

Integrated Annual Report

2025



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Financial



Human



Intellectual



Manufactured



Natural



Social



Relationship

Introduction

About the Report

GRI 2-3 | 2-5 | 2-14

We outline the major accomplishments of the A.C.Carmargo Cancer Center from January 1 to December 31, 2025, for our patients, healthcare professionals, partners, governmental organizations, local communities, and other stakeholders.

This document follows the framework of the International Integrated Reporting Council (IIRC), showcasing how the institution's strategy creates value through financial, manufactured, intellectual, human, natural, social, and relationship capitals, all in line with the Sustainable Development Goals (SDGs) of the United Nations (UN) 2030 Agenda.

To measure performance in healthcare, teaching, and research, we report indicators based on the standards of the Global Reporting Initiative (GRI), the Sustainability Accounting Standards Board (SASB), and the Institution's own metrics. Throughout the text, these data are identified by the following captions: GRI XXX-X, SASB XX-XX-XX, and ACC XX. The complete and detailed list of all reported indicators can be found in Chapter 8 – Table of Indicators.



The 2025 Integrated Annual Report was prepared by the Sustainability, Marketing, and Communications teams, backed by senior leadership. The document was approved by the Board of Trustees and underwent an external and independent review conducted by KPMG, ensuring the credibility, consistency, and accuracy of the information.



If you have any questions or suggestions about this report or the topics covered in it, please contact us by e-mail: sustentabilidade@accamargo.org.br

Message from the Administration

GRI 2-22 | 3-3

Thousands of healthcare professionals have been providing daily care for cancer patients at the A.C.Camargo Cancer Center for over 70 years, with the objective of maintaining the mission set forth by our founders: to respect life, advance oncology, and promote research and education for the benefit of society.

In 2025, we consolidated our position as a leading institution in cancer care and celebrated significant achievements that have strengthened our capacity and ambition to deliver social value. We concluded the three-year strategic planning cycle to begin the 2026–2030 cycle. We delivered on six of the seven commitments made to society, relating to financial, intellectual, social, human, natural, and relational capital. In manufactured capital, we completed four of the five planned deliverables, and in the next cycle, we will continue to advance the digital transformation of our processes.

We have celebrated milestones, such as our recognition by the Ministry of Health as an Institution of Excellence and our inclusion in the Institutional Development Support Program of the Unified Health System (Proadi-SUS). We also took to the stage at the Pre-COP30 event (Encontro+B Amazônia 2025) in Belém (PA) to express our concern about the impacts of climate change, which drive up the cost of fresh foods, increase the consumption of processed foods, and consequently raise cancer risks among the population.

The rising confidence of patients and companies in our cancer care, combined with the steady growth of our reputation and the diversification of our revenue streams, has ensured the financial sustainability of the Institution, which grew by 10%. We continue to improve patient care flows in our facilities and enhance the quality of our hospitality and service, resulting in an average NPS of 90 points. Progress in

digital transformation, with artificial intelligence projects ranging from diagnosis to patient navigation, also stands out and positions us at the forefront of healthcare.

We renewed key international certifications and recognitions such as Qmentum, UTI Top Performer, and ISO 14001, and earned new accreditations, such as the Diagnostic Imaging Accreditation Program (PADI) in the field of Radiology. We also received awards from the United Nations High Commissioner for Refugees (UNHCR) for our refugee employability program, the Immensità Environmental Awareness Award, and, for the second consecutive year, the FIA Most Amazing Places to Work Award.

We closed 2025 with significant headway in implementing three risk-sharing agreements with partners in the pharmaceutical industry for different types of cancer. By linking payment for high-cost therapies to effective clinical outcomes, the Institution not only optimizes resources across the entire ecosystem and takes a leading national role in advancing a more equitable healthcare system, but also ensures patients have access to the most effective precision medicine treatments, thereby reducing waste.

We have made steady progress in consolidating and expanding our Teaching and Research initiatives, strengthening the institution's role in education and knowledge production. Among our key milestones is the authorization from the Ministry of Education (MEC) to offer lato sensu graduate programs, expanding our role in professional development. We have also made progress in securing external funding for research, reinforcing our capacity to develop relevant scientific projects and expand our positive social impact.

Impact that amplifies

In pursuit of our dream of a world that overcomes cancer, our membership in Proadi-SUS has enabled us to lead initiatives with significant social impact, such as the Super Centro Brasil Cancer Diagnostic Center. This project is committed to processing up to 1,000 biopsies per day for the SUS, ensuring rapid diagnosis so that treatment can begin promptly. We will also train pathologists across Brazil and invest in optical and digital microscopy infrastructure in the country's five regions.

Other program highlights include the training and oncology specialization of more than 70 physicians who will work in 17 states, and the training of over 400,000 Primary Care professionals to promote prevention and early detection in 100% of Brazilian municipalities.



Sustainability that inspires

Year 2025 also signals a decade since we decided to enhance the cancer center model. Throughout this period, we have worked to achieve the level of excellence of which we are proud today, reflected in our corporate and clinical governance, in the integration of the cancer care journey with patient navigation and tumor boards, in teaching and research focused on cancer control, and in the structuring of the value office to monitor outcomes and costs, seeking to extend patient survival with quality while strengthening the system's sustainability. We have expanded our scope to become an institution active in cancer control at the national level, partnering with the Federal Government in the implementation of the National Policy for Cancer Prevention and Control.

As Brazil's leading cancer center, we held an international conference in São Paulo (SP), in partnership with the Ministry of Health, to celebrate the first anniversary of the Latin American Organization of Cancer Institutes (OLACI), bringing together 45 high-complexity national oncology institutions. The goal was to connect all of Brazil with global leaders in cancer control—with whom A.C.Camarago already has a longstanding relationship—to share experiences. OLACI is part of the Organization of European Cancer Institutes (OECI World), which brings together over 170 cancer centers.

Still on the international stage, we achieved a prominent position in the SCImago Institutions Rankings (SIR), securing first place among private institutions in Brazil and second place among all oncology institutions in the country. The ranking evaluates universities and organizations based on a composite indicator comprising three dimensions: research (50% weight), focusing on the volume and quality of scientific output; innovation (30%); and social impact (20%), which reflect, respectively, the capacity for knowledge transfer and visibility and relevance to society.

Future

As we look ahead, we are convinced that all the knowledge we generate must be shared and transcend boundaries. To that end, we will accelerate our digital transformation through a phygital journey. By integrating in-person service with the responsiveness of a digital platform, we will bring the A.C.Camargo experience to all of Brazil.

In this new phase, operational efficiency and financial sustainability allow us to expand our social impact. We understand, however, that we cannot move forward alone. That is why we have embraced an ecosystem approach, forging strategic partnerships with the Ministry of Health and other leading institutions to enhance our ability to deliver high-complexity health-care on a large scale. We are embarking on this new strategic cycle ready to guide and mobilize all of society toward cancer control, with more prevention, greater access to cost-effective diagnostics and treatments, lower mortality, and more years of productive life for everyone.

Special thanks

In honor of Antônio and Carmen Prudente's legacy, we renew our dedication to patients, their families, and society as a whole. We applaud the more than 5,000 experts who spend their days greeting and caring for life. We are also grateful to our board members, donors, partners, suppliers, public entities, volunteers, and everyone who has put their trust in this institution, so deepening our connection.

JOSÉ ERMÍRIO DE MORAES NETO
Chairman of the Board of Trustees

JOSÉ HERMÍLIO CURADO
Institutional Chairman of the Board of Trustees

VICTOR PIANA DE ANDRADE
CEO



From left to right: José Hermílio Curado, Victor Piana de Andrade, and José Ermírio de Moraes Neto

A.C.Camargo Cancer Center

GRI 2-1 | 3-3

We are a highly specialized oncology platform, recognized nationally and internationally for our integration of clinical care, education, and research. We provide continuous support throughout the entire cancer care journey—from diagnosis to life after cancer—offering personalized, patient-centered care. We have seven strategic units (five patient care units, one administrative unit, and one research unit), which support an integrated operation structured around 13 Centers of Excellence organized by tumor type and comprising specialized clinics, high-complexity surgical centers, and a diagnostic center. We also have a dedicated Oncology Emergency Department and advanced infrastructure for innovative clinical research, positioning us uniquely within the Brazilian landscape and ensuring patients receive comprehensive, high-precision care.

As an oncology platform, we take a multidisciplinary, patient-centered, and integrated approach that brings together prevention, diagnosis, treatment, rehabilitation, and palliative care into a single journey. This model ensures access to comprehensive and coordinated solutions, leading to better clinical outcomes and quality of life for patients.

When knowledge meets purpose, cancer care transcends boundaries, bringing together care and innovation to transform lives.

* PROADI-SUS IS AN INITIATIVE OF THE MINISTRY OF HEALTH THAT SUPPORTS LEADING HOSPITALS IN DEVELOPING PROJECTS FOCUSED ON INNOVATION, CAPACITY BUILDING, AND IMPROVING HEALTHCARE IN BRAZIL'S UNIFIED HEALTH SYSTEM (SUS).

Our impact extends beyond São Paulo State. Through the A.C.Camargo Mission Program, we share our knowledge, technology, and expertise in oncology with different regions of the country, promoting access to quality care.

In 2025, this scope was further expanded with our participation in the Institutional Development Support Program of the Unified Health System (Proadi-SUS)*. As an oncology institution participating in the program, which brings together seven hospitals of excellence, we began to contribute in a structured manner to strengthening cancer care nationwide, using our expertise to advance the health system and reinforcing our role as a leading cancer center in Brazil.

By doing so, we reinforce our contribution to generating lasting value for society, with a positive impact on people's lives, driven by the production of knowledge and the continuous evolution of healthcare.



Learn more at:

Our history

<https://accamargo.org.br/institucional/nossa-historia>



Learn more at:

Cancer center model

<https://accamargo.org.br/cancer-center/o-modelo-cancer-center>

Vision, Purpose and Values

Knowledge in oncology moves forward swiftly, driven by science, technology, and an increasingly patient-centered approach to care.

At the A.C.Camargo Cancer Center, we don't see cancer merely as a disease, but as a journey in which we can provide support, dignity, and quality of life at every stage.

As we bring one strategic cycle to a close and begin building a new one, our vision and purpose take on even greater significance. We seek to transform the patient experience and generate lasting benefits for society, guided by an approach that integrates science and patient-centered care, ethics, and sustainability, thereby cementing our position as a leader in oncology and reaffirming our mission to build a world that overcomes cancer.



VISION

Our dream

A world that overcomes cancer



PURPOSE

What drives us

Honoring life, challenging the oncology frontiers, promoting education and research for society



VALUES

Principles that guide our decisions and reflect the world we believe in

Respect
for life

Generating and
sharing knowledge

Social
commitment

Excellence at
all times

Conscientious use
of resources

Operating structure

ACC 38



7

UNITS

5 patient-care units
1 administrative unit
1 research unit



3

SURGICAL CENTERS

(Antônio Prudente,
Pires da Mota
and Tamandaré)



66

INFUSION STATIONS

42 at the Antônio
Prudente unit
24 at the Pires da Mota
unit



13

CENTERS OF EXCELLENCE



28

OPERATING ROOMS



215

CONSULTATION ROOMS

(+13% VS. 2024)

391

BEDS IN USE



1

OUTPATIENT SURGICAL CENTER (Pires da Mota)

Center of Excellence

ACC 1 | 42

Our 13 Centers of Excellence (CoEs) are organized by tumor type, enabling specialized and integrated care tailored to the complexity of the disease. With their own infrastructure and dedicated medical and multi-disciplinary teams, the CoEs follow clinical protocols based on the best scientific evidence, ensuring safe, effective, and patient-centered treatments.

Patient-centered care encompasses the entire cancer care journey, tailored individually to each patient throughout their treatment. By doing so, we promote collaboration across specialties and ensure timely, coordinated care, leading to positive clinical outcomes and higher survival rates.

To support our integrated care model, we have organized the CoEs as business units, with dedicated goals and budgets. This structure facilitates a better understanding of the specific challenges in each area, enhances management efficiency, and enables more effective solutions, thereby strengthening institutional sustainability and ensuring more accurate diagnoses and advanced treatments in less time.



learn more at:

Centers of Excellence

<https://accamargo.org.br/cancer-center/centros-de-referencia>



ADA Network

The Upper Gastrointestinal Tract Network (ADA) is a community dedicated to gastroenterologists across the country. The goal of this initiative is to provide scientific updates on the prevention, early diagnosis, and treatment of cancers of the upper gastrointestinal tract and to streamline care for referred patients by connecting specialists from our cancer center with other physicians in the network.

A pioneering initiative, the network was presented during an event at the Itaim facility. At the meeting, the 1st Guide to Best Practices for Treatment of *H. pylori* was launched, with a focus on gastric cancer prevention.

New patients by Center of Excellence



HEAD AND
NECK TUMORS

2,400



SKIN
TUMORS

2,749



BREAST TUMORS

2,355



UROLOGICAL TUMORS

1,493



GYNECOLOGICAL
TUMORS

1,174



UPPER GASTROINTESTINAL AND
HEPATOPANCREATOBILIARY (HPB)
CANCERS

967



PEDIATRIC
TUMORS

1,148



COLORECTAL
TUMORS

1,025



HEMATOLOGICAL
NEOPLASMS

796



LUNG AND THORACIC
TUMORS

556



BONE TUMORS
AND SARCOMAS

523



CENTRAL NERVOUS
SYSTEM TUMORS

132



PATIENTS NOT LINKED TO A
SINGLE COE

5,129



TOTAL NEW
PATIENTS

20,447

Quality and Continuous Improvement

GRI 3-3 | ACC 17

Committed to excellence, we have strict processes and a highly skilled team. We undergo external audits that validate the quality of our operations, risk management, internal controls, and adherence to best practices.

Certifications

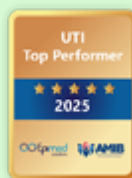
We hold international certifications that testify to our excellence in various areas. Among them, the following stand out:



International Accreditation for Excellence, Quality, and Patient Safety (Qmentum Diamond - Since 2015).



implementation and maintenance of the Environmental Management System (ISO 14001) - Since 2012.



2025 Top Performer ICU Certificate, which recognizes hospitals with the best outcomes based on parameters such as severity-adjusted hospital mortality and efficient resource utilization.



For the third straight year, we have received the Gold Seal (the highest certification level under FGV's Brazilian GHG Protocol Program), which recognizes organizations with a full emissions inventory (Scopes 1, 2, and 3) verified by an independent audit.

OECI Member Certificate



We are a member institution of the Organisation of European Cancer Institutes (OECI), an international network of leading cancer centers committed to high standards of quality, integrated care, research, and innovation. Starting in 2024–2025, we will expand our strategic international

engagement within the OECI, with more active participation in initiatives, technical forums, and institutional processes. Within this context, we are currently engaged in a structured preparation process for OECI accreditation, which involves institutional self-assessment, analysis of compliance with standards, and the implementation of continuous improvements. This membership reinforces our commitment to a model that integrates high-complexity cancer care, translational research, education, and prevention within a single organizational environment, aligned with international standards for quality, governance, and safety.

PADI

We have also earned PADI (Program for Accreditation in Diagnostic Imaging) certification in the field of radiology.



Brand positioning

ACC 39

In 2024, the A.C. Camargo Cancer Center made an important step forward in its 71-year history by launching its new institutional positioning. This move represented an evolution in the way the institution engages with society, patients, physicians, and employees.

To reflect this shift in our external communications, in 2025 we launched a broad campaign under the slogan “You at the center, science by your side.” The initiative represented a break from the traditional vocabulary of oncology—often associated with terms like “struggle,” “battle,” and “war”—and adopted a more empathetic, human, and contemporary approach. The new narrative acknowledges the patient’s vulnerability while highlighting science as the foundation for facing cancer—not a full stop, but a comma in each person’s story.

The campaign, centered on the patient experience, featured two films: one depicting a patient’s last chemotherapy session, celebrated with a honking of horns at the end of treatment, and another presenting the journey of a pediatric patient, highlighting the importance of the support network throughout care.

The rebranding strengthened the internal culture, aligning the message across all stakeholders while reinforcing the commitment to placing the patient at the center of every stage of the cancer care journey.

*You at the center,
science by your side.*



Learn more at:

A.C. Camargo Cancer Center x Vermelho Amour

<https://vermelhoamour.com.br/categoria/accamargo-vermelho-amour/>

Coala Festival

We brought an initiative focused on cancer patients to the 11th edition of the Coala Festival, one of the country’s leading Brazilian music events, held at the Memorial da América Latina in São Paulo (SP).

Highlights of the initiative

- **Compassion and Humanization:** We integrate cancer care with leisure and cultural activities, offering moments of distraction and relaxation that are essential to emotional well-being.
- **Exclusive Space:** We have created a safe and welcoming environment to host people undergoing treatment
- **Experience:** Patients experienced the thrill of attending concerts by major names in the country’s music scene, such as Nando Reis.
- **Commitment:** This participation reaffirms our dedication to a fulfilling life and holistic well-being at every stage of the journey.

Collab Vermelho Amour

We partnered with Vermelho Amour to raise awareness of cancer causes and connect with diverse audiences.

The initiative began at the Coala Festival, where custom caps were designed and given as gifts to invited patients. Following the initiative’s success, the product became available for purchase on the brand’s website, with a portion of the proceeds going toward patient care, education, and cancer research initiatives.



Highlights in 2025

Entry into Proadi-SUS

PAGE 84

First phase of the “People Who Cultivate Life” project

PAGE 97

New Institutional and Sustainability Strategic Cycle 2026–2030

PAGE 27

New Double Materiality Matrix

PAGE 20

Risk matrix update

PAGE 43

Expansion of international operations

PAGE 106

Partnerships with companies for cancer prevention

PAGE 49

Participation in the Pre-COP30 Event

PAGE 92



Awards and recognitions

MOST INCREDIBLE PLACES TO WORK

For the second year in a row, we have received the “Most Incredible Places to Work” certification from the FIA/Estadão survey. This recognition evaluates our internal culture based on pillars such as leadership, learning, and well-being. We scored 82.4 points on the workplace climate index, with a 38% employee participation rate.

ACTIONS THAT INSPIRE AWARD

We were awarded the Companies with Refugees Forum Award in the “Leaving No One Behind” category. The award recognizes our support for refugees and migrants through vocational training and psychosocial support, promoting a welcoming environment and a sense of purpose.

EPIMED UTI TOP PERFORMER 2025 SEAL

The institution's Adult ICUs have earned the Top Performer 2025 seal, a national certification based on international quality standards. This recognition highlights their efficiency in resource utilization and healthcare performance.

Among over 12,000 ICUs from dozens of countries worldwide that were evaluated, our Adult ICUs—with four recognized units—are among the most efficient and rank in the top 1%—meaning that, out of every 100 units, only one achieves this level of performance.

Recognition of Excellence by the Health Ministry

We have received the Recognition of Excellence from the Health Ministry and have joined the Institutional Development Support Program of the Unified Health System (Proadi-SUS), which brings together leading institutions to support the SUS in education, research, innovation, and specialized care. For the first time since 2009, this group, consisting of six hospitals of excellence, has been expanded, and we have joined it as the only Cancer Center. Joining Proadi-SUS strengthens the structural and sustainable initiatives of the social impact pillar, which has been present since the institution's founding, expanding our capacity to generate positive impact and broadening the population's access to effective, innovative, and patient-centered cancer diagnostics and treatments.

IMMENSITÀ ENVIRONMENTAL AWARENESS AWARD

We have implemented a composting system that transforms organic waste into natural fertilizer, which is used to maintain green spaces and support a community garden. This initiative reduces the amount of waste sent to landfills, lowers CO₂ emissions, and cuts down on fertilizer use, resulting in savings and a return on investment in less than three years.

SCImago INSTITUTIONS RANKINGS 2025

We ranked first among private institutions, second among all institutions in Brazil, and third in Latin America in Oncology in the SCImago Institutions Rankings 2025, which evaluated the performance in research, innovation, and social impact for more than 160 Brazilian institutions.

Value Generated

GRI 2-24 | 3-3 | 201-1 | ACC-2025-CF | ACC-2025-CH | ACC-2025-CI | ACC-2025-CM | ACC-2025-CN | ACC-2025-CS | ACC-2025-CR

We create value by integrating patient care, education, research, and innovation, contributing to the continuous evolution of cancer care and expanding the possibilities for cancer prevention, diagnosis, and treatment. This journey builds on the advances made in our public commitments and reaffirms A.C.Camargo's dedication to life and sustainability.

EXTERNAL IMPACTS

- Sectoral legislation and regulation
- Political changes
- Health market dynamics
- Macroeconomic issues

A.C.CAMARGO BUSINESS MODEL

- INTEGRATED JOURNEY: PATIENT CARE, EDUCATION AND RESEARCH

CANCER CARE MANAGEMENT AND CONTROL
- CENTERS OF EXCELLENCE.

STRATEGIC PLANNING
- FOCUS ON THE PATIENT JOURNEY.

VISION OF THE FUTURE
- ETHICS AND TRANSPARENCY.

COST-EFFECTIVENESS
- SOCIAL IMPACT

TECHNOLOGY AND INNOVATION
- PARTNERSHIPS

SUSTAINABILITY

RELATIONSHIP CAPITAL



INPUTS/RESOURCES:

- New brand positioning.
- Relationships built with patients, communities and doctors.
- Partnerships developed with suppliers, public entities, companies, operators and service providers, educational institutions, associations and entities in the health and oncology sector.

VALUE CREATED

- NPS of 90.4 in patient satisfaction.
- 26% growth in B2B partnerships.
- 680 direct suppliers, 1,484 indirect suppliers and 128 international suppliers.
- 69 suppliers subjected to environmental impact assessments.
- 111+ thousand patients served, including 20 thousand new ones.
- Promotion of patients' physical and emotional well-being.
- Dissemination of knowledge to society with the Cancer Observatory.
- Operational Intelligence Center (NIOP).

A.C.CAMARGO BUSINESS MODEL

NATURAL CAPITAL



INPUTS/RESOURCES:

- Management of renewable and nonrenewable natural resources.
- Environmental Management System (EMS).
- Waste disposal awareness campaigns.
- Members of the Healthy Hospitals Project (PHS).

VALUE CREATED

- Commitment to combating climate change.
- Gold seal from the Greenhouse Gases Protocol (GHG) - 2022, 2023 and 2024.
- RAUL Project.
- Improved equipment and processes, improving water resource management.
- ISO 14001 recertification.
- "Gente que cultiva a vida" (People who cultivate life) project (first cycle).
- Acquisition of 22,660 MWh of renewable energy, with I-REC certification.
- 63.6% of the waste generated was reused, recovered or recycled.
- Replacement of refrigeration equipment.

SOCIAL CAPITAL



INPUTS/RESOURCES:

- Patient safety.
- Improvement of care processes.
- Relationship with local communities and physicians.
- Partnership with the Unified Health System (SUS) and with institutions that contribute to strengthening the health ecosystem.
- Pursuit of health equity.

VALUE CREATED

- Oncology solutions, impacting thousands of lives with knowledge on prevention, diagnosis, quality of life and survival in cancer treatment.
- A.C.Camargo Mission.
- Dona Carolina Tamandaré Program.
- Employability Promotion Grants Project: 310 beneficiaries of courses in the health area.
- Schwester Heine Specialized School benefited 597 students, totaling nearly five thousand consultations.
- 306,818 outpatient consultations.
- 20,940+ emergency consultations.

A.C.CAMARGO BUSINESS MODEL

FINANCIAL CAPITAL



INPUTS/RESOURCES:

- Revenue from a variety of sources.
- Investment in innovation, professional specialization, education and research.
- Funds from funding agencies and donations from individuals and companies.
- Management of the Social Impact and Evolution Reserve (RISE).
- R\$ 117.6 million invested in infrastructure and technology improvements.
- Resources applied with social impact.

VALUE CREATED

- Projects in patient care, research, education, innovation and social impact.
- R\$ 2.12 billion in net revenue (+11% vs. 2024).
- R\$ 850 million in net added value, distributed to the business, employees and society.

HUMAN CAPITAL



INPUTS/RESOURCES:

- 4,120 in-house specialized professionals.
- 840 doctors on clinical staff and multidisciplinary team.
- 946 professionals, including outsourced and interns.
- 111 full-time employees engaged in scientific research.
- Professional development and talent retention.
- Promotion of well-being, integral health and quality of life.
- Development path.

VALUE CREATED

- 3.5% increase in the number of professionals.
- 71% of the total number of professionals are women.
- 88.3% of professionals received performance evaluations.
- 64+ thousand hours of training for different functions.
- 99 multidisciplinary medical residents trained, 14 of whom have joined the clinical staff.
- 27 graduates from the Technical School in 2025.

A.C.CAMARGO BUSINESS MODEL

INTELLECTUAL CAPITAL



INPUTS/RESOURCES:

- R\$ 25+ million invested in information technology and innovation.
- Personalized routines and journeys, based on scientific evidence.
- Dissemination of oncological knowledge.
- Environment that promotes innovation in diagnostics, treatments and patient experience.
- Review of the risk matrix.
- Dédalo Project (Renewed Scientific Research).

VALUE CREATED

- Leadership in CAR-T cell therapy.
- 106 clinical studies in the follow-up or recruitment phase.
- 7,5 thousand participants in 72 open enrollment courses offered.
- MBA in Healthcare Management, in partnership with IBMEC.
- 281 research projects launched and 292 articles published.
- ~R\$ 14 million raised for Research.
- 92 interdisciplinary Research Board meetings.
- Biological samples for the Biobank from 293 new patients.
- 4th José Eduardo Ermirio de Moraes Award: Innovations for Life, with 35 projects submitted.
- 54 professionals completed master's, doctorate and post-doctorate courses.
- Five Intellectual Property assets for which registration has been filed with the INPI.

MANUFACTURED CAPITAL



INPUTS/RESOURCES:

- A network of care units, rehabilitation facilities and a high-tech hospital complex with laboratory units.
- 13 Oncology Centers of Excellence (business units).
- Strategic partnerships.
- 391 active beds, 215 consultation rooms and 28 operating rooms.

VALUE CREATED

- Humanized environment for welcoming patients and their companions.
- Automation and digitalization of the patient journey, with self-service check-in in outpatient clinics and a Zero Absences system.
- Improved data privacy policies and procedures.
- Management of the medicine and materials chain.

Material Topics

GRI 3-1 | 3-2 | 3-3

As part of our commitment to sustainable development and value creation, we have been signatories to the United Nations (UN) Global Compact since 2015, incorporating the 2030 Agenda and the Sustainable Development Goals (SDGs) as guiding principles for our decisions. Consistent with our vision of a sustainable future and the adoption of best practices, in 2025 we conducted a double materiality study based on the methodology proposed by [European Financial Reporting Advisory Group - EFRAG](#).

This process identifies priority topics when assessing the impacts of our activities on society and the environment, as well as factors that influence the institution's performance and long-term viability. The study was carried out with the support of external consultants and conducted internally by the Sustainability department, with integrated stages that ensure a comprehensive overview:

- **Mapping challenges and opportunities:** Identifying the extent of the impact and potential risks and opportunities in the value chain by analyzing global trends, regulatory standards, and best practices in the healthcare sector;
- **Consolidation of priorities:** Compilation of a comprehensive list of key issues for a sustainable future, aligned with the Institution's long-term commitments;
- **Dialogue and evaluation:** Analysis of topics identified by transdisciplinary groups—composed of leaders, experts, and members of the Patient Advisory Board—combining technical expertise with the insights of those who experience the day-to-day reality of care;
- **Strategic validation:** Review and approval of the matrix by the Executive Board, with reporting to the Board of Trustees.

