will be reviewed, including the various aspects discussed in greater depth throughout this course. Each panel member will review the key points of their presentations and will address questions from the audience.



Clinical Breast Examination Certification Course

Certification Course!

7:00 – 8:00 AM Breakfast

Saturday, March 14 8:00 AM – 5:30 PM

Sunday, March 15 8:00 AM – 12:00 PM

Suzanne M. Taylor, MD, Shireen L. Braner, PA, RT(R)(M)(QM), Sharon Cabbage, RN, BSN and Cathy Cole, RNC, NP, MPH, CHES

This course covers one and one-half days and is designed to utilize Clinical Breast Examination Skills to accomplish a CBE's Paramount Objective, the detection of any dominant breast mass as another early detection tool to ultimately reduce breast cancer deaths. This is accomplished through an intensive didactic review of Core Breast Knowledge, BSE Technique, Breast Oriented History, Breast Imaging, Diagnostic Procedures with Breast Pathology, Follow-up Recommendations and Risk Management. The core knowledge component of the course is followed by a full half day of demonstration and practicum on performing a Clinical Breast Exam. Patient models, students and instructors will interface in life scenarios to experience issues and challenges in performing clinical breast exams. Additionally, this course will provide instruction and practice of the tactile skills associated in the performance of a clinical breast exam.

Each student will be provided a binder that outlines the major concepts that will be presented during the course and information that will on the testing units. Also included in the binder are supplemental reading materials as well as a vocabulary list to assist in the understanding of course material. All test material is included in the binder. Following course instruction, students will be evaluated on their core knowledge, ability to perform a Clinical Breast Exam in a real life approximated setting and their tactile skills regarding lump detection. A score of 85% or better must be achieved on the didactic written exam, the performance observation exam and tactile testing in order to pass the course and receive certification.

CBE® certification is the process by which the NCBC validates, based upon predetermined standards, a licensed breast health care provider's knowledge in

the performance of a clinical breast examination. The purpose is to assure the public that the certified licensed breast health care provider has completed the NCBC CBE® course and has met minimum knowledge and performance standards by recognizing the individual who has met these standards. Candidates who pass the CBEC® may use the mark CBEC® to verify they have met all eligibility and testing requirements. This may be used only while valid, after which time certification may be renewed. All individuals with valid certifications will be posted on the NCBC website.

To keep the certification active, each certified examiner must supply an annual report that identifies the number of exams completed and the exam findings, which shows that Clinical Breast Examinations have been performed as a part of their job responsibility. There is no annual renewal fee. Re-examination will be offered at the NCBC Annual National Conference. Certification lasts for a three-year period and re-certification is required at the end of that time.

This course is available to licensed healthcare professionals (physicians, physician assistants, nurse practitioners, registered nurses and radiologic technologists). It is recommended, but not mandatory, that individuals should be actively performing clinical breast examinations as part of their ongoing job responsibilities. Although this course will provide core knowledge and review performance and tactile skills, this CBE Certification Course is not designed as an entry level or introductory course for practitioners interested in learning basic CBE skills. This CBE Certification Course is designed for practitioners seeking CBE Certification as validation of their mastery of the breast health knowledge and CBE skills.

Breast Health Navigator Certification Course

Certification Course!

7:00 – 8:00 AM Breakfast

Saturday, March 14 8:00 AM – 5:30 PM

Sunday, March 15 8:00 AM – 12:00 PM

Colleen Johnson, RN, NP, Lillie Shockney, RN, BS, MAS, Susan Gardner, RN, CBEC and Colleen Sullivan-Moore, RN

In the recent history of quality patient care, the breast health patient educator and navigator has become a vital component in many breast centers across the country. This position is sometimes referred to as the case manager, breast services manager or care coordinator, Nurse Navigator or Patient Navigator. Based upon the diversity in job descriptions reflecting various roles and responsibilities from center to center, the NCBC has identified the various navigation stages of a breast (cancer) patient's care, clarifying the role of a navigator in each stage and setting minimum knowledge requirements of the navigator to perform in each navigation stage. This clarity will assist both the breast health professionals who fill this role as well as the administrators who have set expectations of the person in the position.

Breast Health Patient Educator and Navigator Certification is the process by which the NCBC validates, based upon peer-reviewed standards, a licensed breast health care provider's knowledge in the navigation of a breast health care (cancer) patient. The purpose is to assure the public that the certified licensed breast health care provider has completed the NCBC Breast Health Patient Educator and Navigator Certification program and has met minimum knowledge and performance standards by recognizing the individual who has met these standards. Candidates who pass the certification may use the mark BHNC to verify they have met all eligibility and testing requirements. This may be used only while valid, after which time certification may be renewed. All individuals with valid certifications will be posted on the NCBC website.

Each student will be provided a binder that outlines the major concepts that will be presented during the course and information that will on the testing units. Also included in the binder are supplemental reading materials as well as a vocabulary list to assist in the understanding of course material. All test material is included in the binder. Following course instruction, students will be evaluated on their patient navigation and education core knowledge. A score of 85% or better must be achieved on the exam.

This is a breast health patient educator and navigator certification program; it is not an in-depth patient navigator training course. The certification program covers one and one-half days and will highlight navigation and education components, knowledge pertaining to breast health care processes, an overview

of the navigation stages and updates on clinical care relevant to patient navigation, education and treatment. Individuals who are familiar with breast patient navigation should consider becoming certified. The certification will validate a professional's knowledge to perform as a breast health patient educator and navigator in the various navigation stages.

This course is available to licensed healthcare professionals (physicians, physician assistants, nurse practitioners, registered nurses and radiologist technologists). It is recommended, but not mandatory, that individuals should be actively practicing as a breast health patient educator and navigator or should have this responsibility at their breast health care facility. This certification course is designed for practitioners seeking Breast Health Patient Educator and Navigator Certification as validation of their mastery of the breast health knowledge associated with this position.

