

TORACIC SURGERY ACADEMY

26-28 Ottobre 2026

Advanced Minimally Invasive, Robotic, Digital and AI-Enabled Thoracic Surgery

Expanded Bilingual Course Program

Scientific Director: Dr. Gian Luca Pariscenti

ASST Grande Ospedale Metropolitano Niguarda - Milan, Italy

Promoters and Innovation Partners: Fulbright Medical - MOVI

Participants: 30 selected thoracic surgeons and residents from leading centers in Northern Italy

3	30	4	2
Academy days	Selected participants	Core tracks	Languages: EN + IT

Document purpose

This version expands the original scientific program into a structured course presentation, adds a dedicated chapter on Artificial Intelligence in Health with a lung cancer focus, and includes an Italian translation for institutional and educational use.

English Course Program

The Toracic Surgery Academy is an advanced scientific and educational course dedicated to the evolution of modern thoracic surgery. The program connects prevention, thoracic oncology, minimally invasive and robotic surgery, live case education, digital surgery, AI governance, digital transition platform development, communication and international network development.

Course profile	
Course format	Three-day residential Academy combining expert lectures, live surgery, structured case discussion, digital surgery, technology assessment and consensus development.
Participants	30 selected thoracic surgeons and residents from leading centers in Northern Italy, plus moderators, faculty, anesthesiologists, perioperative nursing staff and innovation partners.
Scientific direction	Dr. Gian Luca Pariscenti, ASST Grande Ospedale Metropolitano Niguarda - Milan, Italy.
Primary learning method	Faculty-guided analysis of clinical pathways, live procedures, pre-recorded international cases, structured debates and practical validation criteria.
New AI chapter	A dedicated chapter on Artificial Intelligence in Health, with a lung cancer focus, covering screening, imaging, decision support, surgical planning, governance and regional implementation.
Digital platform	Construction of a digital transition platform where course materials, video lessons, faculty content, case libraries and all future Academy courses can be uploaded, organized and reused.
Communication plan	A July 2026 launch plan based on articles, video content and regional health/science media outreach, including proposed targets such as regional editions of Corriere della Sera, La Repubblica and the web publication UP Salute.

Educational promise

Participants leave with a practical framework for selecting surgical approaches, assessing technology, integrating digital tools and contributing to a permanent international thoracic surgery network.

Educational Objectives

- Strengthen knowledge of prevention, thoracic oncology and early diagnosis pathways.
- Compare open surgery, VATS, uniportal VATS and robotic thoracic surgery through expert discussion.
- Analyze stapling strategies, tissue compression, bronchial closure, pulmonary vessel management and air leak prevention.
- Use live surgery and pre-recorded cases as structured educational tools.
- Explore AI, digital twin, 3D planning, connected operating rooms and future surgical platforms.

- Understand how AI tools should be validated, governed and monitored in health systems.
- Build an international Academy network involving Italian, European and Asian thoracic surgery centers.

Faculty and Contributors

The Academy is led by a multidisciplinary scientific faculty, with invited European and international contributors. Institutional and policy-oriented speaker profiles should be checked by the organizing committee before publication.

Name	Role / Affiliation	Contribution
Dr. Gian Luca Pariscenti	Scientific Director; Director, Thoracic Surgery Unit, ASST Grande Ospedale Metropolitano Niguarda - Milan	Course leadership, live surgery, Academy development
Dr. Giulio Melloni	Director, Thoracic Surgery Unit, Fondazione IRCCS Policlinico San Matteo - Pavia	Regional network, technology assessment, stapling forum
Prof. Mario Nosotti	Full Professor of Thoracic Surgery; Director, Thoracic Surgery Unit, Fondazione IRCCS Ca' Granda Ospedale Maggiore Policlinico - Milan; University of Milan	Scientific chair, modern surgery, consensus conference
Prof. Francesco Leo	Director, Thoracic Surgery Unit; Associate Professor of Thoracic Surgery, AOU San Luigi Gonzaga - Orbassano; University of Turin	Prevention, robotic debate, international moderation
Prof. Enrico Ruffini	Full Professor of Thoracic Surgery; Chief/Director, University Thoracic Surgery Unit, AOU Città della Salute e della Scienza di Torino - Molinette; University of Turin	Complications, quality indicators, clinical governance
Prof. Andrea Dell'Amore	Associate Professor / Thoracic Surgery Faculty, Azienda Ospedale Università di Padova - University of Padua	Robotic strategy, future technologies, international comparison
Prof. Franco Stella	Director, Thoracic Surgery Unit Romagna, AUSL Romagna - Forlì; University of Bologna	Complex resections, provocative discussion, surgical education
European Faculty - Spain	International moderator, discussant and case presenter	Case comparison, European network development
European Faculty - Denmark	International moderator, discussant and case presenter	Case comparison, European network development
China Faculty	Thoracic Surgery / Innovation Network - China	High-volume models, surgical education contribution
Giovanni Bonati	Digital transition technical advisor with European parliamentary experience and a focus on digital transition initiatives for Regione Lombardia	Invited speaker for Artificial Intelligence in Health and lung cancer pathway governance
Fulbright Medical Representative	Technology and innovation representative	Lunar S Pro / Thorapler technology focus only

MOVI Representative	Educational and organizational innovation partner	Technology transfer and Academy development
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Day 1 - Prevention, Innovation and Clinical Framework

