###### UNI-Logo_Siegel_4c_149mm(2)KSR_Logo_Bild-Wortmarke_RGB

###### Universitätsfrauenklinik und Poliklinik

###### am Klinikum Südstadt Rostock

###### Südring 81 · 18059 Rostock

Direktor: Prof. Dr. med. B. Gerber

Universitäts- Brustzentrum

**Onkologisches Konsil vom**

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| **Patientin:**  **geb.**     |  |  |  |  |  | | --- | --- | --- | --- | --- | | Alter: |  | | | | | Größe: |  | | | cm | | Gewicht: |  | | | kg | | KI: |  | | | % | | Menopausenstatus: | |  | menopausal | | |   **Vorstellung**:   |  |  |  |  |  | | --- | --- | --- | --- | --- | | Präoperativ |  |  |  |  | | Primärfall |  | ja |  | nein | | postoperativ |  |  |  |  |   Gynäkologe:    Unterschrift Gynäkologe  Hausarzt:  Patient stimmt der Vorstellung seiner Daten in der Tumorkonferenz zu:  Datum, Unterschrift Patient | **Diagnose:**  **Tumorformel:**   |  |  |  | | --- | --- | --- | | **Tumorsitz** | **Oben** | **Unten** | | **Innen** |  |  | | **Außen** |  |  | | **Zentral** |  | | | **Multifokal** |  | | | **Multizentr** |  | |  |  |  |  |  | | --- | --- | --- | --- | | **ER: IRS** |  | **PgR: IRS** | | | **HER2:** |  | **KI – 67:** | **%** | | **min. RR:** | **mm** |  | |   **Bildgebung:**   |  |  |  | | --- | --- | --- | |  | Datum: | | | Mammasonographie |  | | | Mammographie |  | | | Mamma-MRT |  | | | MG- Screening  SID: |  | | | BIRADS: | **rechts** | **links** | |  |  |   **Perkutane Biopsie:**   |  |  |  | | --- | --- | --- | |  | Datum: | | | Sonographisch |  | | | Stereotaktisch |  | | | Histologisches Ergebnis: | **rechts** | **links** | |  |  | |
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| **Nebendiagnosen / Risikofaktoren:**  **Staging:**   |  |  |  | | --- | --- | --- | | **Datum:** | **Untersuchung:** |  | |  | Oberbauchsonographie: |  | |  | Röntgen Thorax: |  | |  | Skelettszintigraphie: |  | |  | weitere Untersuchungen: |  | | |

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|  | **Onkologisches Konsil** | **Studie** | **Therapieempfehlung (Therapieabweichung mit Begründung)** |
|  |  |

Patientengespräch am

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| Patientin stimmt der Empfehlung zu |  |
| Patientin stimmt der Empfehlung nicht zu | Begründung: |