

등록번호 : 11206154 성명 : 이영희 성별/나이 : 여/67세 생년월일 : 1957-12-11

외래초진 작성과: 산부인과 (2025-07-09)

Chief Complaint

1. cyst, ovary

Present Illness

유방암으로 본원 f.u 하는 환자로, 복강 내 mass 소견으로 내원함.

'24.8.30 APCT>

No remarkable change of following findings:

- probably small hepatic cyst in S6, and parenchymal calcification in S7.
- multiple uterine myomas.
- parenchymal calcifications in spleen.

No significant ascites.

Otherwise, unremarkable in the abdomen and pelvis.

최근 복부 팽만감 있었음.

최근 출혈은 없었음.

통증 사정 (통증 점수 1점 이상이면 위치, 양상, 기간, 빈도 기입)

현재 통증 정도 무

기능평가

거동 독립적

Past History

Last Pap 유 '25.07

HPV vaccination Hx 무

Last GY USG 유 '25.07

DM 무

HT 무

Thyroid diseases 무

Heart diseases 무

Tb 무

Hepatitis 무

Allergic disease 무

Medication history 무

Operation history 유

유

'15 유방암수술

Obstetric History

결혼 상태

미혼

Coitus 유

Para

임신 횟수 0

피임방법 무

Menstruation history

Menopause 유

Physical Examination

첨부한 사본은 의무기록 원본과 같음을 증명합니다.

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특이사항 없음

Assessment

Endometrium pathology

- r/o malig.

Myoma of uterus

Care Plan

1. TVS
2. p. em bx
3. 7/18 금 DCB rec.

작성자 김보라 김보라



등록번호 : 11206154 성명 : 이영희 성별/나이 : 여/67세 생년월일 : 1957-12-11

외래경과 작성과: 산부인과 (2025-07-18)

소견 및 계획

Subjective information

UMr single+

'15 유방암수술

Objective information

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Vital Signs

BP : 90 / 56 mmHg PR : 59 /min RR : 20 /min BT: 36.7 °C

Ht : 154 cm

Assessment

Endometrium pathology

- r/o malig.

Myoma of uterus

Plan

7/18 금 DCB done

작성자 김보라 김보라

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외래경과 작성과: 산부인과 (2025-07-29)

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Uterine endometrium, dilatation, curettage and biopsy:

Two tiny fragments of atypical glandular lesion with extensive bloody materials

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Plan

1. pathology 확인
2. baseline study rec.> 8/3 adm (2pm 부터 NPO 교육)
premedi lab, APCT, CCT, MRI, 결과보고 PET 여부 고려 등

작성자 김보라 김보라

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외래경과 작성과: 산부인과 (2025-08-12)

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'25.8.3 APCT/MRI>

- C/W Endometrial carcinoma

- Bilateral ovarian tumors, primary or metastatic

- Large amount of ascites (+), probably peritoneal seeding

'25.8.3 chest CT>

Compared to 2024-08-30 CT

S/P left MRM

1. No evidence of metastasis in the thorax

Otherwise are not remarkable in the thorax.

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'25.8.5 PET>

Focal hypermetabolic mass in uterus

- suggestive of malignancy

Focal hypermetabolic mass in rectovaginal pouch

- suggestive of metastasis

Hypermetabolic LNs in the left iliac, both common iliac, and left paraaortic area

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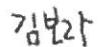
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Endometrium cancer IIIC2, carcinoma

Myoma of uterus

Plan

1. baseline study 결과 확인
2. op rec.> Em ca stagine op rec. (TAH BSO BPLND PALND) - 8/21?

작성자 김보라 



등록번호 : 11206154 성명 : 이영희 성별/나이 : 여/67세 생년월일 : 1957-12-11

외래경과 작성과: 산부인과 (2025-08-19)

소견 및 계획

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Endometrium cancer IIIC2, carcinoma

Myoma of uterus

Plan

1. 전화 안내 op rec.> Em ca stagine op rec. (TAH BSO BPLND PALND) - 8/21

작성자 김보라 김보라



등록번호 : 11206154 성명 : 이영희 성별/나이 : 여/67세 생년월일 : 1957-12-11

외래경과 작성과: 부인종양OG (2025-09-05)

소견 및 계획

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UMr single+

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sx - ok

wd - ok

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'25.8.21 s/p TAH BSO BPLND PALND (L3) pOM' Adh (midline)>