The program is being presented, as the beta program with expectations of its continually evolving overtime. This skill set as well as the knowledge base will be the basis of the Breast Health Patient Educator and Navigator Certification. There will be three classifications of navigators: the Breast Health Education Navigator, the Breast Health Imaging Education Navigator and the Breast Cancer Education Navigator. Each classification's skill set and knowledge base builds upon the previous. The Breast Health Education Navigator assists patients from the time they walk in the door to their scheduled mammogram. The Breast Health Imaging Education Navigator may work with the patient from the time of taking history through the results of their mammogram. And the Breast Cancer Education Navigator may work with the patient from intake through end-of-life.

Program attendees meeting minimum proficiency on the exam will receive certification for one year and be able to sit for the three-year certification in 2010 at no cost. This course will consist of instruction on the core competencies of navigation on Saturday, March 14 with a certification test on Sunday, March 15. The NCBC is excited to offer this program for the first time at the 19th Annual National Interdisciplinary Breast Center Conference March 14-18, 2009. Registration for the conference is now available online at www.breastcare.org. A course curriculum is expected to be available online by January 1, 2009.



Surgical Management of Breast Disease



Saturday, March 14, 2009

This course is being presented in assistance with the American Society of Breast Surgeons. This course will present state-of-the-art concepts for the treatment of benign breast disease and breast cancer, including image-guided biopsy, sentinel node mapping and partial breast irradiation. A brief review of adjuvant therapy will also be provided. Upon completion of this course, participants should be able to understand state-of-the-art concepts for treatment of breast cancer. Attendees of the course will be able to enhance their diagnostic and treatment abilities as they encounter patients with breast disease. This course is supported in part by a grant from SenoRx, Inc.

7:45 – 8:00 AM

Breakfast

7:45 – 8:00 AM

Welcome/Introduction/Course Overview

Cary S. Kaufman, MD, FACS

8:00 – 9:00 AM

Benign Breast Disease

Cary S. Kaufman, MD, FACS

This lecture will discuss the symptoms of benign breast disease, covering breast infections, pain, nipple discharge and fibroadenomas.

9:00 - 10:00 AM

Management of the High Risk Patient

Jennifer Gass, MD, FACS

Treating the high-risk patient is vital. This presentation will explore important techniques, including risk assessment, genetic counseling, testing and other risk-reducing strategies.

10:00 – 10:15 AM

BREAK

10:15 – 11:15 AM

Imaging of the Breast for the Surgeon

Mark A. Gittleman, MD, FACS

Breast imaging is a science that is constantly changing and developing, along with the technology used. This session will provide an overview of CAD and Digital Mammography, Ultrasound and MRI

11:15 AM – 12:15 PM

Lymph Node Analysis

Pat Whitworth, MD

Axillary dissection and the sentinel node will be discussed

12:15 – 1:30 PM

Lunch

1:30 – 2:30 PM

Image-Guided Biopsies

Mark A. Gittleman, MD, FACS

State-of-the-art concepts for breast disease treatment, including image-guided biopsies, will be presented. Stereotactic, ultrasound and MRI will be discussed.

2:30 – 3:30 PM

Breast Surgical Techniques

Pat Whitworth, MD

Several mastectomy techniques will be covered, including partial mastectomy, skin-sparing mastectomy and nipple/areolar sparing mastectomy.

3:30 – 3:45 PM

BREAK

3:45 – 4:45 AM

Adjuvant Therapy

Jennifer Gass, MD, FACS

This session will give a brief review of adjuvant therapy treatment techniques, including radiation and APBI, chemotherapy and endocrine therapy.

4:45 - 5:45 PM

Tumor Board and Panel Discussion

Mark A. Gittleman, MD, FACS, Cary S. Kaufman, MD, FACS, Pat Whitworth, MD and Jennifer Gass, MD, FACS

Attendees will be able to hear how the experts will handle some interesting cases. Several tough cases will be presented.

Post Conference Courses



Grant Writing Course

Wednesday, March 18

4:45 - 7:45 PM

Karleen Habin, RN, BCCS, MPHc and Ann Forcier, LMHC, CAGS, PRT

This course focuses on the grantsmanship process from foundation research and cultivation to the development and writing of a proposal for submission to a foundation, corporation, or agency. It will introduce participants to the important elements of a grant proposal including the cover letter, summary statement, statement of problem or need, goals and objectives, methodology, evaluation, the budget, and future funding. Participants will learn about the typical questions funders ask when considering a proposal and criteria used. Students will participate in proposal critiquing exercises and develop and write a full proposal.

Breast Self Examination Trainer Certification Course

Wednesday, March 18

4:45 - 7:45 PM

Suzanne M. Taylor, MD, Shireen L. Braner, PA, RT(R)(M)(QM), Sharon Cabbage, RN, BSN and Cathy Cole, RNC, NP, MPH, CHES

This course is designed to provide core Breast Knowledge and Breast Self Examination Skills needed to provide BSE instruction to lay persons and other health care professionals. It will include comprehensive didactic sessions for Core Breast Knowledge and BSE Skills followed by workshop session for tactile BSE skills and verbal BSE presentations. It will also identify the next steps for securing the training and skills necessary to obtain NCBC CBE Certification. Upon successful completion of this course, i.e., score of 80% on each test (core knowledge, tactile silicone model skills, and verbal mini-lecture test), participants will receive a NCBC BSE Instructor's Certificate.

Certification Course!



12:00 – 1:50 PM

Network with Vendors in Exhibit Hall

Moderator - Don S. Dizon, MD, FACP

2:00 – 2:10 PM

Presidential Address

Kevin S. Hughes, MD, FACS

2:10 – 2:15 PM

Conference Logistics

Don S. Dizon, MD, FACP

2:15 – 2:45 PM

Global Breast Health Initiative

Benjamin O. Anderson, MD

This course will focus on the global impact of breast cancer, specifically among areas of the world that are economically disadvantaged low and middle income countries (LMCs). Evidence-based, economically adapted guidelines will be discussed. Method and ongoing projects related to breast cancer in LMCs will be discussed.

