First, I would like to thank ASBrS and ACS for organizing these programs where young surgeons who perform breast cancer surgery are given the opportunity to acquire high-level continuing education, as well as establish valuable professional relationships (Networking).

I achieved several goals through my attendance in the program, both as a participant at the annual conference in Dallas, and during the visit to the hospital in Chicago.

1. Learn about new advances in breast surgery.
2. Refresh my knowledge on breast cancer surgical treatments for use on breast cancer patients.
3. Build professional networks in order to be able to carry on with continuing education as well as to share tips and experiences that may vary from country to country.
4. One of the most important objectives reached was to get to know different health-care protocols, both in the operating room and outpatient consultation; this way observing a different perspective of integral care provided to women suffering from this ailment.

The annual conference, this being the second time I have attended, was amazing due to the number of attendees and how these events were organized. The structuring of the program and was made so that there was a selection of topics that were interesting and focused on presenting up to date knowledge and procedures. ASBrS maintains high standards for its speakers, thus generating a high-quality, evidence-based conference. I had the opportunity to observe the effort put forth in order to conduct this successful conference.

The pre-courses prior to the conference were very interesting, as the topics were applicable and of interest to the professionals in attendance, in accordance with their specialization. Due to the fact that at the moment I am carrying out an investigation on mastitis, these topics were very useful for my research study, making this congress invaluable for expanding my professional, educational, and personal development,

Another pleasant surprise was being able to see my teacher from Mexico. In addition, it was interesting to meet colleagues from several Latin American countries with whom I was able to share experiences about our joint work environment, as well as American residents, who welcomed us with open arms.

The first visit was to UT Southwestern and Parkland Memorial Hospital where Natalia Partain MD welcomed me, whom I thank immensely for making it such a great experience. Natalia welcomed me, answered my questions, taught me new breast technologies, and walked me through the hospital facilities. She helped me to take part in a Tumor Board, where my presence was welcomed and my participation and opinions were accepted on an equal basis as that of other members of the group.
The second visit was to NorthShore in Evanston, where I was met by Dr. Katherine Yao, to whom I give my sincere thanks. She showed me the hospital facilities and the breast center. In addition I was able to witness patient management at this center. The respect and help given to patients with breast diseases from admission to discharge was impressive; with a supporting nurse and assistant dealing with the administrative and care intervention part, this way making it possible for the doctor to concentrate on the medical part.

She showed me that multidisciplinary work, such as having a radiology team on hand, is effective in speeding up the diagnosis and treatment process for patients with a breast ailment.

On the second day of my stay at Evanston, I had the opportunity to meet Dr. Nelson, a visiting professor from the Mayo Clinic. That same day, I met with Dr. Yao, and the Surgical Research Office staff.

The third and final visit was to the American College of Surgeons. Rather than only being a medical visit it was additionally an administrative scientific one, where I learned about key points to follow in order to obtain accreditation in breast health through the National Accreditation Programs for Breast Centers. The topics required by the National Accreditation Programs for Breast Centers that were discussed and reviewed by the staff were: Erin DeKoster reviewed accreditation standards, Lauren Dyer reviewed the application form and the information that must be collected to support the accreditation standards, Ryan McCabe reviewed the National Cancer Database and the breast quality measures collected, and Amanda Francescatti reviewed the operative standards developed for breast care.

In my opinion I think that a Developing Latin-American country like mine, has the ability to progress in these fields if it were not for political stagnation. We could direct resources toward the purchasing of equipment essential for the diagnosis and treatment of breast cancer. It is the most frequently diagnosed cancer in women in Ecuador, as it is in other countries, and yet there is still a deficiency in attention for those women. The knowledge acquired in this tour of hospitals will help me to emphasize and promote the importance of good breast cancer management, not only in my private practice, but also as co-founder of the Ecuadorian Multidisciplinary Mastology Society (SEMMA in Spanish) and as a lecturer at the Universidad San Francisco de Quito (USFQ). By participating in this valuable program I bring back to my country learning methods, valuable tricks for treatment and an experience that must be shared with my colleagues.

My idea is to procure support from SEMMA and convince the Ministry of Health to allow us to act as an advisory source for a health problem that needs to be addressed. On the other hand, to create a breast certification program for gynecologists and general surgeons at the university so that breast pathology management is established with general standards and concepts in order for patients to receive timely care. Finally, to be a link between public and private health sectors in order to unify education and treatment methods.
I believe it would have been good to have had the opportunity to build more peer networking in view of my goal to create timely care programs for women suffering breast pathologies.

I would have liked to have spent more time in hospital rotations, to have been able to complete a short internship where I could have reinforced the knowledge learned in order to be able to replicate, here in Ecuador, a work system similar to that carried out in Hospitals in the United States. On the other hand, the most beneficial part of this program was the opportunity of attending the meeting in Dallas. Participating in these meetings was undoubtedly a great learning experience, however they are expensive for attendees from countries where salaries are very low, reason for which it is extremely difficult to attend year after year. It would be very good for members from low-income countries to get a discount in order to be able to attend more frequently.

Finally, I would like to thank Dr. Luis Suarez, Head of Gynecological Services at the Axxis Hospital here in Quito for encouraging me to apply and guiding me through the International Scholarship application process.

I would like to thank 'Kate' Hoke, Program Administrator of the Parkland Health & Hospital System; Connie Bura, Administrative Director for Cancer Programs at the American College of Surgeons; and Maria Vartelas, Education Program Specialist of the Surgery Department of the NorthShore University Health System, who helped me with the administrative processes necessary to participate in the hospitals and the ACS sessions.

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A special thank you to Jane Mendez who made me feel at home, and who was always attentive to my external observation and my acceptance to the meeting. Someone with great empathy and human qualities.

And of course a heartfelt thank you to my family and friends who have encouraged me throughout this experience, especially my husband Dr. Henry Ortega and my best friend Dr. Marco Avalos.

Congratulations to everyone who are a part of the ASBrS and ACS for the fantastic work they provide in support of continued education and research for surgeons. This program is without a doubt the best experience I have had in my professional career.

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