Time	Session	Lead / Faculty	Learning Output
14:00 - 14:30	Opening Ceremony and Presentation of the Academy	Dr. Gian Luca Pariscenti	Align the faculty and participants around the Academy's scientific and educational mission.
14:30 - 15:15	Thoracic Oncology Prevention: The New Era of Early Diagnosis	Dr. Gian Luca Pariscenti; Prof. Francesco Leo; Prof. Mario Nosotti	Understand how prevention modifies diagnosis, surgical indication and operating room planning.
15:15 - 16:00	Regione Lombardia and Regional Healthcare Networks	Round table; Dr. Giulio Melloni	Define a regional model for early diagnosis, referral and multidisciplinary management.
16:00 - 16:30	International Models: Asian and Chinese Experience	China Faculty / Fulbright Medical Representative	Compare high-volume international models with European quality and patient-centered care.
16:30 - 16:45	Coffee Break	Faculty and participants	Networking.
16:45 - 17:30	Modern Thoracic Surgery: Open, VATS, Uniportal VATS and Robotic Surgery	Prof. Mario Nosotti; Prof. Francesco Leo	Select the right surgical platform for the right patient and disease stage.
17:30 - 18:15	Advanced Mechanical Stapling Technologies in Thoracic Surgery	Faculty panel	Analyze how stapling strategy affects safety, air leak prevention and reproducibility.
18:15 - 19:00	Fulbright Medical Technology Forum: Lunar S Pro and Thorapler Platform	Fulbright Medical Representative	Discuss technology in a scientific, non-promotional validation framework.
19:00 - 19:45	Leaders Forum: The Thoracic Surgery Department of 2035	Dr. Pariscenti; Prof. Nosotti; faculty panel	Create a shared vision for digital, robotic and sustainable thoracic surgery units.

Day 2 - Live Surgery and Technology Assessment

Time	Session	Lead / Faculty	Learning Output
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08:00 - 08:30	Robotic Closure and Advanced Stapling Session	Faculty practical session	Prepare participants to analyze the technical choices visible during live surgery.
08:30 - 09:00	Clinical Case Presentation	Niguarda Thoracic Surgery Team	Build a shared preoperative decision-making framework.
09:00 - 12:30	Live Surgery from Niguarda	Lead Surgeon: Dr. Gian Luca Pariscenti	Transform the live procedure into structured education with faculty commentary and technology assessment.
12:30 - 13:30	Lunch	Faculty and participants	Networking.
13:30 - 15:30	International Pre-Recorded Cases Forum	Italy, Spain, Denmark, China	Create an international case-based discussion platform and future video library.
15:30 - 16:30	Advanced Stapling Master Forum	Faculty master forum	Define measurement criteria for validating stapling technologies and reducing variability.
16:30 - 17:30	Complications and Postoperative Management	Case-based session; Prof. Enrico Ruffini	Provide practical algorithms for recognition, escalation and management of postoperative complications.
17:30 - 18:15	Provocative Debate: Should Robotic Surgery Become the New Standard?	Prof. Andrea Dell'Amore; Prof. Francesco Leo; faculty	Stimulate critical thinking and avoid dogmatic adoption of robotic surgery.

Day 3 - Advanced Live Surgery, Digital Surgery, AI and International Network

Time	Session	Lead / Faculty	Learning Output
08:30 - 09:00	Introduction and Educational Objectives	Dr. Gian Luca Pariscenti	Prepare faculty and participants for advanced technical analysis and final consensus work.
09:00 - 12:15	Advanced Live Surgery	Lead Surgeon: Dr. Gian Luca Pariscenti	Standardize complex minimally invasive decision-making while preserving safety and oncological quality.

12:15 - 13:05	Artificial Intelligence in Health: Focus on Lung Cancer	Giovanni Bonati; Prof. Andrea Dell'Amore; MOVI	Translate AI from policy and digital transition into practical, governed clinical pathways.
13:05 - 13:45	Future Technologies Session	International Faculty, Fulbright Medical, MOVI	Distinguish technologies ready for clinical use from technologies requiring further validation.
13:45 - 14:25	Fulbright & MOVI Innovation Lab	Fulbright Medical Representative; MOVI Representative	Define credible technology transfer, education and multicenter validation pathways.
14:25 - 15:00	International Thoracic Surgery Network Forum	Academy network panel	Move the Academy from a single course to a permanent educational and research network.
15:00 - 15:35	Consensus Conference: Academy Recommendations	All faculty; chair: Prof. Mario Nosotti	Draft final recommendations and define deliverables for future editions.
15:35 - 15:50	Closing Ceremony	Dr. Gian Luca Pariscenti and Faculty	Close the course with educational messages, certificates and next steps.

Expanded Scientific Modules

14:30 - 15:15 | Thoracic Oncology Prevention: The New Era of Early Diagnosis

Speaker / Presenter	Dr. Gian Luca Pariscenti
Moderator / Panel	Moderator: Prof. Francesco Leo Discussant: Prof. Mario Nosotti European Faculty commentary

Scientific topics and discussion notes

- Evolution of lung cancer epidemiology and the shift toward earlier-stage detection.
- Low-dose CT screening, eligibility criteria, adherence and follow-up pathways.
- Pulmonary nodule pathway, risk stratification and early surgical referral.
- Artificial intelligence in imaging triage, nodule detection and longitudinal change assessment.
- Biomarkers, liquid biopsy and integration with radiology and multidisciplinary boards.
- Impact of screening on surgical volumes, segmentectomy planning and operating room capacity.

