

Oncoplastic Round-Block Lumpectomy with Magnetic Seed Localization

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Conclusions

The Sirius Pintuition supported the localization of the lesion with adequate intraoperative margins. Due to the directional guidance and mm distance it was also possible to do an oncoplastic approach (round block) with a good cosmetic result.

Case Description

Round Block (lumpectomy with MSL) + Sentinel Lymph Node Biopsy

Course of Treatment

Patient of 52 years old. During Breast X-ray Screening a 9 mm Lesion BI RADS 4 was identified in the internal upper quadrant of the left breast. No adenopathy.

Core Biopsy (BAG): Infiltrating ductal carcinoma of the breast

Histologic grade I: Well differentiated

Lymphovascular invasion: Non-necrotic in the infiltrating carcinoma

Tumor cellularity in the infiltrating component: 30%. Intraductal breast carcinoma

Nuclear grade: Intermediate

Pattern: Solid-cribiform

Necrosis: No

Microcalcifications: No

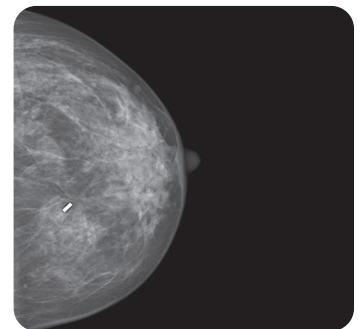
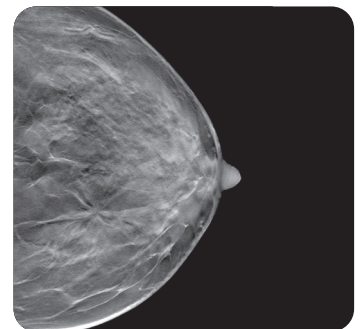
Calcification: Absent

Complementary studies:

- **Estrogen receptors:** Positive 100%
- **Progesterone receptors:** Positive 90%
- **Cell proliferation index:** (Ki67: 5%)
- **HER2/neu by immunohistochemistry:** NEGATIVE

Patient outcomes

The lesion was adequately localized guided with Sirius Pintuition seed and with adequate intraoperative margins. The SLNB was negative (4 Lymph nodes negative). The pathological study confirmed the findings. Tumor of 9mm. with margins free of tumor cells.



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