2:45 – 3:15 PM

The Evolution of the Breast Center

Melvin J. Silverstein, MD, FACS

This lecture will describe the idea that hatched the Van Nuys Breast Center, the first free-standing breast center in the United States and the environment in which it was hatched. It will chronicle its 20-year development, triumphs, and ultimate demise.

3:15 – 3:45 PM

A Breast Center Is...

Lillie Shockney, RN, BS, MAS

What do we mean when we use the term "Breast Center"? How many Breast Centers are there in the United States that have the authority to call themselves or their group a Breast Center? Currently, it just about anyone. This is due to there being no regulatory organization that determines what is meant by a Breast Center. NCBC has worked to solve this issue by defining what is meant when the term Breast Center is used as well as providing guidance and definition about the various types of Breast Centers in the country. Learn what the components and services are of each type of Breast Center and where yours fits best. This type of information is being used to assist Breast Centers in benchmarking with one another for those participating in the NCBC's National Quality Measures for Breast Centers Program.

3:45 – 4:15 PM

Can We Get Away From Breast Surgery? Emerging Technologies in Breast Treatment

Pat Whitworth, MD

Surgical therapy for breast disease has evolved from its original beginning and now encompasses a goal of tumor control balanced with quality of life. There continues to be a revolution in breast surgery as treatments are aiming to reduce volume of breast tissue removed without compromising the goals of surgery. This session will touch on new techniques and technological advances that aim to minimize the surgical role in breast diseases, particularly in breast cancer and alternative approaches to breast surgery, including the increased role of neoadjuvant treatment in down-staging breast tumors.

4:15 – 5:15 PM

New Technologies in Breast Cancer Diagnostics:

A Focus on BSGI

Rachel Brem, MD

This talk will discuss the basis for physiologic imaging with Breast Specific Gamma Imaging (BSGI), the scientific basis for BSGI, current literature regarding BSGI, pro's and con's of BSGI and future direction. Finally, the integration of BSGI into clinical practice will be discussed.

5:15 – 6:15 PM

Quality Performance 2009: Results of the NQBC's Web-Based Quality Comparison Program

Lillie Shockney, RN, BS, MAS, Cary S. Kaufman, MD, FACS and Stephanie Streed, RNC

The NQBC™ Program provides breast centers a "real time" tool to compare themselves with others to determine if their facility is providing the highest quality of care to their patients as compared to others. For the past two years this session has addressed how to get involved in the NQBC™ Program, the cost of the program, an overview of the measures and how to enter data into the program. This year attendees will hear from a Certified Participant in the NQBC™ Program, who will discuss issues and resolutions regarding understanding what data to collect, the issues finding and collecting the data and how the data was used in comparison with other centers to determine how they compare to others. An analysis of some of the data that has been submitted over a four-year span will also be presented. This analysis will reflect "floating" performance ranges and who how participants will be empowered for comparison and analysis to isolate needs and develop performance improvement initiatives or to identify performance that is at acceptable or peak values.

6:15 – 6:30 PM

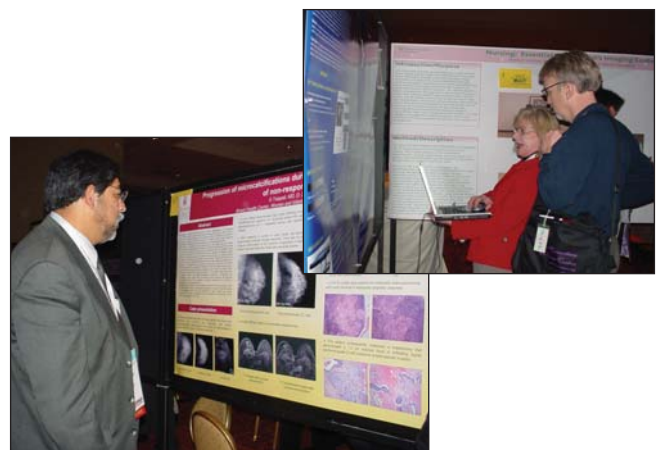
Oral Poster Presentations

Offered again this year will be two poster presentations representing the highest scoring abstracts chosen by the program committee. These will be chosen prior to the conference opening and will represent an excellent opportunity for NCBC members to understand and learn about novel programs and developments by members of our organizations.

6:30 – 7:30 PM

Wine and Cheese Poster Reception

In order to allow more time for review and discussion of the posters accepted for presentation at the 2009 Annual Meeting, there will be a Wine and Cheese Poster Reception. This will be the ideal time to review the submissions at this year's meeting and discuss findings personally with the first authors. In addition, this reception provides yet another opportunity to network with fellow attendees. For poster presenters, it will represent a dedicated session where both knowledge can be disseminated and feedback received on your hard work. This reception will be a well-deserved congratulations on the work selected for presentation and will showcase the diversity of our membership in achieving the common goal of quality breast care.





6:30 – 7:30 AM

Choose One of Two Vendor-Hosted Breakfast Symposia

Morning Plenary Moderator - Balazs Imre Bodai, MD

7:45 – 7:50 AM

Intro/Opening

Don S. Dizon, MD, FACP

7:50 – 8:50 AM

Breast MRI as a Screening Tool

Constance Lehman, MD, PhD

Breast MRI has several advantages, the most important being its high sensitivity in detecting breast cancer. The American Cancer Society currently recommends MRI in addition to mammography to screen women at high risk. The supporting research and current recommendations for screening MRI will be discussed as well as the benefits and risks for screening MRI and the importance of auditing a screening MRI program.

8:50 – 9:20 AM

Hereditary Breast and Ovarian Cancer: Applying the New Genetics to Clinical Practice

Kevin S. Hughes, MD, FACS

While the BRCA1 and BRCA2 genes were identified over 13 years ago, the medical system has been slow to capitalize on this information. Many women at risk have yet to be identified, and many of those identified have been identified AFTER they had cancer. Until we begin to identify high-risk women in large numbers before they develop cancer, we will be missing a significant opportunity to decrease the morbidity and mortality of these cancers. This lecture will define the problem, discuss possible solutions, and challenge the audience to use their breast center's resources to improve the identification of high-risk women when it will do the most good, that is, BEFORE they have cancer.

