



Grup Català de Patologia Mamària

V Sesió, ACMCB, 24/04/14

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Paciente de 64 años controlada en consultas externas por tumoración de varios años de evolución. A raíz de un aumento de tamaño de la tumoración en los últimos meses, acompañado de dolor en la zona, es derivada a nuestro centro para completar estudio. La paciente a la exploración física presenta equimosis que ocupa el 80% de la mama y a la palpación se objetiva tumoración de 10cm. No se objetivan signos flogóticos ni secreciones. La axila es clínicamente negativa. Se realiza una ecografía que pone de manifiesto un nódulo de 7cm en unión de cuadrantes externos de mama derecha, de bordes y eco-estructura homogéneas.



SMALL PARTS
SUPERFICIAL

LA523 13-4
CONN : B

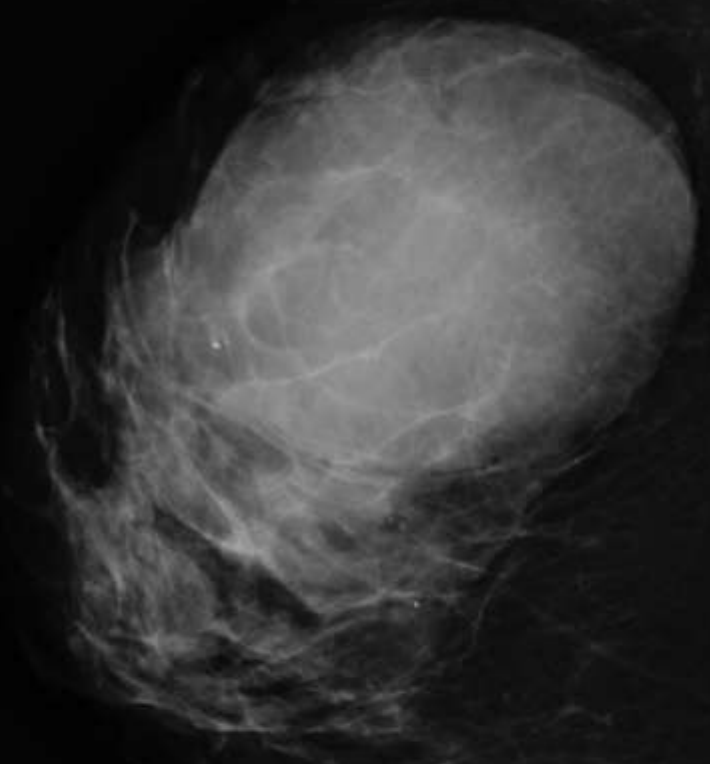
Distance

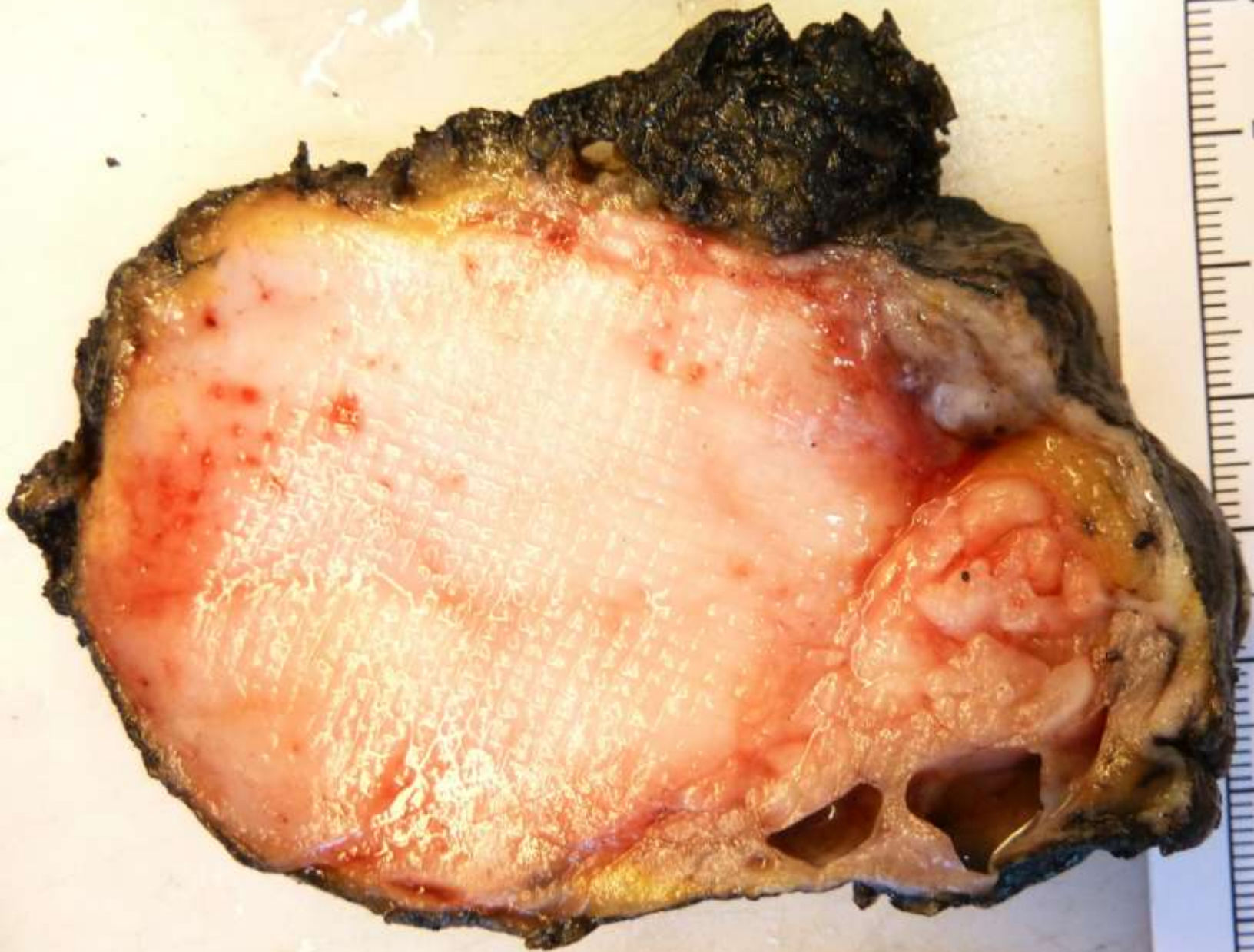
Left key to FIX first caliner

