

SACRO CUORE
DON CALABRIA



I R C C S

IRCCS

Istituto di Ricovero e Cura a Carattere Scientifico

Sacro Cuore - Don Calabria

Ospedale Classificato e Presidio Ospedaliero Accreditato - Regione Veneto

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Cancer Care Center

Incontri di aggiornamento del Dipartimento Oncologico

Responsabile Scientifico:

DOTT.SSA STEFANIA GORI

26 ottobre - 9 novembre

23 novembre - 30 novembre

2022

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26 ottobre 2022

dott. Fabrizio Nicolis

Direttore Sanitario

Mercoledì 26 ottobre

- Centro Formazione e Solidarietà -

Il carcinoma del colon retto

Mercoledì 9 novembre

- Sala convegni "Fr. Francesco Perez" -

Il carcinoma della mammella

Mercoledì 23 novembre

- Centro Formazione e Solidarietà -

Gruppo Oncologico Multidisciplinare (GOM) Tumori della Mammella: modalità di lavoro e discussione di casi clinici

Mercoledì 30 novembre

- Sala convegni "Fr. Francesco Perez" -

La gestione del dolore nel paziente oncologico: dalla fisiopatologia al trattamento

Sessione 1

MODERATORI: GIUSEPPE ZAMBONI, GIACOMO RUFFO

- 14.40** I numeri del carcinoma del colon retto in Italia e fattori di rischio
ALESSANDRO INNO
- 14.55** Screening nella popolazione a rischio medio e ad alto rischio e diagnosi clinica e strumentale
PAOLO BOCUS
- 15.25** Referto anatomico-patologico: quali informazioni deve contenere?
PAOLA CASTELLI
- 15.40** Discussione

Sessione 2

MODERATORI: GIACOMO RUFFO, ROBERTA FREONI

- 15.50** Stadiazione
GIOVANNI FOTI
- 16.05** Chirurgia
GIACOMO RUFFO
- 16.20** Ruolo dell'infermiere stomaterapista nella gestione dei pazienti operati
DEBORA DALLE PEZZE

Sessione 3

MODERATORI: STEFANIA GORI, FILIPPO ALONGI

- 16.35** Terapia sistemica adiuvante e follow up
ALESSANDRO INNO
- 16.50** Ruolo del Farmacista Ospedaliero
ROBERTO TESSARI
- 17.05** Carcinoma del retto: trattamento neo-adiuvante
ELISA BERTOCCHI
- 17.20** Gestione del paziente con carcinoma del colon-retto metastatico
MASSIMO CIRILLO
- 17.35** La radioterapia nel Carcinoma del colon-retto
LUCA NICOSIA
- 17.50** PDTA del carcinoma del colon retto
MASSIMO CIRILLO
- 18.05** Discussione
- 18.15** Compilazione questionario ECM
- 18.30** Chiusura dei lavori

