

# SCOUT Report

News and Views on Surgical Guidance  
and Breast Tumor Localization



## Dr. Alice Police, MD

Breast Surgeon  
UC Irvine Medical Center

Dr. Alice Police was the first surgeon in the country to adopt SCOUT in late 2015, at UC Irvine Medical Center, in Orange County, CA.



"My focus is always on finding a better breast cancer operation," Dr. Police said. "SCOUT is the standard of care for my breast localizations as I utilize this wire-free

approach for all scenarios requiring localization. The distance feature provides more control over the procedure which is important for predictable outcomes."

Dr. Police recently completed validation of the next generation SCOUT that will measure and display distance in millimeters and she shares her perspectives on the most advanced breast localizing system in the industry.

## Next Generation SCOUT® with Real-Time Distance Management

### How has SCOUT made your breast surgeries clinically more efficient?

Efficiency with SCOUT is experienced in two areas. The first is the fact that the reflector placement can be done prior to the day of surgery. This allows us to schedule cases first thing in the morning without any OR delays. This is HUGE! The second is clinical as SCOUT allows for precise location of the tumor which is crucial for a shorter operation time, smaller incision, speedier recovery, and to avoid another surgery.

### What were the enhancements of the next generation SCOUT ?

In addition to seeing the real time distance reading on the console, the next generation SCOUT is more sensitive and reacts faster to the reflector. It has an instant response and enhanced signal strength.

### Can you comment on the accuracy of the distance measurement?

The distance measurement is quite accurate and is a quantum leap forward in facilitating a more precise surgery. The measurement and the real-time distance that is displayed was consistently within 1mm of accuracy compared to ultrasound. An advantage of SCOUT is that it tells you in real-time the exact depth of the reflector, which can

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change depending on patient positioning and the amount of lidocaine used. Upon removing the specimen, using SCOUT from all sides showed the distance reading to be accurate from 360 degrees.

### **What is the main surgical benefit of the distance measurement?**

The distance measurement avoids what I call the “stack of pancakes” issue where you are right over the lesion but the dissection does not go deep enough on the first try. With the

SCOUT real-time distance innovation you can know if you are not deep enough and can adjust immediately. I believe this will enhance surgical guidance.

### **Was there a learning curve using next Generation SCOUT ?**

The next generation SCOUT is intuitive and just immediately better.



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