

# SCOUT Report

News and Views on Surgical Guidance  
and Breast Tumor Localization



## Dr. Pat Whitworth, MD

Breast Surgical Oncologist and Director,  
Nashville Breast Center

Dr. Whitworth is a pioneer in new methods of breast tumor localization that both improve the surgical outcome and the patient experience. Among his clinical interests are cancer genetics, targeted treatments, minimally invasive surgery and breast oncoplasty. Some of his recent work and publications include advancing and expanding the use of genetic testing by breast surgeons to aid in decision-making and optimal patient treatments.



## American Society of Breast Surgeons Awards SCOUT® Breast Localization Presentation the Scientific Impact Award

A clinical research presentation on the performance of the SAVI SCOUT® breast localization and surgical guidance system in facilitating the removal of non-palpable breast lesions earned the Scientific Impact Award at the American Society of Breast Surgeons (ASBrS) annual meeting, which was held April 13-17 in Dallas, Texas. The presentation, given by breast surgical oncologist and director of the Nashville Breast Center Pat Whitworth, M.D., was judged by surgical professionals in attendance as having the greatest scientific impact on breast cancer care.

Dr. Whitworth presented the results of the prospective, single-arm, multi-site clinical evaluation study of SCOUT on behalf of the investigators. Data from the trial of 154 patients demonstrated a 100 percent surgical success rate using SCOUT, with significantly lower repeat surgery rates than those commonly reported when using wire localization.

"SCOUT has practice changing potential to improve the way we locate breast tumors, benefitting thousands of patients and clinicians, said Dr. Whitworth, Director of the Nashville Breast Center. "I'm extremely proud to receive the Scientific Impact Award on behalf of the many physicians and researchers who contributed, especially my colleague, study principal investigator and SCOUT pioneer Dr. Charles Cox."<sup>1</sup>

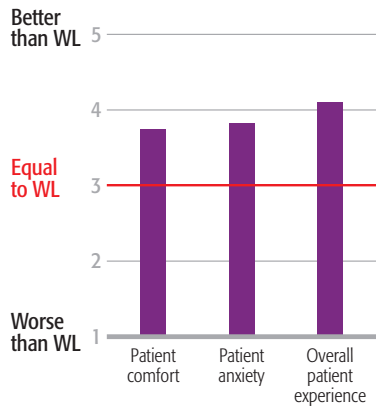
### High Clinician Satisfaction

The study also demonstrated high clinician satisfaction with SCOUT. On a

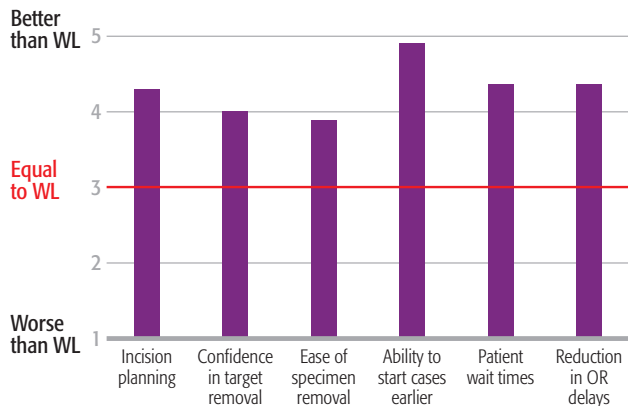
*"In addition to clinician satisfaction, post-procedure surgery data indicated that 97 percent of patients would recommend SCOUT to other patients."*

scale of 1-5, where 3 was equal to wire localization, surgeons favorably rated the ability to start cases earlier at 4.9, and the reduction in OR scheduling delays at 4.3. Using the same scale, radiologists rated patient comfort, patient anxiety and overall patient experience better than wire localization at 3.7, 3.8 and 4.1 respectively.

### REFLECTOR PLACEMENT



### SURGICAL GUIDANCE



### Patient Satisfaction

In addition to clinician satisfaction, post-procedure survey data indicated that 97 percent of patients would recommend SCOUT to other patients.

According to Dr. Cox, "SCOUT is easy to use and does what it should in terms of improving surgical efficiency. The learning curve for surgeons using the device for the first time is minimal, and it eliminates a lot of guesswork of trying to figure out precisely where the lesion is located in the breast from the radiographic imaging."

The study was conducted at 11 sites, with 16 surgeons and 20 radiologists contributing. Participating centers included: University of South Florida Breast Health, Nashville Breast Center, Baylor Regional Medical at Plano, Cancer Centers of Colorado, Hackensack University Medical Center, UC Irvine Health Pacific Breast Care Center, Medical Center of Plano Complete Breast Care, Morton Plant Mease Hospital, New York University Langone Medical Center, Pink Lotus Breast Center and Texas Breast Specialists.

1. Charles E. Cox, M.D is professor of surgery and McCann Foundation Endowed Professor of Breast Surgery at the University of South Florida College of Medicine.

## Hospitals Value Improving Performance over Cost Cutting

A new report about the current priorities of hospital executives indicated that "maximizing performance against CMS' risk-based payment and quality metrics" is the number-one way in which they hope to rein in costs. "Driving operational efficiency" ranked second. The information is based on a survey of 85 hospital executives conducted in late 2015 and early this year and was published online at MDDI Medical Device and Diagnostic Industry News.

### SCOUT's Impact on Quality Measures

Advanced technologies like SAVI SCOUT breast localization and surgical guidance system can help hospitals meet their performance and operational

efficiency goals. Favorable feedback from clinicians, patients and administrators indicate that SCOUT is helping to address unmet needs through improved workflow, simplified scheduling and high quality



clinical results across diverse healthcare delivery settings.

### Quality Metrics

SCOUT's higher level of localization precision may improve quality clinical results. The ability to precisely locate the tumor increases the probability of complete cancer removal and reduces the likelihood of needing follow-up surgeries—a huge advantage for breast cancer patients. In addition, SCOUT allows the surgeon to plan a surgical approach that may result in less tissue being removed during surgery and has the

potential to improve cosmetic outcomes. This adds up to increased patient satisfaction.

### Operational Efficiency

The most common challenges reported with current localization techniques involve scheduling and workflow. SCOUT has the potential to significantly reduce or even eliminate operational inefficiencies by decoupling surgical schedules and radiology schedules. Not only can this potentially reduce surgical delays, it can lead to more predictable radiology schedules and increased productivity.



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