

PREOPERATIVE DIAGNOSIS:, Suspicious microcalcifications, left breast.,POSTOPERATIVE DIAGNOSIS:, Suspicious microcalcifications, left breast.,PROCEDURE PERFORMED:, Needle-localized excisional biopsy, left breast.,ANESTHESIA:, Local with sedation.,SPECIMEN: ,Left breast with specimen mammogram.,COMPLICATIONS:, None.,HISTORY: , The patient is a 71-year-old black female who had a routine mammogram, which demonstrated suspicious microcalcifications in the left breast. She had no palpable mass on physical exam. She does have significant family history with two daughters having breast cancer. The patient also has a history of colon cancer. A surgical biopsy was recommended and she was scheduled electively.,PROCEDURE:, After proper informed consent was obtained, she was placed in the operative suite. This occurred after undergoing preoperative needle localization. She was placed in the operating room in the supine position. She was given sedation by the Anesthesia Department. The left breast was prepped and draped in the usual sterile fashion. The skin was infiltrated with local and a curvilinear incision was made in the left lower outer quadrant. The breast tissue was grasped with Allis clamps and a core of tissue was removed around the localization wire. There were some fibrocystic changes noted. The specimen was then completely removed and was sent to Radiology for mammogram. The calcifications were seen in specimen per Dr. X. Meticulous hemostasis was achieved with electrocautery. The area was

irrigated and suctioned.,The aspirant was clear. The skin was then reapproximated using #4-0 undyed Vicryl in a running subcuticular fashion. Steri-Strips and sterile dressing on the patient's bra were applied. The patient tolerated the procedure well and was transferred to recovery room in stable condition.