1. ENDOMETROID CARCINOMA, FIGO histologic grade 2

- Tumor size: 6.9 x 4.2cm
- Depth of myometrial Invasion: 26mm
(26mm out of 28mm entire uterine wall thickness)
- Uterine serosa involvement: absent
- Involves adnexa (direct extension or metastasis) (pT3a)
- Lymphovascular invasion: present, extensive
- Lymph nodes: metastasis in 41 out of 42 lymph nodes (pN2)
("Rt pelvic LN", 3/3; "Lt pelvic LN", 19/19; "Rt common LN", 4/5;
"Lt common LN", 1/1; "Presacral LN", 2/2; "Rt PALN", 9/9; "Lt PALN", 3/3)
(the largest size of the metastasis: 32mm)
(extranodal extension: absent)
- Negative exocervical resection margin

2. Cervix: Leiomyoma

3. Myometrium: Leiomyomas, multiple

4. Ovary, right: Involvement of ENDOMETROID CARCINOMA

5. Salpinx, right: No tumor present

6. Ovary, left: Involvement of ENDOMETROID CARCINOMA

7. Salpinx, left: Involvement of ENDOMETROID CARCINOMA

4) Specimen labelled as "Rt. paracolic gutter", excision:

No tumor present

5) Specimen labelled as "Lt. paracolic gutter", excision:

No tumor present

6) Specimen labelled as "Lt. uterosacral lig.", excision:

Involvement of ENDOMETROID CARCINOMA

7) Omentum, partial omentectomy:

No tumor present

Vital Signs

BP : 90 56 mmHg PR : 59 /min RR : 20 /min BT: 36.7 °C

Ht : 154 cm

Assessment

Endometrium ca IIIC2, ENDOMETROID, grade 2, MMR (pendign..)

- '25.8.21 s/p TAH BSO BPLND PALND (L3) pOM' Adh (midline)

--> bilat. Ov inv+, PALN+, Lt. uterosacral lig.+ ==> R0

- '25.9.1. s/p lymphangiograph & embolization

Myoma of uterus

Plan

1. pathology 결과 확인

2. 추후 MMR 결과 확인 필요

-> 일주일뒤 내원하여 결과 보고 항암 종류 상의

TC-Jemp?

작성자 김보라 김보라

등록번호 : 11206154 성명 : 이영희 성별/나이 : 여/67세 생년월일 : 1957-12-11

외래경과 작성과: 부인종양OG (2025-09-12)

소견 및 계획

Subjective information

UMr single+

'15 유방암수술

Objective information

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'25.8.3 APCT/MRI>

- C/W Endometrial carcinoma

- Bilateral ovarian tumors, primary or mestastatic

- Large amount of ascites (+), probably peritoneal seeding

'25.8.3 chest CT>

Compared to 2024-08-30 CT

S/P left MRM

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Otherwise are not remarkable in the thorax.

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Focal hypermetabolic mass in uterus

- suggestive of malignancy

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Hypermetabolic LNs in the left iliac, both common iliac, and left paraaortic area

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Large amount of ascites with mild hypermetabolic peritoneal thickening

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sx - ok

wd - ok

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'25.8.21 s/p TAH BSO BPLND PALND (L3) pOM' Adh (midline)>

1. ENDOMETROIDIC CARCINOMA, FIGO histologic grade 2

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- Negative exocervical resection margin

2. Cervix: Leiomyoma

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4. Ovary, right: Involvement of ENDOMETROIDIC CARCINOMA

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No tumor present

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Involvement of ENDOMETROIDIC CARCINOMA

7) Omentum, partial omentectomy:

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Vital Signs

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Ht : 154 cm

Assessment

Endometrium ca IIIC2, ENDOMETROID, grade 2, MMRp

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--> bilat. Ov inv+, PALN+, Lt. uterosacral lig.+ ==> R0

- '25.9.1. s/p lymphangiograph & embolization

Myoma of uterus

Plan

1. 추후 MMR 결과 확인 필요

2. 9/14 Adm for 1st chemo

TC-Jemp? (보 100) or TC - 고민해보시고 입원하셔 알려주시기로

작성자 김보라 김보라

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외래경과 작성과: 부인종양OG (2025-09-23)

소견 및 계획

Subjective information

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- (20250916) 1st TC-Jemperli (보100) chemotherapy

Myoma of uterus

Hypothyroidism on med (ME Pf.O이혜진 f/u)

Plan

1. cbc check - ok
2. 1wL f/u for CBC
3. 10/6 adm for 2nd CTx

작성자 김보라 김보라

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외래경과 작성과: 부인종양OG (2025-09-30)

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'24.8.30 APCT>

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- probably small hepatic cyst in S6, and parenchymal calcification in S7.
- multiple uterine myomas.
- parenchymal calcifications in spleen.

No significant ascites.

Otherwise, unremarkable in the abdomen and pelvis.

최근 복부 팽만감 있었음.

최근 출혈은 없었음.

