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Case No. 12 - Diagnosis of a Stage III High Grade Right Breast Ductal Carcinoma in Right 1 Breast of a 35 year old woman who Palpated a Lump two years earlier.

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CASE NO. 12

DIAGNOSIS OF A STAGE III HIGH GRADE RIGHT BREAST DUCTAL
CARCINOMA IN RIGHT BREAST OF A 35 YEAR OLD WOMAN WHO
PALPATED A LUMP TWO YEARS EARLIER

Diane, age 30, went to her GYN's office (Dr. R) on January 6, 2000 for a routine visit. Diane was seen and examined by a nurse practitioner (NP) who palpated a small area of thickening in the RU quadrant and referred Diane to a radiology group for a sonogram performed on January 13, 2000. The radiologist, Dr. L read the sono as WNL and recommended follow-up.

Diane again went to Dr. R's office on July 28, 2000. A different NP palpated "something" at 10:00 location in RUQ and advised followup in 6 months and reevaluation earlier if any change was noted on self-exams.

Diane noted no change thereafter and waited until August 16, 2002 for another visit to Dr. R. A different NP noted cystic right breast especially at the 10:00 area. Diane was advised to have followup in 1 year.

On June 16, 2003, Diane was sent to the radiology group for sonograms, as she was now complaining of a lump in her right breast. At the radiology office, Dr. L's report stated there was no sonographic correlate to a pea sized palpable focus noted by the patient at 12 o'clock. Dr. L recommended follow-up right breast sono within 6 months and further management should be determined on a clinical basis, although right breast mammogram might be considered as well. The report was sent to Dr. R. Neither, Dr. L or Dr. R discussed these issues with one another or with Diane.

Diane returned to the radiology group on January 14, 2004 for follow-up. The sonogram was evaluated by Dr. W who reported a new cyst in the 11:00 position but again no correlate on sonogram for a lump in the right breast again reported.

Diane reported to Dr. R's office for GYN exams on January 31, 2004, May 7, 2004, September 14, 2004, and January 5, 2005. No comment is made concerning the lump in the right breast. A sonogram on February 21, 2005 now read by Dr. R reported new cysts at 11:00 interpreted as benign. No comment is made

concerning the lump in the right breast and no follow-up is discussed.

On March 10, 2005, Diane went to the E.R. of a municipal hospital with complaints about her right breast. Sonogram and mammogram were followed with excision of a palpable high grade ductal carcinoma with nodal spread classified as Stage III.

The radiologists and Dr. R never coordinated with one another or with Diane with regard to a persistent palpable lump in the right breast and the need to biopsy. There were no discussions concerning the use of MR and/or mammography, in addition to sonogram.