Learning output

Participants will understand how prevention changes the entire thoracic surgery pathway, from risk identification and early diagnosis to surgical indication, resource planning and patient communication.

17:30 - 18:15 | Advanced Mechanical Stapling Technologies in Thoracic Surgery

Speaker / Presenter	Faculty panel
Moderator / Panel	Moderator: Dr. Giulio Melloni Panel: Nosotti, Leo, Ruffini, Dell'Amore, Stella, European Faculty

Scientific topics and discussion notes

- Principles of mechanical stapling, tissue compression and staple formation quality.
- Bronchial closure, pulmonary artery stapling, fragile parenchyma and vascular safety.
- Difficult fissure management, air leak prevention and reinforced reload strategy.
- Powered versus manual stapling, reproducibility of firing and team ergonomics.
- Outcome indicators, cost-effectiveness and data elements for a technology registry.

Learning output

Participants will be able to connect stapling decisions with safety, air leak prevention, reproducibility, team workflow and measurable clinical value.

09:00 - 12:30 | Live Surgery from Niguarda

Speaker / Presenter	Lead Surgeon: Dr. Gian Luca Pariscenti
Moderator / Panel	International moderators: Prof. Francesco Leo, Prof. Andrea Dell'Amore, European Faculty - Spain Technology Assessment Panel: Melloni, Nosotti, Ruffini, Stella

Scientific topics and discussion notes

- Patient positioning, access strategy, port placement and exposure.
- Hilar dissection, vessel management, bronchial closure and lymphadenectomy.
- Application of advanced technologies, including Lunar S Pro / Thorapler when clinically appropriate.
- Air leak prevention, bleeding prevention and intraoperative complication management.
- Team communication, anesthesia management and perioperative nursing role.
- Structured live-surgery education with continuous commentary and participant questions.

Learning output

Participants will convert a live operation into an educational case, using a shared vocabulary for anatomy, risk, technical decisions, technology assessment and postoperative expectations.

12:15 - 13:05 | Artificial Intelligence in Health: Focus on Lung Cancer

Speaker / Presenter	Giovanni Bonati
Moderator / Panel	Moderator: Prof. Andrea Dell'Amore Clinical discussants: Dr. Gian Luca Pariscenti, Prof. Enrico Ruffini Innovation partner: MOVI

Scientific topics and discussion notes

- AI in health as a governance issue: safety, transparency, accountability, privacy and human oversight.
- EU digital transition and the implications of the AI Act for high-risk healthcare applications.
- AI-supported lung cancer screening: low-dose CT workflow, prioritization, nodule detection and follow-up.
- Clinical decision support in thoracic oncology: risk prediction, staging support and multidisciplinary board preparation.
- AI for surgery: 3D planning, digital twin concepts, computer vision, operative performance review and connected operating rooms.
- Implementation in regional health systems: data quality, interoperability, procurement, validation and post-market monitoring.

Learning output

Participants will understand how to evaluate AI tools as clinical systems rather than isolated software, with special attention to lung cancer screening, pulmonary nodules, surgical planning and regional digital transition.

Format note

Speaker profile based on organizer-provided information: Giovanni Bonati is included as an invited digital-transition speaker with European parliamentary technical experience and a focus on digital transition initiatives for Regione Lombardia.

Special Chapter: Artificial Intelligence in Health with a Lung Cancer Focus

This chapter gives the Academy a dedicated policy, technology and clinical translation component. It frames AI as a set of clinical systems that must be evaluated across evidence, workflow, governance, ethics, regulation and measurable benefit for patients.

Why AI Belongs in Toracic Surgery Academy

AI is already entering radiology, oncology, perioperative medicine and hospital operations. For thoracic surgery, the practical question is not whether AI will appear, but how it can be validated, governed and safely integrated into clinical pathways.

The lung cancer pathway is an ideal teaching case because it combines prevention, low-dose CT screening, pulmonary nodule management, molecular information, multidisciplinary decision-making, surgical planning and postoperative monitoring.

Core Clinical Use Cases

Screening and early diagnosis: prioritization of low-dose CT examinations, detection and measurement of pulmonary nodules, comparison with previous scans and support for follow-up intervals.

Multidisciplinary boards: preparation of structured summaries that combine imaging, pathology, functional assessment, molecular markers and patient preferences.

Surgical planning: segmentation, 3D reconstructions, digital twin concepts, simulation of segmentectomy margins and anticipation of difficult anatomy.

Intraoperative and postoperative support: computer vision, operative video review, air leak prediction, digital chest drainage signals, early warning systems and readmission prevention.

Governance and Validation Questions

What exact clinical decision will the AI tool influence, and who remains accountable for that decision?

Has the tool been validated on a population similar to the patients treated in the regional network?

How will false positives, false negatives, algorithmic bias and model drift be measured over time?

Does the tool fit medical device regulation, data protection requirements, cybersecurity standards and procurement rules?

How will clinicians explain the tool's role to patients without overstating its certainty?

Academy Practical Exercise

Participants review a hypothetical lung cancer screening pathway and identify where AI could add value, where it could add risk, and which governance controls are required before clinical deployment.