'25.7.18 DCB>

Uterine endometrium, dilatation, curettage and biopsy:

Two tiny fragments of atypical glandular lesion with extensive bloody materials

Note) Carcinoma is suspected.

'25.8.3 APCT/MRI>

- C/W Endometrial carcinoma

- Bilateral ovarian tumors, primary or mestastatic

- Large amount of ascites (+), probably peritoneal seeding

'25.8.3 chest CT>

Compared to 2024-08-30 CT

S/P left MRM

1. No evidence of metastasis in the thorax

Otherwise are not remarkable in the thorax.

2. Upper abdomen ; newly developed large ascites, please refer to abdominal CT report.

'25.8.5 PET>

Focal hypermetabolic mass in uterus

- suggestive of malignancy

Focal hypermetabolic mass in rectovaginal pouch

- suggestive of metastasis

Hypermetabolic LNs in the left iliac, both common iliac, and left paraaortic area

- r/o metastasis

Large amount of ascites with mild hypermetabolic peritoneal thickening

- probably peritoneal seeding

sx - ok

wd - ok

등록번호 : 11206154 성명 : 이영희 성별/나이 : 여/67세 생년월일 : 1957-12-11

'25.8.21 s/p TAH BSO BPLND PALND (L3) pOM' Adh (midline)>

1. ENDOMETROID CARCINOMA, FIGO histologic grade 2

- Tumor size: 6.9 x 4.2cm
- Depth of myometrial Invasion: 26mm
(26mm out of 28mm entire uterine wall thickness)
- Uterine serosa involvement: absent
- Involves adnexa (direct extension or metastasis) (pT3a)
- Lymphovascular invasion: present, extensive
- Lymph nodes: metastasis in 41 out of 42 lymph nodes (pN2)
("Rt pelvic LN", 3/3; "Lt pelvic LN", 19/19; "Rt common LN", 4/5;
"Lt common LN", 1/1; "Presacral LN", 2/2; "Rt PALN", 9/9; "Lt PALN", 3/3)
(the largest size of the metastasis: 32mm)
(extranodal extension: absent)
- Negative exocervical resection margin

2. Cervix: Leiomyoma

3. Myometrium: Leiomyomas, multiple

4. Ovary, right: Involvement of ENDOMETROID CARCINOMA

5. Salpinx, right: No tumor present

6. Ovary, left: Involvement of ENDOMETROID CARCINOMA

7. Salpinx, left: Involvement of ENDOMETROID CARCINOMA

4) Specimen labelled as "Rt. paracolic gutter", excision:

No tumor present

5) Specimen labelled as "Lt. paracolic gutter", excision:

No tumor present

6) Specimen labelled as "Lt. uterosacral lig.", excision:

Involvement of ENDOMETROID CARCINOMA

7) Omentum, partial omentectomy:

No tumor present

Vital Signs

BP : 90 56 mmHg PR : 59 /min RR : 20 /min BT: 36.7 °C

Ht : 154 cm

Assessment

Endometrium ca IIIC2, ENDOMETROID, grade 2, MMRp

- '25.8.21 s/p TAH BSO BPLND PALND (L3) pOM' Adh (midline)

--> bilat. Ov inv+, PALN+, Lt. uterosacral lig.+ ==> R0

- '25.9.1. s/p lymphangiograph & embolization

- (20250916) 1st TC-Jemperli (보100) chemotherapy

Myoma of uterus

Hypothyroidism on med (ME Pf.이혜진 f/u)

Plan

1. cbc check - ok
2. 1wL f/u for CBC
3. 10/6 adm for 2nd CTx

작성자 김보라 김보라

등록번호 : 11206154 성명 : 이영희 성별/나이 : 여/67세 생년월일 : 1957-12-11

외래경과 작성과: 부인종양OG (2025-10-14)

소견 및 계획

Subjective information

오른쪽 팔목 경결?

UMr single+

'15 유방암수술

Objective information

유방암으로 본원 f.u 하는 환자로, 복강 내 mass 소견으로 내원함.

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- r/o metastasis

Large amount of ascites with mild hypermetabolic peritoneal thickening

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sx - ok

wd - ok

첨부한 사본은 의무기록 원본과 같음을 증명합니다.

등록번호 : 11206154 성명 : 이영희 성별/나이 : 여/67세 생년월일 : 1957-12-11

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- (20251007) 2nd TC-Jemperli chemotherapy

Myoma of uterus

Hypothyroidism on med (ME Pf.이혜진 f/u)

Plan

1. cbc check - ok
2. 1wL f/u for CBC, 루치온 주사 원함
3. 10/28 adm for 3rd CTx

작성자 김보라 김보라