9:20 – 9:40 AM

Award Presentations

9:40 – 10:40 AM

Break Time with Vendors in the Exhibit Hall

10:40 AM – 12:40 PM

CONCURRENT SESSIONS

RT TRACK

Track Moderator - Teresita Macarol, RT(R)(M)(QM)

10:40 – 11:10 AM

Trouble in Paradise: Improving RT/Radiologist Relations

Michael N. Linver, MD, FACP, Louise C. Miller, RT(R)(M)

This course will discuss common barriers between RTs and Radiologists, explaining methods and giving examples for improvement.

11:10 – 11:40 AM

Understanding PACS: What You Need to Know

Teresita Macarol, RT(R)(M)(QM)

This session will review basic PACS, explaining image flow, display retrieval and storage options. Challenges and requirements to implement PACS will also be discussed.

11:40 AM – 12:10 PM

Digital Positioning

Tammy Coryell, RT(R)(M)

The time has come, the journey has begun...the digital age has finally entered the world of mammography. With any such technologic advancement comes challenges and growth. Technologists are both excited and apprehensive, unsure of how this change will impact their current skill sets. Join us for insight into how digital will change the practice of mammography from the technologist's perspective and how we can prepare to meet this challenge.

12:10 – 12:40 PM

Accreditation Options and Opportunities

Gina Leffert-Paige, AART(R)(M)

This course will outline accreditation options for breast centers, including how to become a Center of Excellence.

RN TRACK

Track Moderator - Robin Hayden, APRN, MSN

10:40 – 11:10 AM

The Role of Pathologists in Improving the Quality of Breast Health Care

Shahla Masood, MD

Breast pathology is the foundation of quality breast health care. The information provided in a pathology report is the guiding light in directing immediate therapy and the follow up clinical management. There is no doubt that accuracy of diagnostic and prognostic/predictive information has a long lasting impact on the quality of life and the final outcome of breast cancer patients. To achieve the optimal care, it is essential to engage knowledgeable pathologists who are interested in breast pathology in an integrated breast center concept with the ability to directly communicate with the physicians and health care providers who are involved in management of patients.

11:10 – 11:40 AM

Managing Treatment-Related Symptoms and Side Effects: Chemotherapy Toxicities

Joanna Schwartz, PharmD, BCOP

This course will review common side effects of chemotherapy agents including nausea and vomiting, neutropenia, anemia and neuropathy, including their prevention and treatment

11:40 AM – 12:10 PM

Endocrine Therapy: Addressing Side Effects and Sequelae

Kristie Bobolis, MD

Endocrine health is an important issue facing women with breast cancer. Certain treatment modalities can increase a woman's risk for developing osteoporosis/osteopenia and menopause. Both medical and non-medical interventions to maintain endocrine health will be discussed.

12:10 – 12:40 PM

Holistic Modalities in Breast Cancer

Kathy O'Day, RN

Patients with cancer are interested in non-traditional medicine but want to know if it is safe. We will review the state of advance of CAM treatments and modes of collaboration that meet the objectives of patients, providers and their breast centers.



"This conference is extremely well-planned and coordinated, I really benefited from the networking opportunities available in a social setting."
 Nikki Levinson-Lustgarten, RN
 Jacksonville, FL



"Great lectures and exhibits, excellent speakers. I always learn something new at this conference!"
 Richard Wagner, MD
 Mequon, WI



"I loved the time I got to spend with the vendors, this year was my first time here and I'll definitely be back!"
 Laurie Margolies, MD
 New York, NY

CHOOSE ONE OF FOUR TRACKS

10:40 AM – 12:40 PM

CLINICAL TRACK

Track Moderator - Lee Bronfman, RN, MA, CCRP

10:40 – 11:10 AM

Preoperative MRI in Breast Cancer: the Surgeon's Perspective
COL Craig D. Shriver, MD

The widespread use of MRI in breast cancer has been well documented, but its use in the preoperative setting has resulted in an increased rate of mastectomy in the era of breast conservation. In addition, significant controversy as to what role it should play in the newly diagnosed patient remains. In this session, we will review the evidence for breast MRI from a surgical viewpoint and delineate the pros and cons of the breast MRI when used in the preoperative setting.

11:10 – 11:40 AM

Biopsy Techniques in the 21st Century
Mark A. Gittleman, MD, FACS

Breast biopsy techniques with various imaging modality guidance, technical aspects and indications will be discussed.

11:40 AM – 12:10 PM

Lobular Neoplasia: Implications in Treatment
Benjamin O. Anderson, MD

This course will address the issues regarding the biology, detection, diagnosis and management of lobular neoplasia, including atypical lobular hyperplasia (ALH) and lobular carcinoma in situ (LCIS). The historical evolution of thinking on this biologically unique lesion will be reviewed. Evidence will be reviewed delineating sub-classification of lobular neoplasia. Controversies in management strategies will be reviewed and discussed.

11:40 AM – 12:10 PM

Moving Beyond Excision: Ablative Technologies for Breast Cancer
Cary S. Kaufman, MD, FACS

The American College of Surgeons Oncology Group has initiated a multicenter trial to evaluate the efficacy of cryoablation treating breast cancers under 2 cm in size. Concepts of breast cancer ablation as well as pros and cons of this new technology will be described. As breast centers find small lesions, techniques such as ablation will take a more reasonable position in treatment.

ADMINISTRATION TRACK

Track Moderator - Claudia Lee, MBA

10:40 – 11:40 AM

Community Needs: Serving the Needs of the Uninsured and Underserved
Colleen Johnson, RN, NP

This course will cover how to offer philanthropic support, access local, state and national grants and the development of a sliding scale fee schedule to cover the cost of breast health care services for medically underserved women. The importance of value added services and the economic impact will be presented with suggestions on how to incorporate these programs through philanthropic support. The importance of community involvement and consideration will be emphasized.