The results were consolidated into a double materiality matrix (impact and financial), and A.C.Camargo's material topics were defined based on their high relevance across both dimensions. This prioritization supports decision-making, goal-setting, risk mitigation, capitalizing on opportunities, and transparency in communication with stakeholders. The ten material topics identified are presented below:

1. **Cancer Prevention and Screening:** Initiatives to raise awareness among the Brazilian population about early diagnosis, preventive measures, and healthy habits, with the aim of reducing tumor incidence and mortality. This involves campaigns and multisectoral partnerships, as well as collaboration with government agencies.
2. **Equality in Access to Healthcare and Social Impact:** A commitment to ensuring high-quality cancer treatments for a broad population while mitigating social, geographic, and economic disparities. It involves the use of advanced technologies and high-complexity care.
3. **Decarbonization:** Measures to reduce greenhouse gas (GHG) emissions, recognizing climate change as a public health challenge. Aligns cancer care services with global sustainability.
4. **Digital Transformation, Privacy, and Data Security:** Integrating technologies to optimize the patient journey while ensuring strict protection of sensitive data. Combining digital agility with cybersecurity to ensure privacy, confidentiality, and compliance with the General Personal Data Protection Law (LGPD).

5. **Patient Care with Quality and Safety:** Implementation of strict clinical protocols and multidisciplinary coordination to minimize risks and adverse events. Promotion of a culture of safety and comprehensive care, combining therapeutic precision with a humanized approach.

6. **Financial Sustainability:** Ethical and efficient management of resources to enable investments in innovation, technology, and long-term care. Encompasses revenue diversification, the adoption of value-based healthcare models, and the strategic allocation of resources.

7. **Climate Adaptation and Energy and Water Management:** Strengthening infrastructure to ensure efficient use of natural resources and continuity of care during climate events. Focuses on the reliability of the energy supply and strict management of water and effluents, combining operational resilience with patient safety.
8. **Waste Management:** Safe handling and proper disposal of waste, preventing environmental and occupational contamination. Combines regulatory compliance, waste reduction, and reverse logistics.

9. **Sustainability and Value Chain Engagement:** Engaging suppliers to adhere to strict criteria for compliance, quality, safety, and social and environmental practices. Focuses on the strategic management and traceability of the entire supply chain to mitigate risks.

10. **Clinical Innovation:** Integration of new technologies, clinical practice, and evidence-based advanced therapies to optimize cancer treatment, improve patient care, and enhance clinical outcomes. Focuses on the implementation of scientific innovations, balancing access to cutting-edge treatment with economic sustainability.



MATERIAL TOPICS

- CRITICAL | FINANCIAL AND IMPACT MATERIALITY

1. Cancer Prevention and Screening

2. Patient Care with Quality and Safety

3. Digital Transformation, Privacy, and Data Security

4. Sustainability and Value Chain Engagement

5. Climate Adaptation and Energy and Water Management
- CRITICAL | IMPACT MATERIALITY

6. Equality in Access to Healthcare and Social Impact

7. Decarbonization

8. Clinical Innovation

9. Waste Management

10. Financial Sustainability

Strategic Planning

2016–2025 Cycle: Closure

The period from 2016 to 2025 saw a structural transformation that consolidated the organization's operating model and prepared it to expand its national and international impact. Throughout this journey, we have established a solid foundation of financial sustainability, operational maturity, and the integration of environmental, social, and governance (ESG) agendas, with continuous progress in management, quality of care, the integration of cancer center pillars, and social development. We also highlight the consolidation of the Centers of Excellence as business units and our leading position in oncology in the country.

2025

Certification as an institution recognized for **excellence** by the Ministry of Health and admission to **Proadi-SUS**.

2024

UTI Top Performer seal. We have joined the Latin American Organization of Cancer Institutes (OLACI) as a founding member.

2023

We have reached our **70th anniversary**; Participation in the **Healthy Hospitals Project**.

2022

First **CAR-T** infusion performed; **First GHG Protocol Gold Seal**; First **risk-sharing** agreement with a pharmaceutical partner as a cost-effectiveness measure.

2020

Opening of the **Itaim Bibi** unit.

2019

Opening of the **Pires da Mota** unit.

2017

Membership in the **Ethos Institute** (social responsibility, ethics, and sustainability in management).

2015

Launch of the **Center of Excellence** model. Commitment to the **Global Compact**; First **Qmentum** certification.

This decade laid the foundations for expanding, in a sustainable and innovative way, the delivery of value to society in various areas:

Social: We have established highly specialized care through teaching and research activities. We have strengthened our contribution to the public health system, expanded prevention initiatives, and created the Social Impact Department.

Environmental: We have made progress in integrating environmental practices into institutional management and operational processes, promoting greater alignment with strategic guidelines.

Financial: We consistently strengthened financial sustainability, which enabled the expansion of operations, strategic investments, and increased operational efficiency, contributing to long-term institutional resilience.

Governance: We have improved decision-making processes by setting up different levels of decision-mak-

ing and clarifying responsibilities. We have expanded the use of indicators and data to support strategic decisions, in addition to refining our risk management and compliance mechanisms.

Innovation: We restructured the innovation area by creating a dedicated management team and advanced projects and partnerships with the innovation ecosystem. We strengthened our culture by relaunching the Idea Factory Program and implementing employee development initiatives, training over 1,300 people in Innovation, Design, Technology, and Agility.

During the period, we completed the 2018–2025 cycle of the Strategic Sustainability Plan, with significant progress on prioritized goals, initiatives, and deliverables. As a result of the institutional commitments set for 2025 for each of the pillars of the Integrated Report, six of the seven commitments were fully met. The only one not fully achieved relates to Manufactured Capital, in which four of the five topics were completed, and the remaining one reached 80% of the planned delivery.



Deliverables of the 2018–2025 Strategic Sustainability Plan

PILLAR

DELIVERIES

RELATED SDGS

Focus on the Future

- Implementation of the Impact and Evolution Reserve (RISE)
- Structuring the donations and sponsorships portfolio



Focus on the Environment

- Integrated Solid Waste Management Plan
- Purchase of energy from renewable sources
- Management of GHG emissions
- Ensuring the maintenance of Environmental Management System (EMS) certification
- Approval of the EMS Standard
- Implementation of the RAUL Project (Rationalization of Water, Electricity, and Utilities)
- First cycle of the "People Who Cultivate Life" project
- Invisible Food – Reduction of food waste



Focus on the Supply Chain

- Supplier performance evaluation, taking into account social and environmental requirements
- Supplier training on sustainability practices
- Rota Verde (Green Route) Program – use of electric vehicles for deliveries to A.C.Camargo



Focus on People

- Diversity, Equity, and Inclusion Policy
- A.C.Camargo Mission Program
- Dona Carolina Tamandaré Program
- Grants to promote employability among socially vulnerable individuals
- Creation of Affinity Groups
- Sustainability Week
- 2nd edition of Black Awareness Week



2025 Institutional Commitments

ACC 2025-CR | 2025-CS | 2025-CF | 2025-CM | 2025-CH

Commitment	2023-2025 goal	2025 result
FINANCIAL CAPITAL Internal resources allocated to maximizing social impact.	Ensure that at least 10% to 20% of total EBIT is allocated to the Social Impact and Development Reserve (RISE) from 2023 to 2025.	The Board of Trustees approved the allocation of 10% of total 2024 EBIT to RISE.
HUMAN CAPITAL Promoting diverse thinking in leadership to foster diversity in decision-making.	Diverse and inclusive leadership to promote a culture of pluralistic decision-making, taking into account generational, gender, and ethnic-racial considerations, as well as the inclusion of people with disabilities and the LGBTQIAPN+ community.	In 2025, the leadership demonstrated diversity in terms of generation, gender, ethnicity and race, as well as the inclusion of people with disabilities and the LGBTQIAPN+ community.*
INTELLECTUAL CAPITAL A positive impact and pioneering work in Brazilian oncology.	To be ranked among the top five private institutions in oncology in the SCImago Institutions Rankings (SIR).	We ranked 1st.

* THE LEADERSHIP AND SENIOR LEADERSHIP STRUCTURE INCLUDES THE POSITIONS OF DIRECTOR, MANAGER, SUPERVISOR, COORDINATOR, AND LEADER, AND WILL CONSIST, BY 2025, OF 205 WOMEN AND 100 MEN, WITH A PREDOMINANCE OF GENERATION X (179), FOLLOWED BY GENERATION Y (120) AND MILLENNIALS (FOUR), AS WELL AS 87 BLACK, BROWN, OR ASIAN INDIVIDUALS, 16 LGBTQIAPN+ INDIVIDUALS, AND THREE INDIVIDUALS WITH DISABILITIES.

Commitment	2023-2025 goal	2025 result
MANUFACTURED CAPITAL Digitization of the patient journey.	Provide patients with digital self-service channels to increase service capacity and improve the speed and efficiency of their interactions with A.C.Camargo.	 Channel implementation status: Self-scheduling; Self-check-in; Results via digital channels; Automated interactions: 100% implemented. Telemedicine consultations: 80% implemented.
NATURAL CAPITAL Fighting climate change.	Expand the measurement of greenhouse gas (GHG) emissions generated by the value chain (Scope 3 – indirect emissions).	 We have expanded our measurement of value chain emissions (Scope 3) to include the categories of upstream transportation and business travel.
SOCIAL CAPITAL Number of lives impacted nationwide.	To make a difference in 500,000 lives each year.	 628,026 lives impacted by 2025 in the areas of assistance, education, innovation, social impact, research, and products and services.
RELATIONSHIP CAPITAL Patient satisfaction index regarding their cancer care journey at strategic cancer centers.	Achieve a minimum NPS score of 90 from patients treated at the breast, urology, dermatology, and head and neck Centers of Excellence.	 CE breast: 92 CE urology: 92 CE dermatology: 93 CE head and neck: 93

2026–2030 Cycle: Strategic Vision

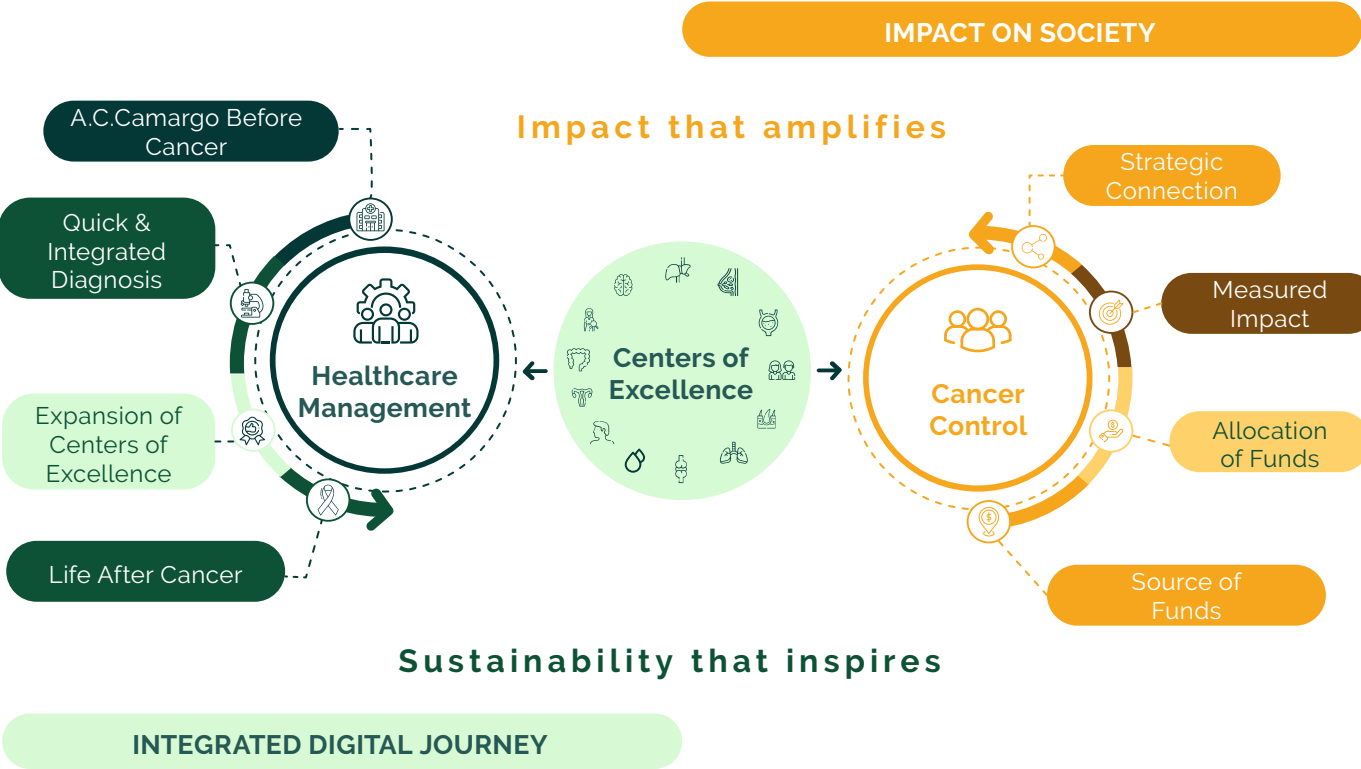
GRI 2-24 | 3-3

By the close of 2025, the institution reaches a stage of maturity that reflects ten years of building the current model. This decade has been one of preparation, structuring, and consolidation, which has laid a solid foundation for the next strategic cycle.

This journey positions A.C.Camargo at a new turning point in its history. The accumulated knowledge becomes a strategic asset to contribute to the development of the healthcare system, ushering in a new phase focused on transferring this knowledge, expanding the impact of clinical care and scientific research, and strengthening the leading role that A.C.Camargo plays in cancer care in Brazil.



Strategic Plan 2026–2030: connection with sustainability pillars



2026–2030 Strategic Sustainability Plan

In the 2026–2030 Strategic Sustainability Plan, we have taken into account global and national transformations and trends in the healthcare sector (climate change, ESG management, digitalization, and a shortage of qualified professionals), as well as the institution's priority issues. The plan is structured around two interconnected axes:

Sustainability that Inspires, focused on operational excellence, long-term viability, and revenue diversification;

Impact that Empowers, focused on expanding national reach through Proadi-SUS, education, research, and social initiatives.

These axes unfold into four pillars, represented by a pinwheel, to highlight that social impact permeates and connects them all. Goals were also defined to guide public commitments and are aligned with the Balanced Scorecard (BSC) and the Strategic Programs.



Pillars of Sustainability 2026–2030

Impact that Empowers

Sustainability that Inspires

Sustainable healthcare ecosystem

Engagement of stakeholders, strengthening relationships throughout the healthcare system.

Mobilize partners and healthcare professionals to promote sustainability and strengthen relationships throughout the healthcare system.

Capitals:
Social and Relationship
SDG: 1, 3, 11, 12, 16 and 17

Capital:
Natural
SDG: 2, 6, 7, 12, 13 and 15

Reduce the environmental impacts of operations and increase resilience to climate change.

Environment

Resource management and mitigation of environmental impacts.

**SOCIAL
IMPACT**

People

Strengthening Human Capital. Inclusion and Capacity Building.

Strengthening human capital, diversity, and social impact.

Capital:
Human
SDG: 3, 4, 5, 10 and 18

Capitals:
Financial, Manufactured, and Intellectual
SDG: 3, 8 and 9

To ensure the long-term success of A.C. Camargo through innovation, digital transformation, teaching and research, and financial, social, and environmental sustainability, thereby creating value for society and our stakeholders.

Future and Innovation

Focus on financial sustainability, digital transformation and innovation, teaching, and research.

Commitments for 2026–2030

GRI 3-3

Commitment	2030 goal
FINANCIAL CAPITAL Strengthen sustainability by expanding and diversifying fundraising efforts	To raise R\$ 46 million.
HUMAN CAPITAL Promote diverse and inclusive thinking at all levels of governance, ensuring representation, equality and a voice for different groups	• 45–50% of hires from underrepresented (ethnic and racial) groups. • 2% of hires of refugees.
INTELLECTUAL CAPITAL To achieve first place in the SCImago Institutions Rankings (SIR) as the top private institution in oncology in Latin America	1st place in the ranking.

Commitment

MANUFACTURED CAPITAL

Implement the phygital journey for prevention, diagnosis, and treatment, moving toward an integrated, predictive, and interactive model

NATURAL CAPITAL

Strengthen institutional climate management

SOCIAL CAPITAL

Expand the social impact at the regional level through the Colorectal Mission Program, promoting early diagnosis and access to cancer care, thereby helping to reduce inequalities and strengthen cancer care in at least two municipalities

RELATIONSHIP CAPITAL

New patients starting chemotherapy, surgery, or radiation therapy

2030 goal

Attract 10% of new patients annually through digital platforms, reaching a total of 10,000 patients by 2030.

Reduce Scope 1 emissions by at least 30% (base year 2024).

Increase the percentage of patients diagnosed at stages I or II among those treated by the Colorectal Mission Program in the two selected municipalities.

Achieve 10% annual growth.

Governance and Integrity

Governance Structure

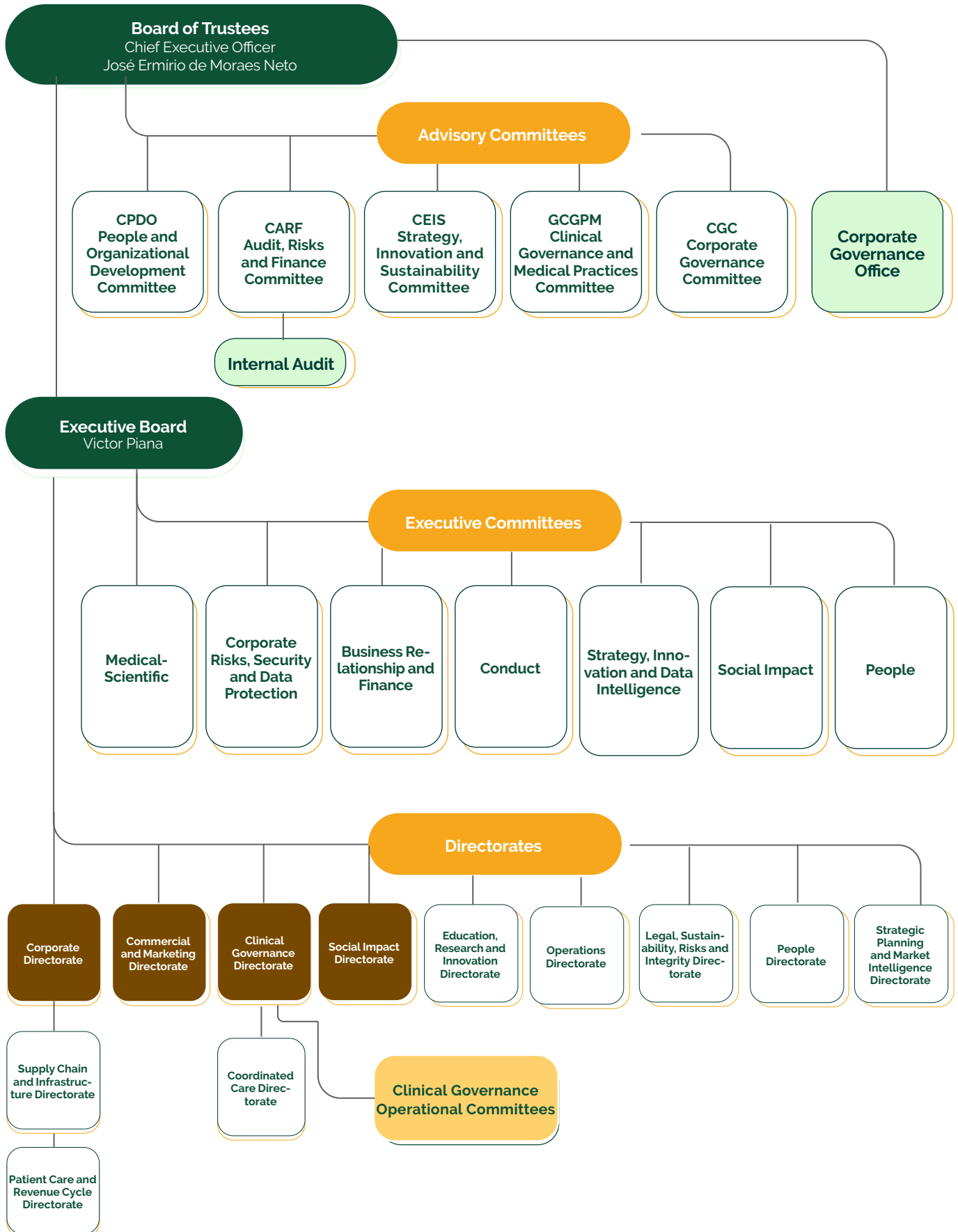
GRI 2-9

We have embraced an integrated governance model, comprising structures that ensure consistency, transparency, and effectiveness across all institutional activities:

- **Corporate Governance:** Guided by the Articles of Incorporation and internal regulations, which define responsibilities, authority levels, and decision-making processes.
- **Clinical Governance:** Linked to the Medical Board and focused on technical and clinical supervision.
- **Executive Body:** Aligned with the General Management, which coordinates and implements the institution's strategic and administrative management.

In 2025, the Corporate Governance department consolidated its role as a strategic unit providing institutional support to the Board of Trustees, strengthening its independence, the technical quality of its analyses, and the transparency of its decision-making processes. To ensure sound and effective governance, we maintain a clear organizational structure with the following responsibilities:

- **Board of Trustees:** The highest decision-making body for institutional governance, responsible for approving and monitoring the Strategic Plan, ensuring that the institution's mission, purpose, and long-term sustainability are upheld.
- **Advisory Committees:** Specialized structures that delve deeper into strategic issues and support the Board of Trustees in its decision-making.
- **Internal Audit:** Reporting to the Audit, Risk, and Finance Committee (CARF), it operates independently to assess and improve risk management processes, internal controls, and governance, thereby contributing to institutional transparency and compliance.
- **Executive Board:** Responsible for the executive and operational management of the Institution, overseeing the departments and ensuring the implementation of the strategy approved by the Board of Trustees.
- **Executive Committees:** Specialized entities that support the General Management, fostering cross-functional integration, strategic alignment, and greater efficiency in decision-making processes.



Board of Trustees

GRI 2-9 | 2-10 | 2-11 | ACC 65

The Board of Trustees plays a pivotal role in corporate governance, ensuring that the Institution's economic, social, and environmental impacts are managed responsibly and with a long-term vision. As the highest decision-making body, it sets guidelines, approves the Strategic Plan, and deliberates on expansion projects and investments.

To fulfill its duties, the Board and its Advisory Committees hold regular meetings to track strategy, monitor risks, and adjust actions, promoting sustainable and socially responsible operations. The Board also approves institutional policies, values, purposes, and ethical guidelines.

The Executive Chairman of the Board of Trustees coordinates the body's activities, while the Executive Board is responsible for management, preserving independence and avoiding conflicts of interest.

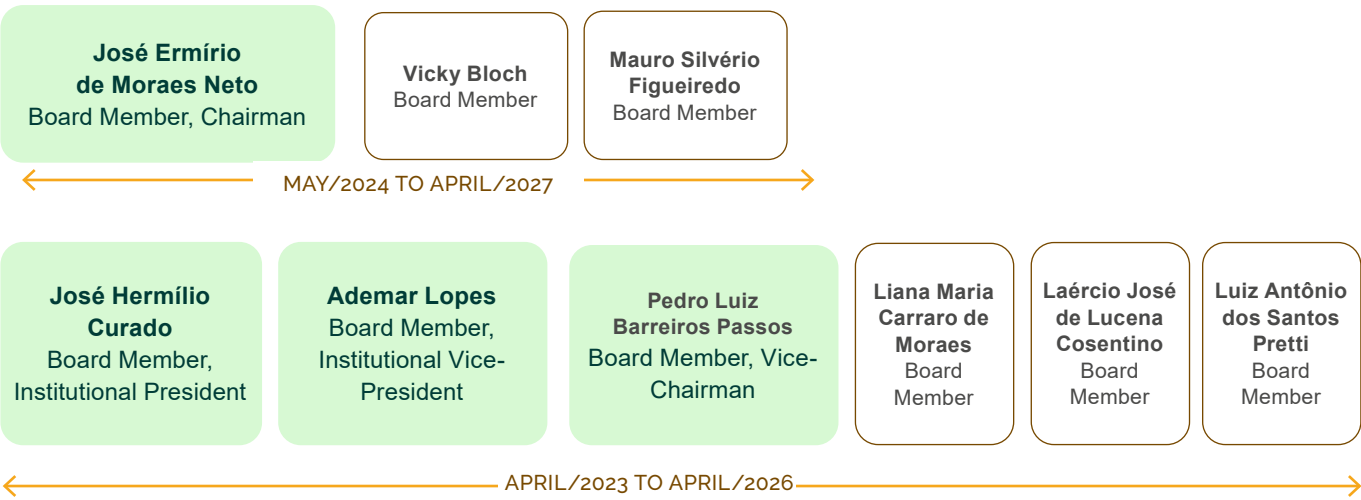
DIVERSITY OF THE BOARD OF TRUSTEES

GRI 2-9 | 405-1



The appointment of members of the Board and its committees is governed by the Bylaws and internal regulations and includes, prior to the final decision, an assessment conducted by the Corporate Governance Committee based on criteria of competence, diversity, integrity, and independence.

