



CASE

CASE WESTERN RESERVE UNIVERSITY  
SCHOOL OF MEDICINE



Institute for Surgery  
and Innovation



Wolstein Research Building | University Hospitals Case Medical Center, Cleveland, Ohio

Friday September 28, 2007

# Oncoplastic Surgery for Breast Cancer

COURSE DIRECTOR  
Julian Kim, MD

Professor of Surgery  
Chief, Division of Surgical Oncology  
University Hospitals Case Medical Center, Cleveland, Ohio



## Course Description

The concept of oncoplastic surgery for patients with breast cancer has advanced significantly over the past decade. Please join us as we discuss topics such as proper incision and tissue handling for breast conservation procedures, skin and nipple-sparing mastectomy and prosthetic and autologous tissue reconstruction. The course will provide a valuable learning experience for general surgeons, breast surgeons, plastic surgeons and oncologists who care for patients undergoing surgery for breast cancer. Video presentations and “hands-on” surgical technique in animal laboratory operating rooms will allow the participants to become familiar with the technical challenges of oncoplastic surgical procedures.

## Educational Objectives

Upon completion of this course, participants will be able to:

1. Discuss the role of oncoplastic surgery in the management of patients with breast cancer.
2. Discuss the incision placement options in patients undergoing breast conserving surgery for cancer.
3. Discuss the rationale and results of both skin-sparing and nipple-sparing mastectomy procedures.
4. Discuss the various reconstruction options for patients undergoing mastectomy.

## Continuing Education

The Case Western Reserve University School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The Case Western Reserve University School of Medicine designates this education activity for a maximum of **8 AMA PRA Category 1 credits<sup>TM</sup>**. Physicians should only claim credit commensurate with the extent of their participation in the activity.

## Acknowledgment

Educational grants from corporate sponsors in support of this course are gratefully acknowledged. Acceptance of funding in support of this program does not constitute endorsement of any product or manufacturer.

**Policy Disclosure** The policy of the Case School of Medicine CME Program (Case) requires that the Activity Director, planning committee members and all activity faculty (that is, anyone in a position to control the content of the education activity) disclose to the activity participants all relevant financial relationships with commercial interests. Disclosure will be made to activity participants prior to the commencement of the activity. Case also requires that faculty make clinical recommendations based on the best available scientific evidence and that faculty identify any discussion of “off-label” or investigational use of pharmaceutical products or medical devices.

## COURSE AGENDA

- 7:30 am Registration/Cont. Breakfast
- 8:00 am Welcome  
*Julian Kim, Course Director*
- 8:15 am Breast Conserving Surgery- Technical Factors to Ensure Best Oncologic and Cosmetic Outcome  
*Rosemary Leeming, MD*
- 9:00 am Oncoplastic Techniques for Everyday Practice: Tricks of the Trade  
*Robert Shenk, MD*
- 9:45 am Reconstructive Options for Patients Undergoing Mastectomy: From Simple to Complex  
*Hooman Soltanian, MD*
- 10:30 am Questions/Coffee Break
- 10:45 am Radiation Therapy- What You Should Know Before You Reconstruct  
*Janice Lyons, MD*
- 11:30 **VISITING PROFESSOR LECTURE**  
Oncoplastic surgery- Perspective from Memorial Sloan Kettering Cancer Hospital  
*Joseph Disa, MD*
- 12:30 pm LUNCH
- 1:15 pm Skin and Nipple-Sparing Mastectomy- Data from an Oncologic Perspective  
*Julian Kim, MD*
- 2:00 pm Nipple-Areola Sparing Mastectomy- Cleveland Clinic Experience and How I Do It  
*Joseph Crowe, MD*
- 2:45 pm Nipple-Areola Sparing Mastectomy- Video Presentation  
*Julian Kim, MD*
- 3:15 pm Hands-On Lab for Nipple-Sparing Mastectomy on Porcine Model
- 5:00 pm Questions/Wrap-up/Adjourn

### ACTIVITY DIRECTOR

*Julian Kim, MD*  
Professor  
Division Chief Surgical Oncology  
University Hospitals Case Medical Center

### GUEST FACULTY

*Joseph Disa, MD*  
Plastic Surgery  
Memorial Sloan Kettering Cancer Center  
New York, New York

*Joseph Crowe, MD*  
Director, Breast Center  
Cleveland Clinic  
Cleveland, Ohio