11:40 AM – 12:10 PM

Breast Cancer Treatment Decision and Patient Tracking Tools
James Michaelson, PhD

While most women with signs suggestive of breast cancer are treated soon after cancer detection, a fraction of women undergo long periods of time between the first sign of their disease and ultimate treatment. Such delay may account for as many as one in four of the breast cancers deaths that occur at the present time. Great reductions in breast cancer deaths should be achievable by improving the timeliness of treatment. Methods for improving timeliness in breast cancer treatment, including simple tracking and reminding, will be reviewed.

12:10 – 12:40 PM

An Update on Coding/Reimbursement: Radiology Specifics
William R. Poller, MD, FACR

This session will familiarize the participant of the importance of proper coding, with the common pitfalls and mistakes. It will identify variances in insurance policies (if not reimbursed, why not?) and how to "sell" your services to insurance companies. This session will review mammography, breast ultrasound, breast MRI, PET and BSGI evolving and tracking to appropriately maximize reimbursement.



12:40 – 1:45 PM Lunch Time with Vendors in the Exhibit Hall

1:45 – 3:45 PM

CONCURRENT SESSIONS

RT TRACK

Track Moderator - Debora Wright, RT(M)

1:45 – 2:45 PM

After The Mammogram: What Happens to My Patient?

Lawrence Gardner, MD, FRCS(c)

Do you wonder what happens to your patient after the mammogram and diagnostic workup? This lecture will cover mammo/path correlation, sentinel node biopsy, excisional biopsies, lumpogram, mastectomy and treatment options for breast cancer.

2:45 – 3:45 PM

Scooters, Scoliosis and Skin Folds

Louise Miller, RT(R)(M)

This talk will seek to better educate radiology technologists on the positioning of three challenging patient groups: patients with physical disabilities, patients with spine abnormalities and the obese patient.

RN TRACK

Track Moderator - Collen Johnson, RN, NP

1:15 – 2:45 PM

Ultrasound Imaging for Nursing

Ellen Mendelson, MD, FACR

This course will present indications for breast ultrasound in the patient, the characteristics used to define a benign vs. malignant lesion of the breast and the place of ultrasound in patient work-up.

2:45 – 3:15 PM

Breast Cancer Treatment in the 21st Century: Beyond AC and Taxol

Joanna Schwartz, PharmD, BCOP

This course will review new classes of agents used in the treatment of breast cancer and examples of agents in each class, as well as their dosing and side effects.

3:15 – 3:45 PM

Patient Satisfaction With Services Provided By a Mid-Level Provider in a Breast Center

Cathy Cole, RNC, NP, MPH, CHES

Breast cancer survivors need continuous surveillance physically and emotionally. A followup clinic setting allows patients to adjust back to routine health maintenance with the same team, while continuing highly specialized breast care and monitoring for recurrence.

3:45 – 4:15 PM Break Time with Vendors in Exhibit Hall

Afternoon Plenary Moderator - Jennifer Gass, MD, FACS

4:15 – 5:15 PM

Breast Ultrasound: An Update

Ellen Mendelson, MD, FACR

The role of sonography in breast diseases remains unchallenged, despite the more frequent utilization of other technologies, including MRI. From evaluation of mammographic abnormalities to interrogation of the axilla, ultrasound continues to be a critical aspect of the imaging armamentarium. In this session, we will review the role of ultrasound in breast disease and breast cancer.

5:15 – 5:45 PM

Update on Partial Breast Irradiation (PBI)

Alphonse Taghian, MD, PhD

The standard of care for women with early stage and locally advanced breast cancer is breast conserving therapy (BCT) for eligible patients. For these women, radiation therapy allows for maximal local control with evidence suggesting its benefits for overall survival as well. However, the role of radiotherapy in BCT continues to evolve as clinical research continues to investigate the role of more tailored and shorter duration treatments. One of these is APBI which is being explored using several modalities including multicatheter interstitial brachytherapy, breast brachytherapy catheter, and three-dimensional conformal external-beam radiation therapy. This report will review an update in what we have learned regarding APBI based on completed early trials and ongoing phase III studies.

5:45 – 7:00 PM Special Reception with Vendors in the Exhibit Hall

BE SURE TO VISIT OUR VENDORS IN THE EXHIBIT HALL!

Sunday	Monday	Tuesday	Wednesday
12:00 – 1:50 PM	9:40 – 10:40 AM	10:15 – 10:45 AM	9:45 – 10:15 AM
	12:40 – 1:45 PM	12:15 – 1:45 PM	11:45 – 12:30 PM
	3:45 – 4:15 PM		
	5:45 – 7:00 PM		



CHOOSE ONE OF FOUR TRACKS

1:45 – 3:45 PM

CLINICAL TRACK

Track Moderator - Lawrence Gardner, MD, FRCS(c), FACS

1:45 – 2:45 PM

Transitioning to Digital: Problems and Promise

Jay R. Parikh, MD, FRCP(c), CPE, FSBI, FACPE

Many facilities in the United States are considering installing full-field digital mammography technology in their breast centers. This installation is often a time-consuming complex process. Analysis of different manufacturers' technologies, economical modeling, preparation for installation and assessment of PACS integration are critical steps that can help ease the installation phase of the FFDM conversion. Attention to workflow issues will be paramount to success of the transition.

2:45 – 3:15 PM

Cardiac Toxicities from Radiation Therapy

Alphonse Taghian, MD, PhD

Radiation therapy for breast cancer treatment can cause cardiac morbidity. While newer radiation techniques may minimize morbidity, it is not clear that this issue has totally been resolved. This talk will cover the history of cardiac morbidity, the changes in techniques that have minimized morbidity and ideas for the future.

3:15 - 3:45pm

Reverse Axillary Mapping

Pat Whitworth, MD

As the breast surgeon aims to preserve quality of life in patients with locally advanced breast cancer, reducing the risk of post-operative lymphedema becomes of more importance. One potential mechanism to reduce this risk is to perform reverse axillary node mapping in order to preserve arm lymphatics. This session will review the evidence in support of this procedure and discuss the technical aspects of reverse axillary node mapping.