COMPOSITION OF BOARD OF TRUSTEES



Advisory Committees

GRI 2-12

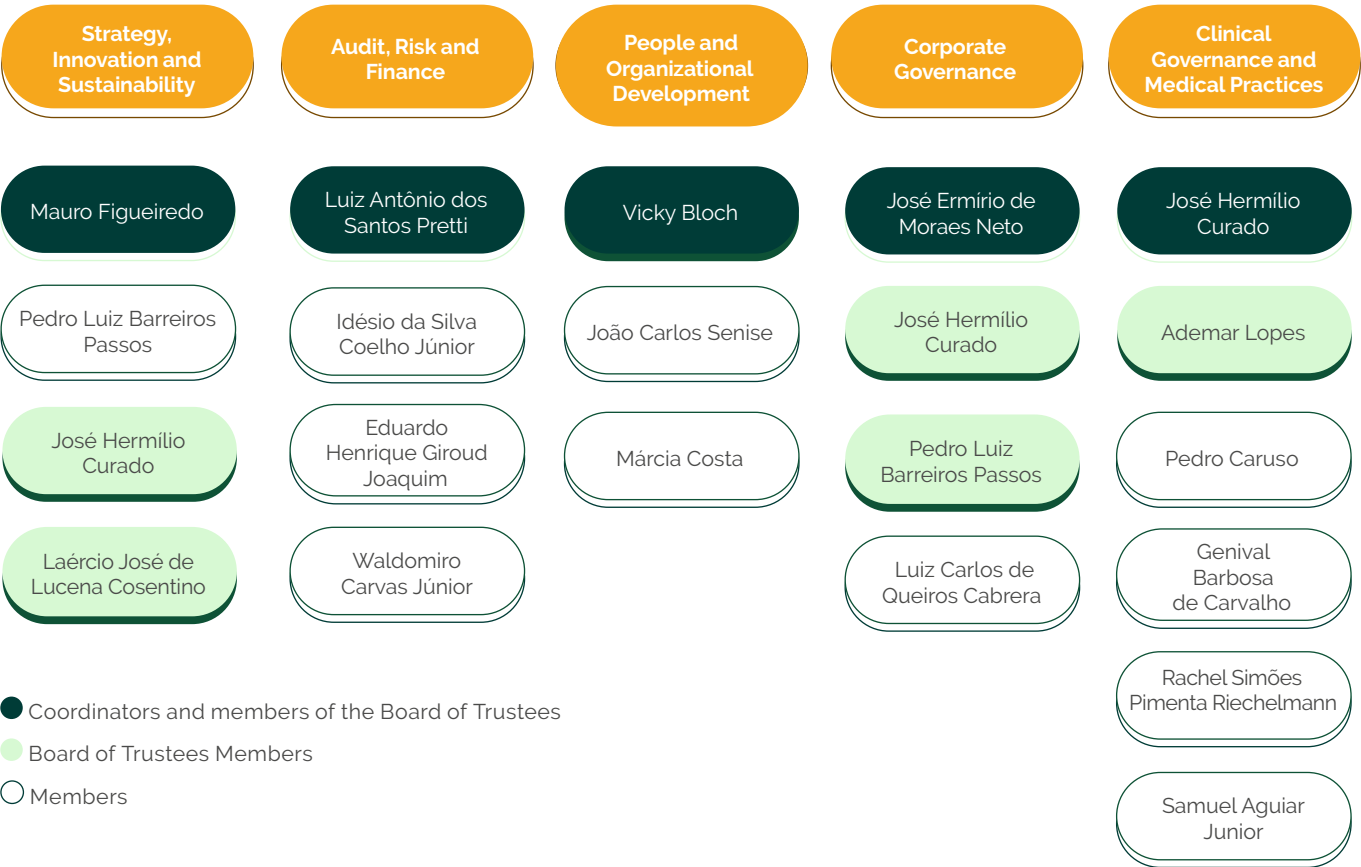
To enhance decision-making quality and increase the technical depth of analyses, the Board of Trustees is supported by five standing advisory committees, whose responsibilities, composition, and operating procedures are defined by internal regulations.

- **Strategy, Innovation and Sustainability Committee:** monitors sustainability goals and indicators as well as ESG themes.
- **Audit, Risk and Finance Committee:** monitors risks, internal controls, auditing, data privacy, and compliance.

- **People and Organizational Development Committee:** oversees corporate culture, human resources, and social responsibility.
- **Corporate Governance Committee:** supervises the functioning of the governance structure and provides guidance on the conduct of the institution's activities.
- **Clinical Governance and Medical Practices Committee:** track the quality of care and clinical governance.

Composed of board members and external experts, these committees ensure a diversity of viewpoints and specialized expertise in the institution's discussions.

COMPOSITION OF THE ADVISORY COMMITTEES



- Coordinators and members of the Board of Trustees
- Board of Trustees Members
- Members

Executive Board

The Executive Board forms the administrative structure responsible for the operational management of the Institution and is composed of Foundation staff. Its role is to execute the strategy, implement institutional policies, oversee healthcare, teaching, research, and innovation operations, and ensure compliance with the decisions of the Board of Trustees, in accordance with the Bylaws and applicable laws.

It is composed of highly qualified professionals, appointed by the Board of Trustees based on the alignment of their profiles and competencies with the Foundation's strategic and institutional development objectives.

In 2025, we optimized the Executive Board's structure, making management faster and more integrated. The Technology and Innovation areas began working jointly with the Strategy area, ensuring alignment in decision-making. The Executive Board now consists of six men and six women. We also reorganized responsibilities to strengthen Healthcare Coordination. The entire healthcare area (including nursing, ICUs, the operat-

ing room, and multidisciplinary teams) came under the management of the Clinical Governance Directorate. Meanwhile, the Operations area began focusing its efforts on ensuring the infrastructure and resources necessary for patient care, incorporating Hospital Engineering and the Contact Center.

EXECUTIVE COMMITTEES REPORTING TO THE EXECUTIVE BOARD

The Executive Committees are advisory bodies reporting to the Executive Board, with the aim of strengthening the Foundation's strategic coordination and operational efficiency. In 2025, we optimized this structure, reducing the number of committees from 11 to nine. They serve as forums for analyzing, planning, and monitoring issues relevant to management, promoting integration across departments and alignment with strategic guidelines and priorities. This approach contributes to more consistent, evidence-based decisions that are aligned with the Institution's long-term objectives.

DIVERSITY OF THE EXECUTIVE BOARD

GRI 2-9 | 405-1



GOVERNANCE ASSESSMENT

GRI 2-18

The Board of Trustees is an independent body, and its Internal Regulations provide for a performance evaluation every two years, covering both the Board as a whole and its individual members. The process follows criteria defined by the Corporate Governance Committee and approved by the Board itself, combining self-assessment and collective analysis, with the aim of continuously improving governance practices and the performance of board members.

The assessments consider the management of ESG (environmental, social, and governance) impacts and other relevant topics from the perspective of best governance practices. The results are discussed by the relevant governance bodies and may lead to action plans to improve processes and strengthen the Board's performance.

COMPENSATION

GRI 2-19 | 2-20

We adhere to practices that are consistent with applicable laws, institutional standards, governance principles, and the Foundation's strategic guidelines, ensuring transparency, equality, and sustainability. The compensation determination process is overseen by the Board of Trustees, with support from the People and Organizational Development Committee (CPDO). As a private, nonprofit foundation, decisions on this matter do not involve shareholders and may be supported by specialized consulting firms when necessary.

Board of Trustees and Advisory Committees

Members of the Board of Trustees, in their capacity as statutory officers, as well as members of the Advisory Committees, are not paid any compensation, whether fixed or variable, nor do they receive any benefits, bonuses, or other financial advantages, in accordance with the Bylaws and legal requirements.

Executive Board

The Executive Board is compensated in accordance with the Compensation Policy approved by the Board of Trustees. The compensation structure consists of a fixed component and, when applicable, a variable component. The variable component for the Executive Board is linked to strategic planning and corporate goals, which include sustainability guidelines, reinforcing the link between performance, results, and institutional objectives.

Severance payments comply with labor laws and internal policies; special conditions for the termination of senior leadership are evaluated on a case-by-case basis by the CPDO and the Board of Trustees. Regarding retirement benefits, directors participate in the general social security system and may enroll in long-term programs applicable to eligible employees, with no exclusive plans.

Transparency and Integrity

GRI 2-16 | 2-29 | 3-3 | 205-2 | 205-3

At A.C.Camargo, ethics govern all decisions, operations, and relationships. Our work is guided by the preservation of our institutional purpose and the maintenance of trust among employees, clinical staff, partners, and suppliers. This commitment is formalized in the Code of Conduct, approved by the Board of Trustees, which establishes principles and standards for professional relationships, in compliance with current legislation and aligned with the institution's values.

The Code of Conduct defines the principles that underpin our operations and guide the commitments we have made, with the support of the Executive Board, on issues such as promoting diversity, respecting people, combating all forms of discrimination, preventing harassment, protecting privacy, health, and safety, as well as addressing corruption, fraud, money laundering, and child or forced labor.

To ensure the effectiveness of these commitments, our decisions and processes are supported by clear policies, periodic training programs, transparent communication, and monitoring of activities. This set of actions aims to prevent, identify, and address any misconduct through internal investigations and the application of appropriate measures when necessary.

Reports received through formal feedback channels are recorded on an independent platform that ensures the confidentiality of the information. The reports are evaluated by a specialized team and, depending on their nature, forwarded to the Executive Conduct Committee for review and decision-making. Based on the decisions adopted, the Executive Board is responsible for implementing the defined guidelines, with continuous monitoring of the areas involved. The Board of Trustees periodically receives, through the People and Organizational Development Committee, reports on indicators and the main issues addressed through the channel.

The ongoing evaluation of operations contributes to strengthening internal controls and reducing the risk of irregularities. Furthermore, actual or potential concerns and impacts are reported to the Board of Trustees through structured workflows, ensuring transparency, consistency, and alignment with best governance practices.

In 2025, anti-corruption policies were widely communicated to the nine members of the Board of Trustees, all employees, and the 457 new business partners. All employees participated in training on the topic. No critical concerns were reported to the Board of Trustees, nor were any cases of corruption identified during the period.



CONDUCT CHANNEL

The Conduct Channel is available to anyone (employees, patients, suppliers, or other stakeholders) to report unethical behavior or violations of laws, the Code of Conduct, and internal policies. The channel is secure, accessible online and by phone, and can be used either with or without identifying information, with a guarantee of confidentiality and protection against retaliation.

In 2025, 607 (73%) of the reports were investigated internally, primarily related to misconduct (42%), moral harassment (14%), non-compliance with internal policies (10%), favoritism or conflict of interest (6%), theft, misappropriation or diversion of materials (5%), discrimination (5%), and other categories (18%). Monitoring this data strengthens preventive and educational measures and reinforces our commitment to a trustworthy, ethical, and inclusive environment.



Privacy and Data Protection

GRI 418-1

The protection of personal data, especially sensitive health information, is a priority for A.C. Camargo. We continuously invest in technology and process improvements to ensure the privacy and security of the data under our responsibility. These initiatives are part of our digital transformation strategy, aimed at improving the experience of patients, healthcare professionals, and employees.

We maintain a Privacy Program aligned with the General Data Protection Law (LGPD), which brings together guidelines, controls, and practices to ensure the responsible use of information. The program involves the periodic review of privacy notices, the assessment of risks related to data processing, and ongoing internal awareness initiatives. We also provide a Privacy Portal with clear information on how data is processed and channels for data subjects to exercise their rights, such as access, correction, or deletion of data.

In 2025, 22 substantiated complaints related to customer privacy were recorded, all received from third parties, with no interventions by regulatory agencies. Among these cases, 20 resulted from human error, with no evidence of data leaks, theft, or loss. All situations were promptly addressed, reinforcing our commitment to the protection and responsible management of information.

We continue to strengthen our integrity and data protection processes by enhancing our third-party vetting procedures, including reviews related to privacy, compliance, and information security.

We also hold Privacy and Data Protection Week, as well as other educational and interactive initiatives to reinforce a culture of information security among our employees.

CUSTOMER SERVICE (SAC)

It serves as the primary contact point, responsible for receiving requests, suggestions, compliments, and complaints from patients and their families. The feedback recorded by the Customer Service Center helps improve the patient experience, ensuring a structured, effective process that aligns with the principles of excellence in the care provided by A.C.Camargo.

9,699

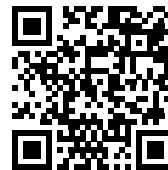
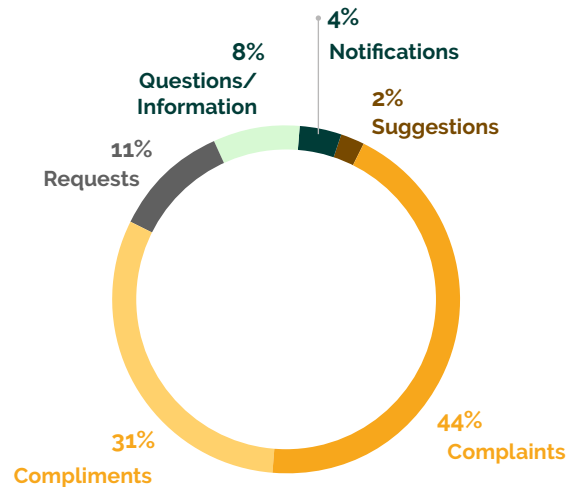
Total number of manifestations (SAC)

3,041

compliments reported

60%

of the negotiations conducted within an hour



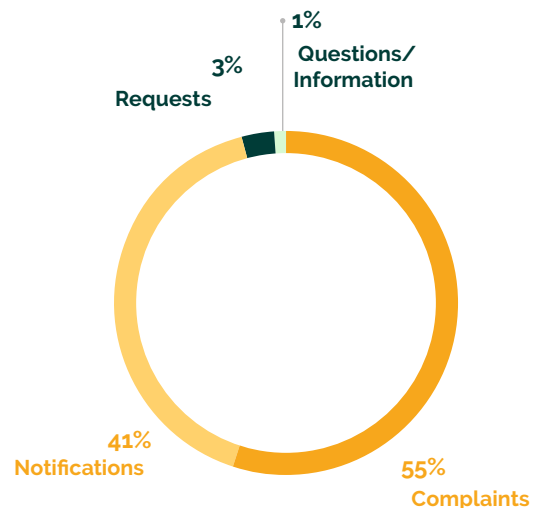
SAC:
+55 (11) 2189-5000
sac@accamargo.org.br
accamargo.org.br/form/contato

OMBUDSMAN

It specializes in high-complexity cases, including those related to healthcare practices and regulatory issues, ensuring a technical and neutral approach, with a commitment to providing swift, effective solutions that align with institutional guidelines. This approach helps mitigate risks and strengthen transparency and trust in institutional relationships.

1,028

Total number of manifestations (Ombudsman)



OMBUDSMAN
accamargo.org.br/form/ouvidoria

Communication Channels

GRI 2-25 | 2-26

A.C.Camargo provides various channels through which employees, patients, family members, suppliers, and other stakeholders can report concerns or complaints, or seek guidance on responsible conduct. All channels ensure confidentiality, impartiality, and protection against retaliation.

These channels are widely publicized and monitored by the relevant departments, with structured analysis of the reports and referral to governance bodies when necessary.

PROFESSIONAL CHANNEL

Intended for all employees regarding questions, suggestions, compliments, and internal complaints.

NOTIFIQUE SYSTEM

A system for recording incidents related to patient care, used by healthcare professionals, medical staff, and third parties.

INFORMATION SECURITY CHANNEL

To report issues or risks related to digital security.

PRIVACY PORTAL

For requests related to the protection of personal data (LGPD)



learn more at:

Privacy Portal

accamargo.org.br/institucional/portal-de-privacidade

CONDUCT CHANNEL

To report unethical behavior or violations of laws, the Code of Conduct, and internal policies.



learn more at:

Conduct Channel

0800 377 8022

accamargo.org.br/institucional/codigo-de-conduta



Risk Management

GRI 2-12 | 2-13 | 3-3 | ACC 54 | 71

A.C.Camargo's risk management is structured based on international standards, such as ISO 31000 and the Institute of Internal Auditors (IIA) Three Lines Model, with a clear definition of roles, responsibilities, and workflows between management and control areas, guided by the principles of segregation of duties, transparency, prior risk analysis, and regulatory compliance. Integrated management encompasses the clinical and business areas, which are responsible for identifying, assessing, monitoring, and addressing risks, as well as for implementing and maintaining the respective internal controls. The control areas, acting as the second line, provide technical and methodological support, while Internal Audit (third line) maintains independent oversight, ensuring greater transparency and compliance in the institutional process.

The Board of Trustees sets strategic guidelines and oversees economic, social, environmental, and governance impacts by approving policies, overseeing strategic planning, and monitoring the effectiveness of risk management. Its work is supported by Advisory Committees, such as the Audit, Risk, and Finance Committee and the Strategy, Innovation, and Sustainability Committee, which analyze indicators, audit results, and critical issues related to the ESG agenda.

The Executive Board is responsible for implementing guidelines and conducting risk management processes. In this context, the Legal, Sustainability, Risk, and Integrity Department coordinates corporate risk management, compliance, integrity, and sustainability, ensuring a structured reporting flow to governance bodies.

In 2025, corporate risk management made progress in terms of scope and methodological consistency, with 100% of the 32 activities—spanning six institutional mac-

ro-processes—being assessed, in addition to three special assessments related to infrastructure risks, climate events, and environmental risks. There was progress in standardizing assessments, with consistent application of the institutional probability and impact framework, as well as greater involvement of business units in the identification, assessment, validation, and treatment of risks, strengthening the integrated approach.

Structured analyses were conducted on the resilience of hospital infrastructure, including electrical, hydraulic, and building systems. The Risk Matrix was revised, with a focus on strengthening socio-environmental aspects and improving monitoring through risk sheets and governance bodies.

Regarding business continuity, the Institution updated and aligned the regulations related to contingency plans in collaboration with the business units, focusing on conceptual standardization, a clear definition of roles, and adherence to institutional practices. This initiative established a consistent regulatory framework, a foundational step for the evolution of this area.

There was no formal update to the Business Impact Analysis (BIA) nor full implementation of a business continuity management model, with these topics remaining in the planning phase. This approach reflected a strategy of progressive maturation, giving priority to regulatory strengthening, integration with risk management, and the engagement of the responsible departments.

This approach enables structural advances in the upcoming cycles, promoting the evolution of response capabilities, the strengthening of operational resilience, and the continuity of essential services.

Climate-related risks

GRI 201-2

In 2025, we identified and assessed climate risks for the first time, following the recommendations of the Task Force on Climate-related Financial Disclosures (TCFD) and ISO 31000. Five risks were mapped, including acute and chronic physical risks, climate transition risks, and systemic risks, such as disruption of hospital operations, reduced operational efficiency in the face of climate and epidemiological changes, exposure to regulatory and reputational risks, and interdependent effects among essential systems.

These risks may affect critical infrastructure, response capacity, operating costs, and service continuity. Management is integrated, with oversight by the Risks, Corporate Security, and Data Protection Executive Committee, which monitors mitigation and adaptation measures as well as strategic and budgetary impacts.

Strategic Risks

Strategic risks encompass events that could potentially impact institutional sustainability and the long-term continuity of operations, including aspects related to the healthcare environment, competitive dynamics, partnerships, and the patient experience.

Within this context, the Institution monitors critical issues such as information security, data protection, and technology deployment in an integrated manner, ensuring that innovation occurs with adequate levels of reliability, compliance, and regulatory alignment.

Additionally, factors related to people, processes, and ethics are considered, providing guidance for decision-making in line with institutional standards of governance and excellence in patient care.

Prevention of Adverse Events

To prevent adverse events, we hold regular discussion groups to improve patient care practices. These groups systematically analyze risks and propose preventive and corrective measures, including:

Patient Safety and Hospital Infection Control

Committees: responsible for reviewing procedures and ensuring the implementation of best practices to protect patients and healthcare professionals.

Safety Huddle: quick, daily meetings of interdisciplinary teams focused on identifying risk situations and defining preventive and corrective actions, promoting joint decision-making in complex clinical contexts.

This integrated approach strengthens safety, the quality of care, and a culture of prevention throughout the institution.

Patient care risk

The corporate risk management process includes an assessment of clinical risks, which was strengthened in 2025 as part of a commitment to patient safety and quality of care. This assessment identifies process risks based on frequency and impact, and aims to promote continuous improvement in services.

Internal Audit

The Internal Audit is an evaluation activity conducted through a systematic approach to reviewing risk management, control, and governance processes. Their work contributes to the achievement of the institution's strategic objectives and to the improvement of operational efficiency. The independence of the role is ensured by direct reporting to the Audit, Risk, and Finance Committee (CARF), which is linked to the Board of Trustees.



External Controls

To ensure transparency and compliance with regulatory requirements, our external controls complement internal governance mechanisms, providing independent assessments of our institutional performance and protection of stakeholders' interests. Among these controls, the following stand out:

Public Prosecutor's Office: Our activities are supervised by the Curatorship of Foundations, a department of the Public Prosecutor's Office of the State of São Paulo. We regularly report on corporate governance, financial management, initiatives carried out, and social impact results.

Independent Audit: Hired by the Board of Trustees, external auditors review our financial statements annually.

Quality Certifications: We undergo external assessments that validate the quality of our institutional processes, risk management, internal controls, and the use of best practices. In 2025, we underwent recertification by Qmentum, reinforcing our commitment to excellence and patient safety.

Sustainable Healthcare Ecosystem

Healthcare Value Chain

GRI 2-6 | 2-23 | 2-24 | 3-3 | 204-1 | 414-1 | 414-2

Our supply chain includes 680 direct suppliers and 1,484 indirect suppliers. In 2025, payments to direct partners totaled R\$ 704.8 million, of which 99.8% went to local suppliers (65% for products and 35% for services), covering mainly medications, hospital supplies, orthotics, prosthetics, and special medical supplies (OPME), and other inputs, including 128 international partners.

We have made progress in establishing standards and procedures for evaluating service providers, defining responsibilities and criteria based on an impact matrix. We have also implemented a structured process for incident management, with response deadlines and a complete workflow for recording and resolution.

With regard to environmental management and logistics, we conducted an assessment of approximately 630 diesel vehicles through opacity inspections, automating the process for requesting reports and thereby improving compliance with environmental and legal requirements. We also achieved significant gains in operational efficiency, reducing the volume of externally stored documents and associated costs by approximately 60%. On the transportation side, route reviews and demand control helped reduce costs and optimize logistics.

Regarding purchasing and planning, we strengthened cross-departmental integration, reviewed inventory policies, and took steps to control internal inflation, generating significant savings through negotiations, loss reduction, and maintaining high product availability.

Throughout the year, 100% of our active suppliers underwent integrity assessments, with a focus on mitigating reputational and compliance risks, including verification of practices related to forced labor. No significant negative impacts, whether actual or potential, were identified, which eliminated the need to adopt improvement agreements or terminate contracts. We also assessed the performance of over 200 suppliers against social and environmental criteria, including adherence to ISO 14001 certification, as well as sending notifications to address non-conformities and promote continuous improvement of services.

The results underscore the company's commitment to a more efficient and transparent supply chain that aligns with best sustainability practices.

Supplier Evaluation Results

Performance

239 evaluations performed

219 different suppliers evaluated

98% overall IQF average
(Supplier Qualification Index)

Three training sessions with instructional videos and a certificate of completion

Incidents

~70 alignment meetings held (suppliers and/or internal departments)

~360 notifications sent

~145 different suppliers notified

Partnership Network

PETLOVE + INSTITUTO CARAMELO

Partnering with Petlove and the Caramelo Institute, we organized an initiative that brought affection and connection to patients, featuring Amendoim, the dog who starred in the film “Caramelo”. The “Love que Cuida” project transformed rescued dogs into sources of emotional support. Before the visits, they underwent training and socialization to ensure safe interactions. The result was a number of encounters that helped make the cancer journey more welcoming for patients undergoing treatment and their families. Besides its impact at the Cancer Center, the initiative also encouraged responsible adoption of the participating dogs, reinforcing the idea of care as a continuous cycle.

PARTNERSHIP WITH MINALBA BRASIL



In September, over 700 flower bouquets and personalized bottles of water were delivered to patients and their companions in partnership with Minalba Brasil, providing information, a touch of light-heartedness, and care during a time of raising awareness about the prevention and early diagnosis of gynecological tumors.

PINK OCTOBER WITH NESTLÉ

We partnered with Nestlé on an initiative: for every can of Molico skim milk—special Pink October edition—sold, a share of the proceeds was donated to projects and research conducted by A.C.Camargo, reinforcing our commitment to generating knowledge and promoting evidence-based health.



learn more at:

Partnership Molico and A.C.Camargo Cancer Center

<https://www.nestlefamilynes.com.br/molico-outubro-rosa>

PARTNERSHIPS WITH HEALTHCARE INSTITUTIONS

ACC 45

A.C.Camargo has entered into several strategic partnerships with hospitals and healthcare institutions to expand its oncology, pediatric, and maternal and child healthcare services, as well as to promote teaching and research activities:

Hospital Sabará (since 2021): A partnership focused on pediatric and adolescent patients, with oncology cases referred to A.C.Camargo and non-oncological pediatric conditions referred to Sabará. The collaboration includes in-person and telemedicine consultations, joint teaching and research activities, and participation of oncologists within the Sabará facility to provide support for cancer diagnosis, staging, and treatment.

Santa Joana Group (since 2022): Integrated care for pregnant women and newborns, with consultations between doctors from A.C.Camargo and Santa Joana. Since 2024, the project has included the Madrinha Program, offering free online courses for pregnant employees.

Rede Carinho – COE (since 2023): Partnership for institutional engagement, teaching and research, patient referrals and counter-referrals, preventive oncology, consultations in pathological anatomy, second-opinion programs, and the provision of pharmaceutical services for chemotherapy.

Hospital Santa Rita (since 2023): Patient referrals, teaching and research activities, and strengthening institutional cooperation.

IAMSPE (started in 2025): Provision of inpatient healthcare services, with a focus on radiation therapy.

Hospital Cema (started in 2025): Referral of cancer patients for treatment at our institution.



354

Total number of patients from partner institutions treated at A.C.Camargo

Partnership with the Municipal Health Department

We continue our partnership with the city of São Paulo (SP) to strengthen cancer care within the SUS. Through a contract with the Municipal Health Department, we focus on high-complexity care and excellence across the entire healthcare system.

INTEGRATED ONCOLOGY MANAGEMENT PROGRAM FOR COMPANIES

We have signed a technical cooperation agreement with Sesi (Industry Social Service) to develop an oncology management program focused on the prevention and early detection of the disease. The initiative aims to go beyond treatment by supporting companies and their employees in promoting habits and practices that reduce risks and promote health.

The agreement was signed during a meeting of the CNI Health Council in São Paulo (SP), with the participation of the president of the Sesi Council's health division. Based on this partnership, it will be possible to develop integrated corporate solutions, structuring a number of projects that offer more appropriate and effective cancer care in the industry.



Lecture on Cancer Prevention at ESPM

The New Business team visited ESPM (Higher School of Advertising and Marketing) to deliver a lecture on cancer prevention, kicking off the partnership with the Integrated Oncology Management Program for Companies.

The initiative brings information and prevention practices to the corporate environment, focusing on healthy habits, personalized screening based on health history, and specialized medical follow-up. The goal is to strengthen a culture of health and increase early diagnosis among employees.

For us, honoring life means sharing knowledge, care, and support so that no one has to go through this journey alone.

Value-Based Healthcare Management

At A.C.Camargo, we strive to integrate patient care, education, and research to continuously improve our value-based oncology model. This concept links the quality of care—as measured by clinical outcomes—to the resources used, promoting efficiency, reducing waste, and achieving better outcomes for patients.

Our teaching initiatives reinforce this approach, with innovative programs that strengthen healthcare management and evidence-based decision-making.

Science has been transforming cancer treatment with increasingly effective therapies. Now, management becomes the decisive factor in ensuring that these innovations reach all patients in a sustainable and accessible manner, reaffirming A.C.Camargo as a leader in value-based oncology.

Value-based Office

The Value-based Office focuses on data management and analysis to support the improvement of protocols and the efficient allocation of resources throughout the entire patient journey.

It also contributes to the implementation of innovative models, such as risk-sharing initiatives with the pharmaceutical industry, thereby expanding access to highly complex therapies in a sustainable manner.

Integrated with patient care, teaching, and research, it transforms data into clinical intelligence, supporting decisions that strengthen institutional sustainability and generate value for patients, partners, and society.

Value-based Office

Patient Care Integrated CoE Management

- Adherence to clinical and operational protocols.
- Coordination of care
- Measurement of quality of life outcomes.
- Increased efficiency of workdays

Cost-effective solutions and models

ACC 53

In 2025, we implemented cost-effectiveness models, including risk-sharing agreements with medicine manufacturers, volume-based rebates, and episode-based payments, benefiting a total of 33 patients.

Additionally, we formalized the Health Technology Assessment Center (NATS) with the Brazilian Network for Health Technology Assessment (REBRATS), strengthening partnerships with the Ministry of Health.