The exercise ends with a short checklist for regional adoption: clinical need, evidence base, data readiness, interoperability, legal classification, workflow fit, training plan, monitoring dashboard and decommissioning criteria.

Digital Transition Platform

The Academy should be designed not only as a three-day course, but as a continuing digital education ecosystem. The digital transition platform will collect, organize and preserve the scientific value of the course while preparing the structure for future editions.

Platform concept	
Purpose	Create a digital transition platform that becomes the permanent online home of the Academy, not only a repository for a single edition.

Content library	Upload course programs, slide decks, faculty biographies, operative video extracts, recorded lectures, consensus documents and post-course materials.
Future courses	Structure the platform so that future Academy editions, thematic masterclasses and regional/international modules can be added without rebuilding the system.
Participant access	Provide controlled access for selected participants, faculty and partners, with differentiated permissions for public content, restricted educational content and faculty-only materials.
Clinical education governance	Use metadata, version control, consent rules and editorial approval before publishing surgical videos or clinical case materials.
Strategic value	Turn the Academy into a continuing digital learning environment, supporting communication, alumni engagement, multicenter collaboration and technology validation.

Platform Development Roadmap

Time	Session	Lead / Faculty	Learning Output
July 2026	Concept and content architecture	Scientific direction, MOVI, digital transition advisor	Define users, content categories, access levels, editorial workflow and platform roadmap.
August - September 2026	Content preparation	Faculty, course secretariat, communication team	Collect programs, speaker materials, initial video assets, AI chapter content and partner materials.
October 2026	Pilot release	Digital platform team	Launch a restricted pilot for faculty and selected participants, with feedback on navigation and content usability.
November - December 2026	Academy archive and future-course setup	Scientific direction and platform governance group	Publish final materials, prepare the next-course template and define rules for future uploads.

Communication Plan from July 2026

The communication plan starts in July 2026 and should position the Academy as a regional and international scientific initiative. Media names are proposed targets and require editorial confirmation before public announcement.

Editorial and Media Roadmap

Period	Action	Content / Target
July 2026	Launch announcement	Press note and first editorial article presenting the Academy, its scientific director, the AI chapter and the digital platform project.
July - August 2026	Video teasers	Short interviews with scientific leadership and selected faculty on prevention, robotic surgery, digital transformation and AI in lung cancer pathways.
September 2026	Regional media outreach	Proposed outreach to regional health/science pages and magazines, including possible regional editions of Corriere della Sera and La Repubblica.
September - October 2026	UP Salute web coverage	Dedicated web articles and video content for UP Salute, with a focus on innovation, regional healthcare networks and digital transition.
During the Academy	Live communication	Daily short-form updates, faculty quotes, images from non-clinical sessions, participant highlights and partner innovation notes, always respecting privacy and clinical confidentiality.
After the Academy	Outcomes and continuity	Post-event article, consensus highlights, digital platform launch update and preview of future Academy courses.

Cross-Cutting Scientific Tracks

Stapling Academy Track

A cross-cutting track dedicated to tissue compression science, staple formation, bronchial closure, vascular stapling, air leak prevention, powered stapling and cost-effectiveness. The track links theory, live surgery and the Advanced Stapling Master Forum.

Robotic Closure Track

A practical track before live surgery focused on bronchial and vascular closure during robotic and minimally invasive procedures.

Artificial Intelligence and Digital Health Track

A new track connecting AI governance, imaging, lung cancer screening, surgical planning, regional data strategy and clinical validation.

Digital Transition Platform Track

A program-building track dedicated to creating the Academy's digital platform for course content, surgical videos, faculty materials, future editions, participant access and long-term educational continuity.

Communication and Media Track

A communication track beginning in July 2026 with articles, video interviews, course previews and targeted regional media outreach.

European Faculty Track

Faculty from Spain and Denmark participate as moderators, discussants and case presenters in prevention, modern surgery, live surgery, cases, complications, future technologies and consensus.

Fulbright and MOVI Innovation Track

Fulbright Medical is positioned only in technology sessions, with structured focus on Lunar S Pro and Thorapler. MOVI supports innovation, education and technology transfer.

International Pre-Recorded Case Library

The Academy builds a structured case library from Italy, Spain, Denmark and China, using short surgical videos followed by faculty discussion and participant questions.

Consensus and Network Development

The final section turns the course into a continuing Academy project through a collaboration charter, multicenter registry proposal, fellowship pathway and annual meeting roadmap.

Expected Deliverables

- Academy Consensus Statement on minimally invasive, robotic, digital and AI-enabled thoracic surgery.
- Toracic Surgery Academy Network Charter.
- Technology Assessment Recommendations for advanced stapling platforms.
- AI in Health and Lung Cancer Pathway checklist for regional clinical governance.
- Digital Transition Platform blueprint for course content, faculty video library, participant access and future Academy editions.
- July 2026 communication plan with editorial articles, interviews, short videos and targeted regional media outreach.
- Educational roadmap for live surgery and pre-recorded case-based learning.
- Proposal for a multicenter registry and international case library.
- Future annual Academy format with Italian, European and Asian faculty exchange.

