

# Extract of the free record

## Gender

Female : Yes

## Past pregnancies

Has been pregnant and born a child : Yes

## Periods

Has periods : Yes

## Regularity

Periods are regular : Yes

## Menopausal

Premenopausal : Yes

## Comorbidity

Comorbidity does not preclude surgery : Yes

## Shoulder condition

No pre-existing shoulder condition : Yes

## Clinical assessment

Clinical conclusion: There IS cancer : Yes

## Mammographical assessment

Mammographical conclusion: There IS cancer : Yes

## Biopsy assessment

Biopsy conclusion: There IS cancer : Yes

## Diagnosis regarding breast cancer

There IS breast cancer : Yes

## Cancer type

IDC – Invasive Ductal Carcinoma : Yes

## Cancer place (click here to collapse/expand headings)

Ductal : Yes

## IDC type

Mucinous Carcinoma of the Breast : Yes

## Paget's disease

No Paget's disease : Yes

## Number of tumor centers

Unifocal : Yes

## Size of tumor

Below threshold for mastectomy : Yes

## Invasive cancer

Invasive breast cancer : Yes

Suspected early invasive breast cancer : Yes

## Margins for invasive cancer

The margins are clear - and a full removal is expected : Yes

## Tissue amount

Has tissue enough around the tumor : Yes

## Breast biopsy

Biopsy-proven invasive breast cancer : Yes

## Invasive cancer risk assessment

Palpable mass	: No
Extensive microcalcifications	: No
Considered to be at a high risk of invasive disease	: No

## The cancer's involvement of lymph node(s)

Lymph node-negative	: Yes
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## Cancer grade (given as estimate or derived from the Bloom Richardson numbers, if they are supplied)

Grade 1 (well differentiated)	: Yes
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## History preceding the diagnosis

You have a strong family history of or is genetically predisposed to breast cancer	: No
Test positive for certain genetic mutations like BRCA1 and BRCA2	: No
You have NOT had radiation therapy in the past	: Yes

## Situation regarding breast reconstruction

Significant comorbidity (of breast reconstruction)	: No
Need for adjuvant therapy may preclude breast reconstruction	: No

## Stage of cancer (according to BreastCancer.org)

IA	: Yes
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## Receptor status

Estrogen Receptor (ER) positive	: Yes
Hormone Receptor positive (either ER or PR)	: Yes
Human Epidermal growth factor Receptor 2 (HER2) is to be examined	: Yes
Human Epidermal growth factor Receptor 2 (HER2) positive	: Yes

## Oncotype DX test to be performed

Oncotype DX test to be carried out	: Yes
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## Oncotype DX test result

Recurrence Score greater than 31	: No
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Recurrence Score between 18 and 31	: No
Recurrence Score lower than 18	: Yes

## Assessment whether Trastuzumab is tolerated (input to assessment of heart function)

Heart function measurement: A left ventricular ejection fraction (LVEF) of 55% or less	: No
A history of documented congestive heart failure	: No
High-risk uncontrolled arrhythmias	: No
Angina pectoris requiring medication	: No
Clinically significant valvular disease	: No
Evidence of transmural infarction on electrocardiograph (ECG)	: No
Poorly controlled hypertension	: No

## Surgeries

Breast surgery	: Yes
Axilla surgery to remove involved lymph nodes	: No

## Breast surgeries

Breast conserving surgery (lumpectomy) recommended	: Yes
Breast conserving surgery (lumpectomy) chosen	: Yes

## Adjuvant therapy before surgery

Inflammatory cancer	: No
Fixed lymph nodes in same side axilla or underneath shoulder	: No
Lymph node metastases away from the shoulder region	: No
Involves skin or muscle	: No
Tumor diameter greater than or equal to 5 cm	: No
Adjuvant treatment necessary before surgery	: No
Adjuvant treatment necessary before surgery in flow	: No

## Adjuvant treatments recommended and chosen

Chemotherapy offered	: Yes
Chemotherapy chosen	: No
Radio therapy offered	: Yes
Radio therapy chosen	: Yes
Biologic therapy offered (Trastuzumab/Herceptin)	: Yes
Biologic therapy chosen (Trastuzumab/Herceptin)	: Yes
Hormone therapy offered (Tamoxifen or Aromatase Inhibitor)	: Yes

Hormone therapy chosen (Tamoxifen or Aromatase Inhibitor) : Yes  
Ovarian ablation/suppression offered : Yes

## Hormone: Ovarian suppression / ablation

Ovarian suppression / ablation is chosen : Yes

## Hormone: Tamoxifen

No tamoxifen treatment : Yes

## Hormone: Aromatase inhibitor

Aromatase inhibitor is tolerated and selected.  
[http://www.breastcancer.org/treatment/hormonal/aromatase\\_inhibitors](http://www.breastcancer.org/treatment/hormonal/aromatase_inhibitors) : Yes

## Hormone: Aromatase inhibitor

Letrozole (Femara or generic) : Yes

## Trastuzumab (Herceptin) tolerated

Yes : Yes

## Personal data (please note that much of it is not mandatory - but it may be useful if you want to inform your doctor / hospital)

Nationality (the country, where your passport is issued) : United States  
Date of birth (your age is important in several places in this solution) : 01-05-1966  
Age : 49.0704  
First name(s) [you don't have to give your name, this field is not mandatory] : Karina  
Last name [you don't have to give your name, this field is not mandatory] : Nielsen  
Country of residence : United States  
Primary language : English