Survival



ACC 50

Through the Cancer Observatory, we publish our epidemiological profile and the survival outcomes of treated patients annually, reflecting the effectiveness of our therapeutic strategies. The Colorectal Cancer Center of Excellence reports a five-year survival rate of 72.7% for patients under 50 years of age and 63.7% for those aged 50 and older.

Quality and Patient Experience

GRI 3-3

Continuously investing in the Patient Experience and in the professional development of our healthcare providers means fostering more humane, safe, and welcoming practices. Every interaction, gesture, and act of attentive listening makes a difference in the patient's journey. That is why we are committed to providing our teams with the best tools, knowledge, and resources to ensure comprehensive and humanized care, recognizing that there can be no excellence in care unless we pay attention to the mental health of those who provide it.

PATIENT EXPERIENCE WEEK

Patient Experience Week reinforces this commitment to continuous improvement, encouraging reflection, learning, and initiatives that strengthen our patient care culture. At the opening of the program, our teams attended a lecture by Brazilian journalist Daiana Garbin, who shared her perspectives on the patient journey and her experience with the “De Olho nos Olhinhos” (“Keeping an Eye on Little Eyes”) Campaign, conceived after her daughter was diagnosed with retinoblastoma.

NAVIGATION PROGRAM

A cancer diagnosis involves more than just tests and treatments. It brings uncertainty, fears, and a number of important decisions along the way. Our Navigation Program was designed precisely to support this journey in an organized and integrated manner, connecting patients, multidisciplinary teams, and services, from diagnosis through follow-up. The team monitors tests, appointments, and procedures, anticipates needs, and offers close support—in person or remotely—through an approach that guides and contributes to more humane and continuous care.

NEW A.C.CAMARGO PATIENT PORTAL

The portal was launched as a pilot program for select patients at the Breast Center of Excellence, offering features that make the experience simpler and more integrated, such as:

- Schedule follow-up appointments.
- Cancel appointments and tests.
- View appointments, tests, surgeries, and services.
- View imaging and lab test results.
- View prescriptions and medical certificates.
- Update and request changes to personal information.

Soon, new phases will expand access to other patient groups, introducing even more features, such as the ability to schedule examinations. With the new Patient Portal, we are moving forward to provide care that is more efficient, accessible, and focused on those who matter most: our patients.

DIGITAL INTERACTIONS

ACC 58

We recorded 298,458 interactions with patients via WhatsApp, 52,663 via chat, and assisted 293,681 patients via email, primarily to confirm procedures. At the beginning of the year, we migrated from the Salesforce customer relationship management (CRM) system to the Plussoft platform, with the goal of optimizing and standardizing the digital care workflow, increasing process efficiency, strengthening channel adoption, and improving the patient experience, while also contributing to greater organization of the patient care workflow and a reduction in missed appointments.

SERVICE EFFICIENCY

Currently, the check-in process is fully digital. Patients check in online and, at the kiosk, receive instructions that automatically guide them through all the steps of the appointment process, including the authorization request. For patients with Amil health insurance, the option to digitally sign the TISS form (a document used to record and authorize medical procedures with health plans) directly at the kiosk was implemented, increasing autonomy, reducing in-person steps, and optimizing the flow at the reception desk.

Between 2024 and 2025, there were significant changes in service performance. Productivity increased by 7% with no change in the number of staff, while the volume of appointments grew by 10%. These results were driven by the implementation of new initiatives, such as the Return Queue project, launched in the second half of the year, and the automation of authorization requests with insurance providers.

Pediatrics Festival

The pediatric department's traditional end-of-year party is an occasion where children and teenagers, their families, staff, and doctors come together to have fun, celebrating the joys of childhood and adolescence above all else.

The event featured a visit from Santa Claus, toy giveaways, an arcade game area, a workshop using recycled materials, and the donation of a PlayStation 5, which will now be available in our library.

More than just a celebration, this moment holds emotional and therapeutic significance: it symbolizes renewal, hope, and the humanization of care, which goes far beyond medical treatment.

First Treatment with Electroporation

We continue to expand access to minimally invasive therapies for the treatment of complex tumors and situations where new approaches are particularly indicated.

In 2025, we performed the first electroporation treatment at the A.C. Camargo Hospital's Antônio Prudente Unit. The method uses electrical pulses to induce cell death without the need for incisions or heat, causing irreversible rupture of the tumor cell membrane. Thus, it allows for the selective destruction of malignant cells while preserving surrounding healthy tissues, such as blood vessels and nerves.

Guided by imaging, the technique is applied in selected cases of liver, pancreatic, prostate, and kidney tumors, expanding therapeutic options for patients with hard-to-reach or inoperable tumors.

During Purple November, Pancreatic Cancer Awareness Month, we emphasize the importance of offering therapeutic alternatives like this one, which positively impact patient outcomes. We will continue to invest in innovation to expand treatment options and provide increasingly precise, safe, and personalized care to our patients.

Radioembolization

In 2025, we made progress in the application of radioembolization, a therapeutic innovation for specific types of cancer. The procedure is still limited in scope, but our Cancer Center has the necessary infrastructure and multidisciplinary team to perform it safely and effectively, reinforcing our commitment to innovative and cost-effective practices in oncology.

Patient Satisfaction

ACC 64 | 67

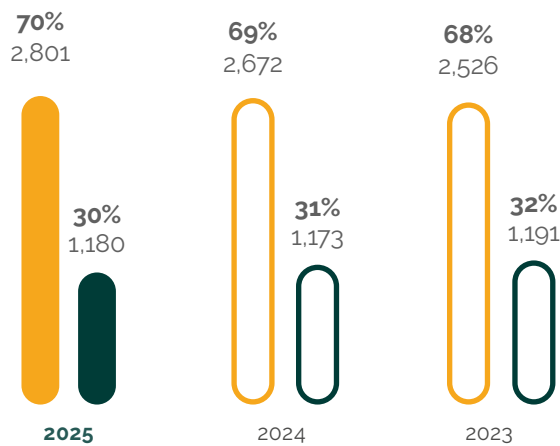
We use the Net Promoter Score (NPS) to continuously assess the quality of our services. The tool measures patient satisfaction following care and helps identify opportunities for improvement, which are analyzed by clinical leaders to develop action plans aimed at enhancing the patient experience.

In 2025, the institutional NPS reached 90.4, exceeding the new target of 90 points (up from 88 in 2024), which reflects our commitment to the quality of care and the patient experience.

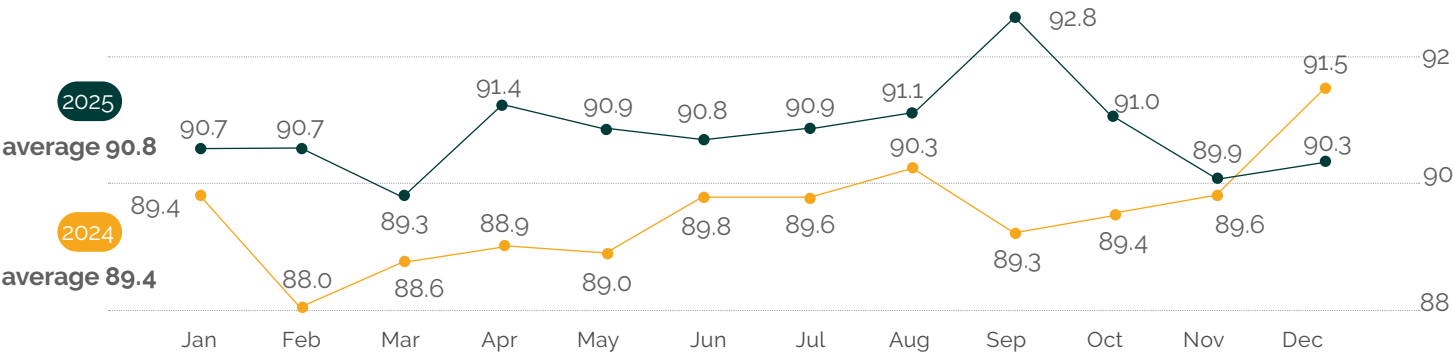
One of the main strategic objectives is to maintain a patient satisfaction rating of over 90 points at all Centers of Excellence, reflecting a positive and patient-centered cancer care experience.

PATIENT WAIT TIMES

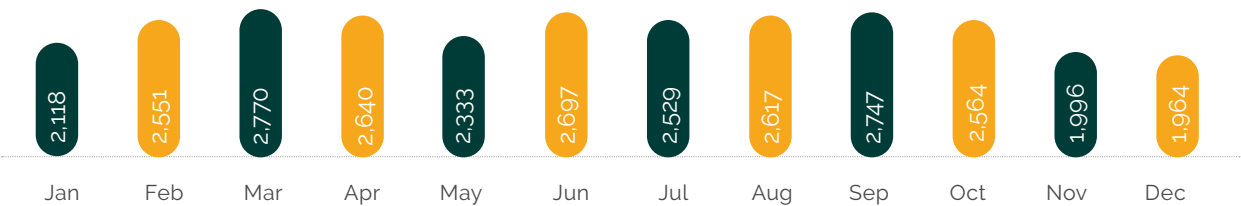
In 2025, the average wait time between arrival at the reception desk and being seen was four minutes. With 97% of patients using web check-in, it was possible to significantly reduce wait times, especially for simpler procedures, contributing to greater efficiency, a smoother patient flow, and a better patient experience.



MONTHLY NPS PATIENT SATISFACTION SURVEY



NUMBER OF RESPONDENTS IN 2025



Welcoming Patient and Companion

At our units, we have a dedicated maintenance team responsible for keeping our facilities in top condition, ensuring that all areas are fully equipped, functional, and welcoming. This attention to detail directly contributes to a positive experience throughout the entire journey of the patient and their companion.

To promote well-being during treatment, we have developed initiatives centered on patients' needs, including the Integrative Care program, with activities such as yoga, music therapy, reiki, and meditation, which enhance physical and emotional health and comfort throughout the cancer care journey.



Post-Cancer Life Program

The Vida Pós-Câncer (Post-Cancer Life) Program was created to provide comprehensive care to cancer survivors, taking into account not only their medical history but also their overall health, lifestyle habits, and the potential long-term effects of treatment. The program supports patients in preventing cancer recurrence, identifying any new tumors, treating other illnesses, and promoting physical and mental health and well-being.

The pilot project began in the fourth quarter of 2025, involving the Centers of Excellence (CoEs) for Breast, Skin, and Lung and Thoracic Cancers, with expansion planned for the CoE for Gynecologic Cancers in the second quarter of 2026. The program offers two types of follow-up:

Shared care model: provided jointly by the Centers of Excellence (CoEs) and the Vida Pós-Câncer team during the period of high risk of recurrence.

Transition care model: fully managed by the Vida Pós-Câncer team after the period of high risk of recurrence.

In 2025, 29 patients participated in the pilot project (mean age 63 years; 76% women), of whom 55% were survivors from the Breast Cancer CoE, 35% from the Lung and Thoracic Cancer CoE, and 10% from the Skin Cancer CoE.

The program highlights the importance of structured and continuous care, contributing to improved health and quality of life for survivors.

Volunteer Network

In 2025, the Volunteer Network launched several initiatives focused on welcoming, ensuring the well-being, and providing comprehensive support to patients and their companions, including dental care, hair salon services, and activities in the Pediatrics department.

Entertainment activities were also promoted, featuring musicians, clowns, magicians, and dance performances; integrative practices such as rei-

ki, yoga, meditation, music therapy, and art therapy; sewing workshops; the delivery of donations; as well as partnerships with various organizations.

These initiatives provided a more welcoming and humanized experience throughout the cancer journey, directly impacting 70,959 people and reinforcing the essential role of volunteerism in patient care.

70+

**THOUSAND PEOPLE
IMPACTED BY THE
VOLUNTEER NETWORK'S
ACTIVITIES**



Support Groups

ACC 14 | 15

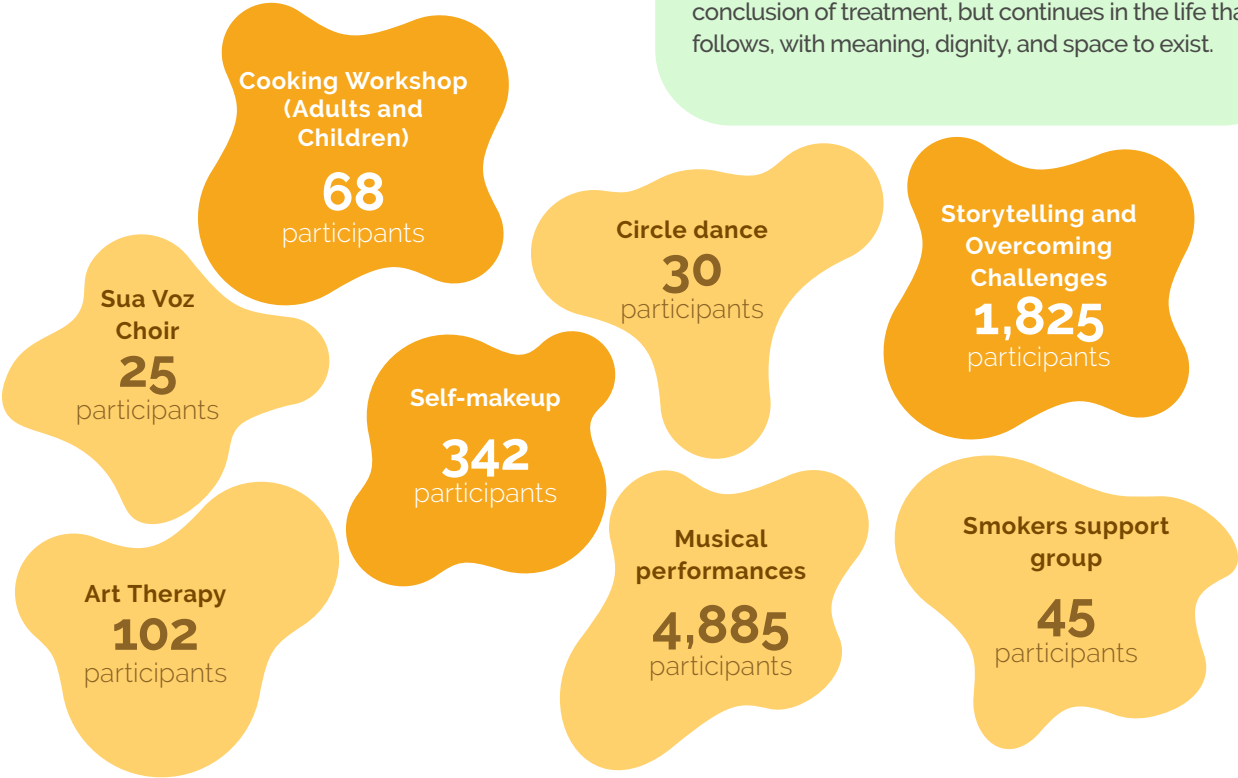
We provide opportunities for patients and their companions to interact through support groups and workshops, which take place both during treatment and during the follow-up phase, when we monitor for potential long-term effects. With a focus on health and well-being, these sessions are held in person and online, with the participation of psychologists, social workers, volunteers, and specialized professionals. During these sessions, patients can share their concerns, discuss challenges, and participate in activities that promote enjoyment, self-esteem, and emotional resilience.

Sua Voz Choir

Created and led by Elisabete Carrara de Angelis, a speech-language pathologist at A.C.Camargo for 30 years, the choir began as a support group for patients with head and neck cancer. The initiative arose from a very specific concern: patients who, even after rehabilitation considered clinically successful, still remained isolated, sad, cut off from social life, with no space to express themselves in the world.

Gradually, music proved to be a powerful tool for rehabilitation, inclusion, and the reconstruction of identity. Singing became an integral part of what speech-language pathology and physical therapy already provide in daily care: respiratory training, articulation, coordination, and vocal endurance. At the same time, it began to fulfill a role that no single technique can achieve on its own: restoring a sense of belonging.

In the Choir, we bring together patients and professionals singing together. Clear voices blend with hoarse, reconstructed, and different voices, valuing them as part of the story of those who survived. A reminder that care does not end with the conclusion of treatment, but continues in the life that follows, with meaning, dignity, and space to exist.



Patient Health and Safety

ACC 59

In 2025, patient care, administrative, and support processes were evaluated for their impact on health and safety. These assessments are conducted on a sample basis, in accordance with hospital accreditation standards and other certifications, such as: Joint Commission International (JCI), the Diagnostic Imaging Accreditation Program (PADI), Qmentum International, and the Environmental Management System (EMS), as per ISO 14001.

We maintained the certifications and recognitions previously earned, including Qmentum and ISO 14001, showcasing the sustainability of our processes and compliance with international standards for quality and environmental management. During the same period, we made progress toward PADI accreditation, reinforcing our commitment to excellence in patient care. Additionally, we continued our structured preparation for key programs, such as JCI, OECl, the Foundation for the Accreditation of Cellular Therapy (FACT), and the Brazilian Society of Pathology's Accreditation and Quality Control Program (PACQ-SBP), consolidating the continuous evolution of institutional practices guided by risk and care impact.

The consolidated results show significant progress, including high compliance rates, improvements in process indicators, and the structured implementation of corrective actions.

We have also redesigned the patient care risk mapping process, prioritizing critical processes, assessing frequency and severity, and establishing action plans to mitigate the identified risks.

Patient Safety Commission

The Commission supports the implementation of the Safety Program by promoting continuous improvement, interprofessional collaboration, protocol monitoring, analysis of adverse events, standardization of documents, and ongoing training, ensuring that all processes and technologies are used safely and efficiently.

Throughout the year, the Patient Safety Commission focused on strategic initiatives to ensure safe, high-quality care. Key topics discussed included the Patient Safety and Quality Program, safety indicators (reports, adverse events, and surveillance systems), and proactive risk mapping in priority processes.

Institutional documents were reviewed and standardized, managed protocols were monitored, and the results of internal and external audits were discussed, ensuring adherence to standards of excellence. Safety engagement initiatives, the results of the Patient Safety Culture Survey, and the analysis of serious adverse events were also addressed, strengthening transparency, interprofessional integration, and the continuous improvement of patient care.

Listening and engagement

GRI 2-29 | ACC 48 | 49

The institution engages its internal stakeholders with the goal of continuously improving the patient experience, using structured communication, monitoring key performance indicators, and working together with patient care and administrative departments. This engagement takes place via email, Teams, WhatsApp, in-person rounds, weekly hybrid meetings, and direct contact with leadership, as needed.

Executive Board, Management, and clinical and patient care leaders: Notable initiatives include the TAI Project, which provides support in situations that impact the patient journey, and the Patient Perception Book, a monthly report featuring institutional indicators and analyses of the patient experience.

Outpatient Care Leadership: The Elo Project monitors the patient care environment, identifies critical points in the patient journey, and strengthens person-centered care.

Multidisciplinary team (physicians, nurses, physical therapists, speech-language pathologists, psychologists, among others): The Multidisciplinary Reception identifies patients who need active listening and strengthens communication throughout their care journey.

Patient Experience Medical Committee: In 2025, the Committee reviewed the patient experience, identifying care quality, humanization, and wait times as critical issues. Strategic initiatives, improvements to scheduling and the call center, and active listening initiatives were discussed. By the end of the year, priorities for 2026 were established, along with ways to boost clinician engagement, ensuring a direct impact on the patient experience.

Patient Consulting Council

In 2025, the Council discussed issues aimed at improving the experience and care provided to people with cancer. Among the topics on the agenda were:

Digital Access and Identification of Priority Topics for 2025: Developments in digital access were presented, such as the Patient Portal, the Immersive Experience, and the Facility Locator, along with the identification of priority topics to be explored in greater depth throughout the year.

Cancer Literacy, Institutional Strategy, and Epidemiological Profile: Actions to expand patients' understanding of cancer, diagnosis, treatment, and follow-up were discussed, along with a presentation of the institutional strategy and the profile of the patients served.

Rights of Cancer Patients: The legal and social rights of patients were addressed, taking into account the different stages of treatment and barriers to accessing information.

"What Matters to You?" Initiative: Opportunities for improvement in communication, information transparency, and the organization of care were discussed, based on actively listening to patients and collecting structured feedback.

Post-Cancer Life Program: Reflections were shared on inclusion criteria, referral processes, and maintaining the bond between patients and the medical team.

Overview

ACC 2 | 8

111,353
PATIENTS
ASSISTED

20,447
NEW
PATIENTS



PATIENT CARE
SUPPORT

OUTPATIENTS
306,818
outpatient
consultations

EMERGENCY
20,940
emergency care

INPATIENTS
19,355
hospital
admissions
93,517
daily hospital stays
(patient-days)



TREATMENT

IMMUNOTHERAPY
843
patients

CHEMOTHERAPY
29,445
sessions

RADIOTHERAPY
2,459
cycles

SURGERIES
23,017
(918 robotic surgeries)



DIAGNOSIS

IMAGING
DIAGNOSIS
306,556
imaging
examinations

Patient Care Quality

SASB HC-DY-250A.2 | HC-DY-250A.3 | HC-DY-250A.4 | ACC 4 | 5 | 6 | 7 | 10 | 11 | 12 | 13



Occupancy rate patient-days/bed-days **74%**

Bed turnover by unit

5.46 Antônio Prudente

4.99 Tamandaré



Time elapsed between consultation and start of treatment **44 days**

Reoperation within 30 days **0.04%**

Readmission within 30 days* **12.5%**



Average rate of healthcare associated infections (HAI) by unit

3.5% Antônio Prudente

4.6% Tamandaré



Average length of stay

4.3 days UI - inpatient unit

3.3 days ICU - intensive Care Unit



Fatality rate in cases of sepsis **15.6%**



08 reportable severe events



Average infection rate in clean surgery by unit

0.9% Antônio Prudente

1.7% Tamandaré

0.3% Pires da Mota



Adverse events **2,167**

44.76% no harm

49.93% low level of harm

4.66% moderate level of harm

0.42% severe level of harm

0.23% fatality

The total number of events in relation to the number of patient-days was **2.32%****

* INPATIENT READMISSIONS RATE CONSIDERED ACCEPTABLE BY THE INSTITUTION IS 12%.

** DESPITE A 45% INCREASE COMPARED TO 2024, THE INDEX REMAINS WITHIN THE CONSERVATIVE LIMITS CITED IN THE INTERNATIONAL LITERATURE.

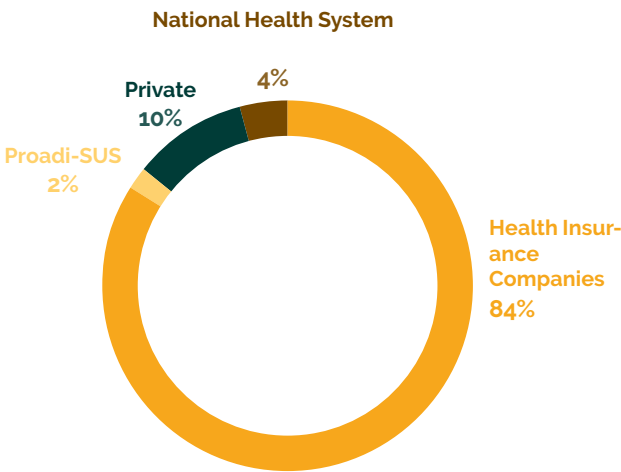
Patients by segment

SASB HC-DY-240A.1 | ACC 62

We provide excellent care to patients from various commercial segments, ensuring that the specific needs of each group are met. In 2025, we saw an 8% increase in the total number of patients treated, with a 31% growth in the Private segment and a 14% increase in our work with Health Insurance Providers. We also contribute to the SUS, servicing 4,242 people under contract (instrument no. 018/SMS.G/2023) and another 2,451 through our participation in Proadi-SUS.

The management of the care mix seeks to balance economic and financial sustainability with access to health-care, integrating services for the SUS, health insurance providers, and private patients. This model is supported by institutional policies for access to the SUS, contracts and negotiations with private insurers, as well as pricing practices that promote a balance between insured and uninsured patients. Participation in initiatives such as Proadi-SUS reinforces integration with the public system and contributes to the sustainability of patient care.

PATIENTS BY SEGMENT



In 2025, we provided 151,152 medical services through the SUS, including hospitalizations and outpatient care.

Segment	Description	Patients treated
Health Insurance Companies	Various plans and categories accredited with health Insurance Companies	92,988
Private	Services paid directly by the patient and resulting from partnerships with companies and the pharmaceutical industry.	11,671
National Health System (SUS)	Patients under contract management with the SUS, instrument 018/SMS.G/2023.	4,242
Proadi-SUS	Patients enrolled in the Program.	2,451
Total		111,352

Comprehensive Oncology: Patient Care, Education, and Research

GRI 3-3

At A.C.Camargo, we combine patient care, education, and research to continuously improve cancer care. This approach ensures that patients receive safe, effective, and evidence-based care. Our care is patient-centered, prioritizing accurate diagnosis and individualized treatments, with protocols updated in accordance with best clinical practices. The education division trains qualified professionals and promotes the dissemination of knowledge, while research contributes to the development of new therapies, methods, and products, in addition to strengthening strategic partnerships in the field of oncology.

Patient Care

ACC 9 | 29 | 46 | 57

RESEARCH BOARD

The Research Board brings together researchers, physicians, and multidisciplinary teams, organized into Centers of Excellence, to conduct research on strategic topics in oncology. These meetings foster knowledge exchange, informed discussions, collaborative development, and the presentation of scientific findings, creating an environment that integrates research, patient care, education, and innovation, thereby enabling projects to address the entire cancer care journey.

During 2025, 92 interdisciplinary Research Board meetings were held, dedicated to discussing relevant topics in oncology.

CAR-T CELLS

We are pioneers in Brazil in the use of CAR-T cell immunotherapy and are one of the institutions that most frequently employ this therapy in cancer treatment. We were the first to use it commercially in an adult patient in the state of São Paulo. Recognized for our expertise in conducting these studies, we have become a national

leader, attracting the pharmaceutical industry to explore the technology for other conditions. This partnership expands our research portfolio and reinforces our role in therapeutic innovation.

BIOBANK

The A.C.Camargo Biobank, Latin America's first biobank focused on oncology, stores and processes samples that contribute to research capable of driving advances in the field, in clinical practice, and in our understanding of cancer. The samples are collected in accordance with each person's/patient's informed consent form and are subsequently included in research projects that identify molecular features, with the aim of developing new tools for diagnosis, treatment selection, and personalized patient care.

BIOBANK DATA 2025

Patients recruited for the Biobank in 2025 (collection in the Surgical Center)

Total

293

Patients recruited for the Biobank - accumulated since 1997 (collection in the Surgical Center)

44,762

Samples collected for the Biobank - accumulated since 1997 (tissue and blood in the Surgical Center)

181,067

Samples processed in the Biobank in 2025 (Biobank and Biorepository)

6,634

Research Projects that used the Biobank in 2025 (Biobank and Biorepository)

43

Collection of frozen samples in the Biobank in 2025 (Biobank and Biorepository)

205,673

PATHOLOGICAL ANATOMY, MOLECULAR BIOLOGY AND GENOMIC DIAGNOSTIC CENTER

In 2025, the Pathology Services and the Genomic and Molecular Diagnostics Center at A.C.Camargo expanded their operations in 2024, performing 21,366 tests (20,244 in Pathological Anatomy and 1,122 in Genomics), up approximately 56% from 2024. Compared to the previous year, there was significant growth in Pathological Anatomy revenue in the B2B segment, with a 95% increase. This result was driven by the signing of new contracts and the revision of exclusive procedures for external partners, which also enabled the conversion of negative EBITDA in 2024 to a positive result in 2025.