Reference and Verification Notes

Scientific and governance references used for the AI chapter	
WHO	Ethics and governance of artificial intelligence for health, 2021: ethics, human rights, accountability and governance principles for health AI. Source: https://www.who.int/publications/i/item/9789240029200
EU AI Act	Regulation (EU) 2024/1689 entered into force on 1 August 2024 and creates a risk-based framework for AI systems, including high-risk health-related uses. Source: https://eur-lex.europa.eu/eli/reg/2024/1689/oj
Lung cancer screening evidence	Low-dose CT screening is the central evidence-based pathway for high-risk lung cancer screening; AI should be positioned as support for validated workflows, not as a replacement for clinical judgment. Source: https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/lung-cancer-screening
Speaker profile note	Giovanni Bonati's profile is inserted as supplied by the organizer and should be verified before public dissemination.

Traduzione Italiana del Progetto

La Toracic Surgery Academy è un corso scientifico e formativo avanzato dedicato all'evoluzione della chirurgia toracica moderna. Il programma integra prevenzione, oncologia toracica, chirurgia mini-invasiva e robotica, didattica su casi live, chirurgia digitale, governance dell'intelligenza artificiale, sviluppo della piattaforma di transizione digitale, comunicazione e network internazionale.

Profilo del corso	
Formato del corso	Academy residenziale di tre giornate con lezioni di esperti, chirurgia live, discussione strutturata dei casi, chirurgia digitale, valutazione tecnologica e sviluppo di consenso.
Partecipanti	30 chirurghi toracici e specializzandi selezionati dai principali centri del Nord Italia, con moderatori, faculty, anestesisti, personale infermieristico perioperatorio e partner dell'innovazione.
Direzione scientifica	Dr. Gian Luca Pariscenti, ASST Grande Ospedale Metropolitano Niguarda - Milano, Italia.
Metodo didattico principale	Analisi guidata dalla faculty di percorsi clinici, procedure live, casi internazionali pre-registrati, dibattiti strutturati e criteri pratici di validazione.
Nuovo capitolo AI	Capitolo dedicato all'intelligenza artificiale in sanità, con focus sul tumore al polmone: screening, imaging, supporto decisionale, pianificazione chirurgica, governance e implementazione regionale.
Piattaforma digitale	Costruzione di una piattaforma di transizione digitale dove caricare materiali del corso, video lezioni, contenuti della faculty, librerie di casi e tutti i corsi futuri dell'Academy.
Piano comunicazione	Piano di lancio da luglio 2026 con articoli, video e contenuti per magazine e testate regionali, inclusi target proposti come edizioni regionali di Corriere della Sera, La Repubblica e la testata web UP Salute.

Promessa formativa

I partecipanti terminano il percorso con un quadro pratico per scegliere l'approccio chirurgico, valutare la tecnologia, integrare strumenti digitali e contribuire a una rete internazionale permanente di chirurgia toracica.

Obiettivi Formativi

- Rafforzare le conoscenze su prevenzione, oncologia toracica e percorsi di diagnosi precoce.
- Confrontare chirurgia open, VATS, uniportal VATS e chirurgia robotica attraverso discussioni con esperti.
- Analizzare strategie di stapling, compressione tissutale, chiusura bronchiale, gestione dei vasi polmonari e prevenzione air leak.

- Usare chirurgia live e casi pre-registrati come strumenti educativi strutturati.
- Esplorare AI, digital twin, pianificazione 3D, sale operatorie connesse e piattaforme chirurgiche future.
- Comprendere come gli strumenti AI devono essere validati, governati e monitorati nei sistemi sanitari.
- Costruire un network Academy internazionale tra centri italiani, europei e asiatici.

Faculty and Contributors

The Academy is led by a multidisciplinary scientific faculty, with invited European and international contributors. Institutional and policy-oriented speaker profiles should be checked by the organizing committee before publication.

Name	Role / Affiliation	Contribution
Dr. Gian Luca Pariscenti	Direttore Scientifico; Direttore, Chirurgia Toracica, ASST Grande Ospedale Metropolitano Niguarda - Milano	Leadership del corso, chirurgia live, sviluppo Academy
Dr. Giulio Melloni	Direttore, Chirurgia Toracica, Fondazione IRCCS Policlinico San Matteo - Pavia	Rete regionale, valutazione tecnologica, forum stapling
Prof. Mario Nosotti	Professore Ordinario di Chirurgia Toracica; Direttore, Fondazione IRCCS Ca' Granda Ospedale Maggiore Policlinico - Milano; Università di Milano	Chair scientifico, chirurgia moderna, conferenza di consenso
Prof. Francesco Leo	Direttore, Chirurgia Toracica; Professore Associato, AOU San Luigi Gonzaga - Orbassano; Università di Torino	Prevenzione, dibattito robotico, moderazione internazionale
Prof. Enrico Ruffini	Professore Ordinario; Direttore, Chirurgia Toracica Università, AOU Città della Salute e della Scienza di Torino - Molinette; Università di Torino	Complicanze, indicatori di qualità, governance clinica
Prof. Andrea Dell'Amore	Professore Associato / Faculty di Chirurgia Toracica, Azienda Ospedale Università di Padova	Strategia robotica, tecnologie future, confronto internazionale
Prof. Franco Stella	Direttore, Chirurgia Toracica Romagna, AUSL Romagna - Forlì; Università di Bologna	Resezioni complesse, discussione provocatoria, formazione chirurgica
Faculty Europea - Spagna	Moderatore internazionale, discussant e presenter di casi	Confronto casi, sviluppo rete europea
Faculty Europea - Danimarca	Moderatore internazionale, discussant e presenter di casi	Confronto casi, sviluppo rete europea
Faculty Cina	Chirurgia toracica / Innovation Network - Cina	Modelli ad alto volume, contributo educativo
Giovanni Bonati	Tecnico/consulente per la transizione digitale con esperienza europarlamentare e focus su iniziative di transizione digitale per Regione Lombardia	Relatore invitato per intelligenza artificiale in sanità e governance del percorso tumore al polmone