## Height

Feet : 5  
Inches : 8

## Weight

Pounds : 180

## Citizen measurements - used to calculate medication dosage

Height in cm	: 172.72
Weight in kg	: 81.64656
Body surface area in m2 (DuBois)	: 1.9544
Body surface area in m2 (Mosteller)	: 1.97924
Use DuBois not Mosteller to calculate body surface	: Yes
Body surface area in m2 - using the selected formula. Used for medication dosage calculations	: 1.9544

## Medication in current use

The patient undergoes Anti Coagulant treatment (blood thinners) (important for the doctor to know)	: No
Daily use of acetyl salicyl acid (aspirin) (important for the doctor to know)	: No

## Comorbidity factors

Documented acute myocardial infarction (heart attack)	: No
The patient has a heart failure, requiring treatment of a heart disease, except hypertension	: No
Peripheral arterial disease	: No
Cerebrovascular disease	: No
Dementia	: No
Chronic Obstructive Pulmonary Disease (COPD) or asthma requiring treatment	: No
Connective tissue disease	: No
Ulcer disease requiring treatment	: No
Light liver disease	: No
Diabetes	: No
(Hemi-)paraplegia	: No
Moderate to severe renal (kidney) disease	: No
Other non metastatic malignant disease (solid tumors)	: No
Leukemia	: No
Malignant lymphoma or multiple myeloma	: No
Moderate or severe liver disease	: No
Other metastatic solid tumor	: No
AIDS	: No

## Comorbidity score

Sum of weights applicable	: 0
Maximum score allowed for surgery (must be set by the doctor)	: 8
Score above threshold allowed for surgery	: No
Date for assessing the comorbidity	: 25-05-2015

## Comorbidity score data

Comorbidity (age corrected value used by Adjuvant! Online) : Perfect Health

## Children

Number of pregnancies : 1  
Birth date of first child : 02-05-2000

## Periods

Date of last period : 01-05-2015  
Age when getting first period (years) : 12

## Family members having had breast cancer or ovarian cancer

No family member(s) has (have) had breast cancer or ovarian cancer - to my knowledge : Yes

## Smoking habits

Never smoked : Yes

## Cancer progression

Tumor diameter (in inches) : 0.2  
Tumor diameter (in mm) : 5.08  
Tumor involves a muscle : No  
Tumor involves skin : No  
Tumor involves chest wall : No  
T score (in the TMN classification) : T1b 5 - 10 mm

## Localization side (used for the surgery)

Left : Yes

## Localization within affected breast (used for the surgery)

Direction of tumor center from center of breast : 11 o'clock  
Distance of tumor center from center of breast (in inches) : 1  
Distance of tumor center from center of breast (in cm) : 2.54

## Localization within affected breast

Upper lateral (outwards)	: No
Upper medial (towards center of body)	: Yes
Lower lateral (outwards)	: No
Lower medial (towards center of body)	: No
Central	: No

## Histologic appearance: Bloom Richardson Grade

Supply the Bloom Richardson Grade numbers	: Yes
Tendency to form tubular structures (1, 2, or 3)	:
Nuclear size, shape, and staining intensity (1, 2, or 3)	:
Mitotic rate - Rate of cell division (1, 2, or 3)	:
BR Score (from 3 - 9)	: 0
Grade - from BR Score	: Grade 1: Low score

## Explanations regarding surgery and medication

You can have surgery right away (no medical, so-called Adjuvant, therapy before the surgery)	:
A breast conserving surgery is recommended (the so-called Lumpectomy, as opposed to Mastectomy where the whole of the breast is removed) - due to (1) the type of cancer, (2) its limited extent both (2a) absolutely (it is less than 4 cm which is a little less than 2") and (2b) relative to the surrounding breast, (3) the fact that you have no elevated family or genetic risk, (4) you haven't undergone radio therapy previously, (5) you are not pregnant, (6) the cancer is not multi focal (it has only one center), and (7) the cancer has clear margins. You must undergo radio therapy of the surgery place after surgery, if you choose this surgery where you do not remove the whole breast	:
You have a HER2 positive cancer, and it is invasive. In this case the Trastuzumab (Herceptin) medication is recommended, but only if you can cope with it (it has side effects affecting the heart funtion)	:
You have a hormone receptor positive cancer (grows more due to hormones), and you are pre-menopausal (so you produce these hormones). Then you can either use Tamoxifen to stop your hormones from making the cancer grow, or you can provoke the menopause (called ovarian ablation, which is either accomplished by use of medicine or by surgically stopping the ovaries) and use the aromatase inhibitor medicine, which is milder - if you can cope with this medicine	:
Chemo therapy is recommended, because of the following factor(s) [if the list is empty it is not recommended for a reason this solution recognizes - but it is ultimately the doctor's decision]:	:
Cancer is invasive, and you are pre-menopausal - then it tends to be more aggressive	:
The Oncotype DX test shows that you will NOT benefit from chemo therapy, but it is recommended for other reasons (see above) - check with the doctor if there is a good reason to propose the chemo therapy. Otherwise you may de-select it	:
You seem to be able to cope with Trastuzumab (Herceptin)	:

## Questions to ask the doctor after diagnosis (not necessary)

Where exactly is the cancer positioned?	: In my left breast,
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towards the center and a bit above

What are its characteristics?

It is well  
: defined, but  
invasive

Is the extension known?

: Yes

## Extracts and reports

Date of extraction

: 25-05-2015