TUMOR BOARD

In 2025, 3,191 cases were discussed at the weekly Tumor Board meetings, a 14% increase over the previous year, with the Neuroendocrine Tumor Board seeing a 78% increase and the Pediatric Tumor Board a 75% increase.

The specialties with the highest volume of new cases were surgical oncology (1,401 cases, 44%) and clinical oncology (900 cases, 28%). Of the total cases discussed, 1,762 (55.2%) concerned the determination of primary treatment, and in 881 (28%) there was a change in the previously established management plan, highlighting the importance of multidisciplinary evaluation.

The main decisions made were systemic treatment (665 cases, 21%), surgical treatment (577 cases, 18%), and ordering tests for diagnosis and staging (569 cases, 18%), reinforcing patient-centered care and the integration of clinical needs, risks, and therapeutic benefits.



learn more at:

CAR-T cell therapy



BUSINESS UNITS

Total tests

Pathological Anatomy	20,244
Genomics Laboratory	1,122
Grand Total	21,366

PATIENT CARE LINES

Number of cases discussed at the Tumor Board

Hematologic Neoplasms	511
Upper Gastrointestinal and Hepato-Pancreato-Biliar (HPB) Cancers	445
Bone Tumors and Sarcomas	333
Lung and Thoracic Tumors	240
Head and Neck Tumors	238
Skin Tumors	223
Colorectal Tumors	212
Breast Tumors	196
Neuroendocrine Tumors	166
Gynecological Tumors	161
Pediatric Tumors	149
Urological Tumors	125
Central Nervous System Tumors	113
Vascular	66
Hypophysis	13

Research

ACC 20 | 30 | 40 | 47

The International Research Center (CIPE) at A.C.Camargo offers modern infrastructure, well-equipped laboratories (including an animal house, biosafety level 1 and 2 rooms, cell culture facilities, and technology platforms), and support services for clinical, basic, translational, and economic research.

CIPE brings together various research support fronts, including the Project Office, the Advanced Center for Clinical Research, the Hospital-based Cancer Registry, research nurses, core facilities (support centers and services with platforms available for use as a service or for collaboration), consulting services in statistics and database management, bioinformatics and computational biology, a Research Ethics Committee accredited by the National Research Ethics Commission (CONEP/CNS), a biobank, and a histology laboratory.

79

Active cooperation
agreements

45 national
34 international

61

New cooperation
agreements

44 national
17 international



INSTITUTIONAL SCIENTIFIC RESEARCH

Institutional Scientific Research is one of the strategic pillars of A.C.Camargo, directly contributing to the generation of scientific knowledge, innovation in cancer care, and the continuous improvement of patient outcomes. To strengthen and organize this role in a structured manner, Dédalo (Strategic Development of Research for Discoveries Applicable to the Oncology Journey) was developed, an initiative focused on institutional scientific evolution and alignment.

With initiatives structured around axes such as Governance, Incentives, Fundraising, Human Resources Management, and Networking, Dédalo's mission is to connect research to the cancer care journey. The project aims to expand A.C.Camargo's scientific leadership, bring the institution closer to the innovation ecosystem and the productive sector, expand participation in national and international collaborative groups, and strengthen fundraising for research.

Among the highlights of 2025 is external fundraising, which reached nearly R\$ 13 million, a result of Dédalo's initiatives, which include the creation, within the Project Office, of a position for a professional dedicated to identifying calls for proposals and research opportunities and providing support in structuring projects to be submitted.

PROGRAM TO PROMOTE TEACHING, RE- SEARCH, AND INNOVATION (PROEPI)

In 2025, as part of the Dédalo Project, we launched PROEPI. The initiative provides financial grants to selected professionals, which can be used for teaching, research, and innovation activities. A pioneering initiative in Brazil, it strengthens direct support for employees who generate knowledge, contributing to scientific development, process improvement, and innovation.

New hiring model for researchers

We have embraced an innovative structure in the composition of our research team, expanding the participation of experts in health economics, artificial intelligence, and R&D. We have also strengthened the integration between clinical care and research by enabling clinical staff to dedicate protected time to scientific activities, such as clinical trials, basic and translational research, the production of meta-analyses aligned with the Value-based Office, and real-world studies. This structure expands and diversifies our research team, brings research closer to other institutional areas, and reinforces the integration of A.C.Camargo's pillars.

SCIENTIFIC PRODUCTION

We make the results of our research available to the scientific community through top-tier, internationally recognized publications in high-impact journals, as well as through presentations, lectures, and seminars, thereby contributing to the advancement of knowledge in oncology and supporting diagnosis and decision-making in patient care.

Among the scientific articles published in 2025, 29 stand out in the areas of basic and translational research, 13 in epidemiology, and 97 in observational clinical research, reflecting the diversity of approaches and lines of investigation conducted.

281
research projects
initiated

292
Scientific articles
published
in specialized journals

HEALTH ECONOMICS

One of 2025's major highlights was the launch of the research program on Health Strategy, Economics, and Policy. To lead this initiative, we hired an expert dedicated to studying the subject.

CLINICAL RESEARCH

ACC 18 | 19

Patients with high-complexity diseases have access to innovative therapies through the Advanced Clinical Research Center (CAPEC), which is responsible for conducting clinical trials in oncology with medicines still in the development phase. These studies, conducted in partnership with national and international pharmaceutical companies, expand treatment options, especially for patients who respond poorly to conventional treatments, always following strict ethical and scientific criteria.

STUDIES BY PROTOCOL TYPE	112
Targeted therapy	48
Immunotherapy	42
Others (hormone therapy and pain)	13
Chemotherapy	3
Cell therapy	4
Expanded access / compassionate use	2

Beyond expanding treatment options, CAPEC helps cement A.C.Camargo's position as a leader in oncology innovation. Since its founding in 2000, the Center has enrolled approximately 3,907 patients in 389 clinical trials. In 2025, the Clinical Research Unit reached record levels, maintaining approximately 100 studies simultaneously each month, of which 14 were completed that year. A significant shift was observed in the studies' profile, with a decrease in research involving chemotherapy and a marked increase in studies using targeted therapies and cell therapies, particularly CAR-T.

CATEGORY	2025	2024	2023
New studies cataloged	32	40	31
New patients included in clinical research projects	111	129	114
Patients included in clinical research projects from 2001 to 2025	3.907	3.796	3.667
Studies initiated	32	40	31
Studies being monitored	73	41	51
Studies recruiting patients	33	51	29
Studies completed in the year	14	12	14

Education

ACC 21

In 2025, the Education Division underwent a cycle of expansion and strategic consolidation. The major milestone of the year was the authorization granted by the Ministry of Education (MEC) to offer lato sensu graduate programs (specializations). This achievement opened up a new area of activity, expanding the institution's role in training highly qualified professionals in oncology and related fields.

We also saw growth in the number of preceptorships* (educational programs conducted in partnership with the pharmaceutical industry), strengthening technical and scientific exchange and the continuous professional development of specialists.

The Alumni network underwent a structured consolidation process, unifying previously fragmented databases. This move made it possible to organize and activate relationships with former students in a more strategic manner, expanding opportunities for connection, professional development, and institutional engagement.

Another highlight was the launch of the Oncology Manual for Non-Oncologists, developed as part of the institution's strategic planning. The manual provides guidance to non-specialist physicians on the initial management of cancer patients in their practices, thereby strengthening the patient care journey and the relationship with the medical community.



learn more at:

Oncology Manual for Non-Oncologists

<https://accamargo.org.br/form/manual-de-oncologia>

* PRECEPTORSHIPS ARE PROGRAMS DESIGNED FOR LEADING ONCOLOGISTS IN THEIR REGIONS, WHO PARTICIPATE IN TECHNICAL AND SCIENTIFIC DEVELOPMENT ACTIVITIES GUIDED BY PROFESSIONALS FROM A.C.CAMARGO.

EDUCATIONAL PARTNERSHIPS

The Education Division has expanded its contribution to Proadi-SUS through the implementation of two professional development programs in oncology, aligned with the Ministry of Health's "Mais Especialistas" Program.

One of the programs is aimed at already qualified medical specialists, who receive training and mentoring, including distance learning. The other is aimed at residents from different institutions across the country, who undergo supplementary training at the Institution. Both initiatives contribute to the qualification of professionals nationwide, expanding the social impact of the technical knowledge produced.

IBMEC PARTNERSHIP

The academic curriculum has been reinforcing the concept of value-based oncology through initiatives such as the MBA in Health Management, developed in partnership with IBMEC. Launched in 2025, the program helps train professionals to act strategically in the sector by integrating clinical knowledge, economic sustainability, and efficient management of health services.

NURSING TECHNICAL SCHOOL

ACC 28

In 2025, the Nursing Technical Program had 72 enrolled students, 27 of whom graduated. A new class was launched, adding 32 new students who are expected to graduate in December 2026, representing a significant increase compared to the previous year.



learn more at:

A.C.Camargo Technical School

<https://accamargo.org.br/ensino/escola-tecnica-accamargo-cancer-center>

SHORT- AND MID-TERM COURSES

ACC 55

In 2025, the short- and mid-term courses covered a wide range of health-related topics, with a focus on oncology, health finance, radiation therapy, nutrition, physical therapy, and preceptorship programs, which saw an increase compared to the previous year. Some of the free courses were made available online, expanding the reach and accessibility of these educational initiatives.

72 SHORT- AND
MID-TERM
COURSES

22 FREE

7,502 STUDENTS

SCIENTIFIC INITIATION

ACC 66

In 2025, the Scientific Initiation Program received 350 applications. Following the selection process, 101 candidates advanced to the second phase (interview), and at the end of the process, 57 were accepted.

20 CNPQ GRANT RECIPIENTS

PROFESSIONAL TRAINING

ACC 22

MEDICAL RESIDENCY PROGRAM, MULTI-PROFESSIONAL RESIDENCY AND FELLOWSHIP PROGRAMS

The Medical Residency, Multi-professional Residency, and Fellowship Programs are designed to train professionals through hands-on experience in oncology.

In 2025, we overhauled the first-year resident (R1) curriculum, incorporating content focused on developing a broader range of skills. Along with technical training,

we included topics such as diversity and inclusion, ethics, harassment, patient safety, information security, the healthcare system, medical records, and the job market. This initiative reinforces our commitment to training leaders prepared to act in an ethical, systemic, and humanized manner, going beyond technical excellence.

62 RESIDENTS
GRADUATED
IN 2025

14 JOINED THE MEDICAL
STAFF



Learn more at:

Multi-professional Residency

<https://accamargo.org.br/ensino/residencia-multiprofissional>

Medical Residency

<https://accamargo.org.br/ensino/residencia-medica>

Medical and Multidisciplinary Improvement

<https://ensino.accamargo.org.br/cursos-e-programas/aprimoramento-fellow/multiprofissional>

LATO SENSU GRADUATE PROGRAM

Our specializations and MBAs offer intensive training in advanced professional skills. They are aimed at graduates who wish to deepen specific knowledge, develop applied skills and gain a competitive advantage in a constantly changing market.



Learn more at:

Lato Sensu Graduate Program

<https://accamargo.org.br/ensino/agenda-pos-graduacao-lato>

**STRICTO SENSU GRADUATE PROGRAM -
ACADEMIC MASTER'S DEGREE AND DOCTORATE**

The academic masters and doctorate program has classes taught by qualified and multidisciplinary professionals, including members of the clinical staff and renowned researchers in oncology.

6

CAPES
GRADE

EVALUATION OF THE NATIONAL
GRADUATE SYSTEM
(2021-2024)

For the second consecutive four-year period, our Master's and Doctoral Academic Programs received a score of six on a scale of seven, which stands for recognition of a program of excellence. The Professional Master's Program, meanwhile, received a score of four (on a scale of seven) in its first evaluation—a significant achievement for a new program, given that most programs receive a score of three in their first evaluation.

PROFESSIONAL MASTER'S DEGREE IN ONCOLOGY

The program qualifies professionals in health services management, research applied to oncology and care for cancer patients. It is designed for professionals from various fields who wish to contribute to the advancement of knowledge and the development of solutions applicable to the cancer care journey.



Learn more at:

Lato Sensu Graduate Program

<https://ensino.accamargo.org.br/cursos-e-programas/pos-graduacao/mestrado-e-doutorado>

Professional Master's Degree

<https://accamargo.org.br/ensino/mestrado-profissional>

RESIDENCY AND STRICTO SENSU GRADUATE PROGRAM ACC 24 25	2025	2024	2023
Medical residents graduated in the year	62	64	62
Total number of students in medical residency	174	172	168
Multiprofessional residents graduated in the year	24	22	21
Total number of students in multiprofessional residency	49	47	47
Fellowship students graduated in the year	13	11	12
Total number of fellowship students	13	11	13
Master's thesis defenses*	32	41	14
Total number of students in the master's program**	122	99	62
Doctoral thesis defenses	21	16	25
Total number of students in doctorates	81	68	69
Completed post-doctorates	1	4	2
Total number of students in post-doctorates	20	10	9
Total number of students in scientific initiation	48	43	40

* TOTAL NUMBER OF GRADUATES FROM THE ACADEMIC MASTER'S PROGRAM (17) AND THE PROFESSIONAL MASTER'S PROGRAM (15).

** TOTAL OF 63 STUDENTS ENROLLED IN THE ACADEMIC MASTER'S PROGRAM AND 59 IN THE PROFESSIONAL MASTER'S PROGRAM.



Human



Intellectual



Social



Relationship

People

Our Employees

GRI 2-7 | 2-8 | 405-1 | SASB HC-DY-330A.2 | ACC 40

We are a multidisciplinary team that works collaboratively to provide the best care for our patients. Our mission to honor life begins with the people who make our institution thrive every day through their dedication, talent, and commitment.

We believe that investing in the growth and well-being of our professionals strengthens not only the quality of care but also the sustainability and evolution of our operating model. After all, they are the ones who transform knowledge into care and purpose into results.





4,120

Employees (CLT contracts)
98.5% on a permanent contract 100% in the Southeast region



840

677 doctors and 163 professionals from multiple specialties*



946

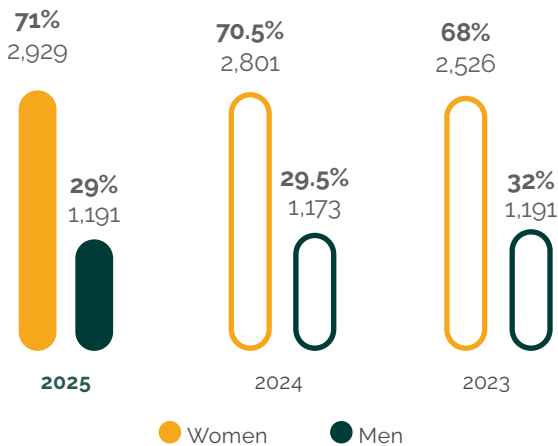
Outsourced professionals and trainees



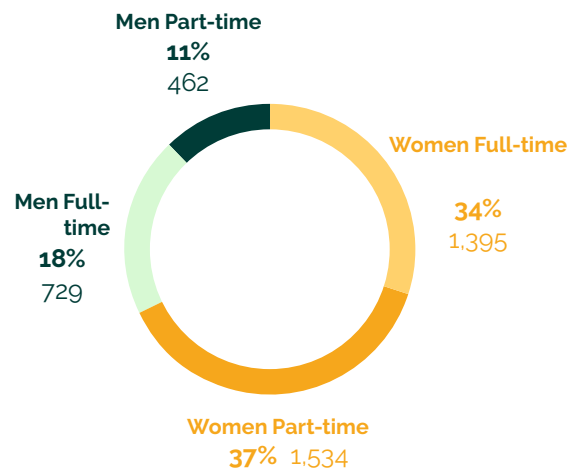
111

CLT Professionals dedicated to scientific research

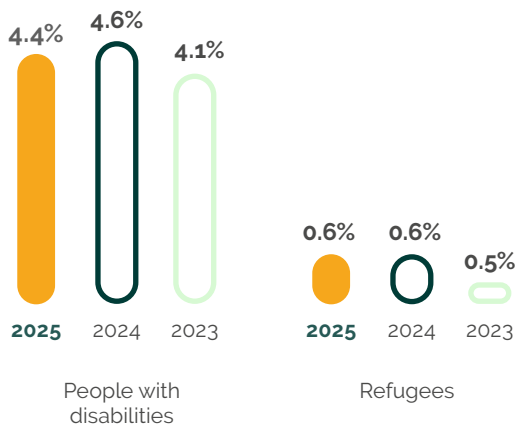
TOTAL EMPLOYEES BY GENDER



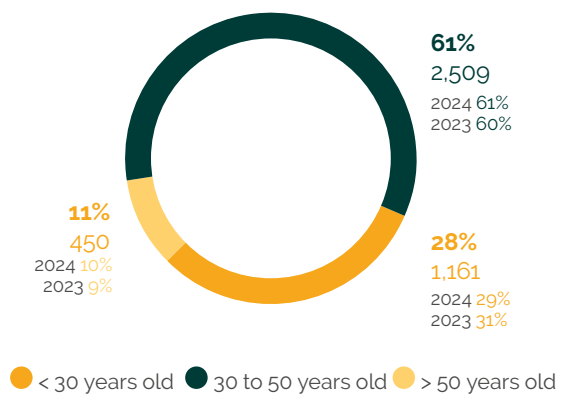
BREAKDOWN OF EMPLOYEES BY GENDER AND TYPE OF CONTRACT



EQUITY AND INCLUSION



BREAKDOWN OF EMPLOYEES BY AGE GROUP



NOTE: ANNUAL AVERAGE OF EMPLOYEES ON 12/31/25
* THE TOTAL OF 840 PROFESSIONALS REFERS TO THOSE WHO ARE NOT EMPLOYED UNDER THE CLT.

Talent Management

At the A.C. Camargo Cancer Center, we have taken a structured approach to recruiting, selecting, developing, and retaining healthcare professionals, covering positions in patient care, technical support, and administration. Our goal is to ensure technical excellence, cultural alignment, and the sustainable growth of our team.

Recruitment and Selection

We use different channels to attract talent, such as LinkedIn, the organization's career portal, and educational partnerships with the A.C. Camargo Technical School, NUBE, and Instituto Saber. The selection process includes resume screening, interviews with HR and managers, case studies (where applicable), and a proposal letter. For strategic positions, we apply the DISC behavioral assessment, and for high-volume positions, specific psychological tests.

Nursing

We have developed an internal career progression program for nursing staff, ranging from Nursing Technicians I to Nurses II. In 2025, 23 professionals were selected for the talent pool, 14 were promoted to Nurse I, and 31 advanced to Nurse II. The nursing career path is structured into seven levels, ensuring advancement based on competencies, performance, and institutional contribution, with clear criteria for promotion and merit.

Talent Pool

We created a talent pool for graduating students from the Nursing Technical School to help them transition into nursing positions and encourage them to remain at the institution. In 2025, 17 candidates participated in interviews; ten were hired, and seven received personalized feedback.



EMPLOYEES BY FUNCTIONAL CATEGORY

GENDER	2025		2024		2023	
	Women (%)	Men (%)	Women (%)	Men (%)	Women (%)	Men (%)
Directorates and Su- perintendencies	50.0	50.0	42.9	57.1	38.5	61.5
Management	64.0	36.0	57.5	42.5	54.1	45.9
Leadership	68.8	31.2	66.7	33.3	66.3	33.7
Coordination and Supervision	68.7	31.3	70.6	29.4	71.9	28.1
Operational	62.7	37.3	63.3	36.7	57.4	42.6
Nursing	79.1	20.9	78.7	21.3	79.2	20.8
Patient Care	66.2	33.8	66.3	33.7	73.5	26.5
Administration per- sonnel	69.0	31.0	66.4	33.6	65.3	34.7
Apprentices	73.4	26.6	82.1	17.9	66.3	33.7

AGE GROUP	2025			2024			2023		
	< 30 years old (%)	30 to 50 years old (%)	> 50 years old (%)	< 30 years old (%)	30 to 50 years old (%)	> 50 years old (%)	< 30 years old (%)	30 to 50 years old (%)	> 50 years old (%)
Directorates and Superintenden- cies	0.0	16.7	83.3	83.3	42.9	57.1	0.0	61.5	38.5
Management	0.0	66.0	34.0	34.0	62.5	37.5	0.0	70.3	29.7
Leadership	15.6	72.5	11.9	11.9	81.4	6.9	17.4	75.0	7.6
Coordination and Supervision	0.0	88.8	11.2	11.2	88.1	8.7	3.3	88.4	8.3
Operational	22.8	54.0	23.3	23.3	56.3	20.1	28.8	55.3	15.9
Nursing	19.6	70.3	10.0	10.0	71.7	8.7	21.9	70.0	8.1
Patient Care	32.6	61.2	6.2	6.2	60.5	6.8	29.4	64.0	6.6
Administration personnel	39.5	53.5	6.9	6.9	52.8	6.9	44.5	49.2	6.3
Apprentices	100.0	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0.0

Compensation between Women and Men

GRI 202-1 | 405-2

In 2025, the lowest wage paid at the Liberdade and Tamandaré units was R\$1,649, which was 1.73% higher than the local minimum wage. No wage differences were identified between men and women at entry-level positions, with identical starting pay for both genders.

RATIO OF COMPENSATION BETWEEN WOMEN AND MEN BY UNIT

JOB TITLE	Antônio Prudente	
	Average compensation	Base salary**
Directorate	0.87	0.65
Superintendencies	0.80	0.81
Senior management	0.75	0.82
Management	0.90	0.98
Supervisors and Coordinators	0.90	1.01
Experts	1.10	0.99
Leadership	0.84	1.51
Other levels	0.92	1.03

JOB TITLE	Tamandaré		Pires da Mota*	
	Average compensation	Base salary**	Average compensation	Base salary**
Supervisors and Coordinators	1.06	1.01	-	-
Leadership	1.31	1.22	-	-
Other levels	0.85	0.95	0.81	0.96

JOB TITLE	Castro Alves*		Itaim*	
	Average compensation	Base salary**	Average compensation	Base salary**
Leadership	-	-	-	-
Other levels	1.06	1.18	0.86	0.98

* IN SOME UNITS, CERTAIN FUNCTIONAL CATEGORIES ARE COMPOSED EXCLUSIVELY OF MEN OR WOMEN, WHICH MAKES IT IMPOSSIBLE TO CALCULATE THE RATIO BETWEEN SALARIES.

** BASE SALARY: A FIXED AMOUNT OF COMPENSATION, EXCLUDING ADDITIONAL PAYMENTS (SUCH AS OVERTIME AND BONUSES) OR DEDUCTIONS (SUCH AS TAXES AND CONTRIBUTIONS).

Turnover

HIRED PROFESSIONALS GRI 401-1

GENDER	Number of hires	Hiring rate*
Women	642	0.22
Men	247	0.21

TERMINATED PROFESSIONALS

GENDER	Number of terminations	Turnover rate*
Women	634	0.22
Men	282	0.24

AGE GROUP	Number of hires	Hiring rate*
< 30 years old	452	0.39
30 to 50 years old	404	0.16
> 50 years old	33	0.07

AGE GROUP	Number of terminations	Turnover rate*
< 30 years old	418	0.36
30 to 50 years old	429	0.17
> 50 years old	69	0.15

* THE HIRING RATE IS CALCULATED AS THE RATIO OF THE NUMBER OF HIRES DURING THE REPORTING PERIOD (BY GENDER OR AGE GROUP) TO THE TOTAL NUMBER OF EMPLOYEES IN THE RESPECTIVE GROUP.

** THE TURNOVER RATE IS CALCULATED AS THE RATIO OF THE NUMBER OF TERMINATIONS DURING THE REPORTING PERIOD (BY GENDER OR AGE GROUP) TO THE TOTAL NUMBER OF EMPLOYEES IN THE RESPECTIVE GROUP. THE CALCULATION INCLUDES EMPLOYEES UNDER THE CLT AND APPRENTICES, EXCEPT FOR INTERNS, WHO ARE GOVERNED BY LAW NO. 11,788/08.

PARENTAL LEAVE GRI 401-3

	Women	Men
Employees entitled to parental leave	2,929	1,191
Total number of employees who took parental leave in the year	67	23
Employees who were due to return to work after the end of parental leave, in the year	53	23
Employees who returned to work after parental leave, in the year	53	23
Return rate	1	1
Employees who returned to work after the parental leave in the previous year	42	34
Employees who completed 12 months of return to work after the end of parental leave in the previous year	37	28
Retention rate	0.88	0.82

Employee Journey

GRI 404-1 | 404-2 | SASB HC-DY-330A.2

We continuously invest in training our team, strengthening our internal culture, and striving for excellence in patient care and service delivery. Our training and development initiatives are aligned with our Strategic Plan, linking the institution's needs to each individual's growth.

In 2025, we moved forward with tools and programs to support the clinical staff, such as the metrics dashboard, which will be used to map leadership competencies. We also support the career transition of senior physicians and assist professionals at the beginning of their careers.

DEVELOPMENT TRACK

We developed a dedicated Development Track on our platform in 2024, which included the following training courses:

FOCUS ON THE PATIENT:
Practicing Empathy Course.

HOLISTIC VIEW:
Systemic Thinking course.

TEAMWORK:
Active Listening course.

RESPONSIBLE AUTONOMY:
The Power of Protagonism course.

INNOVATION:
Innovation for Results course.

CONSTRUCTIVE LEADERSHIP:
Inspiring Teams course.



Training and capacity building

GRI 404-1 | 404-2 | ACC 68

In 2025, there were several initiatives to improve the skills of our staff and leaders. We'd like to highlight the specific development tracks for patient care, pharmacy, nutrition, residents, and nursing. We also ran a mentoring program for residents and addressed topics related to human resources, benefits, and internal processes in the nursing profession.

LEADERSHIP DEVELOPMENT

In partnership with Oracle, we conducted a training program on Data Science and Artificial Intelligence aimed at managers, senior managers, superintendents, directors, and clinical leaders. The training lasted five hours and 30 minutes and was offered in three sessions, with a total of 161 managers enrolled, of whom 64 completed the program.

We concluded the Leadership Development Program (LDP) with Insper in 2024. For 2026, the Organizational Development plan includes the design of a new Leadership Development Program (LDP), focused on strengthening strategic competencies and preparing leaders for future challenges.

AVERAGE TRAINING HOURS BY FUNCTIONAL CATEGORY	2025
Directorates and Superintendencies	15.7
Management	17.7
Leadership	13.7
Coordination and Supervision	15.9
Operational	16.9
Nursing	18.6
Patient Care	12.6
Administration personnel	12.9
Apprentices	17.6

We carried out more than 64 thousand hours of training in 2025, with an average of 15.6 hours/employee 16.0 hours for women and 14.6 hours for men.



REVISED MODEL OF INSTITUTIONAL COMPETENCIES

We are now in the second year of implementing the model. With the start of the evaluation cycle, we are training staff through in-person and online workshops, covering each stage of the process.

Network Selection Workshop: geared toward managers, this workshop introduced the concept of competency-based evaluation, the premises of the process, its stages, institutional competencies, the measurement criteria, and how the network selection stage works.

Evaluation Workshop: intended for the entire institution, it addressed topics such as performance management, self-awareness, career planning, unconscious biases, the responsibility matrix, and the identification of key professionals.

BEING A.C.CAMARGO WORKSHOPS

Over the course of about eight months, we held the SER A.C.Camargo workshops, creating opportunities for knowledge sharing and professional development. Over 3,500 people participated in the initiative, and 98% rated the experience with the highest score.