Rappresentante Fulbright Medical	Rappresentante tecnologia e innovazione	Focus Lunar S Pro / Thorapler
Rappresentante MOVI	Partner per innovazione educativa e organizzativa	Trasferimento tecnologico e sviluppo Academy

Giorno 1 - Prevenzione, Innovazione e Quadro Clinico

Time	Session	Lead / Faculty	Learning Output
14:00 - 14:30	Cerimonia di apertura e presentazione dell'Academy	Dr. Gian Luca Pariscenti	Allineare faculty e partecipanti sulla missione scientifica e formativa.
14:30 - 15:15	Prevenzione in oncologia toracica: la nuova era della diagnosi precoce	Dr. Pariscenti; Prof. Leo; Prof. Nosotti	Comprendere come la prevenzione modifica diagnosi, indicazione chirurgica e pianificazione.
15:15 - 16:00	Regione Lombardia e reti sanitarie regionali	Tavola rotonda; Dr. Giulio Melloni	Definire un modello regionale per diagnosi precoce, invio e gestione multidisciplinare.
16:00 - 16:30	Modelli internazionali: esperienza asiatica e cinese	Faculty Cina / Fulbright Medical	Confrontare modelli ad alto volume con qualità europea e centralità del paziente.
16:30 - 16:45	Coffee Break	Faculty e partecipanti	Networking.
16:45 - 17:30	Chirurgia toracica moderna: open, VATS, uniportal VATS e robotica	Prof. Nosotti; Prof. Leo	Scegliere la piattaforma chirurgica giusta per paziente e stadio di malattia.
17:30 - 18:15	Tecnologie avanzate di suturatrici meccaniche	Faculty panel	Analizzare sicurezza, prevenzione air leak e riproducibilità.
18:15 - 19:00	Technology Forum Fulbright Medical: Lunar S Pro e Thorapler	Rappresentante Fulbright Medical	Discutere la tecnologia in un quadro scientifico e non promozionale.
19:00 - 19:45	Leaders Forum: il reparto di chirurgia toracica del 2035	Dr. Pariscenti; Prof. Nosotti; faculty	Creare una visione condivisa per reparti digitali, robotici e sostenibili.

Giorno 2 - Chirurgia Live e Technology Assessment

Time	Session	Lead / Faculty	Learning Output
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08:00 - 08:30	Chiusura robotica e stapling avanzato	Sessione pratica faculty	Preparare i partecipanti ad analizzare le scelte tecniche della chirurgia live.
08:30 - 09:00	Presentazione del caso clinico	Team Chirurgia Toracica Niguarda	Costruire un quadro condiviso di decisione preoperatoria.
09:00 - 12:30	Chirurgia live da Niguarda	Primo operatore: Dr. Gian Luca Pariscenti	Trasformare la procedura live in didattica strutturata e valutazione tecnologica.
12:30 - 13:30	Lunch	Faculty e partecipanti	Networking.
13:30 - 15:30	Forum casi internazionali pre-registrati	Italia, Spagna, Danimarca, Cina	Creare una piattaforma internazionale basata sui casi è una futura libreria video.
15:30 - 16:30	Advanced Stapling Master Forum	Faculty master forum	Definire criteri di misurazione per validare tecnologie e ridurre variabilità.
16:30 - 17:30	Complicanze e gestione postoperatoria	Sessione case-based; Prof. Enrico Ruffini	Fornire algoritmi pratici per riconoscimento, escalation e gestione.
17:30 - 18:15	Dibattito provocatorio: la robotica deve diventare il nuovo standard?	Prof. Dell'Amore; Prof. Leo; faculty	Stimolare pensiero critico ed evitare adozioni dogmatiche.

Giorno 3 - Chirurgia Avanzata Live, Chirurgia Digitale, AI e Network Internazionale

Time	Session	Lead / Faculty	Learning Output
08:30 - 09:00	Introduzione e obiettivi formativi	Dr. Gian Luca Pariscenti	Preparare faculty e partecipanti ad analisi avanzata e consenso finale.
09:00 - 12:15	Chirurgia live avanzata	Primo operatore: Dr. Gian Luca Pariscenti	Standardizzare decisioni mini-invasive complesse mantenendo sicurezza e qualità oncologica.
12:15 - 13:05	Intelligenza artificiale in sanità: focus tumore al polmone	Giovanni Bonati; Prof. Andrea Dell'Amore; MOVI	Tradurre policy e transizione digitale in percorsi clinici pratici e governati.
13:05 - 13:45	Tecnologie future	Faculty internazionale, Fulbright Medical, MOVI	Distinguere tecnologie pronte all'uso clinico da tecnologie da validare.

13:45 - 14:25	Innovation Lab Fulbright & MOVI	Fulbright Medical; MOVI	Definire trasferimento tecnologico, educazione e validazione multicentrica.
14:25 - 15:00	Forum Network Internazionale di Chirurgia Toracica	Panel Academy network	Trasformare il corso in una rete permanente educativa e di ricerca.
15:00 - 15:35	Consensus Conference: raccomandazioni Academy	Tutta la faculty; chair: Prof. Mario Nosotti	Redigere raccomandazioni finali e deliverable per le edizioni future.
15:35 - 15:50	Cerimonia di chiusura	Dr. Gian Luca Pariscenti e Faculty	Concludere con messaggi educativi, certificati e prossimi passi.

