SCOUT® REPORT

SAVI SCOUT®

News and Views on Surgical Guidance and Breast Tumor Localization

THINK WIRE-FREE™ Breast Tumor Localization Education Course

A group of physicians gathered on March 29-30 at Merit Medical's Educational Center, Salt Lake City, UT for the inaugural THINK WIRE-FREE course. The course was designed by radiologists and surgeons to educate their colleagues looking to implement or expand an advanced wire-free breast tumor localization program at their facility or healthcare system.

Wire-free breast tumor localization is quickly becoming standard of care for achieving optimal clinical results while at the same time offering women a better experience—from biopsy to surgery. The THINK WIRE-FREE course explored advancing wire-free tumor localization for use in breast conserving surgery for oncoplastic procedures, prior to neoadjuvant therapy, for localizing lymph nodes and for placement at biopsy. In addition the proctor led discussion on workflow efficiency and future wire-free technology developments.

Proctors Mary K. Hayes, MD, board certified radiologist specializing in Women's Imaging and Chief of Women's Imaging at Memorial Health Centers and Barry Rosen, MD Chairman of the Department of Surgery at Advocate Illinois Masonic Medical Center and Medical Director of the Breast Center at Advocate Good Shepherd Hospital, Chicago, IL led the discussion and reflector implantation and procedure steps during the course.

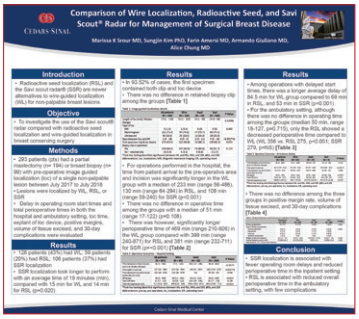
VIEW UPCOMING COURSES

Comparison of Wire Localization, Radioactive Seed, and SAVI SCOUT Radar for Breast Disease at Cedars Sinai Medical Center

This poster presented at the 2019 Society of Surgical Oncology (SSO) meeting involved 293 patients who underwent breast lesion localization between July 2017 and July 2018 compared the three techniques:

- For operations performed in the hospital setting - time from patient arrival to pre-operative area and incision was considerably longer with the wire-loc (WL) group (233 minutes) compared to the RSL group (130 minutes) to the SCOUT localized group (108 minutes).
- Peri-operative time of 469 minutes for the (WL) group compared to 399 minutes for the RSL group and 381 minutes for the SCOUT localized group.
- Delayed start times reflected an average of 84.5 for the WL group, 69 min for the RSL group and 53 minutes for SCOUT localized group.

Conclusion: SCOUT localization is associated with fewer operating room delays and reduced perioperative time in the inpatient setting.


Comparison of Wire Localization, Radioactive Seed, and Savi Scout® Radar for Management of Surgical Breast Disease

DOWNLOAD THE FULL STUDY NOW

ASBrS Breakfast Symposium Opportunity

THINK **WIRE-FREE**™

Advanced Utilization of Wire-Free Technology from Biopsy to Surgery

Learn how advanced applications of SCOUT™ Radar Localization enable enhanced efficiency, precision and patient experience for placement at time of biopsy, localization prior to neoadjuvant therapy, and oncoplastic surgery.

WHO SHOULD ATTEND

This THINK Wire-Free event is designed for surgeons, breast surgery fellows and administrators interested in learning more about advanced applications of wire-free breast tumor localization.

Saturday, May 4, 2019

Breakfast, 6:30am–7:45am
Hilton Anatole Hotel
Room: Wedgwood Room

To register:
www.merit.com/thinkwirefree.

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