Mercoledì 26 ottobre
- Centro Formazione e Solidarietà -

Il carcinoma del colon retto

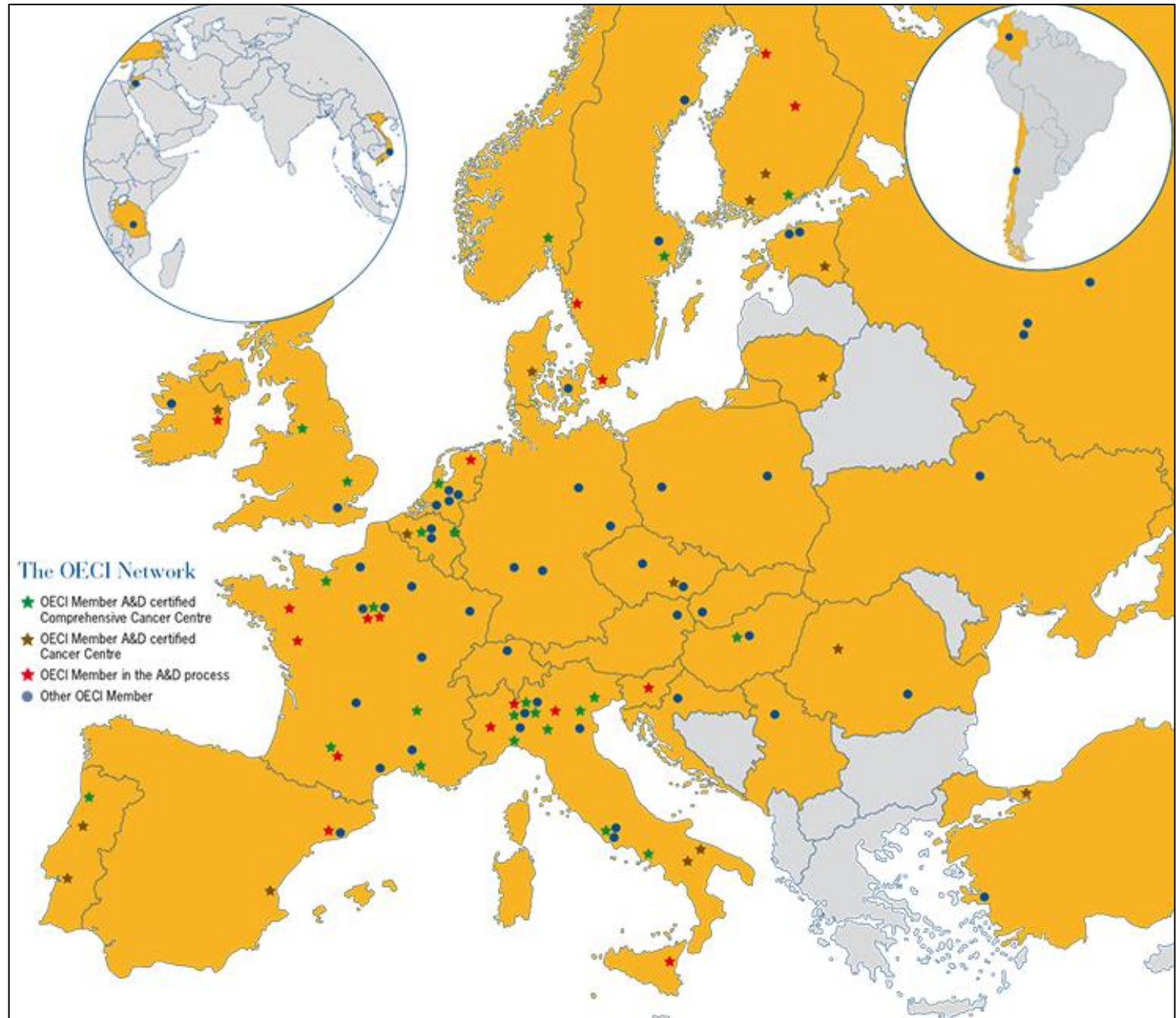
Site Visit – 8 e 9 giugno 2022





ORGANISATION OF EUROPEAN CANCER INSTITUTES

EUROPEAN ECONOMIC INTEREST GROUPING

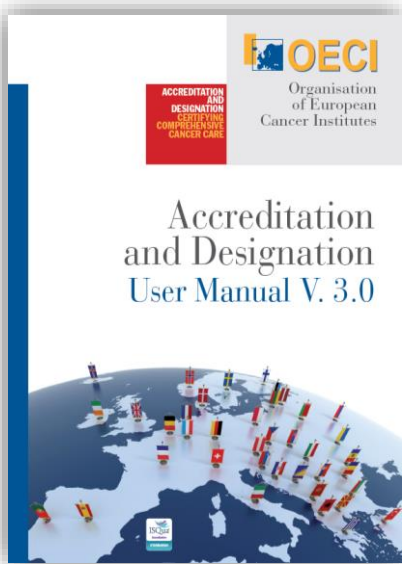


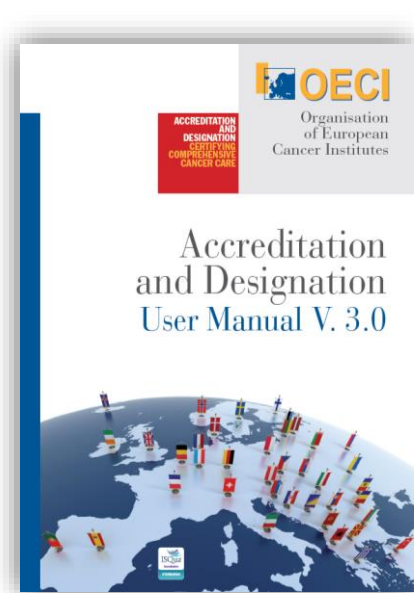
OECI

Qualitative Standards

CAPITOLI

1. Governance of the cancer centre/institute
2. Organisation of quality systems
3. Patient involvement and empowerment
4. Multidisciplinary
5. Prevention and early detection
6. Diagnosis
7. Treatment
8. Research
9. Education and training





Chapter 9: Education and training (standards 83 to 85)

Analysing and providing for oncology training needs	
Standard 83	
The cancer centre/institute analyses the specific training and continuous education needs in oncology and defines training and educational programmes.	
1.	The cancer centre/institute analyses the specific training and oncological continuous education needs of its staff regularly (preferably annually, cross reference to Chapter 2, Standard 17).
2	CORE Relevant training is provided to all staff according to individual needs, institutional requirements, and regulatory requirements, including Good Clinical Practice.
3.	Based on the analysis, the institution defines an annual or multi-annual oncology training programme for physicians.
4.	Based on the analysis, the cancer centre/institute defines an annual or multi-annual oncology training programme for researchers.
5.	Based on the analysis, the cancer centre/institute defines an annual or multi-annual oncology training programme for nurses.
6.	Based on the analysis, the cancer centre/institute defines an annual or multi-annual oncology training programme for supportive disciplines.
7.	The cancer centre/institute collects and analyses feedback about the quality of the continuous professional education and training programmes.





ELSEVIER

