

BREAST CANCER SURGERY CHECKLIST (BREAST CANCER SYNOPTIC OPERATIVE REPORT TEMPLATE)

The Breast Cancer Surgery Checklist was developed through the Surgery Network’s Breast Surgical Tumour Group in collaboration with surgeons across BC and with medical and radiation oncologists. Information from the operative report will be extracted and collected by the Breast Cancer Outcomes Unit at BC Cancer. Dictating the information on this template will enable all relevant information to be captured reliably, accurately and consistently.

<p>INSTRUCTIONS</p> <p>There are two ways to dictate your operative report from this template:</p> <p>1. Summary Report</p> <ul style="list-style-type: none"> Consists of 18 essential data elements (#1-3; 6-9; 11-16; 18; 20; 22-23; 26) followed by your narrative report. Dictate all items marked in red as a list before your narrative report. Dictate “skip” for each item in blue. Specify element number, name and response (eg. 1. Indication: Primary Treatment). For patients undergoing operations for bilateral breast cancer, please dictate the 18 essential data elements for each side. <p>2. Complete Report</p> <ul style="list-style-type: none"> Consists of all 28 data elements and replaces the traditional narrative report. Dictate all items as a list. Specify the element number, name and response (eg. 1. Indication: Primary Treatment). For patients undergoing operations for bilateral breast cancer, please dictate all 28 data elements for each side. 	<p>SAMPLE OPERATIVE REPORT</p> <p>CLINICAL PREAMBLE: As appropriate</p> <ol style="list-style-type: none"> Indication: Primary treatment Preop Biopsy: Core by radiology Preop Diagnosis: Invasive carcinoma Preop Stage: 2cm tumour right breast with nodes clinically negative Neoadjuvant Therapy: None Breast Procedure: Partial mastectomy Indication for Total Mastectomy: Not applicable, BCS done Reconstruction: Not applicable, BCS done Localization: Wire localization Incision: Lateral to tumour at wire site Intraoperative Confirmation of Lesion Removal: Yes, Xray Clips Marking Site: Yes Specimen Orientation: Yes Additional Margin Tissue Taken: Yes, superior and medial Pectoral Fascia Removed: Yes Anterior Breast Tissue Remaining: No, skin remaining Additional Notes on Breast Procedure: No more medial tissue Axillary Procedure: SLNB Axillary Incision Location: Axillary skin crease incision Sentinel Node Technique: Technetium and blue dye Internal Mammary Radioactivity: No Number of Submitted Sentinel Nodes: 2 Indication for ALND: Not applicable, SLNB done Structures Identified and Preserved: Not applicable, SLNB done Additional Notes on Axillary Surgery: None Unplanned Events/Complications: None Drain: No Closure: Skin closure breast and axilla with subcuticular stitch <p>FOLLOW-UP: The patient will return to the office to review results in 2 weeks and then will be referred for adjuvant treatment.</p>										
<p>ACRONYMS</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">ALND - Axillary Lymph Node Dissection</td> <td style="width: 50%;">LCIS - Lobular Carcinoma In Situ</td> </tr> <tr> <td>BCS - Breast Conserving Surgery</td> <td>MMO - Mammography</td> </tr> <tr> <td>DCIS - Ductal Carcinoma In Situ</td> <td>SLNB - Sentinel Lymph Node Biopsy</td> </tr> <tr> <td>DIEP - Deep Inferior Epigastric Perforators</td> <td>TRAM - Trans–Rectus Abdominis Muscle</td> </tr> <tr> <td>FNA - Fine Needle Biopsy</td> <td>US - Ultrasound</td> </tr> </table>		ALND - Axillary Lymph Node Dissection	LCIS - Lobular Carcinoma In Situ	BCS - Breast Conserving Surgery	MMO - Mammography	DCIS - Ductal Carcinoma In Situ	SLNB - Sentinel Lymph Node Biopsy	DIEP - Deep Inferior Epigastric Perforators	TRAM - Trans–Rectus Abdominis Muscle	FNA - Fine Needle Biopsy	US - Ultrasound
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SUMMARY REPORT - dictate items in red; dictate "skip" for items in blue

COMPLETE REPORT - dictate all 28 items

CLINICAL PREAMBLE

Dictate as appropriate. May include details such as marking, antibiotics, DVT, radiology results, metastatic workup, etc.

A. PREOPERATIVE RATIONALE FOR SURGERY

1. Indication

(select all that apply)

- Primary treatment
- Re-excision for positive margins after BCS
- Completion of mastectomy after initial BCS
- Additional axillary surgery after identification of invasive disease
- Locally recurrent
- 2nd primary
- Prophylactic
- Palliative as part of relapse
- Palliative for initial diagnosis
- Unknown
- Other (specify)

2. Preoperative Biopsy

- Core biopsy - Radiology
- Core biopsy - Surgeon
- FNA - Radiology
- FNA - Surgeon
- Open/surgical biopsy (Imaging Biopsy Not Technically Possible)
- Open/surgical biopsy (Equipment Not Available for Imaging Biopsy)
- Surgical biopsy following suspicious lesion on needle biopsy
- None

3. Preoperative Diagnosis (pathology)

- Invasive carcinoma
- DCIS
- Phylloides
- Pagets
- LCIS
- Other (specify)

4. Preoperative Stage (Narrative)

Dictate as appropriate. May include details such as: size (mm) ____ by ____ (exam, US, MRI or MMO), location, multicentric/multifocal. distant mets, etc.

