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Patient: 73-year-old female

Diagnosis: Atypical ductal hyperplasia

Procedure: Localization of multiple sites in the left breast

Challenge: SCOUT® localized surgery delayed due to cardiac clearance

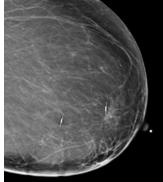
Patient History

The patient is a 76 year old female who had indeterminant calcifications identified on a screening mammogram which warranted biopsy. She has a personal history of lung cancer s/p chemotherapy and XRT asthma/COPD and HTN.

She had a screening mammogram followed by additional views in March 2016. A stereotactic core biopsy was subsequently performed yielding ADH. Localization and excision was recommended but not performed.

The patient returned in September 2016 and had a unilateral follow up mammogram. In view of the atypia it was determined that in addition to excision of the biopsied lesion, another faint group should be localized as well.





10/2016 Post-placement mammography images

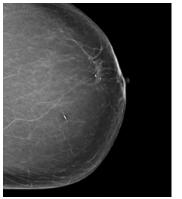
Localization

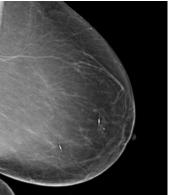
In preparation for surgery, the patient had two SCOUT reflectors placed in October 2016. One reflector was placed in the retroareolar region at the site of the STCB yielding ADH with residual calcifications and a top hat shaped clip. The second reflector was placed to sample faint calcifications in the LIQ. Post-localization radiographs confirmed positioning.

Long-Term Reflector Placement

In the days following the localization procedure, the anesthesiologist cancelled surgery, requiring cardiac clearance. Her course was complicated by COPD/Chronic lung disease with episodes of shortness of breath resulting in visits to the ER.

She returned in February 2017 for mammographic imaging, which demonstrated that the reflectors remained accurately positioned. She was still not cleared by her cardiologist, as a cardiac catheterization was recommended.





5/2017 Pre-surgery mammography images

Surgery

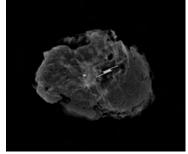
In May 2017, she returned to radiology for imaging, where it was confirmed that the reflectors had not moved and could be detected in both supine and erect positions. The following week, over 6 months since placement of the reflectors, the specimen was successfully retrieved. Two specimen X-rays, each submitted with a reflector and calcifications, demonstrated successful localization.

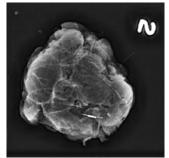
Pathology

Final path: Hyalinzed FA and fiboradenomatoid change.

Conclusion

The SCOUT reflectors did not move within the breast, created no untoward symptoms for the patient, and were easily detected more than 6 months after placement, allowing for long term placement.





5/2017 Specimen X-rays



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