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year 2020

The Breast

journal homepage: www.elsevier.com/brst



Original article

The requirements of a specialist breast centre

Laura Biganzoli ^{a,*}, Fatima Cardoso ^{b,1}, Marc Beishon ^c, David Cameron ^d,
Luigi Cataliotti ^e, Charlotte E. Coles ^f, Roberto C. Delgado Bolton ^g, Maria Die Trill ^h,
Sema Erdem ⁱ, Maria Fjell ^j, Romain Geiss ^k, Mathijs Goossens ^l, Christiane Kuhl ^m,
Lorenza Marotti ⁿ, Peter Naredi ^o, Simon Oberst ^p, Jean Palussière ^q, Antonio Ponti ^r,
Marco Rosselli Del Turco ^s, Isabel T. Rubio ^t, Anna Sapino ^u, Elzbieta Senkus-Konefka ^v,
Marko Skelin ^w, Berta Sousa ^x, Tiina Saarto ^y, Alberto Costa ^c, Philip Poortmans ^z



Meeting Multidisciplinari (MDT meeting – MDM)

- At least 95% of all early and locally advanced breast cancer cases and at least 50% of metastatic cases must be discussed at the meeting (but in future the goal is that all cases, early and metastatic, are discussed at the MDM).

- Looking at multidisciplinary aspects an observational cohort study evaluated the effects on breast cancer survival on nearly 14,000 women in Scotland, and found MDT working was associated with a 18% lower breast cancer mortality at 5 years [99]. By comparing an area where MDT working was introduced with areas that had not implemented it, the authors found that it probably improves patient outcomes by influencing various aspects of care, such as adherence to guidelines, nurse education, increased surgical volume and experience, and improved interdisciplinary working. A study in Taiwan that compared those receiving MDT treatment with those without found that MDT intervention significantly increased the breast cancer survival rate [100]. A population study from a region in Germany suggested there may be evidence of increased mortality if breast cancer patients do not receive guideline compatible treatment [101].

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