

Date of visit: May 9th, 2023

Full name: D.O

Address: unknown

Date of Birth: 10/15/1967

Location: NYC Health + Hospitals/Metropolitan, breast clinic (outpatient)

Source of information: Self

Reliability: Reliable

Source of Referral: Self

Mode of Transport: Car

**S:**

HPI: D.O is a 55-year-old female with a PMHx of invasive ductal carcinoma of the right breast clinical stage IIIA (T3, N1, M0 grade 3, ER/PR+ HER2+) presents in the clinic status post right total mastectomy with sentinel node biopsy and left prophylactic total mastectomy with plastic surgery reconstruction (500 ml expander bilateral) on 1/24/2023. The patient reports that for the last couple of weeks, she has been feeling more pain at the lateral aspect (~7 o'clock) of her right breast. She would like to have another infusion of the tissue expander, as it has relieved some of the pain in the past. Her last infusion was on 02/28/2023, where 120 ml of saline was injected into her bilateral breasts, added to the 100 mL that was injected in the OR, for a total of 220 ml in each breast. She recently just completed her 5-week course of external beam radiation therapy on 05/02/2023, with moderate dermal burns on her right neck and right lateral chest. She saw a dermatologist a week ago, who prescribed her Lindex ointment and mupirocin ointment to put on the affected areas.

She completed neoadjuvant therapy with Carboplatin, Docetaxel, Trastuzumab, and Peruzumab x 6 cycles (completed in December 2022)

PMHx: IDC right breast (2022), Prediabetes, Obesity class II, Hyperlipidemia, Hypothyroidism

PSHx: Mastectomy modified radical with sentinel node biopsy of the right breast and left breast prophylactic mastectomy (2023), tissue expander placement breast reconstruction bilateral (2023), Cesarean section (2000)

Medications: Anastrozole 1 mg tablet, atorvastatin 40 mg tablet, ezetimibe 10 mg tablet, levothyroxine 88 mcg tablets

Allergies: none

FHx: heart disease (mother), DM2 (daughter)

SHx: denies illicit drug use, alcohol use, or smoking tobacco.

**ROS:**

denies fever, chills, nausea, vomiting, diarrhea, urinary urgency or frequency, abnormal bowel movements, headache, dizziness, weight loss or gain.

Reports itchy painful burn on her right neck and breast post-radiation (05/02/2023).

**O:**

Vitals: T: 97.8°F (36.6° C) | P: 85 BPM, regular | RR: 19 breaths/min, unlabored | BP: 108/55 mm hg | SpO2: 97% room air | Height: 4'11 (149.86 cm) | BMI: 32.3 kg/m2

General: obese female appears alert, awake, and oriented x 3. In no acute distress.

Skin: **moist desquamation on the left neck and axillae with areas of dry desquamation. Hyperpigmentation and erythema over the radiation treated area of the breast. Radiation dermatitis stage II. Tenderness to touch. No signs of cellulitis or purulent discharge.**

CV: RRR. S1 and S2 normal. No murmurs, S3, S4, splitting of heart sounds or friction rubs.

Pulmonology: Breathing comfortably in room air, with no accessory muscle use. Chest expansion symmetrical without wheezing, rhonchi, rales, stridor.

HEENT: Normocephalic and atraumatic. PERRLA and EOM intact.

Extremities: moves all 4 extremities spontaneously. No edema, erythema, inflammation noted.

Pulses are 2+ bilaterally in the upper extremity.

Neuro: cranial nerves intact. Sensations are equal and intact bilaterally of the upper extremities.

**A:** D.O is a 55-year-old female with a PMHx of invasive ductal carcinoma of the right breast clinical stage IIIA (T3, N1, M0 grade 3, ER/PR+ HER2+) who just completed her radiation treatment on 05/02/23. Patient presented with grade II radiation skin changes on her right neck region and right breast.

**P:**

- Hold on tissue expander until radiation dermatitis heals
- Continue Lindex ointment and mupirocin ointment as instructed by the Dermatologist
- Start Augmentin 875-125 mg tablet BID x 10 days
- Return to the clinic in 1 week. Seek immediate medical care if you have any of the following symptoms including but not limited to swelling around the wound, worsening pain, drainage from the wound, red streaking extending away from your wound, inability to move the right forearm near the wound, or discoloration of skin near the wound.