Modulo Speciale: Intelligenza Artificiale in Sanità con Focus sul Tumore al Polmone

Questo capitolo introduce una componente dedicata a policy, tecnologia e traduzione clinica. L'AI viene presentata come un insieme di sistemi clinici da valutare su evidenza, workflow, governance, etica, regolazione e beneficio misurabile per i pazienti.

Relatore AI	
Relatore	Giovanni Bonati
Profilo	Tecnico/consulente per la transizione digitale con esperienza europarlamentare e focus su iniziative di transizione digitale per Regione Lombardia, secondo le informazioni fornite dall'organizzazione.
Focus didattico	Governance dell'AI in sanità, screening del tumore al polmone, imaging, decision support, pianificazione chirurgica e implementazione regionale.

Perché l'AI appartiene a una Academy di chirurgia toracica

L'AI sta già entrando in radiologia, oncologia, medicina perioperatoria e gestione ospedaliera. Per la chirurgia toracica la domanda pratica non è se l'AI arriverà, ma come validarla, governarla e integrarla in sicurezza nei percorsi clinici.

Il percorso del tumore al polmone è un caso didattico ideale perché combina prevenzione, screening con TC a basso dosaggio, gestione del nodulo polmonare, dati molecolari, decisione multidisciplinare, pianificazione chirurgica e monitoraggio postoperatorio.

Principali casi d'uso clinici

Screening e diagnosi precoce: prioritarizzazione delle TC a basso dosaggio, rilevazione e misurazione dei noduli, confronto con esami precedenti e supporto agli intervalli di follow-up.

Tumor board multidisciplinare: preparazione di sintesi strutturate che integrano imaging, anatomia patologica, valutazione funzionale, marcatori molecolari e preferenze del paziente.

Pianificazione chirurgica: segmentazione, ricostruzioni 3D, concetti di digital twin, simulazione dei margini di segmentectomia e previsione di anatomie complesse.

Supporto intraoperatorio e postoperatorio: computer vision, revisione video, previsione air leak, drenaggi digitali, early warning system e prevenzione delle riammissioni.

Domande di governance e validazione

Quale decisione clinica influenzerà lo strumento AI e chi rimane responsabile della decisione?

Lo strumento è stato validato su una popolazione simile ai pazienti trattati nella rete regionale?

Come saranno misurati nel tempo falsi positivi, falsi negativi, bias e drift del modello?

Lo strumento è coerente con regolazione medical device, protezione dati, cybersecurity e regole di procurement?

Come spiegheranno i clinici ai pazienti il ruolo dell'AI senza sovrastimarne la certezza?

Esercitazione pratica Academy

I partecipanti rivedono un percorso ipotetico di screening del tumore al polmone e identificano dove l'AI può aggiungere valore, dove può aggiungere rischio e quali controlli sono necessari prima del deployment clinico.

L'esercizio termina con una checklist di adozione regionale: bisogno clinico, evidenza, readiness dei dati, interoperabilità, classificazione legale, workflow, training, monitoraggio e criteri di dismissione.

Piattaforma di Transizione Digitale

L'Academy deve essere progettata non solo come corso di tre giornate, ma come ecosistema continuativo di formazione digitale. La piattaforma di transizione digitale raccoglierà, organizzerà e conserverà il valore scientifico del corso, preparando anche la struttura per le edizioni future.

Concept della piattaforma	
Finalità	Creare una piattaforma di transizione digitale che diventi la sede online permanente dell'Academy, non solo un archivio per una singola edizione.
Libreria contenuti	Caricare programmi dei corsi, slide, biografie faculty, estratti video operatori, lezioni registrate, documenti di consenso e materiali post-corso.

Corsi futuri	Strutturare la piattaforma affinché edizioni future dell'Academy, masterclass tematiche e moduli regionali/internazionali possano essere aggiunti senza riprogettare il sistema.
Accesso partecipanti	Prevedere accessi controllati per partecipanti selezionati, faculty e partner, con permessi differenziati per contenuti pubblici, contenuti formativi riservati e materiali solo faculty.
Governance formativa clinica	Usare metadata, versioning, regole di consenso e approvazione editoriale prima della pubblicazione di video chirurgici o materiali di casi clinici.
Valore strategico	Trasformare l'Academy in un ambiente continuativo di apprendimento digitale, comunicazione, alumni engagement, collaborazione multicentrica e validazione tecnologica.

Roadmap di Sviluppo della Piattaforma

Time	Session	Lead / Faculty	Learning Output
Luglio 2026	Concept e architettura contenuti	Direzione scientifica, MOVI, advisor transizione digitale	Definire utenti, categorie contenuto, livelli di accesso, workflow editoriale e roadmap piattaforma.
Agosto - settembre 2026	Preparazione contenuti	Faculty, segreteria scientifica, team comunicazione	Raccogliere programmi, materiali speaker, primi asset video, capitolo AI e materiali partner.
Ottobre 2026	Pilot release	Team piattaforma digitale	Lanciare un pilot riservato a faculty e partecipanti selezionati, con feedback su navigazione e usabilità.
Novembre - dicembre 2026	Archivio Academy e setup corsi futuri	Direzione scientifica e gruppo governance piattaforma	Pubblicare i materiali finali, preparare il template dei prossimi corsi e definire regole di upload future.

