

Leather Oct 12/06

Oct 6/06
Received
by Council
from
Dr. Laing's
Office

FYI- This lady
Never did
get contacted
Dr. Laing's office told me
to leave with you.

VCE IN 2001 - NO

Debbie

MOF #. [REDACTED]

Ms. [REDACTED] was diagnosed in 1997 with a carcinoma of the **left** breast. The original report of the estrogen and progesterone receptors showed <5% staining for estrogen and negative staining for progesterone. A repeat report from Mount Sinai Hospital has shown the tumour to be estrogen and progesterone receptor positive at 50% and <1% respectively.

Ms. [REDACTED] subsequently developed a left axillary recurrence in 2001. The original report of the estrogen and progesterone receptors showed negative staining for estrogen and <10% staining for progesterone. A repeat report from Mount Sinai Hospital has shown the tumour to be estrogen and progesterone receptor positive at 95% and 0% respectively.

This patient was discussed at the Physician Review Panel on March 4, 2006. The recommendation of the Panel is that this lady should be offered treatment with Tamoxifen. If Tamoxifen is contraindicated, or not tolerated, an Aromatase inhibitor may be used in post menopausal patients.

If you wish, this patient may be referred to one of the Medical Oncologists at The Dr. H. Bliss Murphy Cancer Center for further evaluation.

We would ask that you communicate this information to your patient as soon as possible.

Yours sincerely,

Kara Laing, M.D., F.R.C.P. (C)
Clinical Chief, Cancer Care Program
The Dr. H. Bliss Murphy Cancer Center

Cc: Dr. [REDACTED]
Dr. [REDACTED]
Dr. [REDACTED]

[REDACTED]

as of Sept 10/04
not in service
Sept-29/06



Eastern Health

*Oct 6/06
Received
by Council
from
Dr. Laing's
Office*

SPOKE TO [REDACTED] - PT. LEFT PROVINCE IN 2001 - NO FORWARDING ADDRESS

March 6, 2006

RE: [REDACTED]
MCP #: [REDACTED]

Ms. [REDACTED] was diagnosed in 1997 with a carcinoma of the *left* breast. The original report of the estrogen and progesterone receptors showed <5% staining for estrogen and negative staining for progesterone. A repeat report from Mount Sinai Hospital has shown the tumour to be estrogen and progesterone receptor positive at 50% and <1% respectively.

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Clinical Chief, Cancer Care Program
The Dr. H. Bliss Murphy Cancer Center

Cc: Dr. [REDACTED]
Dr. [REDACTED]
Dr. [REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
*as of Sept 10/04
not in service
Sept-29/06*