The sessions strengthened the experience of our internal culture, encouraging individual leadership and collaboration—where “I” becomes “we.” The initiative also reinforced the value of diverse experiences and integrated work, aligned with our institutional purpose and excellence in patient care.

LEAN TRAINING

Between February and October, we conducted the Lean Training Program. The Lean methodology is a management approach geared toward continuous improvement, with a focus on creating value, reducing waste, and optimizing processes.

In total, 28 people were trained by the Lean Institute Brazil in a comprehensive program consisting of 60 hours of classroom instruction and 30 hours of guidance on practical applications. During this period, 19 improvement projects were developed, aimed at eliminating waste, optimizing processes, and enhancing the experience of patients and healthcare professionals.

On October 2, the final presentation of the projects took place, evaluated by the A.C.Camargo Board of Directors and instructors from the Lean Institute Brazil, with three initiatives recognized for their relevance, potential impact, and capacity for transformation.

At the end of the program, participants received Green Belt certification, becoming advocates of the Lean methodology in their respective areas and driving continuous improvement at the institution.

LEADERSHIP BOARD

Faced with the challenges of management in a highly complex environment, we identified the need to better prepare coordinators transitioning into leadership roles. Thus, in 2025, we established the Leadership Board, an innovative initiative that goes beyond traditional training models by fostering a space for collaborative learning, the exchange of experiences, and strategic reflection.

The program is conducted through periodic meetings, in which the participants themselves take an active role in shaping the agenda, bringing up topics, real challenges, and practical cases from their own experiences. With the support and mentorship of managers, the development of essential leadership competencies—such as communication, decision-making, team management, and systemic vision—is encouraged, always aligned with the institutional context.

Therefore, the Leadership Board has solidified its role as a forum for leadership development, strengthening the organizational culture and preparing new leaders in the areas of Teaching, Research, and Innovation for strategic and integrated action.

Performance evaluation

GRI 404-3

In 2025, 3,638 employees were eligible and underwent performance evaluations, representing 88.3% of the total number of active employees in December.

EVALUATED PROFESSIONALS

JOB TITLE	QUANTITY	%
Directorates and Superintendencies	12	100.0%
Management	47	94.0%
Leadership	104	95.4%
Coordination and Supervision	126	94.0%
Operational	516	87.0%
Nursing	1,292	93.2%
Patient Care	467	87.6%
Administration personnel	1,074	87.7%

GENDER	QUANTITY	%
Women	2,579	88.1
Men	1,059	88.9

* THE EVALUATION INCLUDES ACTIVE CLT EMPLOYEES ON PAYROLL AND CONTRACTED PROFESSIONALS UP TO AUGUST 31, 2025. APPRENTICES, INTERNS, FIXED-TERM CONTRACTS, AND PROFESSIONALS ABSENT FOR MORE THAN 180 DAYS ARE NOT ELIGIBLE.

Climate Survey

Our Organizational Climate Index for 2025 was 82.4%, and 73% of our employees are considered advocates for the organization. The themes with the best results are related to ESG, communication, and learning.

We also achieved a very significant result regarding Diversity & Inclusion: over 85% of respondents say they are treated fairly and respectfully, regardless of their sexual orientation, race, color, gender, or socioeconomic background.

Our culture reflects idealism; that is, we are focused on a greater cause, whether social or environmental. The work environment is supportive, and we are united by a shared ideal—elements that have defined our essence since the institution's founding.

For the second year in a row, we have been named among the "Most Incredible Places to Work," according to a survey conducted by FIA and Estadão. This is the result of a joint effort by everyone who strives to make A.C.Camargo an increasingly better place to work.

Employee health and safety

GRI 403-1 | 403-2 | 403-3 | 403-4 | 403-5 | 403-6 | 403-7 | 403-8 | 403-9 | 403-10

We uphold a structured occupational health and safety management system that complies with Regulatory Standards (NRs) with a focus on the prevention of accidents and occupational illnesses, covering 100% of our employees, including administrative, support, and operational staff, clinical personnel, and leadership.

Risk identification and assessment are carried out through the Risk Management Program (PGR), preliminary risk analyses, safety inspections, and work permits, conducted by the Specialized Service in Safety Engineering and Occupational Medicine (SESMT). The results are continuously monitored and contribute to the improvement of preventive measures.

We provide institutional channels for reporting risks and incidents, such as the Notification System, the Employee Channel, and the Conduct Channel, ensuring confidentiality and protection against retaliation. Incidents are investigated using a structured methodology, risk classification, and action plans to prevent recurrences.

In accordance with NR-1, employees may suspend their activities upon identifying situations involving serious and imminent risk, and must immediately notify their supervisor. In such cases, the Occupational Safety team is called in to assess and mitigate the risks.

Employees participate in occupational health and safety management through institutional channels and formal bodies, such as CIPA and the Health Committee, which are responsible for monitoring indicators and recommending preventive measures.

Additionally, we offer occupational health and wellness programs, including care at corporate clinics and initiatives for mental health, immunization, nutrition, chronic disease prevention, support for pregnant women, and smoking cessation.

In 2025, we recorded 6.3 million hours worked, with no fatalities. There were 56 reportable workplace accidents, primarily related to sharps or exposure to biological materials, falls, and impacts. To mitigate these risks, we implement ongoing training, signage in hazardous areas, the provision of PPE, and prevention programs.

There were also 29 reported cases of occupational illnesses, primarily related to injuries, mental health disorders, and musculoskeletal conditions, which were monitored through periodic assessments and prevention programs. No accidents involving contract workers were reported during the period.

WORK-RELATED INJURIES INVOLVING DIRECT EMPLOYEES	2025	2024	2023
Mandatory reporting	56	65	60
Accident rate with mandatory reporting	8.9	10.8	10.6
Severe consequences**	43	29	38
Accident rate with severe consequences	6.8	4.8	6.7

* RATE RELATIVE TO 1 MILLION HOURS WORKED
** NO FATALITIES WERE RECORDED

EMPLOYEE WELL-BEING AND HEALTH

In 2025, we performed a psychosocial risk assessment that went beyond the requirements of NR-1. We installed meditation stations at our units, providing rest areas for our clinical staff, which were used nearly 900 times in the first month. The goal is to provide a healthy work environment with balanced stress levels and resources that promote well-being.

HUMANAMENTE PROGRAM

We continue to strengthen this ongoing, high-priority mental health initiative, focused on providing compassionate care for our teams, which offers:

- Psychological counseling;
- Primary care at our own outpatient clinic;
- Prevention and treatment of chronic conditions;
- The Gestar Bem Program; and
- Medication support.

The program helps retain talent, reduce absenteeism, and improve quality of life.



MENTORING AND PROFESSIONAL DEVELOPMENT

We offer mentoring programs for residents and clinical staff, focusing on integration, technical and behavioral development, alignment with institutional values, and strengthening of internal identity.

VANGUARD GROUP

Aimed at professionals aged 23 to 40, with 31 participants in 2025, the group seeks to foster innovation, leadership, and contributions to strategic projects.

SENIOR GROUP (50+)

In 2025, the organization had 167 professionals who helped foster a culture of valuing experience, supporting career transitions, and suggesting improvements for the institution.

REFUGEE PROGRAM

We are proud to have been working toward this cause since 2017, when we launched our initiatives focused on employability. Over the years, we have expanded our commitment to technical and vocational training, while also strengthening support and care initiatives.

Today, we have 21 refugee professionals on our team and another 35 people who have completed the employability and apprenticeship program.

Communication and integration

Communication is critical to the daily care of patients and the engagement of all employees. We have adopted a structured, data-driven approach to strengthen relationships with internal stakeholders, based on transparency, active listening, and continuous improvement.

To expand this integration, we have implemented Workvivo, a corporate social network that centralizes internal communication, facilitates the exchange of information, and strengthens teamwork. Recognizing the benefits of close and constant dialogue with managers, we use the platform to foster greater connection between leaders and teams, encouraging ownership and alignment with strategic objectives.

Doctors' Day

We hosted a celebration for Doctors' Day, bringing together the medical staff and their guests to celebrate another year of work guided by the purpose of honoring life. The ceremony also included the presentation of the Celestino Bourroul Award, which recognizes individuals and teams for their exemplary excellence and dedication to patient care. The event concluded with a musical performance by singer Nando Reis, fostering a moment of bonding and appreciation for the clinical staff.



Recognition for Length of Service

CLINICAL STAFF

The Doctors' Day event included a recognition ceremony for the medical staff's years of service, honoring more than 60 professionals with 15, 20, 25, and other multiples of five years of service at A.C. Camargo.



EMPLOYEES UNDER THE CLT

In 2025, a special recognition ceremony was held to honor the length of service of employees under the CLT labor law, recognizing over 100 employees and reinforcing the company's commitment to valuing its people.

Diversity and Inclusion

ACC 70

Promoting diversity, equality and inclusion is vital to building a fair, welcoming, and respectful environment that values each person's unique qualities. In 2025, we advanced this commitment by strengthening foundational initiatives and expanding efforts to raise awareness, foster dialogue, and promote institutional growth.

We continued the Afro Conexão Affinity Group (Race and Ethnicity), which currently has 47 members. We also made progress on other fronts of diversity awareness and appreciation, such as Women's History Month, expanding the reach of our engagement. These actions reinforce our commitment to promoting equity, respecting differences, and building an organizational culture that is increasingly diverse, inclusive, and aligned with our purpose of caring for lives.

2ND BLACK AWARENESS WEEK

In November 2025, we held the Second Black Awareness Week, organized by the Afro Conexão Affinity Group. We created spaces for dialogue, learning, and—above all—active listening to the voices of Black people within the institution, with a focus on valuing diverse experiences and perspectives.

During the event, topics such as racism and health, aesthetics and ancestry, Umbanda, and religious prejudice were addressed. These exchanges contributed to strengthening equality and internal inclusivity.

WOMEN'S LEADERSHIP

We believe that diversity strengthens innovation, improves decision-making, and transforms patient care. Although women globally account for 70% of the healthcare workforce, only 25% hold leadership positions. In Brazil, this percentage rose from 44% in 2021 to 51% in 2023.

At A.C. Camargo, 70% of our professionals are women, and we have 67% female representation in strategic roles and 50% at the C-level. This representation reflects our culture of equality and commitment to creating an environment of development and growth for everyone.

Promoting women's leadership is essential to enriching diversity, strengthening care, and generating a positive impact on society.



Social Impact Beyond the Walls

GRI 3-3

Cancer remains one of the greatest global public health challenges, with projections underscoring the need to expand efforts in prevention, early diagnosis, and access to treatment.

To address this reality, we have implemented institutional policies, health education programs, and strategic partnerships with the public sector, expanding access to cancer care. Committed to expanding our social impact, we have set a goal of benefiting over 500,000 lives per year through treatments, services, courses, research, and the dissemination of knowledge.

Entrance to Proadi-SUS

In 2025, we reached a major milestone: we signed the agreement for A.C. Camargo to join the Program to Support the Development of the Unified Health System (Proadi-SUS), formalizing our entry as the only Cancer Center among the institutions of excellence supporting the Federal Government's program. This partnership constitutes an important public health policy tool, funded by tax exemption resources granted to philanthropic hospitals with excellence recognized by the Ministry of Health, through which we contribute to initiatives in human resources training, research, evaluation, and technology implementation, as well as management and specialized care.

The program strengthens our mission to honor life, pushing the boundaries of oncology.

SUPER CENTRO BRASIL PROJECT

The Super Centro Brasil Project, developed by A.C. Camargo under the Proadi program, aims to expand the diagnostic capacity of the SUS in the field of pathological anatomy by upgrading laboratories, supporting clinical and diagnostic decision-making, and utilizing telepathology (a technology that allows for the digital analysis of slides from any location) as a strategy to reduce waiting lines, speed up the start of treatment, and promote equity.

NAVEGASUS

Developed in partnership with the Health Ministry's Secretariat for Labor and Health Education Management (SGTES/MS), it is part of Proadi-SUS and the Agora Tem Especialistas ("Now There Are Specialists") Program. The goal is to train professionals and strengthen the implementation of the care navigation program for individuals diagnosed with cancer within the Unified Health System, helping to reduce barriers to access, organize the stages of care, and ensure timely treatment.

COORDENA-APS

The project supports the organization of care in primary health care (such as Basic Health Units), helping professionals to better monitor patients and integrate SUS services more efficiently.

An investment of R\$ 156 million is planned for the three-year period, to be financed with tax-exempt funds.

RESIDENCY PROGRAMS IN ONCOLOGY CARE

Aimed at strengthening and expanding specialized training, it supports the creation, development, and accreditation of medical and multidisciplinary residency programs in oncology, in line with the policies and needs of the SUS.

ON-THE-JOB TRAINING

It aims to train physicians and specialists in the field of oncology through practical and continuing education, thereby enhancing diagnostic capabilities and improving the effectiveness of cancer care within the Brazilian Unified Health System (SUS).

QUALIFICA LAUDO

The project aims to train professionals in the analysis and interpretation of germline genetic variants identified through human exome and genome sequenc-

ing (genetic alterations found in DNA), enabling the preparation of comprehensive and informative reports for clinical practice. By training leading professionals in their home regions, the project also seeks to reduce geographic disparities and expand the population's access to precision medicine.

SAÚDE REDES

With a focus on the regional perspective, it develops initiatives to improve priority care pathways, particularly in regions composed of small municipalities, thereby strengthening the integration and effectiveness of health care.

CORRELATION WITH THE NATIONAL CANCER POLICY

Through Proadi-SUS, we support several national health policies, particularly the strategy for implementing the National Cancer Policy.



Proadi-SUS: Project Macro Results



6,000+

Patients across the country underwent tests, totaling **8,500+ tests**



10.5X
faster

The speed of cancer diagnosis exceeded the usual rate in states in the Northeast



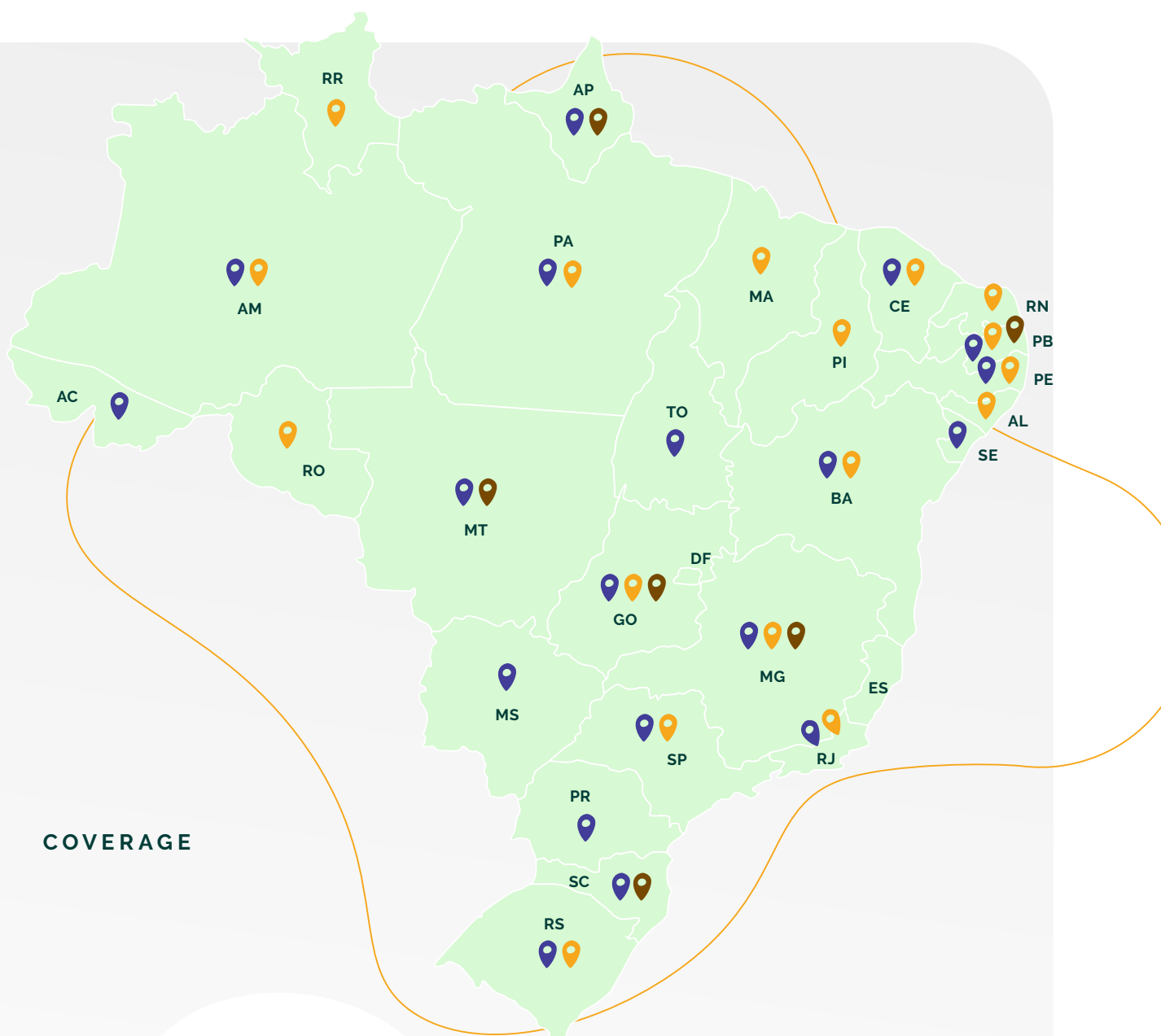
17 States
50 Municipalities

Oncology Continuing Education Program for Medical Specialists



~5 million

People benefiting from projects within the healthcare network, which promote a new approach to organizing work and patient care



COVERAGE

*Projects with a
national scope*

- Super Centro
- NavegaSUS
- Coordena-APS
- Qualifica Laudo
- Residences
- Improvement
- Saúde Redes

A.C.CAMARGO MISSION

GRI 413-1

The A.C.Camargo Mission aims to operate nationwide, strengthening the SUS (Unified Health System) and contributing to public health policies focused on health promotion, disease prevention, and cancer control in Brazil. Through institutional partnerships, we bring our knowledge and experience to all three levels of the public health system: municipal, state, and federal. The projects support people with cancer throughout their entire journey, promoting awareness, early diagnosis, and effective, economically sustainable care.

The data generated feeds into the institution's translational and epidemiological studies, forming a robust foundation that guides the development and updating of protocols used by the SUS and other oncology services across the country.

A.C.CAMARGO JUNDIAÍ MISSION

With the arrival of the A.C.Camargo Mission Program in Jundiaí (SP), we are making progress in strengthening cancer care within the SUS, integrating prevention, early diagnosis, treatment, and palliative care into a single care pathway. The partnership supports the entire spectrum of cancer care in the local public health system through an action plan developed specifically for the city.

We mapped the epidemiological profile, analyzed patient flows and waiting lists, and spoke with healthcare professionals. We will train teams in primary care, specialized care, and hospital settings, with the goal of increasing early diagnoses and reducing the mortality rate.

The project is fully funded by the A.C.Camargo Cancer Center as part of its social impact strategy, reinforcing its commitment to supporting the SUS with solutions that promote equality and comprehensiveness in cancer care.

Connecting knowledge saves lives, and that is how we continue to transform cancer care in the country.

Specialization Course in Oncology in Primary Health Care

We have partnered with Conasems and the Ministry of Health to train Primary Health Care (PHC) professionals in the care of people with cancer through the course "Specialization Course in Oncology in Primary Health Care."

We are responsible for the program's Oncology module, with technical content focused on prevention, early diagnosis, and care coordination. The initiative will support over 113,000 PHC teams and has the potential to train more than 550,000 people, reaching over 48,000 Basic Health Units across 5,571 Brazilian municipalities.

Offered online and free of charge, the course expands access to specialized knowledge for those working on the front lines of care, strengthening the health system's capacity to identify early on situations that require specialized evaluation.



learn more at:

A.C.Camargo Mission

<https://accamargo.org.br/institucional/missao-accamargo>

A.C.CAMARGO SANTOS MISSION

In Santos (SP), we are working to strengthen the municipal health service by implementing new protocols for the early diagnosis of lung and colorectal cancer and providing oncology training for staff at polyclinics. These initiatives are part of a public-private partnership with the City Government and Comunitas, aimed at the prevention and early detection of these diseases within the SUS. The selection of these tumors was based on an opportunity assessment conducted by A.C.Camargo, involving interviews and visits to healthcare facilities.

We held a workshop with around 80 employees from the municipal network, led by Sinergia Saúde, to discuss training in accordance with the National Policy for Cancer Prevention and Control. In groups, participants helped develop strategies for disseminating knowledge. The Teaching Plan will be developed collaboratively with the Santos School of Health.

In the second part of the meeting, we developed guidelines for new protocols focused on lung and colorectal cancers, granting general practitioners greater autonomy to order complex tests and streamline referrals to specialists. In doing so, we aim to reduce wait times, raise awareness about screening and early diagnosis, monitor at-risk populations, and enhance the skills of healthcare professionals. Specialists from our Centers of Excellence contributed their knowledge and experience. The event was held at São Judas University and made possible by the Santos School of Health.

This initiative builds on previous efforts, such as the skin cancer screening activities in 2024, which benefited hundreds of people.

Grants For Fostering Employability

GRI 413-1 | ACC 63

The program is designed to prepare individuals for the job market and reduce social vulnerabilities. In 2025, the employability scholarship program reached people from various regions of São Paulo, with support from NGOs in promoting the program and recruiting students, thereby fostering greater engagement and opportunities for professional reintegration.

A total of 310 grants were offered in the health sector, including 300 for the Caregiver Course (with ten classes and 210 graduates, compared to 30 spots in 2024) and ten for the Technical Nursing Course (with eight students, due to two dropouts). Portuguese and math courses were also offered, serving 37 students.



27 students

from the nursing technical program received support for their education (meals, transportation vouchers, and a graduation ceremony)

Dona Carolina Tamandaré Program (PDCT)

GRI 413-1 | ACC 26

The Dona Carolina Tamandaré Program supports vulnerable adolescents and young adults by promoting their social, cultural, and professional integration and helping them resume a productive and independent life. Designed specifically for cancer survivors and their families, it offers educational initiatives, internship opportunities, and support for entering the workforce.

In 2025, we launched the Learning Track, designing a path for each participant toward their goals. Our work is divided into three pillars:

- **Professional:** We provide career counseling, mock interviews, resume writing assistance, and referrals to employment, internship, and youth apprenticeship programs.
- **Social Services:** We address needs related to food, transportation, and mental health, ensuring that young people remain in the program and receive the necessary support.
- **Educational:** We offer academic guidance and opportunities to participate in educational activities aligned with each participant's individual learning path.

We seek to promote lasting social impact through strategic partnerships and the monitoring of key performance indicators, ensuring the program's sustainability and its positive impact on young people's lives. In 2025, 13 language scholarships were awarded.

We have partnered with GRAACC to create 12 job openings in 2026.



32

families assisted



24%

beneficiaries
hired



4

beneficiaries
integrated into our
Young Apprentices
program



learn more at:

Dona Carolina Tamandaré Program

<https://accamargo.org.br/institucional/programa-dona-carolina-tamandare>

Schwester Heine Specialized School

ACC 27

Schwester Heine Specialized School, known internally as the Pediatrics Little School, was the first school established within a private hospital in Brazil. For 38 years, it has ensured the continuity of studies for children and adolescents during treatment, with the support of teachers from the municipal and state education networks, all qualified in hospital pedagogy.

Using a teaching program tailored to hospital needs, it prevents academic delays and facilitates the reintegration of students into regular schools, being a national reference in early childhood, elementary, and high school education for patients who are hospitalized or undergoing outpatient care.



4,900

visits



597

students



learn more at:

Schwester Heine Specialized School

<https://accamargo.org.br/pacientes/apoio-ao-paciente-e-ao-familiar/escola-especializada-schwester-heine>





Intellectual



Natural



Social



Relationship

Environment

Environmental Management

GRI 3-3 | ACC 16 | 69

A.C.Camargo's Environmental Management System (EMS) aims to reduce negative impacts and expand positive actions for the environment. To support it, we have an Environmental Working Group made up of specialists from various fields.

We have taken initiatives focused on the efficient use of resources and proper materials management, such as automatic shut-off faucets and dual-flush toilets to conserve water, zoned electrical circuits and LED bulbs for greater energy efficiency, as well as prioritizing water-based adhesives and paints. We monitor these actions through indicators and share progress internally, encouraging the conscious use of natural resources.

Promoting equal access to healthcare is a way to support the climate agenda and the planet's future.

COP30

Encontro+B Amazônia 2025

We attended the Encontro+B Amazônia 2025 conference in Belém (PA), as part of the preparatory agenda for COP30. The conference brought together various sectors of society to discuss the promotion of sustainable solutions.

A.C.Camargo's CEO, Dr. Victor Piana de Andrade, participated in a panel on the relationship between the environment and well-being. At the event, we presented a study on the influence of diet on colorectal cancer. The data show that more natural dietary choices are essential for prevention, and the feasibility of this approach depends directly on the preservation of biodiversity.

Decarbonization and Health

We also participated in the panel "Decarbonization and Digital Health," which brought together representatives from the Ministry of Health, the National Council of Health Secretaries (CONASS), and leading hospitals, reinforcing the sector's strategic role as an agent of climate and social transformation.

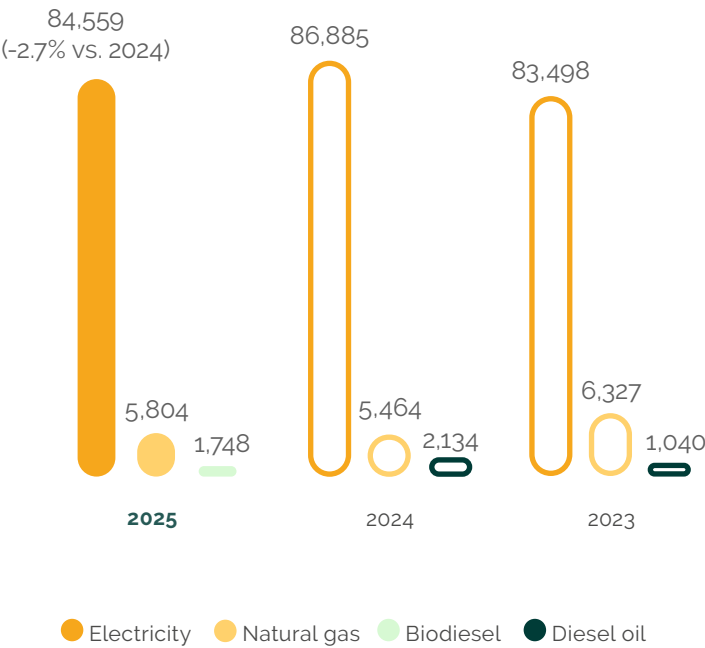
We presented Super Centro Brasil, a project to build a national network for cancer diagnosis based on teleconsultations, telereports, and telepathology. By enabling fast, high-quality remote evaluations, we reduce the need for travel, mitigate regional disparities, and bring specialized care to remote populations.

Energy

GRI 3-3 | 302-1 | 302-3

In 2025, we continued to implement energy efficiency initiatives, such as replacing equipment and optimizing lighting schedules. During this period, we recorded total energy consumption of 92,100 GJ, including electricity, natural gas, and biodiesel. Of this total, electricity accounted for 84,600 GJ (an approximate 2.7% reduction compared to the previous year), and natural gas consumption totaled 5,800 GJ for the year. We replaced diesel fuel with biodiesel, totaling 1,700 GJ. Energy intensity was 0.83 GJ/patient.