ADMINISTRATION TRACK

Track Moderator - Kathy Dittmar, RT(R)(M)

1:45 – 2:45 PM

An Update on Coding/Reimbursement: Clinical Care Specifics

Mark A. Gittleman, MD

This session will explain an update on coding/reimbursement pertaining to breast care. Clinical care presentations, E/M and procedural codes will be described. Areas of controversy will also be discussed

2:45 – 3:15 PM

Achieving Timeliness in Breast Cancer Screening

James S. Michaelson, PhD

One in four women come in for their first mammogram and never return, and one in four of the women who do make an appointment for an annual screening mammogram forget to attend, and these simple failures increase the breast carcinoma death rate by 50%. The failure to attend scheduled visits also presents a great economic burden on screening centers. Scheduling, tracking, and especially, effective reminding of women to attend their mammographic can greatly reduce the breast cancer death rate, and improve the economic viability of screening centers. Methods for achieving these goals will be reviewed.

3:15 – 3:45 PM

Addressing No-Shows in a Breast Center

Shireen Braner, PA, RT(R)(M)(QM)

Appointment adherence is a major issue affecting breast centers, and the impact of this can ripple throughout the administrative structure of the center and its ability to increase new patient flow and financial growth. In addition, adherence may result in worse outcomes for patients themselves, particularly if it affects the use of screening mammography. In this session, an overview of the problem will be presented and solutions for the breast center suggested to help overcome issues related to no-shows.



"As a new breast navigator I have a lot to learn. The conference and speakers were inspirational and I will take all that I have learned back to my patients."

*Angee Brewer, RN
St. Louis, MO*



"As this was my first experience attending the conference, the networking and intimacy of the conference was extremely enjoyable."

*Debra Francis
Meriden, CT*



6:15 – 7:15 AM

Choose One of Two Vendor-Hosted Breakfast Symposia

Morning Plenary Moderator - F. Lee Tucker, MD, FACP

7:30 – 7:45 AM

Welcome and Introduction

Kevin S. Hughes, MD, FACS

7:45 – 8:45 AM

Breast Cancer Screening for Early Diagnosis: The Road Most Traveled

László Tabár, MD, FACP(hon)

The success of the randomized controlled mammography screening trials in demonstrating a significant decrease in mortality from breast cancer has given us convincing evidence that breast cancer is not systemic from its inception; instead it is a progressive disease where detection and treatment in the early phase accomplishes a significant improvement in outcome. The regular use of high quality mammography performed at sufficiently frequent intervals has brought about a shift in the balance of breast cancer cases from mainly palpable, advanced cancers to mainly small, impalpable cases that are still localized to the breast. The predominance of early stage disease resulted in a new era in the diagnosis and treatment of breast cancer, creating a revolutionary new situation for those involved in the diagnosis and treatment of breast cancer patients. We are experiencing a paradigm shift in controlling the disease, since preventing advanced cancer by arresting the disease process is becoming our main goal. The introduction of organized mammographic service screening programs in combination with the establishment of interdisciplinary centers of excellence dramatically improved the standards of breast care. The success of high quality mammographic screening recently has been characterized as a 'major public health achievement' by Cady and Michaelson.

8:45 – 9:45 AM

DCIS

Melvin J. Silverstein, MD, FACS

The lecture will focus on the controversy of whether or not to give radiation therapy for every DCIS patient who elects to save her breast. We'll explore 10 reasons to consider excision alone as full treatment for DCIS.

9:45 – 10:15 AM

Reconstruction Options in Breast Cancer

Aldona Spiegel, MD

Recent trends in breast reconstruction now include multiple options for the woman facing breast surgery and these choices can often be overwhelming. In this session, techniques such as skin-sparing, nipple-areolar sparing, and timing of reconstruction will be reviewed.

10:15 – 10:45 PM

Break Time with Vendors in Exhibit Hall

10:45 AM – 12:15 PM

CONCURRENT SESSIONS

CHOOSE ONE OF THREE TRACKS

RT/RN TRACK

Track Moderator - Louise Miller, RT(R)(M)

10:45 – 11:15 AM

Breast Cancer: The Children's Perspective

Paula Rauch, MD

This session will review the developmental principles that inform how a child understands a parent's breast cancer diagnosis and treatment. Using these developmental principles, practical recommendations will be offered on how to support the family, maintain a child's routines and facilitate parent-child communication. The participants will also be guided to some resources that patients, families and clinicians may find useful.

11:15 AM – 12:15 PM

RTs and RNs: Bridging the Communication Gap

Barbara Rabinowitz, PhD, MSW, RN and Julia Rowland, PhD

Working well together is the ideal, and not always attained. Understanding some of the underpinnings of workplace conflicts can help avoid those pitfalls. Techniques regarding conflict resolution once it has surfaced may be called upon. This session will address each of these issues

CLINICAL TRACK

Track Moderator - Maurice Nahabedian, MD

10:45 – 11:45 AM

Medical Controversies in Breast Cancer

Don S. Dizon, MD, FACP

The medical management of new breast cancers has become more complicated in recent years and while we have learned much in how to manage subsets of breast cancer, more questions arise with each new discovery. In this lecture we will aim to tackle controversial areas of breast cancer management, drawing on best evidence available and how technology can both inform and confuse the decision-making process.

11:45 AM – 12:15 PM

Contralateral Prophylactic Mastectomy

John L. Bell, MD, FACS

The participant will understand current evidence-based guidelines for the use of contralateral prophylactic mastectomy. The discussion will include patients at high risk who have recently or remotely been diagnosed with unilateral breast cancer, and patients who desire this procedure for a variety of reasons (such as symmetry). The discussion will include topics related to timing, techniques and the role of reconstruction.

