

#### DISCHARGE SUMMARY

| Name            | Mrs. B. CHANDRA LEKHA                                     | R.T. NO: GB311/23 |
|-----------------|---|-------------------|
| Age: 28 years   | Sex: Female.  | M.R.NO: B2477     |
| Consultant:     | Dr. N. Madhavi MD, DNB                                    | D.O.A: 10/04/2023 |
| Final Diagnosis | Malignant Phyllodes Tumor B/L Breast (PO) for Adjuvant RT | D.O.D: 04/05/2023 |

<u>Case History in Brief</u>: Mrs. B. Chandra Lekha, a 28 years old female presented with complaints of increase in B/L breast lump since one month.

MRI Breast (11.03.23): Multiple lobulated lesions with thin wall and progressive persistent enhancement in both breast (Lt>Rt) – BIRADS III / IVA.

Mild perilesional inflammation changes in both breastss (Lt>Rt).

WLE + Frozen of B/L breast lumps on 23.03.23.

### HPE (23.03.23):

Histology - Phyllodes Tumor malignant.

Stromal cellularity - marked diffuse cellular.

Stromal Atypia - Moderate.

Mitosis - Focally increased 1-12/10 HPE

Necrosis – identified focally.

Margins of Tumor – infiltrative.

Resected margins - Right breast free of tumor.

Resected margins left breast including re-excised 6 O'clock (D), 9 O'clock (E) and deep margins (F) – Free of tumor.

Right breast lump - shows fibrosis and benign acini and ducts.

# **PET-CT (05.04.23):** Is negative for metabolically active disease.

Non avid small soft tissue density lesions in lower inner and upper outer quadrants of right breast, largest measuring 8mm.

Few non avid soft tissue density lesions in upper outer, central and inner lower quadrants of left breast, largest measuring 13x10mm.

Treatment Given: After discussion with patient and relatives about the nature of the disease. Patient was started on IMRT based technology to B/L breasts. Immobilization done in supine position using thermoplastic mould. Planning CT scan obtained. RT planning done on Ethos AI planning system and requisite target coverage and OAR constraints achieved. Set up verification and correction done after Cone Beam CT scan on treatment couch. A total dose of 5005cGy/19F/250cGy per day along with boost was given over a period of 4 weeks from 10/04/2023 to 04/05/2023. Patient is comfortable. Patient tolerated the treatment well.



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Condition on Discharge: Stable

# Discharge Advise:

- 1. Tab. Pantodac 40mg once daily 30 minutes before breakfast x 15 days.
- 2. Tab. Zofer 8 mg thrice daily in case of nausea/vomiting SOS.
- 3. Tab. Ultracet twice daily in case of pain SOS.
- 4. Tab. Oncovit Plus once daily after food x 1 month.
- 5. Tab. CAL-MD3 500 mg once daily after food x 1 month.
  - 6. Emolene Cream for local application over skin over treated area.
  - 7. Pentasure HP protein powder 4-5 scoops in a glass of milk or water 3-4 times a day x 1 month.
- **8.** Syp. Aristozyme 10 ml twice daily for 1 month.
- Dr. N. MADHAVI 9. Tab. Allegra (120mg) once daily x 5 days.

Dright ONB MAMS 10. Review after 1 month for follow up.

Sr. Consultant Radiation Oncologist Sr. Consulta Regd No. 61085 ologist

Regallant Consultant

Registrar

D.M.O



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