

RESEARCH TO PRACTICE



March 22

Wednesday

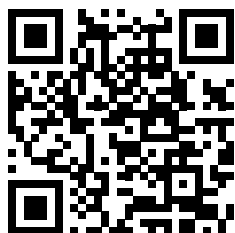
12:00 – 1:00 PM EST/EDT

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Clinical Updates in Breast Oncology



Emily Ray, MD, MPH

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UNC School of Medicine

University of North Carolina at Chapel Hill

Webinar Description

Innovations in breast oncology can translate to improved patient outcomes for patients with early and late-stage disease. In this webinar, Dr. Ray will discuss the latest research findings and how they can be translated into the clinical care of patients with breast cancer.

Learning Objectives

- Discuss adjuvant treatment for patients with high-risk, hormone receptor-positive breast cancer
- Explain adjuvant treatment options for patients with triple negative breast cancer after neoadjuvant chemotherapy plus immunotherapy
- Describe systemic treatment options and recommended sequencing of treatments for patients with metastatic breast cancer

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DISCLOSURE STATEMENT

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Speaker(s): The presenter has no relevant financial relationships with ineligible companies as defined by the ACCME.

ACCREDITATION

NCPD/CNE: The University of North Carolina at Chapel Hill is accredited with distinction as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation. To successfully complete this program and be awarded 1 contact hour you must attend at least 50 minutes of the seminar and complete the online evaluation.

ACPE: The UNC Eshelman School of Pharmacy Postgraduate/Continuing Education (PGCE) Program provides accredited professional educational activities for pharmacists and pharmacy technicians. The Eshelman School of Pharmacy of the University of North Carolina at Chapel Hill designates this live activity for a maximum of 1.0 ACPE Credit(s).

ASRT: The American Registry of Radiologic Technologists (ARRT) is a leading credentialing organization that recognizes qualified individuals in medical imaging, interventional procedures, and radiation therapy. This activity is worth 1 credit hour and is pending approval by the ASRT.

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