ENERGY CONSUMPTION (GJ)



Water

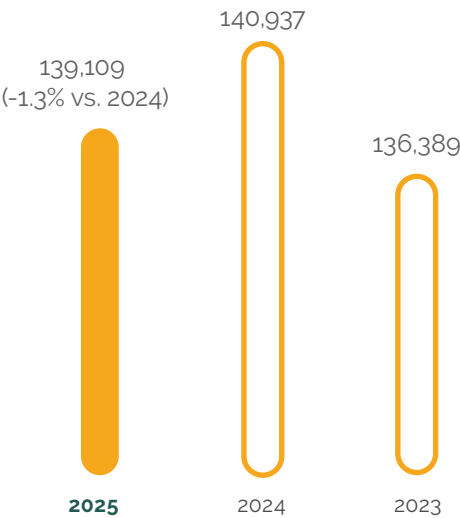
GRI 3-3 | 303-1 | 303-2 | 303-3 | 303-5

In 2025, water consumption totaled 139,000 m³, a 1.3% decrease from the previous year, with 100% of the supply provided by the local utility. This indicator is directly linked to the treatments provided and increases proportionally with the rise in patient visits. Thus, water management is one of our priorities, based on process improvement and equipment modernization.

We maintain periodic preventive maintenance routines and inspections based on the Service Management System. The tool streamlines corrective work orders and generates reports that support monitoring and decision-making, driving the evolution of our practices.

Effluent disposal is carried out through the sewer collection network in accordance with the standards established by Article 19-A of State Decree No. 8,468/1976 (SP) for the discharge of non-domestic effluents.

WATER CONSUMPTION (M³)



Solid Waste

GRI 3-3 | 306-1 | 306-2 | 306-3 | 306-4 | 306-5 | SASB HC-DY-150A.1

We pay close attention to the sorting, packaging, and transportation of medical waste, preventing environmental impacts and preserving the quality of the soil, water, and air. To minimize waste generation and promote sustainable practices, the Environmental Management System (EMS) conducts ongoing awareness and training programs, disseminating best practices throughout the institution.

Trained internal teams handle and store waste with complete safety. The process includes weighing logs that ensure traceability and data accuracy, from the source to the specific disposal site. Collection and off-site disposal are handled by specialized partners, under constant supervision and in accordance with the Integrated Solid Waste Management Plan (PGIRS).

In 2025, 1,499.8 metric tons of waste were generated, of which 953.7 metric tons (63.6%) were sent for recycling, recovery, composting, reverse logistics, and co-processing. Of this total, medical waste (Groups A and B, involving biological and chemical risks) amounted to 288.0 t (19.2%) and was incinerated. General waste in Group D totaled 433.9 t (28.9%), with 356.8 t (23.8%) recycled and 77.1 t (5.1%) sent to landfills. Hazardous waste such as batteries, electronics, X-ray films, and light bulbs totaled 25.1 t (1.7%) and were recycled. Finally, another 571.8 t (38.1%) went to recovery, composting, reverse logistics, and co-processing.

WASTE GENERATED (T)	2025	2024	2023
Hazardous waste	647.5	547.3	541.7
Healthcare services - Group A (infectious)	574.2	499.8	454.9
Healthcare services - Group B (chemical)*	73.3	47.5	55.2
Hazardous civil construction / industrial waste (recyclable)	0	0.0	31.4
Hazardous civil construction / industrial waste (non-recyclable)	0	0.0	0.2
Non-hazardous waste	852.3	1,003.6	880.4
Healthcare services - Group D (common) + civil construction and industrial waste (common)	469.3	545.0	471.7
Healthcare services - Group D (recyclables) + civil construction and industrial waste (recyclables)	383	458.6	408.7
Total	1,499.8	1,550.9	1,422.1

RAUL Project

In 2024, we implemented the RAUL platform (Rationalization of Water, Utilities, and Electricity), a multidisciplinary initiative aimed at reducing energy and water consumption, minimizing waste generation and greenhouse gas emissions, and raising awareness among the institution’s employees about the responsible use of resources.

Actions taken and results for 2025

Invisible Food

We were featured in a CNN Brasil documentary covering our partnership with the Comida Invisível platform to distribute surplus food.

In 2025, **1.3 t** of food were donated, benefiting **1,895** people and preventing the release of **1.2 tCO₂** into the atmosphere.

Organic Waste Bioprocessor

Conversion of organic waste into compost
Estimate of **70 t/year**

Water Efficiency

We saved **7,7000 m³** of water at the Pires da Mota unit, resulting in gross savings of **R\$ 451 thousand** over 11 months.



Watch the video and learn more at: <https://www.youtube.com/watch?v=ZwgIeopCoYI>

Initiatives continuing into 2026



Reducing Water Consumption
Goal 1: Wells for groundwater collection.
Status: Contract signed.

Goal 2: Tools and processes for monitoring and reducing consumption.
Status: Contractor hired; pilot program launched at the Pires da Mota unit; negotiations underway for expansion to the Antônio Prudente and Tamandaré units.



TRSS – Healthcare Waste Fee
Goal: Reduce waste generation (Savings of R\$ 400,000 per year).
Status: Monitoring.



Material Reuse
Goal: Reuse clothing and uniforms for gifts and office supplies.
Status: Awaiting sample submission from the supplier.



Waste Treatment and Composting
Goal: New technologies and equipment.
Status: Equipment delivered.



Awareness Campaigns
Goal: Raise employee awareness and engagement (Environmental Tournament).
Status: Under development.

Climate Change and Emissions

GRI 2-4 | 3-3 | 305-1 | 305-2 | 305-3 | 305-4 | 305-5

To mitigate environmental impacts and move toward more sustainable operations, the Institution monitors GHG emissions across all three scopes, enabling it to identify significant changes, support decision-making, and take swift action.

In Scope 1, an increase of 3,439.17 tCO₂e was recorded compared to 2024, due primarily to a one-time nitrous oxide leak at the Antônio Prudente unit. The incident was addressed with the scheduled shutdown of the network in October 2025, and since then, there has been no gas consumption, indicating the operational shutdown of the emission source. To mitigate risks and reduce future emissions, the company started supplying gas via portable cylinders at the unit and is evaluating expanding this solution to other units, such as Pires da Mota and Tamandaré.

For Scope 2, emissions were offset through the purchase of 22,660.00 MWh of I-REC-certified renewable energy. For Scope 3, we expanded our measurement by adding new categories to the GHG inventory, such as effluent treatment and business travel.

The increase in indicators mirrors the broader scope and greater precision of the inventory, highlighting the maturation of climate management and decarbonization efforts. The data was calculated in accordance with the GHG Protocol and independently verified, ensuring the reliability and transparency of the reported information.

GHG Protocol Gold Seal

We earned the Gold Seal—the highest level of recognition under the Getulio Vargas Foundation's Brazilian GHG Protocol Program—in 2022, 2023, and 2024. The results for 2025 will be released in the third quarter of 2026.

GHG EMISSIONS (TCO ₂ E)	2025	2024	2023	Distribution
Total*	5,569.68	1,686.44	2,008.58	100%
Scope 1 - Direct emissions (operations)**	4,725.94	1,341.31	1,620.90	85%
Scope 2 - Indirect emissions (electricity)	1,054.96	1,305.36	893.2	18.8%
Scope 2 - Indirect emissions avoided (offset via I-REC)	1,044.27	1,226.73	870.33	18.6%
Scope 2 - Indirect emissions (on-site/captive market)	9.79	78.63	22.88	0.2%
Scope 3 - Indirect emissions (supply chain)***	833.95	266.51	364.80	14.9%
Emission intensity (tCO ₂ e/patient served)****	0.04	0.01	0.02	-

* Considers Scope 1 (operations), Scope 2 (captive market), and Scope 3 (supply chain). The sum of the historical data series has been adjusted in this report.
** Accounts for emissions of other GHGs not regulated by the Kyoto Protocol.
*** This includes purchased goods and services (paper printing and cloud data storage), upstream transportation and distribution, treatment of waste and effluents generated by operations, and business travel (by air and via ridesharing apps).
**** For this indicator, the calculation assumption was revised to include total emissions from Scope 1 (operations) and Scope 2 (location approach). Scope 2 (market approach) was not included, as emissions from the operational units result in zero tCO₂e emissions, as verified by the I-REC.

Sustainability Week

A.C.Camargo's Sustainability Week featured a diverse program, encouraging reflection on how each person can contribute to a more balanced future, both within and outside the organization.

The event began with a performance by the Sua Voz Choir and, throughout the week, featured lectures on various topics: conscious water use, sustainable innovation, the role of suppliers and third parties in sustainability, women's empowerment, diversity, and mental health. The program also included a screening of the film "The Boy Who Discovered the Wind" and discussion groups addressing the importance of affinity groups.

Impactful initiatives were highlighted, such as the Flora Project (Danone), the Rota Verde Project (Logistics), and the partnership with Reserva Votorantim, in addition to contributions from partners such as Johnson & Johnson and ELIS. We also dedicated an exclusive training session to suppliers, with the meeting "Sustainable Connections – Be part of the change with A.C.Camargo."

At the event, we also held the awards ceremony for innovative sustainable solutions from the Idea Factory, a topic detailed on [page 105](#).

"Gente que Cultiva a Vida" (People Who Cultivate Life) Project

The "Gente que Cultiva a Vida" project was born out of a partnership between the A.C.Camargo Cancer Center and Reserva Votorantim to conserve an area of the Atlantic Forest through tree planting.

For every sapling donated to the initiative, the institution contributes one more, thereby multiplying efforts to protect biodiversity.

In 2025, 1,667 seedlings native to the Atlantic Rainforest were planted, contributing to the restoration of a one-hectare area, equivalent to a soccer field.



Watch the video and learn more at:

Gente que Cultiva a Vida

www.youtube.com/watch?v=Q2ET5HAo_wY

Engagement

645

employees participating

56

supplier representatives

25

speakers
(13 external and 12 internal)

17

lectures/roundtable discussions





Financial



Intellectual



Manufactured



Natural



Social



Relationship

Future and Innovation

Financial Sustainability

GRI 3-3 | 201-1 | 201-4 | ACC 32 | 33

Net revenue in 2025 totaled R\$ 2.12 billion, a 10.3% increase compared to 2024, driven by growth in hospital activities, whose revenue reached R\$ 1.98 billion, with a higher volume of surgeries, hospitalizations, and tests performed for the private health insurance sector. During the period, R\$ 49.3 million in incentives from the Unified Health System (SUS) were recorded.

Operational performance allowed the company to maintain the pace of strategic investments, expanding the offering of high-complexity oncology services and promoting continuous improvements in the patient journey.

R\$ 2.12
BILLION
net revenue (+10.3%)*

R\$ 1.98
BILLION
net revenue from hospital activities (+10.7%)**

R\$ 850
MILLION
distributed added value (+10.7%)**

* WE HAVE MADE AN ADJUSTMENT TO THE INFORMATION, NOW USING THE INCOME STATEMENT FOR THE YEAR (IS) INSTEAD OF THE VALUE ADDED STATEMENT (VAS) AS THE BASIS FOR A MORE APPROPRIATE PRESENTATION OF REVENUE.

** COMPARED TO THE PREVIOUS YEAR.

**STATEMENT OF VALUE ADDED
(ANTONIO PRUDENTE FOUNDATION)**

	2025 (R\$ thou- sand)	2024 (R\$ thou- sand)	2023 (R\$ thou- sand)
Revenues			
Revenue from hospital operations	1,978,933	1,788,252	1,618,112
Other revenue	70,933	64,666	36,226
SUS Incentive	49,350	51,233	35,528
Revenue related to the construction of own assets	62,409	46,285	76,836
Provision for doubtful debts	-8,229	-20,081	-14,285
Inputs purchased from third parties			
Cost of goods and services sold	-1,116,738	-966,006	-848,318
Materials, energy, third-party services and other	-354,473	-287,328	-268,396
Provision for losses in inventory and fixed assets	-1,081	-1,073	-821
Gross value added	681,104	675,948	634,882
Depreciation and amortization	-113,541	-106,954	-95,573
Net value added	567,563	568,994	539,309
Value added received in transfers			
Financial revenue	282,582	199,019	222,074
Total value added to be distributed	850,145	768,013	761,383
Distribution of Value Added			
Personnel and charges	406,133	375,597	360,200
Direct remuneration	290,437	266,880	258,671
Benefits	89,775	84,512	78,214
FGTS	25,921	24,205	23,315
Taxes, charges, and contributions	2,506	2,388	2,654
State	-	-	-
Municipal	2,506	2,388	2,654
Expenses for SUS procedures	62,633	62,089	65,325
Remuneration of third-party capital	25,969	18,442	26,615
Interest	21,868	12,767	21,510
Rents	4,101	5,675	5,105
Return on equity			
Surplus for the year	352,904	309,497	306,589
Total value added	850,145	768,013	761,383



Learn more at:

Statement of Added Value


Financial resources for research

ACC 31 | 34

FUNDRAISING BY FUNDING SOURCE	2025 (R\$ thou- sand)	2024 (R\$ thou- sand)	2023 (R\$ thou- sand)
1. São Paulo Research Foundation (FAPESP)	3,415	2,241	1,928
1.1. Scholarships	1,700	1,184	877
1.2. Project grants	1,715	1,057	1,051
2. CNPq	5,821	1,423	2,662
2.1. Scholarships	3,922	583	445
2.2. Project grants	1,899	840	2,217
3. Ministry of Health	3,678	8	635
3.1. PRONON	0,549	8	635
3.2. PRONAS	3,129	-	0
4. IARC/WHO	-	181	393
5. Conduct Adjustment Agreements (TAC)	0,154	-	60
6. Other	4,512	630	943
6.1. Domestic	3,310*	399	379
6.2. International	1,202**	231	564
Total	13,752	4,483	6,621
INSTITUTIONAL COUNTERPART	2025 (R\$ thou- sand)	2024 (R\$ thou- sand)	2023 (R\$ thou- sand)
Own Funds - Antônio Prudente Foundation (Includes CAPEX)	25,987	18,352	17,302

* DOMESTIC SOURCES: ROCC (90717058); LACOG-0222 (90717043); LACOG-0322 (90717068); LACOG-0723 (90717059); INSPIER - AUTOMATIZAÇÃO RM (90717054); AMGEN BIOMARCADORES MOLECULAR (90717051); ARO PAN TUMOR (90717044); ARO BRA-HEP (90717063); PARAXEL CARTITUDE 9 (90717067); IMPACTO MR-DADOS EPIDEMIOLÓGICOS (90717053); NOVARTIS-KYMRIAH (90717055); PEDRO ERNESTO - LIBBS VIVAXXIA (90717060); IMPACTO MR - ORGANOSILANO (90717065); REALITY-WW (90717064); RELNESS (90717075); ESTUDO PROBIO DE TUMORES COLORRETAIS (90717062); ESTUDO BISQUIT II (90717061); IA SUS (90717077); IA PATOLOGIA (90717078); FUNDO DE BOLSAS.

** INTERNATIONAL SOURCES: ESCMID CAREER GRANT (90717046); SELNET (90717069); LAGENO-BCR (90717074); SERVIER-NEXTGENETS (90717056); SERVIER - CTDNA - RESPOSTA À TERAPIA NEOADJUVANTE (90717057); SERVIER-GP-PERFIL CLIN CONDROSSARCOMA (90717066); SERVIER DADOS BRA-CONDROSSARCOMA.

Reserve for Social Impact and Evolution (RISE)

ACC-2025-CF

We have remained committed to social impact through RISE. Our goal is to allocate between 10% and 20% of the institution's total EBIT to empower projects and initiatives that promote social benefits from 2023 to 2025. In 2025, we allocated 10% of EBIT to RISE, meeting the target set for the year and reaffirming our commitment to social transformation.



learn more at:

To be part of this movement,
scan the QRCode and make
your donation.



<https://accamargo.org.br/apoie-nossa-causa/doacao-projetos>

RESOURCE MOBILIZATION TO EXPAND POSITIVE IMPACT

As part of its ongoing effort to expand and diversify revenue streams for social, educational, and research initiatives, the Resource Mobilization department has refined its fundraising processes in line with strategic guidelines, achieving the following results:

- We were the beneficiaries of a Golden Anniversary celebration: over 85 donors and R\$ 2.6 million;
- First edition of the "Connections That Transform" event: over 50 participants from 20 companies, with presentations on donation, sponsorship, and volunteer opportunities for 2026;
- Donations from individuals: R\$ 2.1 million allocated to social impact research;
- Partnership with Molico: special edition of milk cans for Pink October, with funds (R\$ 150,000) donated to breast cancer prevention;
- Partnership with Vermelho Amour: a portion of sales from baseball caps promoting the A.C.Camargo cause is donated to the institution.

R\$ 16,4
MILLION
raised

R\$ 8.7
MILLION
in financial
donations with no
tax incentives

R\$ 3.3
MILLION
in tax-incentivized
donations
(PRONAS)

R\$ 3.3
MILLION
in sponsorships for
preceptorships,
workshops, and
symposia

R\$ 950
THOUSAND
of proposed
parliamentary
amendments

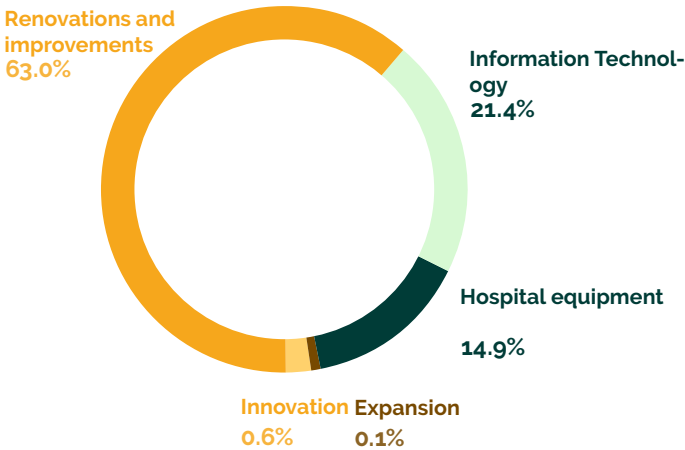
Investments

GRI 203-1 | ACC 37 | 60

We have made comprehensive investments in infrastructure, prioritizing the modernization and efficiency of our operations. In 2025, we invested R\$ 117.6 million in improvements, including renovations, equipment, technology, and innovation. We carried out structural renovations in healthcare facilities, retrofitted critical areas, and improved support environments, along with adaptations to incorporate new technologies and diagnostic equipment. Notable are the investments in IT, with a 97.4% increase focused on updating data security systems, modernizing the Data Center, and acquiring new licenses. We also made progress on projects involving structural reinforcement, modernization of building systems, security, and operational continuity. Notable among these initiatives are the revitalization of the surrounding area, with improvements to sidewalks, pavement, and drainage, providing greater safety and comfort for pedestrians (R\$ 3.4 million); the renovation of the lot at the corner of Professor Antônio Prudente and Tamandaré streets, transforming a degraded area into a space usable by patients and employees, eliminating health risks (R\$ 2.5 million); and the preparation of areas for Proadi-SUS operations (R\$

2.3 million). These investments reflect our ongoing commitment to excellence in care, operational sustainability, and improving the experience of patients, employees, and other stakeholders.

DISTRIBUTION OF INVESTMENTS



INVESTMENTS IMPLEMENTED

Investment type	2025 (R\$ million)	2024 (R\$ million)	2023 (R\$ million)
Renovations and improvements	74.0	67.1	70.6
Hospital equipment	17.5	57.4	76.7
Information Technology	25.2	12.8	27.6
Innovation	0.8	6.3	9.2
Expansion	0.1	2.4	38.8
Total	117.6	146.0	222.9

Innovation in Healthcare and Oncology

GRI 3-3

In 2025, we restructured the Innovation division, creating a dedicated management team and strengthening the integration between Teaching, Research, Innovation, and Patient Care. The team's work is now guided by five pillars, strengthening governance, focusing on institutional priorities, and ensuring alignment with the Strategic Plan.

In innovation projects, we prioritized challenges in care, operations, and management, with cross-functional efforts and active leadership participation. The portfolio brought together structural projects and tactical initiatives that sped up the use of data, artificial intelligence, and new care models, such as the melanoma risk calculator, remote monitoring platforms, AI applications, and online apps for risk calculation and clinical decision support.

Open Innovation has gained momentum, strengthening our engagement with the ecosystem through participation in strategic events, expanding our relationships with startups, universities, and technology companies, as well as identifying, curating, and directing opportunities aligned with oncology. We began implementing the Digital Innovation Hub, a center that connects projects, partners, and digital solutions, and linked the institution to over 60 stakeholders in the healthcare ecosystem, revising our partnership models and positioning ourselves as co-creators of solutions alongside our partners.

Also noteworthy are strategic partnerships with Insper, Philips, and other institutions, featuring initiatives such as AI for cancer prediction in imaging exams; 3D printing of oral stabilizers to ensure safety and improve the patient experience in radiation therapy; and equipment for isolating DNA strands.



learn more at:

José Eduardo Ermírio de Moraes Award -

<https://accamargo.org.br/institucional/premio-jose-eduardo-ermirio-de-moraes-inovacoes-pela-vida-2025>

José Eduardo Ermírio de Moraes Award – Innovations for Life (JEEM)

Organized in partnership with the José Ermírio de Moraes Neto Family, the José Eduardo Ermírio de Moraes Award recognizes innovative solutions with the potential to transform cancer prevention, diagnosis, and care.

Now in its 4th edition, the Award highlights the maturation of the Institution's open innovation strategy, featuring an increasingly refined selection process, attracting solutions with greater technological sophistication, and expanding its national reach with a wider diversity of solutions from different Brazilian states. Since its inception, the Award has surpassed the milestone of 100 accepted projects, and in 2025, it received 35 submissions, distributed across the Deep Tech and Digital Health categories.

Apart from the R\$100,000 prize for each winning solution, the Award has cemented its role as an ongoing mechanism for connecting with the ecosystem, fostering structured relationships with finalists and winners from previous editions. As a result, it has already facilitated a total of seven formally established partnerships, reinforcing its role as a strategic platform for closer ties, co-development, and generating impact for national oncology.

Intellectual Property and Innovation Assets

In 2025, the strengthening of the intrapreneurship culture at A.C. Camargo resulted in the registration of five new intellectual property assets, including patents, software, and trademarks. More than just formal registrations, these assets represent the materialization of internally developed innovation, reinforcing the institution's innovative identity, valuing the talents involved in generating solutions, and demonstrating the scope and applicability of the research and activities conducted.

Prevention and Control of Claim Denials

One of the strategic innovation projects carried out throughout the year focused on managing claim denials (amounts not paid or rejected by health insurance plans and providers). The initiative promoted the creation of teams with professionals from different areas working together (multidisciplinary squads) and the complete mapping of all stages, from patient care to the receipt of payments, in addition to the integration of clinical, administrative, financial, Information Technology, and Data departments.

Starting with an initial investigation phase to understand problems and opportunities, critical issues were given priority, and initial tests were conducted to validate ideas through proofs of concept, as well as pilot projects, joint development of solutions based on Artificial Intelligence, and relevant changes to processes, governance, and organizational structures.

The initiative also promoted the prioritization of actions to be developed throughout the 2026–2030 Strategic Cycle.



Culture of Innovation and Intrapreneurship

A culture of innovation and intrapreneurship has been strengthened as strategic drivers at A.C.Camargo. We have promoted a consistent schedule of events, webinars, and internal initiatives, fostering new skills, collaboration, and the development of solutions by our teams. Throughout the year, 17 events were held, directly impacting over 1,300 people and consolidating innovation as a cross-functional organizational capability.

IDEAS FACTORY

The Fábrica de Ideias (Ideas Factory) is an innovation culture program at A.C.Camargo that aims to foster intrapreneurship by encouraging employees to actively participate in generating ideas, solutions, and projects that have a real impact on the institution and its patients.

In 2025, the program was restructured to become more dynamic, collaborative, and integrated. We maintained idea and suggestion capturing as a central focus, while expanding the ways we interact with employees and clinical staff through initiatives led by the Innovation team, such as partnership programs and internal innovation events.

The Ideas Factory offers various ways to get involved:

- **Idea Capturing:** a platform that supports both themed campaigns and the ongoing collection of ideas, enabling employee suggestions and proposals to be recorded, evaluated, and forwarded to the relevant teams through an organized and transparent process;
- **External Partnerships:** an environment for developing projects in collaboration with partner institutions, with shared challenges and solutions;

- **Innovation Workshops:** initiatives aimed at providing employees with hands-on training to propose and develop innovative solutions, fostering a culture of intrapreneurship;
- **Education:** access to webinars, training sessions, and content on innovation.

Through these initiatives, we aim to engage all employees, bringing together ideas and solutions that transform the day-to-day operations of the organization.

SUSTAINABILITY CAMPAIGN

We launched a campaign to encourage employees to identify challenges and opportunities for improvement, proposing innovative solutions that can be turned into tangible projects for the organization in the environmental, social, and economic spheres, thereby strengthening sustainable practices and the continuous improvement of processes.

The campaign received 26 proposals, covering themes related to patient-centered care (27%), employee health (23%), reducing water and energy waste (23%), proper waste disposal (11%), clean energy (8%), and process improvement (8%). The solutions went through a structured evaluation process and were recognized during Sustainability Week.

This mobilization reinforces the role of innovation as an ally of sustainability, strengthening employee engagement in developing solutions that have a positive impact on the Institution and society.



Expanding Horizons

GRI 3-3 | ACC 37

INTERNATIONAL OPERATIONS

We have broadened our international outreach, focusing on patient care, medical education, and access to cancer treatment through partnerships with the consulates of Paraguay and Bolivia. These initiatives reflect our commitment to promoting health across borders while strengthening collaborative networks in Latin America.

In Paraguay, we have advanced our dialogue with the National Cancer Institute (INCAN), supported by institutional partners. Along these lines, we are working to help the country connect with Latin American networks of cancer institutions and to develop cooperation proposals that might make it easier for the Paraguayan population to access specialized care, as well as initiatives for technical exchange between healthcare professionals from both countries.

In partnership with the Consulate General of Bolivia, healthcare institutions, and representatives of the Bolivian community, we organized practical support initiatives, such as community health clinics held in the Brás neighborhood of São Paulo (SP). The focus was on prevention, screening, and health guidance. These initiatives aim to detect diseases early and guide the population through the treatment process. We also proposed cooperation initiatives, such as telemedicine programs, training for healthcare professionals, care for Bolivian patients in Brazil, and partnerships with treatment centers in Bolivia.

These initiatives reinforce our commitment to health as a universal right through international cooperation, professional training, and the sharing of scientific knowledge, thereby helping to expand access to quality cancer care.

INTERNATIONAL EVENTS

In 2025, our employees attended conferences and meetings that fostered knowledge sharing and strengthened cancer research.

At the **30th CTOS (Connective Tissue Oncology Society)** conference in Florida, our specialists presented three papers, sharing scientific advances in sarcomas and bone tumors.

During the **2025 National Congress of Private Hospitals (CONAHP)**, our CEO moderated a panel on advanced therapies featuring international leaders, including the Global Director of Advanced Therapies at Hospital Clínic in Barcelona, fostering discussions on innovation, access, and sustainability in cancer care.

