Breast Lump history

Patient profile

Name, Age, occupation (workers with radiation exposure), **Marital status**, time of Admission (OPC or ER)

Chief Complaint with duration

Usually breast lump for X duration

HPI

Socrates

Site

Ask about the location of the breast lump:

- "Where is the breast lump?" Right, left, bilateral, and in which quadrant
- "Can you point to where the breast lump is?"

Onset:

Clarify when the breast lump developed:

- "When did you first noticed the breast lump?"
- "How long have you been aware of the breast lump?

Character

Ask about the specific characteristics of the breast lump:

- "Does the breast lump feel soft or hard?"
- "Does the breast lump feel smooth or irregular?"
- "Is the breast lump painful?"

Radiation

If pain is associated with the breast lump, ask if this radiates:

• "Does the pain from the lump move anywhere else?"

Time course

first presentation?

Multiplicity: Are there any other masses? Persistence: Does it ever disappear?

Clarify how the breast lump has changed over time:

- "Has the breast lump changed in size or the way it feels over time? Has it become more painful?"
- "Over what time period has the change occurred?" Cancer is faster in progression than benign causes
 - "Is the lump's size or discomfort related to the menstrual cycle in any way?"

Exacerbating or relieving factors

Ask if anything appears to have triggered the onset of a breast lump:

• "Did the breast lump develop after a specific incident, such as breast trauma?"

If breast lump pain is present, ask if anything makes it worse or better:

- "Does anything seem to trigger the pain?"
- "Does anything improve the pain?"

Severity

Assess the severity of any associated pain by asking the patient to grade it on a scale of 0-10:

• "On a scale of 0-10, how severe is the pain, if 0 is no pain and 10 is the worst pain you've ever experienced?"

Associated symptoms

Ask if there are other symptoms which are associated with the breast lump:

- Nipple discharge (unilateral, or bilateral | | spontaneous or induced | | Nature(blood, milk, greenish Or serous)|| lactating or not
 - Nipple inversion
 - Areola: changes in shape, color, skin, thickness, discharge, ulcers
 - Erythema, ulceration, dilated veins
 - Dimpling (peau d'orange)
 - Fever, night sweats, arm or axillary swelling
 - Non intentional Weight loss & Anorexia
 - Malaise & fatigue
 - Painless > painful Lymphadenopathy: typically involving the lymph nodes of the axilla and neck

Symptoms of Metastasis:

For Lung: cough with hemoptysis, SOB

For brain: New headache, awaken her from sleep z^z, usually the worst headache in her life, mainly in the morning, with projectile vomiting, imbalance, changes depend on location

For bone: new onset **localized** pain (Axial bones, ribs, iliac bones >> long bones ?),

compressed farctures

For liver : RUQ pain , jaundice, Ascites (بطنك نافخ زي القربة) , bleeding tendency



Systemic review

Risk factors



Age during first pregnancy?

No. of children and miscarriage? And the time between each pregnancy

How many of your children did you breastfeed?

Weight? (obesity is a risk factor) & Physical inactivity

Radiation therapy: therapeutic treatment or workers

Menstrual cycle:

Duration: early menarche and late menopause **Menstrual pattern?** - Regular vs. Irregular

Quantity of bleeding during menses

Are the symptoms altered with menses?

Past Medical History

DM, HTN

Previous breast, ovarian cancer, uterine cancer or any type of cancer?

Previous Hx of a breast mass (even if it benign)?

Previous chemo or radiotherapy?

Previous repetitive biopsies

Past Surgical History

Family history

Related cancers you should ask about;

Prostate cancer, uterine cancer, ovarian cancer, pancreatic cancer, breast cancer, colon cancer, thyroid cancer

Who ? {Ask about first degree relatives (mother, daughters, sisters) and second degree} **At any age** he/she was diagnosed with cancer ? **No of cancer pt**

Drug history

Oral Contraceptive Pills, Hormonal Replacement Therapy, IVF

Social history

Smoking, Alcohol

Investigations and Imaging

Imaging:

-Mammogram : > 30 y Shows micro-calcification

-US : < 30 y

Differentiates solid from cystic masses

-Breast MRI

Biopsy:

FNA

CNB *

Surgical excisional biopsy

For metastasis:

- -Bone, brain CT, LFT, CXR, PET scan
- -CBC with differential and platelets count
- -Chemistry and renal function study
- -Tumor markers CA15.3 >> for future follow up

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