### FACULTY

*Rosemary Leeming, MD*  
Assistant Professor  
Division of General Surgery  
University Hospitals Case Medical Center

*Janice Lyons, MD*  
Assistant Professor  
Director Breast Cancer Service  
Division of Radiation Oncology  
University Hospitals Case Medical Center

*Robert Shenk, MD*  
Associate Professor  
Medical Director Breast Center  
Division of General Surgery  
University Hospitals Case Medical Center

*Hooman Soltanian, MD*  
Assistant Professor  
Department of Plastic Surgery  
University Hospitals Case Medical Center

## COURSE INFORMATION

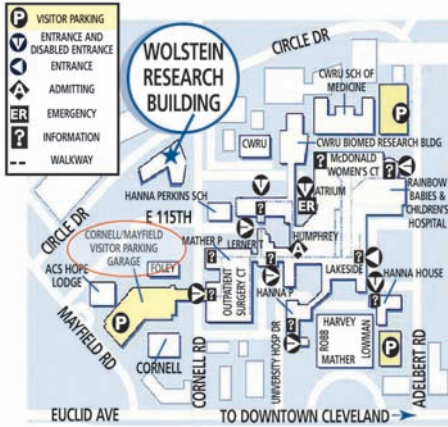
### Meeting Location

University Hospitals Case Medical Center  
Wolstein Research Building

### Parking

The Cornell/Mayfield Visitor Parking Garage is accessible from Cornell or Mayfield Roads.

Exit the garage at ground level and proceed left on Cornell. You are responsible for your own parking charges. Persons with disabilities should inform the Case CME Program of any special services required.



### Lodging Information

#### Baricelli Inn

(0.1 miles to Case)  
2203 Cornell Road  
Phone 216-791-6500  
[www.baricelli.com](http://www.baricelli.com)

#### The Glidden House

(0.5 miles to Case)  
1901 Ford Drive  
Phone 216-231-8900  
[www.gliddenhouse.com](http://www.gliddenhouse.com)

#### Inter-Continental Hotel & Conference Center Cleveland

(1.0 miles to Case)  
9801 Carnegie Avenue  
Phone 216-707-4100  
[www.cleveland.intercontinental.com](http://www.cleveland.intercontinental.com)

#### Wyndham Cleveland at Playhouse Square

1260 Euclid Avenue  
Phone: 216-615-7500  
[www.wyndham.com/hotels/CLEPS/main.wnt](http://www.wyndham.com/hotels/CLEPS/main.wnt)

Please contact these facilities directly to determine availability and make your reservation. For information on other accommodations in the University Circle area call the Case/UHCMC CME Program at

216-844-5050 or 800-274-8263.



## REGISTRATION INFORMATION

Registration includes all educational sessions, course syllabus, hands-on lab, continental breakfast, lunch and refreshment breaks.

Registration is on a first-come basis and is limited for optimal hands-on experience in the animate lab. Register by mail using the tear-off form, by fax, phone or on-line with a credit card. Advance payment secures your participation in the program.

### Late Registration and Cancellation Policy

After Friday, September 7, 2007, register on a space-available basis by calling the Case CME Program at 216-844-5050 or 800-274-8263. Full refunds will be made for cancellations on or prior to September 14, 2007 only.

### Four Ways to Register

1. **Mail** this registration form with your check or credit card number to:  
Registrar, Case/UHCMC CME Program  
11100 Euclid Avenue  
Cleveland, OH 44106-6026
2. **Fax** this form with your credit card number to (216) 844-8133
3. **Phone** (216) 844-5050 or (800) 274-8263 with the information requested below and your credit card number
4. **Register on-line** at <http://cme.case.edu>

## Oncoplastic Surgery for Breast Cancer • Friday, September 28, 2007 • CID #2236

|               |  |           |        |
|---------------|--|-----------|--------|
| First Name    | MI                                     | Last Name | Degree |
| Specialty     | Social Security number (last 4 digits) |           |        |
| Address       |  |           |        |
| City          | State                                  |           | Zip    |
| Phone         | Fax                                    |           |        |
| Email Address |  |           |        |

Tuition (check one)

Lecture Session Only \$250

Lecture & Lab: \$500 (Limited Lab Space)

Enclosed is my check payable to Case Western Reserve University

Charge my:  Visa  MasterCard  Discover

Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_ Signature \_\_\_\_\_