We participated in the **2nd Meeting of Latin American Oncology Institutions (OLACI)**, which brought together representatives from Brazil, other Latin American countries, as well as Canada, France, and India, facilitating the exchange of experiences regarding healthcare systems, prevention, innovative therapies, and equitable access.

Additionally, at the **San Antonio Breast Cancer Symposium (SABCS)**, held in Texas (USA), our research physicians presented 19 scientific papers.

In this way, we share knowledge and help expand our potential to positively impact patients, healthcare professionals, and the healthcare community.

LONG-TERM VISION AND STRATEGY

The Centers of Excellence remain our primary driver for value creation, operating in an integrated manner from prevention through rehabilitation. Building on this solid foundation, we are shaping the future of A.C.Camargo based on four key pillars: increasing social impact, expanding the scope of care, digital transformation, and improving operational efficiency.

The Innovation and Information Technology (IT) departments have worked together to expedite the digital transformation at A.C.Camargo. The goal is not merely to incorporate technologies, but also to foster a digital culture, driving changes in how we work and delivering greater speed, efficiency, and quality in patient care.

In the sphere of social impact, we have defined a long-term strategic goal: to contribute in a structured manner to reducing cancer mortality in Brazil, with a particular focus on colorectal cancer. We aim to mobilize educa-

tion, research, innovation, patient care, and partnerships around this ambition, extending our expertise beyond our walls and expanding our operations throughout the country, including through a “phygital” model that integrates physical and digital care.

We are also expanding our care services, providing an increasingly comprehensive approach to cancer patients (including during the post-treatment period), while strengthening our partnerships with companies and society to expand our large-scale prevention efforts.

We operate within an ecosystem because we believe that major health challenges require collective action. This is how, in collaboration with public and private partners, we will be able to go further, reach more people, and generate an increasingly significant impact for the country.



Indicators

GRI Content Index

A.C.Camargo reported the information mentioned in this GRI content index for the period from January 1 to December 31, 2025 based on the GRI Standards: Fundamentals 2021.

INDICATORS		REFERENCE (PAGE)/DIRECT ANSWER
Universal standards		
The organization and its reporting practices		
2-1	Organizational details	A.C.Camargo Cancer Center, whose corporate name is Fundação Antônio Prudente, is a private non-profit institution. Its activities are spread over seven units located in the city of São Paulo (SP), five of which are healthcare units, one administrative unit and one research unit. Page 7
2-2	Entities included in the organization's sustainability reporting	100% of A.C.Camargo's operations were included in the report: Antônio Prudente, Tamandaré, Pires da Mota, Castro Alves Assistencial, Castro Alves Administrativa, Itaim, International Research Center (CIPE) units, the same as those reported in the Financial Statements.
2-3	Reporting period, frequency and contact point	Annual, from January 1st to December 31st 2025. Page 3.
2-4	Restatements of information	GRI 305: The sum of Scope 2 emissions and the total figures for 2023 and 2024 have been corrected. GRI 302-3: We adjusted the denominator of the formula, resulting in an energy intensity of 0.90 GJ/patient in 2024. GRI 416-1: Following a methodological review, we no longer report the percentage of services assessed for health and safety impacts, since these assessments are conducted on a sample basis, making it impossible to determine the total percentage that was actually assessed.
2-5	External assurance	The Report was externally assured by KPMG Auditores Independentes, which has global experience in assurance based on GRI standards. Page 3.

INDICATORS		REFERENCE (PAGE)/DIRECT ANSWER
Activities and employees		
2-6	Activities, value chain and other business relationships	Page 46.
2-7	Employees	Page 70.
2-8	Workers who are not employees	Page 70.
Governance		
2-9	Governance structure and composition	Pages 32, 34 and 36.
2-10	Nomination and selection of the highest governance body	Page 34
2-11	Chair of the highest governance body	Page 34
2-12	Role of the highest governance body in overseeing the management of impacts	Pages 35 and 43.
2-13	Delegation of responsibility for managing impacts	Page 43.
2-14	Role of the highest governance body in sustainability reporting	Page 3
2-15	Conflicts of interest	Prevention and management of conflicts of interest at the Institution are guided by and communicated to stakeholders through the Code of Conduct, the Conflict of Interest Policy (CPL-NOR-0011), and the Disclosure of Affiliations Procedure (CPL-PRO-0008). Employees, clinical staff, suppliers, and third parties must disclose potential conflicts of interest using an electronic form submitted through the system, which is reviewed by the Compliance department, where risks are assessed and mitigation measures are defined. Conflicts may also be identified during supplier integrity reviews.
2-16	Communication of critical concerns	No critical concerns were reported in 2025. Page 38.
2-17	Collective knowledge of the highest governance body	The members of the Board of Trustees engaged in discussions and considerations on risks, integrity, sustainability, innovation, and trends in the healthcare sector, and received recommendations from the Strategy, Innovation, and Sustainability Committee. Strategic projects such as Proadi-SUS, RISE, Dédalo, and CEPID "Economics of Cancer" also helped broaden the board's knowledge and support strategic decision-making.
2-18	Evaluation of the performance of the highest governance body	Page 37.
2-19	Remuneration policies	Page 37.

INDICATORS		REFERENCE (PAGE)/DIRECT ANSWER
2-20	Process to determine remuneration	Page 37.
2-21	Annual total compensation ratio	The ratio of the CEO's annual compensation to the average employee compensation is 49.7, taking into account base salary, the 13th-month bonus, and other bonuses. The CEO's compensation increased by 5.32%, the same as the average for employees, maintaining the same growth rate.
Strategy, policies, and practices		
2-22	Statement on sustainable development strategy	Page 4.
2-23	Policy commitments	Responsible conduct policies are integrated into the institution's Strategic Planning cycle and are reflected in institutional commitments and key performance indicators (KPIs) monitored by the Sustainability department. Each operational area is jointly responsible for meeting the established goals. Page 46.
2-24	Embedding commitment policies	Pages 16, 27 and 46.
2-25	Processes to remediate negative impacts	Page 42.
2-26	Mechanisms for seeking advice and raising concerns	Page 42.
2-27	Compliance with laws and regulations	No significant cases of noncompliance with laws and regulations were recorded in 2025. Defined threshold: cases involving administrative sanction proceedings; risk of revocation, suspension, or non-renewal of licenses (health, CNEN, ANVISA, CREMESP, or equivalent); or the enforcement of corrective measures and significant structural obligations.
2-28	Membership associations	ABCR - Associação Brasileira de Captadores de Recursos; ABIFICC - Associação Brasileira de Instituições Filantrópicas de Combate ao Câncer; AHFIP - Associação dos Hospitais Filantrópicos Privados; ANAHP - Associação Nacional de Hospitais Privados; IBGC - Instituto Brasileiro de Governança Corporativa; Instituto Ethos; FONIF; PHS - Projeto Hospitais Saudáveis; Instituto Filantropia; UICC - Union for International Cancer Control.
Stakeholder engagement		
2-29	Approach to stakeholder engagement	Pages 38 and 58.
2-30	Collective bargaining agreements	100% employee coverage.
Material topics		
3-1	Process to determine material topics	Page 20.
3-2	List of material topics	Page 20.
3-3	Management of material topics	Pages 20, 27, 30, 38, 43, 46, 51, 62, 84, 92, 93, 94, 96, 98, 103 and 106.

INDICATORS		REFERENCE (PAGE)/DIRECT ANSWER
Specific Standards - Economic Content		
Economic performance		
201-1	Direct economic value generated and distributed	Pages 18 and 98.
201-2	Financial implications and other risks and opportunities due to climate change	Page 44.
201-3	Defined-benefit plan obligations and other retirement plans	A.C.Camargo offers a supplemental pension plan to its employees, managed by Itaú Seguros. Employees may contribute 3% to 5% of their salary. The right to the full amount of the company's contribution is earned gradually, reaching 100% after ten years' contributions.
201-4	Financial assistance received from government	Page 98.
Market Presence		
202-1	Ratios of standard entry level wage by gender compared to local minimum wage, by gender	Page 74.
Indirect Economic Impacts		
203-1	Infrastructure investments and services supported	Page 102.
Procurement Practices		
204-1	Proportion of spending on local suppliers	Page 46.
Anti-corruption		
205-1	Operations assessed for risks related to corruption	The assessment was not conducted.
205-2	Communication and training on anti-corruption policies and procedures	Page 38.
205-3	Confirmed incidents of corruption and actions taken	Page 38.
Anti-competitive Behavior		
206-1	Legal actions for anti-competitive behavior, anti-trust, and monopoly practices	There were no cases of legal action for anti-competitive behavior, anti-trust or monopoly practices in 2025.
Specific Standards - Environmental Content		
Energy		
302-1	Energy consumption within the organization	Page 93.
302-3	Energy intensity	Page 93.
Water		
303-1	Water Consumption Management	Page 93.

INDICATORS		REFERENCE (PAGE)/DIRECT ANSWER
303-2	Management of water discharge-related impacts	Page 93.
303-3	Breakdown of total water withdrawal by source type, including water-stressed areas	Page 93.
303-5	Water consumption	Page 93.
Emissions		
305-1	Direct (Scope 1) GHG emissions	Page 96.
305-2	Indirect (Scope 2) greenhouse gas (GHG) emissions resulting from energy acquisition	Page 96.
305-3	Other indirect (Scope 3) GHG emissions	Page 96.
305-4	GHG emissions intensity	Page 96.
305-5	Reduction of GHG emissions	Page 96.
Waste		
306-1	Waste generation and significant waste-related impacts	Page 94.
306-2	Management of significant waste-related impacts	Page 94.
306-3	Waste generated (type and disposal method)	Page 94.
306-4	Waste diverted from disposal (recovery, reuse, and recycling)	Page 94.
306-5	Waste directed to disposal	Page 94.
Supplier Environmental Assessment		
308-1	New suppliers that were screened using environmental criteria	No new suppliers were screened based on environmental criteria prior to being contracted in 2025.
308-2	Actual and potential negative environmental impacts in the supply chain and measures taken	In 2025, 69 service providers were assessed for environmental impacts. Significant impacts were identified, such as improper waste disposal, chemical spills, disruptions caused by weather events, and greenhouse gas emissions. Improvement measures were established for 1% of the suppliers, and contracts with 39% were terminated.
Specific Standards - Social Content		
Employment		
401-1	New employee hires and employee turnover	Page 75.

INDICATORS		REFERENCE (PAGE)/DIRECT ANSWER
401-2	Benefits provided to full-time employees that are not provided to temporary or part-time employees	Temporary or part-time employees are not offered meal vouchers.
401-3	Parental leave	Page 75.
Occupational Health and Safety		
403-1	Occupational health and safety management system	Page 80.
403-2	Hazard identification, risk assessment, and incident investigation	Page 80.
403-3	Occupational health services	Page 80.
403-4	Worker participation, consultation, and communication on occupational health and safety	Page 80.
403-5	Worker training on occupational health and safety	Page 80.
403-6	Promotion of worker health	Page 80.
403-7	Prevention and mitigation of occupational health and safety impacts directly linked by business relationships	Page 80.
403-8	Workers covered by an occupational health and safety management system	Page 80.
403-9	Work-related injuries	Page 80.
403-10	Work-related ill health	Page 80.
Training and Education		
404-1	Average hours of training per year per employee, by gender and employee category	Page 77.
404-2	Transition assistance programs provided to facilitate continued employability and the management of career endings resulting from retirement or termination of employment	Pages 76 and 77.
404-3	Percentage of employees receiving regular performance and career development reviews, by gender and employee category	Page 79.
Diversity and Equal Opportunity		
405-1	Diversity of governance bodies and employees	Pages 34, 36 and 70.
405-2	Ratio of basic salary and remuneration of women to men	Page 74.

INDICATORS		REFERENCE (PAGE)/DIRECT ANSWER
Non-discrimination		
406-1	Incidents of discrimination and corrective actions taken	In 2025, we received 32 complaints of discrimination. Of these, seven (21%) are still under review, one (3%) has a remedial plan currently being implemented, and five (16%) had their remedial plans completed and their results evaluated, corresponding to 100% of the cases found to be valid. The remaining 20 cases (63%) were dismissed and did not require corrective measures.
Freedom of Association and Collective Bargaining		
407-1	Operations and suppliers in which the right to freedom of association and collective bargaining may be at risk	The institution has not identified any risks to freedom of association or collective bargaining and applies the collective bargaining agreement for the sector.
Child Labor		
408-1	Operations and suppliers at significant risk for incidents of child labor	We have a contractual clause that ensures suppliers do not engage in abusive practices. No significant risks of child labor have been identified, either in our operations or in those of our suppliers.
Forced or Compulsory Labor		
409-1	Operations and suppliers at significant risk for incidents of forced or compulsory labor	Aside from the contractual clause that addresses the fight against forced labor, we consult the Registry of Employers Who Have Subjected Workers to Conditions similar to Slavery, maintained by the Federal Government's Labor Inspection Secretariat.
Security Practices		
410-1	Security personnel trained in human rights policies or procedures	90% of the security team has received formal training on institutional policies and procedures related to human rights and their application in security.
Local Communities		
413-1	Percentage of operations with implemented programs for local community engagement, impact assessment, and/or local development	100% of the operations have community engagement and local development programs in place. Pages 88, 89 and 90.
Supplier Social Assessment		
414-1	New suppliers that were screened using social criteria	Page 46.
414-2	Negative social impacts in the supply chain and actions taken	Page 46.

INDICATORS		REFERENCE (PAGE)/DIRECT ANSWER
Customer Health and Safety		
416-2	Incidents of non-compliance concerning the health and safety impacts of products and services	No significant cases of legal noncompliance related to health and safety impacts arising from products and services were reported during the reporting period.
Customer Privacy		
418-1	Substantiated complaints concerning breaches of customer privacy and losses of customer data	Page 40.

SASB Content Index

INDICATORS		REFERENCE (PAGE)/DIRECT ANSWER
Waste management		
HC-DY-150A.1	Total amount of medical waste, percentage (a) incinerated, (b) recycled or treated, and (c) landfilled	Page 94.
Access for low-income patients		
HC-DY-240A.1	Discussion of strategy for managing the mix of insured and uninsured (SUS) patients, including programs with alternative pricing structures	Page 61.
Quality of care and patient satisfaction		
HC-DY-250A.2	Number of Serious Reportable Events (SREs) as defined by the National Quality Forum (NQF)	Page 60.
HC-DY-250A.3	Quality of patient care: number of healthcare-associated infections (Overall hospital infection rate and SSI rate in clean surgeries)	Page 60.
HC-DY-250A.4	Excess readmission ratio per hospital	Page 60.
Employee Recruitment, Development & Retention		
HC-DY-330A.2	Description of talent recruitment and retention efforts for health care practitioners	Pages 70 and 76.

A.C.Camargo Indicators

CODE	GROUP	THEME	REFERENCE (PAGE)/ DIRECT ANSWER
ACC 1	Patient Care	Centers of Excellence - CoE	Page 10.
ACC 2	Patient Care	Patient Care	Page 59.
ACC 4	Patient Care	Time elapsed between clinical visit and start of treatment	Page 60.
ACC 5	Patient Care	Bed occupancy rate (IU and ICU)	Page 60.
ACC 6	Patient Care	Adverse events	Page 60.
ACC 7	Patient Care	Sepsis fatality	Page 60.
ACC 8	Patient Care	Patients treated with immunotherapy at CoE	Page 59.
ACC 9	Patient Care	Cases discussed in the Tumor Board	Page 62.
ACC 10	Patient Care	Reoperation within 30 days	Page 60.
ACC 11	Patient Care	Readmission within 30 days	Page 60.
ACC 12	Patient Care	Average length of stay (IU and ICU)	Page 60.
ACC 13	Patient Care	Bed turnover (Antônio Prudente and Tamandaré Units)	Page 60.
ACC 14	Patient Care	Participation in Support Groups in face-to-face and online formats	Page 56.
ACC 15	Patient Care	Activities carried out in the Support Groups	Page 56.
ACC 16	Operational	Sustainability Platform	Page 92.
ACC 17	Operational	Certifications	Page 12.
ACC 18	Research	Clinical research by type of therapy	Page 66.
ACC 19	Research	Clinical research by status of projects and patients included	Page 66.
ACC 20	Research	Scientific production	Page 64.
ACC 21	Education	Trained residents incorporated into the clinical staff	Page 67.
ACC 22	Education	CAPES Assessment	Page 68.
ACC 24	Education	Medical and multidisciplinary residencies and fellowship programs	Page 69.
ACC 25	Education	Graduate program (MSc/PhD)	Page 69.
ACC 26	Patient Care	Dona Carolina Tamandaré Program	Page 90.
ACC 27	Patient Care	Schwester Heine Specialized School	Page 91.
ACC 28	Education	Technical course in Nursing	Page 67.
ACC 29	Research	Biobank: patients, stored samples and research	Page 62.

CODE	GROUP	THEME	REFERENCE (PAGE)/ DIRECT ANSWER
ACC 30	Research	National and international cooperation agreements	Page 64.
ACC 31	Financial	Partnerships and financial resources in research	Page 100.
ACC 32	Financial	Direct economic value generated and distributed	Page 99.
ACC 33	Financial	Net revenue	Page 99.
ACC 34	Financial	Own investment in research	Page 100.
ACC 37	Financial	Investments in infrastructure and technology	Pages 102 and 106.
ACC 38	Operational	Infrastructure in patient care, education, and research	Page 9.
ACC 39	Institutional	Launch and results of the campaign for the new brand positioning	Page 13.
ACC 40	Research	Employees dedicated to Research area: scientists, research doctors and the CIPE administrative support team	Pages 64 and 70.
ACC 42	Patient Care	New patients treated by CoE	Page 10.
ACC 45	Patient Care	Partnerships in patient care	Page 48.
ACC 46	Patient Care	Research Board	Page 62.
ACC 47	Research	Basic, translational and clinical research	Page 64.
ACC 48	Patient Care	Patient Consulting Council	Page 58.
ACC 49	Patient Care	Patient Experience Medical Committee	Page 58.
ACC 50	Patient Care	Survival rate	Page 50.
ACC 52	Institutional	Net Promoter Score (NPS) - Selection process	The 2025 NPS for the recruitment processes was not measured.
ACC 53	Financial	Cost-effectiveness model	Page 50.
ACC 54	Institutional	Institutional risk management	Page 43.
ACC 55	Education	Open courses, total participants and per course	Page 68.
ACC 57	Research	Genomic and Molecular Diagnosis Center tests (B2B)	Page 62.
ACC 58	Institutional	Innovation - Digital interactions via chat, WhatsApp, etc.	Page 51.
ACC 59	Patient Care	Scope of the patient safety committee and topics discussed at meetings	Page 57.
ACC 60	Institutional	Net revenue invested in innovation	Page 102.

CODE	GROUP	THEME	REFERENCE (PAGE)/ DIRECT ANSWER
ACC 62	Patient Care	SUS service	Page 61.
ACC 63	Education	Employability Promotion Grants	Page 89.
ACC 64	Institutional	Result of the institutional NPS in the year	Page 53.
ACC 65	Institutional	Number of meetings and attendance of members of the Board of Trustees	Page 34.
ACC 66	Education	Completed scientific registrations	Page 68.
ACC 67	Patient Care	Waiting time in relation to arrival at reception and service	Page 53.
ACC 68	Education	Training course for leaders	Page 77.
ACC 69	Institutional	Mitigation of climate change	Page 92.
ACC 70	Institutional	Actions related to SDG 18	Page 83.
ACC 71	Institutional	Contingencies in risk situations	Page 43.
ACC-2025-CR	Institutional	2025: Achieve a minimum satisfaction rate of 90 points among patients treated at the breast, urological, skin and head and neck tumor Centers of Excellence	Pages 16 and 25.
ACC-2025-CS	Institutional	2025: Positively impact 500,000 lives per year.	Pages 16 and 25.
ACC-2025-CF	Institutional	2025: Ensure that 20% of total EBIT be directed to RISE - Reserve for Social Impact and Evolution, in the period from 2023 to 2025.	Pages 16, 25 and 101.
ACC-2025-CM	Institutional	2025: Provision of self-service digital channels for patients, aimed at increasing service capacity, agility, and assertiveness in their interactions with A.C.Camargo	Pages 16 and 25.
ACC-2025-CN	Institutional	2025: Expand the measurement of the greenhouse gas (GHG) emissions generated in our value chain (Scope 3 – Other Indirect Emissions).	Page 16.
ACC-2025-CH	Institutional	2025: Have a diverse and inclusive senior management to promote a plural approach to institutional culture and decision-making, considering aspects such as age range, gender, color, inclusion of people with disabilities and LGBTQIAP+.	Pages 16 and 25.
ACC-2025-CI	Institutional	To be among the top five private institutions in oncology in the SCImago Institutions Rankings (SIR).	Page 16.

SDG Map - UN



Page 70.



Pages 3, 22 and 92.



Pages 3, 22, 46, 70 and 98.



Pages 3, 46 and 70.



Pages 22, 70 and 92.



Pages 3, 22 and 92.



Pages 3, 22 and 92.



Page 3.



Pages 3, 22 and 98.



Pages 3, 22 and 70.



Pages 3 and 70.



Pages 3, 22, 46 and 92.



Pages 3, 22 and 92.



Page 92.



Pages 3, 32 and 70.



Pages 3, 22, 46, 70, 92 and 98.



Pages 22 and 70.

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Independent auditors' limited assurance report

(This is a free translation of the original report issued in Portuguese)

To the Management Board

Fundação Antônio Prudente

São Paulo - SP

Limited assurance report on the Environmental, Social and Governance (ESG) information included in Fundação Antônio Prudente's 2025 Integrated Annual Report for the year ended December 31, 2025

Conclusion

We have performed a limited assurance engagement on whether the Environmental, Social and Governance (ESG) information included in the 2025 Integrated Annual Report ("Report") of Fundação Antônio Prudente ("Foundation") for the year ended December 31, 2025, prepared based on the guidance of the *Global Reporting Initiative (GRI) – GRI Standards*, in accordance with *Sustainability Accounting Standards Board (SASB)*, and with guidance issued by CPC 09 – Integrated Reporting (which is related to the *Conceptual Framework Basic Integrated Reporting*, prepared by the *International Integrated Reporting Council – IIRC*) and the Indicators of Institutional Commitments defined: (i) number of Lives Impacted at the National level; (ii) patient satisfaction index in their oncology journey in strategic CRs; (iii) fostering plural thinking in leadership for diversity in decision-making; (iv) agility and excellence in the patient's journey; (v) positive and pioneering impact on national oncology; (vi) own resources allocated to enhance social impact, and (vii) fight against climate change ("Criteria").

According to the procedures applied and the evidence obtained, we are not aware of any fact that leads us to believe that the Environmental, Social and Governance (ESG) information included in the 2025 Integrated Annual Report of Fundação Antônio Prudente for the year ended December 31, 2025 was not prepared, in all material respects, based on the guidance of the *Global Reporting Initiative (GRI) – GRI Standards*, in accordance with *Sustainability Accounting Standards Board (SASB)*, with Guidance CPC 09 – Integrated Reporting (which is correlated with the *Basic Conceptual Framework of Integrated Reporting*, prepared by the *International Integrated Reporting Council – IIRC*) and the Indicators of Institutional Commitments defined: (i) number of Lives Impacted at the National level; (ii) patient satisfaction index in their oncology journey in strategic CRs; (iii)

Limited Assurance Report



fostering plural thinking in leadership for diversity in decision-making; (iv) agility and excellence in the patient's journey; (v) positive and pioneering impact on national oncology; (vi) own resources aimed at enhancing social impact, and (vii) combating climate change.

Our conclusion on the Environmental, Social and Governance information contained in the Foundation's 2025 Integrated Annual Report does not extend to any other information, including, links and images and messages from the Foundation's responsible that it accompanies and contains in the Report.

Basis for conclusion

We conducted our engagement in accordance with NBC TO 3000 (revised) - Assurance Engagements Other Than Audits or Reviews and *International Standard on Assurance Engagements (ISAE) 3000 (Revised)*, *Assurance Engagements Other Than Audits or Reviews of Historical Financial Information* issued by the Federal Association of Accountants (CFC) and the *International Auditing and Assurance Standards Board (IAASB)* respectively. Our responsibilities under those standards are further described in the "Our Responsibilities" section of the report.

We have met the independence and other ethical requirements of the Accountant's Professional Code of Ethics and professional standards (including independence standards) issued by the Federal Association of Accountants (CFC) based on the fundamental principles of integrity, objectivity, professional competence and due care, confidentiality and professional behavior.

Our firm applies NBC PA 01 Quality Management for Independent Auditors' Firms (Legal Entities and Individuals) and *International Standard on Quality Management (ISQM) 1, Quality Management for Firms that Perform Audits or Reviews of Financial Statements, or Other Assurance or Related Services Engagements*, issued by CFC and IAASB, respectively. These standards require the firm to design, implement and operate a quality management system, including policies or procedures related to compliance with ethical requirements, professional standards and applicable legal and regulatory requirements.

We believe that the evidence we have obtained is sufficient and appropriate to provide a basis for our conclusion.

Responsibilities of the Foundation's management for the 2025 Integrated Annual Report

The Foundation's Administration is responsible for:

- designing, implementing and maintaining internal controls relevant for the preparation of the information included in the Report that are free from material misstatement, whether due to fraud or error;
- selecting the Criteria as being appropriate for the preparation of the information included in the Report and the appropriate reference to the Criteria used or a description of those Criteria; and
- preparation and proper presentation of the information included in the Report according to the Criteria.

Limited Assurance Report



Our Responsibilities

We are responsible for:

- plan and carry out the engagement to obtain limited assurance about whether the Report is free from material misstatement, whether due to fraud or error;
- form an independent conclusion, according to the procedures applied and the evidence obtained; and
- report our conclusion to the Management Board.

Summary of the work we carried out to support our conclusion

We exercised professional judgment and maintained professional skepticism throughout the engagement. We have designed and performed our procedures to obtain sufficient and appropriate evidence about the Report that provides a basis for our conclusion. Our selected procedures depend on our understanding of the Report and other circumstances of the engagement, and on our consideration of the areas in which material misstatements are likely. When carrying out the work, we perform the following procedures:

- a. we have planned our engagement considering the relevance, the amount of quantitative and qualitative information and the operational systems and internal controls which supported the preparation of the information included in this Report;
- b. We obtained an understanding of the calculation method and the procedures followed to compile indicators by inquiring about and interviewing the managers in charge of preparing the information;
- c. we applied analytical procedures to quantitative information and inquiries about qualitative information and its relation with the indicators disclosed in the information included in the Report; And
- d. we evaluated the procedures followed to prepare the Report and its structure and contents in accordance with the criteria.

The procedures applied in a limited assurance engagement vary in nature and timing, and their extent is restricted (less extensive) than in a reasonable assurance engagement. Thus, the level of assurance obtained from a limited assurance engagement is substantially lower than the assurance that would have been obtained if a reasonable assurance engagement had been performed.

São Paulo, May 28, 2026.

KPMG Auditores Independentes Ltda.
CRC 2SP-014428/O-6

ORIGINAL REPORT IN PORTUGUESE SIGNED BY
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This report was prepared with the contribution
and commitment of A.C.Camargo's
professionals. We thank you for your work and
dedicate this publication to each one of you.

EDITORIAL PROJECT, GRAPHIC DESIGN, DOUBLE MATERIALITY AND BUSINESS MODEL

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Translation

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Knowledge that transforms oncology and expands frontiers