ADMINISTRATION TRACK

Track Moderator - Patricia Barlow, NP

10:45 – 11:15 AM

Integrating PACS in Breast Centers

William R. Poller, MD

This session will examine issues associated with integrating PACS into the workflow of the radiologist, surgeon and oncologist. Areas explained will be the workstation and display issue, the impact this can make and access to image by the caregivers after the diagnosis is made.

11:15 AM – 12:15 PM

So You Want to Start a Sexuality Program?

Michael Krychman, MD, FACOG

This lecture will present all the facts of starting a sexual health program. Topics to be covered will include marker analysis, business development and billing



12:15 – 1:45 PM Lunch Time with Vendors in the Exhibit Hall

Afternoon Plenary Moderator - Yuri Parisky, MD

1:45 – 2:15 PM

Innovations in the Management of Complications in Breast Reconstruction

Aldona Spiegel, MD

Patient expectations of breast reconstruction should be understood prior to planned procedures. However, even with the most successful reconstructions, complications may arise that may heighten anxiety and cause great dissatisfaction to the patient. Aiming to identify complications early on and management strategies for more common complications of reconstruction will be presented in this timely lecture.

2:15 – 3:15 PM

Personalized Medicine

Susana Campos, MD, MPH

This course will discuss the role of technology in helping to make treatment decisions as well as technology's role in treatment after recurrence is documented. Options for treatment of HER-2/neu positive breast cancer will also be discussed.

3:15 – 3:45 PM

Families Get Breast Cancer: Addressing the Challenges Faced by Partners of Patients With Breast Cancer

Marc Heyison

Breast cancer not only affects the patient, it affects the patient's entire family, realm of friends and associates. Any one of these may fill the role of the caregiver of the patient with breast cancer. This session will discuss this role and its impact on the patient's health and well being. Also presented will be issues faced by partners after a patient's breast cancer has been diagnosed. This course will also offer coping mechanisms to assist those who have relationships with the breast cancer patient.

3:45 – 4:15 PM

Breast Cancer in Pregnancy: An Interdisciplinary Approach

Lidia Schapira, MD

In this session we will address the special challenges of diagnosing and treating breast cancer during pregnancy. Tumor biology, stage and the timing of the diagnosis during pregnancy determine the range of treatment options. Specific drugs and diagnostic and surgical procedures considered safe during pregnancy will be discussed during the presentation. Finally, we will discuss a practical approach to preservation of fertility for young women undergoing breast cancer treatment.

4:15 – 4:45 PM

Addressing the Needs of Parents: The MGH Parenting at a Challenging Time Program

Paula Rauch, MD

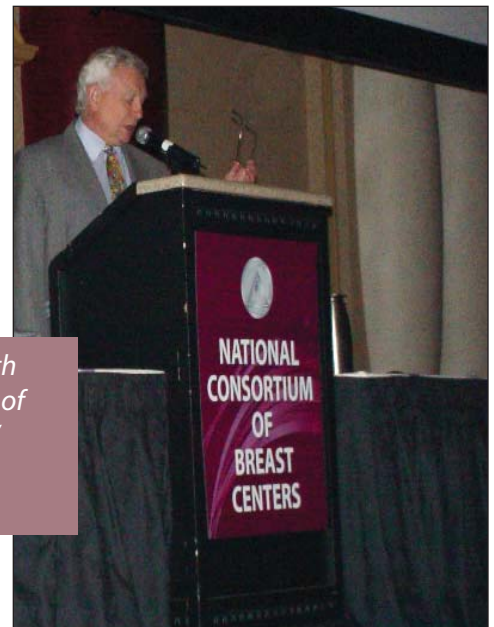
This talk will present the need for parent guidance programs to address the concerns of mothers with breast cancer. The data on this topic will be briefly reviewed. The program at the Massachusetts General Hospital will be described. Guiding principles on how to address the concerns of parents will be offered.

4:45 PM Conference Ends for the Day



"The conference is extremely worthwhile with impressive clinical contributions. The caliber of speakers exceeded all of my expectations!"

Amy Beazizo, RN, BSN, OCN
Roseville, CA





6:15 – 7:15 AM

Choose One of Two Vendor-Hosted Breakfast Symposia

Morning Plenary Moderator- Lee Bronfman, RN, MA, CCRP

7:30 – 7:45 AM

Intro/Opening/General Membership Meeting

Kevin S. Hughes, MD, FACS

7:45 – 8:45 AM

Back to Basics: Mammographic Signs of Early Breast Cancer

László Tabár, MD, FACR(hon)

As in all radiological examinations, a systematic approach is important to ensure that all regions of the image are viewed thoroughly. When viewing the mammograms, it is important to be familiar with the mammographic appearance of the various pathologic lesions, but also to know where breast cancers are most likely to be found. Breast malignancy occurs at a varying frequency in the different quadrants of the breast. Perception of calcifications is not greatly affected by breast density or lesion location. They are frequently observed on the mammogram and the vast majority of them have a typically benign appearance. A careful analysis of all suspicious calcifications should be based on an understanding of the underlying pathophysiologic processes leading to their formation. Perception of an abnormality will be followed by a thorough analysis using multimodality approach in order to arrive at the correct diagnosis.

8:45 – 9:45 AM

Breast Cancer: A Genomic Overview

COL Craig D. Shriver, MD

Breast Oncology has moved beyond traditional characterizations based on microscopic evaluation. The era of genomics has changed the way we discuss breast cancer subtypes and is now impacting on how treatment decisions are rendered. To be a breast cancer provider one must become comfortable in the era of genomics and this overview will discuss the developments that have lead to the revolution in the field of breast oncology.

9:45 – 10:15 PM

Break Time with Vendors in Exhibit Hall

Morning Plenary Moderator- Kristie Bobolis, MD

10:15 – 10:45 AM

Addressing Multicultural and Social Diversity

Lidia Schapira, MD

The etiology of racial and ethnic disparities in breast cancer is complex and the implications are far reaching. Unequal access to screening and preventive services, differences in biology and limited access to treatment may help explain the worse outcomes traditionally seen among women with breast cancer. We should continue to support those interventions that increase mammography use among the medically underserved by addressing the barriers such as cost, language and acculturation limitations, deficits in knowledge and cultural beliefs, literacy and health system barriers such as insurance and having a source of regular medical care. Culturally tailored interventions that target other minority populations will be reviewed and novel approaches to increase minority participation in clinical trials will be discussed.

