

Patient Lumpectomy Discharge

Patient Information:



Name: Claire Thompson



Age: 52



Gender: Female



Date of Birth: May 12, 1972



Address: 123 Oak Street, Springfield, IL



Contact Number: (555) 123-4567



Insurance Provider: BlueCross BlueShield

Medical History:



Hypertension



Family history of breast cancer (mother diagnosed at age 60)



No history of tobacco or alcohol use



Regular mammogram screenings every two years

Presenting Complaint: Claire Thompson presented to the clinic with a lump in her right breast that she noticed two months ago. She reports occasional mild discomfort in the area but no other symptoms. She denies any recent weight loss, fever, or nipple discharge.

Physical Examination:



Vital Signs: Stable



Breast Examination: A 3 cm firm, non-tender lump palpated in the upper outer quadrant of the right breast. No axillary lymphadenopathy detected.

Diagnostic Workup:

1. Mammography: Revealed a suspicious mass in the right breast, BI-RADS category 4.

2. Breast Ultrasound: Confirmed a solid mass with irregular borders in the same location.

3. Core Needle Biopsy: Histopathological examination confirmed invasive ductal carcinoma, estrogen receptor-positive, HER2-negative.

Diagnosis:

1. Primary Diagnosis: Invasive Ductal Carcinoma, Stage II

2. Differential Diagnosis: Fibroadenoma, Phyllodes Tumor

Treatment Plan:

1. Surgery: Scheduled for a right breast lumpectomy with sentinel lymph node biopsy.

2. Adjuvant Therapy:



Chemotherapy: TAC regimen (docetaxel, doxorubicin, cyclophosphamide) for 6 cycles.



Radiation Therapy: External beam radiation to the right breast

post-surgery.

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Hormonal Therapy: Tamoxifen 20 mg daily for 5 years.

Hospitalization Summary: Claire Thompson underwent a successful right breast lumpectomy with sentinel lymph node biopsy without complications. Post-operative recovery was uneventful, and she was discharged home on postoperative day 1 with instructions for wound care and pain management.

Medications on Discharge:

1. Acetaminophen 500 mg, take 1-2 tablets every 6 hours as needed for pain.
2. Oxycodone 5 mg, take 1 tablet every 4-6 hours as needed for severe pain.
3. Calcium carbonate 500 mg with vitamin D, take 1 tablet daily.
4. Ondansetron 4 mg, take 1 tablet every 8 hours as needed for nausea.

Follow-up Plan:

1. Surgical Follow-up: Weekly wound check for the first month post-surgery, then monthly for the next 3 months.
2. Medical Oncology Follow-up: Start chemotherapy within two weeks post-surgery.
3. Radiation Oncology Follow-up: Begin radiation therapy within four weeks post-surgery.
4. Regular Clinical Follow-up: Every 3 months for the first year, then every 6 months thereafter for clinical examination and surveillance mammography.