5. Neoadjuvant Treatment

(select all that apply)

- Chemotherapy
- Radiotherapy
- Hormone therapy
- None

B. OPERATIVE DETAILS: BREAST

6. Breast Procedure

(select all that apply)

- Partial mastectomy/BCS/Wide local excision
- BCS with oncoplastic approach
- Total mastectomy
- Skin sparing mastectomy (with recon)
- Nipple sparing mastectomy (with recon)
- Contralateral prophylactic mastectomy
- None (if none, dictate "#7-17 not applicable" then continue with #18)

7. Indication for Total Mastectomy

- Not applicable, BCS done
- Tumour too large for size of breast
- Multicentric
- Margins positive
- Margins close (<2mm)
- Contraindication to radiotherapy
- Previous cancer
- Patient preference
- Patient unable to access radiotherapy
- Recurrence
- Other (specify)

8. Reconstruction

- Not applicable, BCS done
- Not planned
- Delayed reconstruction desired
- Immediate recon desired, but unavailable
- Tissue expander
- DIAP
- Permanent implant with bioprosthesis
- TRAM
- Other (specify)

9. Localization

- Not applicable, mastectomy done
- Palpable
- Wire localization
- Intraoperative ultrasound
- None
- Other (specify)

10. Incision and Relation to Tumour

- Not applicable, mastectomy done
- Radial
- Circumareolar
- Curvilinear
- Elliptical
- Overlying tumour or ____ (superior/interior/medial/lateral) to tumour

11. Intraoperative Confirmation of Lesion Removal

- Not applicable, mastectomy done
- Yes, specify method (palpation/MMO/US/Xray)
- No

12. Clips Marking Site after BCS

- Not applicable, mastectomy done
- Yes
- No

13. Specimen Orientation

- Yes
- No

14. Additional Margin Tissue Taken and Submitted Separately

- Not applicable, mastectomy done
- Yes, specify (superior/inferior/medial/ lateral/ deep/superficial/ nipple)
- No
- Other (specify)

15. Pectoral Fascia Removed

- Yes
- No

16. Anterior Breast Tissue Remaining

- Yes
- No, skin removed
- No, skin remaining

17. Additional Notes on Breast Procedure (Narrative)

Dictate as appropriate. May include details such as: chest wall taken, issues with wires, core biopsy site excised, details of oncoplastic reconstruction with lumpectomy, etc.

C. OPERATIVE DETAILS: AXILLA

18. Axillary Procedure

- SLNB only
- ALND only (sampling of nodes)
- ALND only (complete level 1 & 2 clearance)
- ALND (sampling of nodes) after previous SLNB
- ALND (complete level 1 & 2 clearance) after previous SLNB
- SLNB & ALND (sampling of nodes)
- SLNB & ALND (complete level 1 & 2 clearance)
- None (if none, dictate "#19-25 not applicable" then continue with #26)

19. Axillary Incision Location

- Axillary
- Mastectomy
- Other (specify)

20. Sentinel Node Biopsy Technique

- Not applicable, ALND done
- Technetium
- Blue dye
- Technetium & blue dye
- Other (specify)

21. Internal Mammary Radioactivity and Method of Detection

- Not applicable, ALND done
- Yes, specify (lymphosyntigraphy/intraop gamma probe evaluation)
- No

22. Specify Number of SUBMITTED Sentinel Nodes

23. Indication for ALND (select all that apply)

- Not applicable, SLNB done
- Preoperative positive node
- Intraoperative positive node
- Other intraoperative findings
- Previous positive sentinel node
- Does not meet sentinel node criteria (eg T3/T4 tumour, pregnant)
- SLNB not available
- SLNB non mapping (unsuccessful)
- Too many sentinel nodes detected
- Patient preferences

24. Structures Identified and Preserved (select all that apply)

- Not applicable, SLNB done
- Thoracodorsal nerve
- Long thoracic nerve
- Number of intercostal brachial nerves
- Medial pectoral nerve
- Axillary vein
- Other (specify)

25. Additional Notes on Axillary Surgery (Narrative)

Dictate as appropriate. May include details such as: abnormal axillary anatomy, etc.

D. PROCEDURE COMPLETION

26. Unplanned Events/Complications

- None
- Describe, if occurred

27. Drain

- Yes, specify (axilla; below mastectomy incision medial/lateral; placed plastics)
- No

28. Closure (Narrative)

Dictate as appropriate. May include details such as: incision closure, closure by plastics, sponge and instrument counts, etc.

FOLLOW-UP : As appropriate