10:45 – 11:45 AM

Interesting Patients, Their Images and Pathology: Multidisciplinary Case Management

Moderator: Kristie Bobolis, MD

William R. Poller, MD, FACR, Brigid O'Connor, MD, PhD, Lillie Shockney, RN, BS, MAS, Cary S. Kaufman, MD, FACS, Don S. Dizon, MD, FACP, F. Lee Tucker, MD, FCAP

Providing care to newly diagnosed patients with breast cancer requires coordination of multiple disciplines. Appropriate workup and management may involve numerous subspecialties including radiology, surgery, pathology, medical oncology, and radiation oncology. Additional supportive services vital to providing coordinated care for patients include nursing, social services and genetic counseling. The value of a multidisciplinary approach will be highlighted in the presentation of cases which detail step-by-step management from initial physical findings, imaging to diagnostic approaches and management.

11:45 AM – 12:30 PM

Lunch Time with Vendors in Exhibit Hall

Wednesday Continues

with the

New!

SURVIVORSHIP SYMPOSIUM!



Survivorship Symposium

New!

As professionals have brought their expanding clinical knowledge base and their compassion forward on behalf of improving care for women with breast cancer over the years, we have been rewarded by women's acknowledgement of the value of these changes and improvements. However, sitting back on the laurels of advances in diagnostics, surgery, adjuvant therapies, and even in patient navigation is not enough. It is time, as acknowledged by the Institute of Medicine, that the healthcare community deal with the shift in caring needs as our patients move from "cancer patient" to "cancer survivor" and not leave them "lost in transition".

This NCBC Survivorship Symposium has been planned to offer an intensive into the world of cancer survivorship. Lectures and discussions will focus on many of the vital life issues that survivors face and with which they grapple. For this session, NCBC brings together experts in these domains and book-ends these meaningful educational forays with an overview with which to begin a look at an example of a program at session end with which health care providers and programs can help our patients, who count on us to "be there for them" and to do the right things as they continue their journey into survivorship.

12:30 – 1:00 PM

Breast Cancer Survivorship: Past, Present and Future

Julia Rowland, PhD

With advances in early detection, treatment effectiveness and supportive care, the number of breast cancer survivors is steadily growing. However, surviving cancer long-term brings with it, however, unique physical, emotional, social and economic demands. These can affect a woman's future function and quality of life. This session will provide an overview of the history of breast cancer survivorship, what the research and survivors themselves are telling us, and the opportunities being created to enhance the length and quality of survival for women diagnosed with and treated for breast cancer.

1:00 – 1:30 PM

What Now: Followup Guidelines After Breast Cancer Treatment

John L. Bell, MD, FACS

Women with breast cancer are often told to resume their life as if nothing had happened to them, but the time of transition from cancer treatment to followup can be a period of heightened psychological distress. Educating providers and patients as to how they will be followed is critical to alleviating the anxiety and will be discussed.

1:30 – 2:00 PM

What Was I Doing Again: Cognitive Function Following Breast Cancer Chemotherapy

Catherine Jansen, RN, PhD, OCN®

Women receiving chemotherapy for breast cancer often complain of changes in cognitive function which, in turn, have a profound impact on their quality of life. However, the evidence for chemotherapy-induced cognitive changes is inconsistent. The purpose of this session is to review the state of the science and evidence-based information regarding key aspects in chemotherapy-induced cognitive changes in breast cancer patients. A brief overview of cognitive function will be provided as a beginning framework. This will be followed by a review of recent studies of chemotherapy-induced cognitive changes in breast cancer patients, along with current evidence for interventions to manage cognitive impairments.

2:00 – 2:30 PM

Addressing Sex and Intimacy: I am a Sexy Breast Cancer Survivor

Michael Krychman, MD, FACOG

This lecture will address etiology of sexual complaints, sexual health assessment and treatment overview while focusing on the multi-faceted treatment healthcare team.

2:30 – 3:00 PM

Adjusting to Life as a Survivor: Stress and Coping Across the Journey

Julia Rowland, PhD

Adaptation to cancer does not end when treatment stops. Making the transition to recovery and beyond brings multiple stressors. Finding a 'new normal,' managing persistent effects of illness, managing uncertainty, and anticipating and establishing plans to minimize threats to future health must be negotiated. This session will outline the psychological challenges to living fully after breast cancer and techniques to address these.

3:00 – 3:30 PM

Fatigue Following Breast Cancer Therapy: Don't Take it Lying Down

Bernardine Pinto, PhD

Cancer-Related Fatigue (CRF) is the most common problem reported by cancer survivors. It is considered to be one of the most distressing sequela that affects survivors' quality of life. Patients frequently report that CRF worsens during treatment and persists months and even years after treatment completion. CRF can affect survivors' physiological functioning, mood, cognitive and social functioning. With improvements in treatments and improved survival, the adverse impact of CRF is accentuated. This presentation will focus on management of CRF with special emphasis on non-pharmacological approaches including exercise interventions.

3:30 – 4:15 PM

Modeling a Cancer Survivorship Program at Your Center

Penny Damaskos, LCSW

This presentation will provide an overview of a compressive survivorship counseling program. The model presented is based on an established, extensive counseling program but is applicable to multiple environments. Contents of the program will be discussed as well as how it fits within a larger survivorship program that encompasses medical follow up and research. Development of groups, maximizing resources and theoretical underpinnings for counseling program will be discussed.

4:15 – 5:00 PM

Questions and Answers, Concluding Remarks

5:00 PM Conference Ends

4:45 – 7:45 PM **Post Conference - Breast Self Examination Trainer Certification Course**

4:45 – 7:45 PM **Post Conference - Grant Writing Course**