Piano Comunicazione da Luglio 2026

Il piano comunicazione parte da luglio 2026 e posiziona l'Academy come iniziativa scientifica regionale e internazionale. I nomi delle testate sono target proposti e richiedono conferma editoriale prima di ogni annuncio pubblico.

Roadmap Editoriale e Media

Periodo	Azione	Contenuto / Target
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Luglio 2026	Annuncio di lancio	Nota stampa e primo articolo editoriale per presentare Academy, direzione scientifica, capitolo AI e progetto piattaforma digitale.
Luglio - agosto 2026	Video teaser	Brevi interviste alla leadership scientifica e alla faculty su prevenzione, robotica, transizione digitale e AI nel percorso tumore al polmone.
Settembre 2026	Outreach media regionali	Outreach proposto verso pagine salute/scienza e magazine regionali, incluse possibili edizioni regionali di Corriere della Sera e La Repubblica.
Settembre - ottobre 2026	Copertura web UP Salute	Articoli web dedicati e contenuti video per UP Salute, con focus su innovazione, reti sanitarie regionali e transizione digitale.
Durante l'Academy	Comunicazione live	Aggiornamenti brevi giornalieri, quote faculty, immagini da sessioni non cliniche, highlight partecipanti e note innovation partner, rispettando privacy e confidenzialità clinica.
Dopo l'Academy	Risultati e continuità	Articolo post-evento, sintesi consensus, aggiornamento lancio piattaforma digitale e anteprima dei futuri corsi Academy.

Track Scientifici Trasversali

Stapling Academy Track

Track trasversale dedicato a compressione tissutale, formazione della graffa, chiusura bronchiale, stapling vascolare, prevenzione air leak, stapling powered e costo-efficacia.

Robotic Closure Track

Track pratica prima della chirurgia live, focalizzata su chiusura bronchiale e vascolare in procedure robotiche e mini-invasive.

Track AI e sanità digitale

Nuovo track che connette governance AI, imaging, screening tumore al polmone, pianificazione chirurgica, strategia regionale dei dati e validazione clinica.

Track piattaforma di transizione digitale

Track dedicata alla costruzione della piattaforma digitale dell'Academy per contenuti dei corsi, video chirurgici, materiali faculty, edizioni future, accesso dei partecipanti e continuità educativa.

Track comunicazione e media

Track comunicazione da luglio 2026 con articoli, video interviste, anteprime del corso e outreach mirato verso testate regionali.

Track Faculty Europea

Faculty da Spagna e Danimarca come moderatori, discussant e presenter di casi in prevenzione, chirurgia moderna, live surgery, casi, complicanze, tecnologie future e consenso.

Track Fulbright e MOVI Innovation

Fulbright Medical e posizionata solo nelle sessioni tecnologiche, con focus Lunar S Pro e Thorapler. MOVI supporta innovazione, educazione e trasferimento tecnologico.

Libreria internazionale di casi pre-registrati

L'Academy costruisce una libreria di casi da Italia, Spagna, Danimarca e Cina, con brevi video chirurgici, discussione faculty e domande dei partecipanti.

Consenso e sviluppo del network

La sezione finale trasforma il corso in un progetto continuativo: charter di collaborazione, registro multicentrico, fellowship e meeting annuale.

Deliverable Attesi

- Consensus Statement Academy su chirurgia toracica mini-invasiva, robotica, digitale e supportata da AI.
- Toracic Surgery Academy Network Charter.
- Raccomandazioni di Technology Assessment per piattaforme avanzate di stapling.
- Checklist AI in sanità e percorso tumore al polmone per governance clinica regionale.
- Blueprint della piattaforma di transizione digitale per contenuti didattici, video faculty, accesso partecipanti e future edizioni Academy.
- Piano comunicazione da luglio 2026 con articoli editoriali, interviste, video brevi e outreach verso testate regionali.
- Roadmap educativa per live surgery e apprendimento case-based pre-registrato.
- Proposta di registro multicentrico e libreria internazionale di casi.
- Formato Academy annuale con scambio tra faculty italiana, europea e asiatica.

Note di Riferimento e Verifica

Fonti scientifiche e di governance usate per il capitolo AI

OMS	Ethics and governance of artificial intelligence for health, 2021: principi di etica, diritti umani, accountability e governance dell'AI in sanità. Fonte: https://www.who.int/publications/i/item/9789240029200
EU AI Act	Il Regolamento (UE) 2024/1689 è entrato in vigore il 1 agosto 2024 e introduce un quadro basato sul rischio, inclusi gli usi sanitari ad alto rischio. Fonte: https://eur-lex.europa.eu/eli/reg/2024/1689/oj
Screening tumore al polmone	La TC a basso dosaggio è il percorso centrale evidence-based per lo screening dei soggetti ad alto rischio; l'AI va presentata come supporto a workflow validati, non come sostituzione del giudizio clinico. Fonte: https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/lung-cancer-screening
Nota relatore	Il profilo di Giovanni Bonati è inserito sulla base delle informazioni fornite dall'organizzatore e va verificato prima della diffusione pubblica.

Sede del corso

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