

# Management of Skeletal Metastases

## Patient Data

Physician: **John Smith**

Patient's name (Initials): **IM**

Age: **74**

Sex: **F**

Histological diagnosis: **Carcinoma of breast**

Anatomical location:

(please mark side, location, and exact anatomical extent of the lesion)

Solitary metastasis:  Yes  No

Visceral metastases:  Yes, Site:  No

Presentation:

Pathological fracture

Impending fracture

Painful lesion

Matrix:

Blastic

Lytic

Mixed

Associated pain:

Mild

Moderate

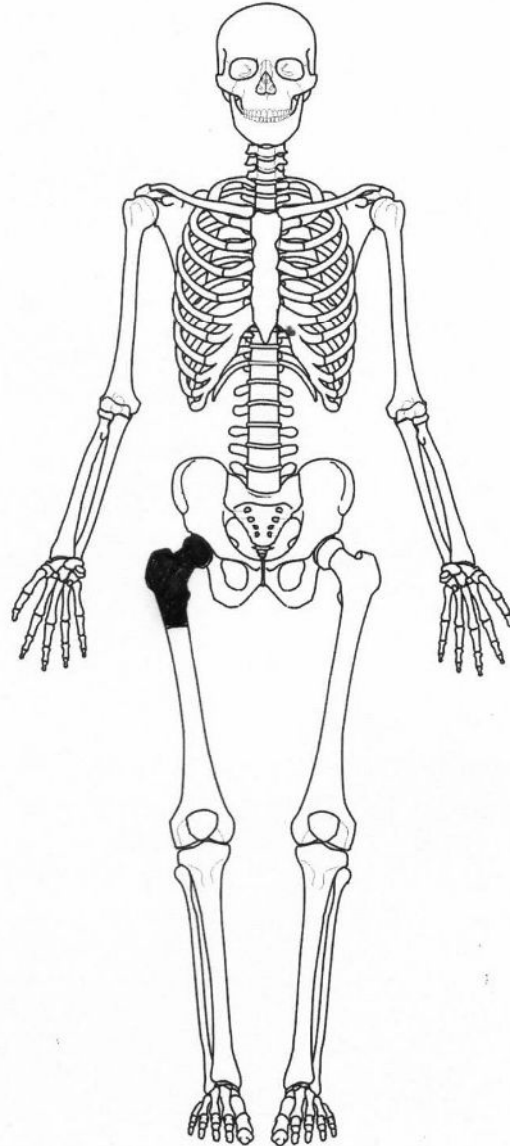
Functional (Aggravated by function)

Extent of bone diameter involvement:

<1/3

1/3 - 2/3

>2/3



### Prior treatment:

Chemotherapy:  Yes,  No

Bisphosphonates:  Yes,  No

Radiation:  Yes,  No

Previous surgery:  Yes,  No

Other:

**Surgery:**  Yes,  No

1. Intramedullary rodding -  open,  closed,  with PMMA,  without PMMA

2. Plating -  with PMMA,  without PMMA

3.  Resection with prosthetic reconstruction

4.  Minimally invasive percutaneous surgical procedure.

Type: \_\_\_\_\_

5.  Amputation

6.  Other: \_\_\_\_\_

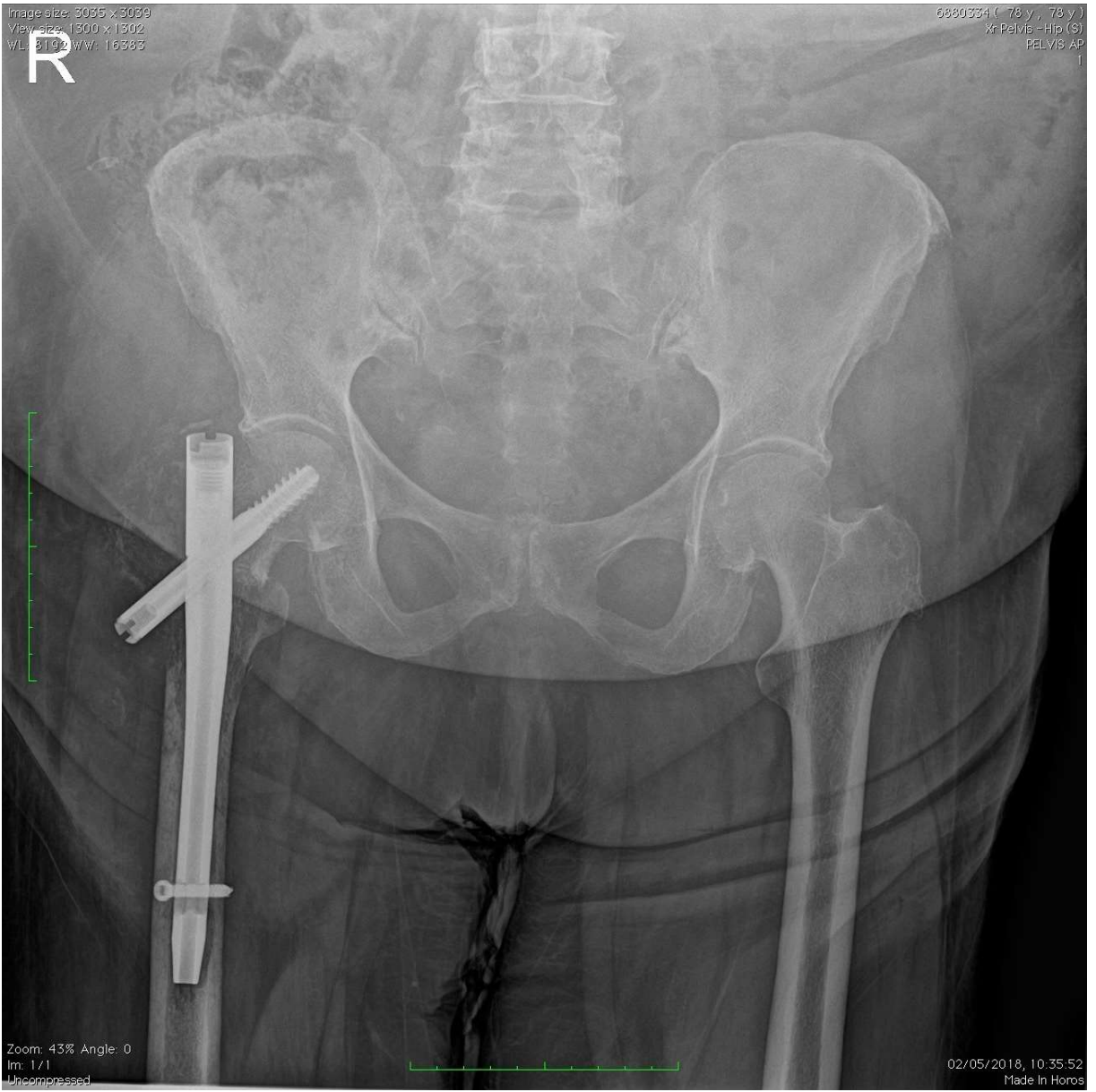
Post-operative radiation:  Yes,  No

Comments: \_\_\_\_\_

Image size: 5055 x 3059  
View size: 1300 x 1302  
WL: 3192 WW: 16337

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Xr Pelvis -Hip (S)  
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