ESAOTE

B:12.5/ DPT 62 mm / G 145

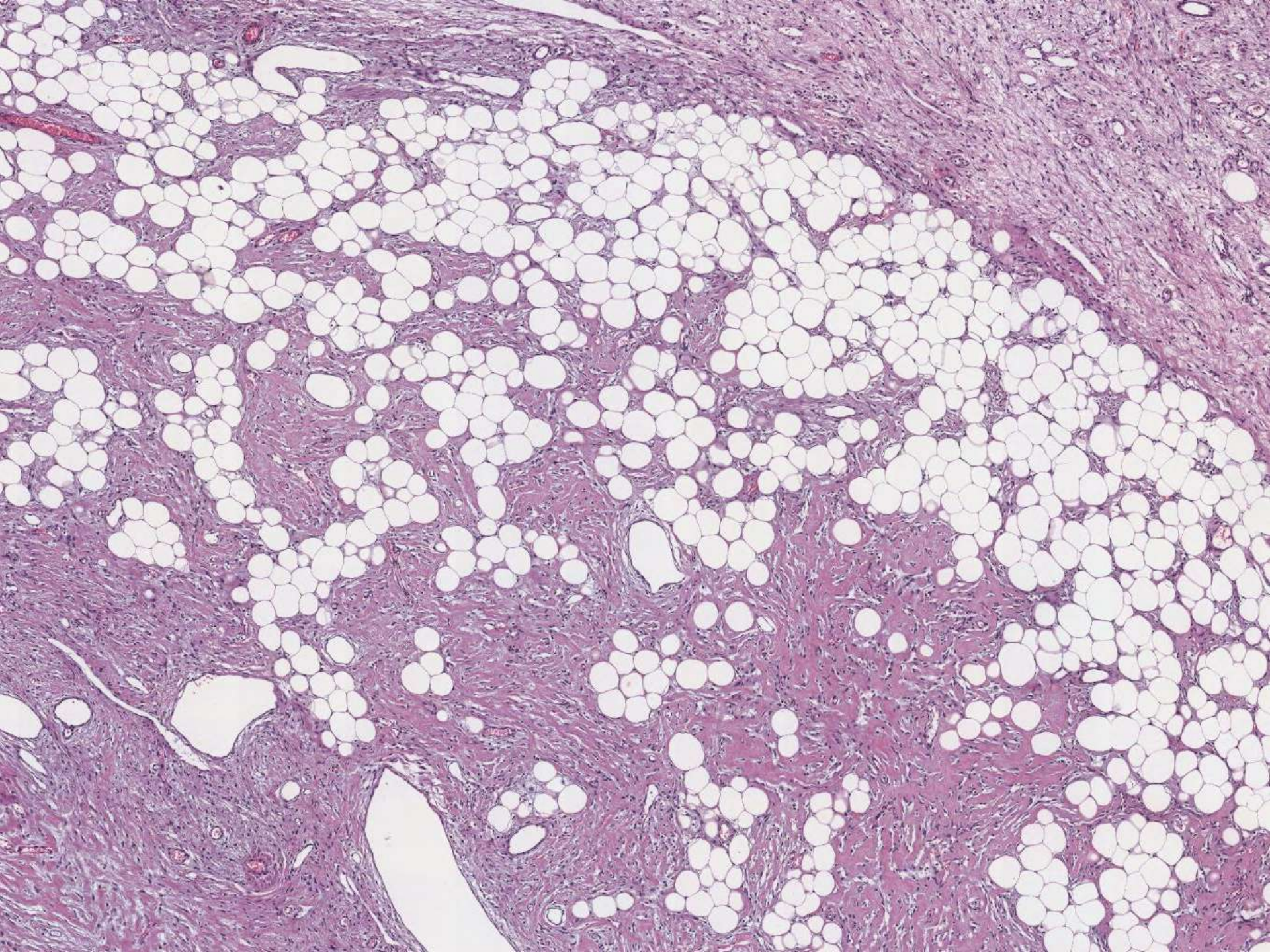
CC.D

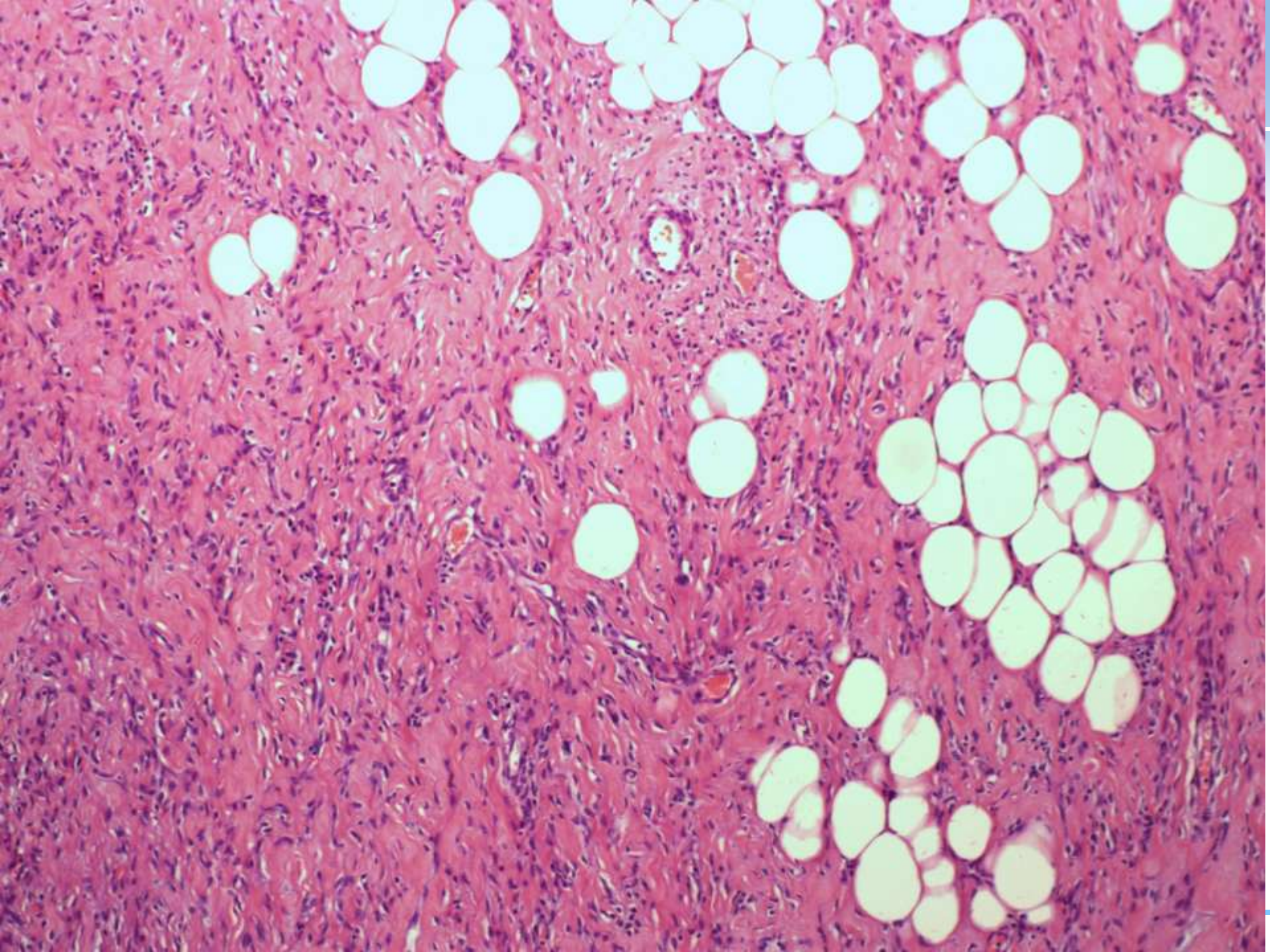


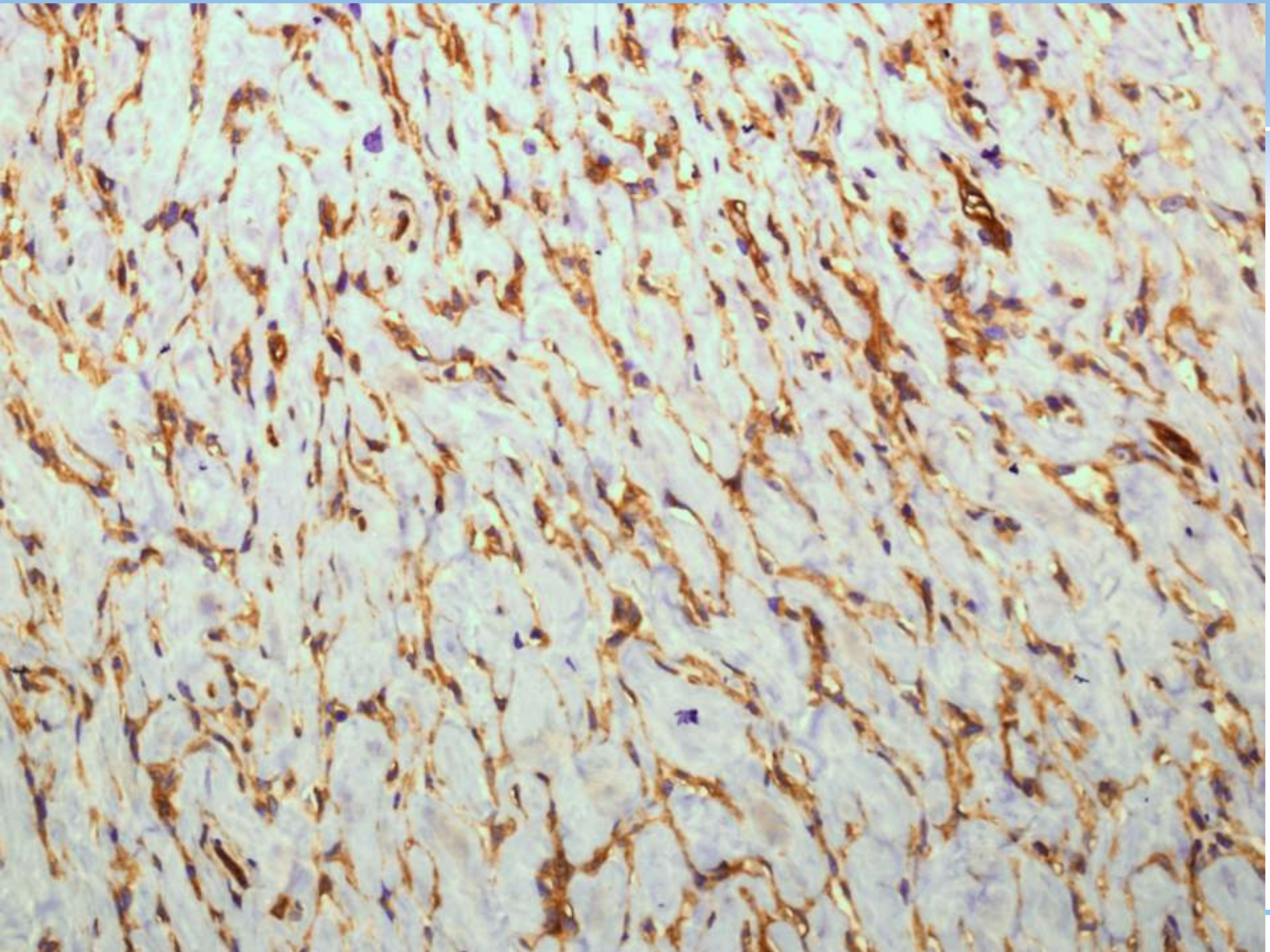


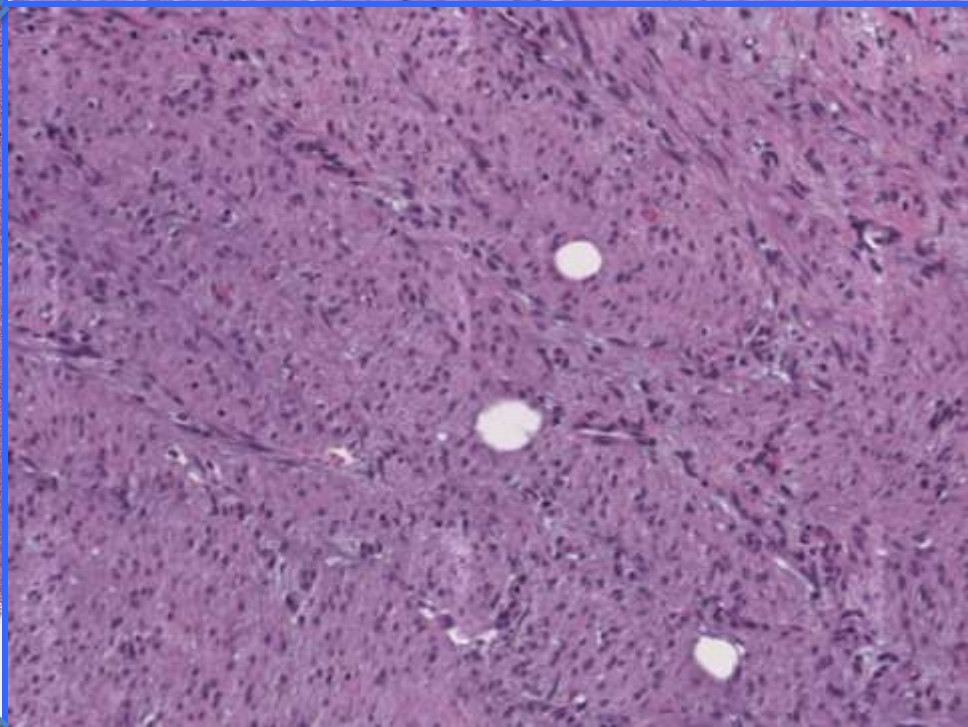
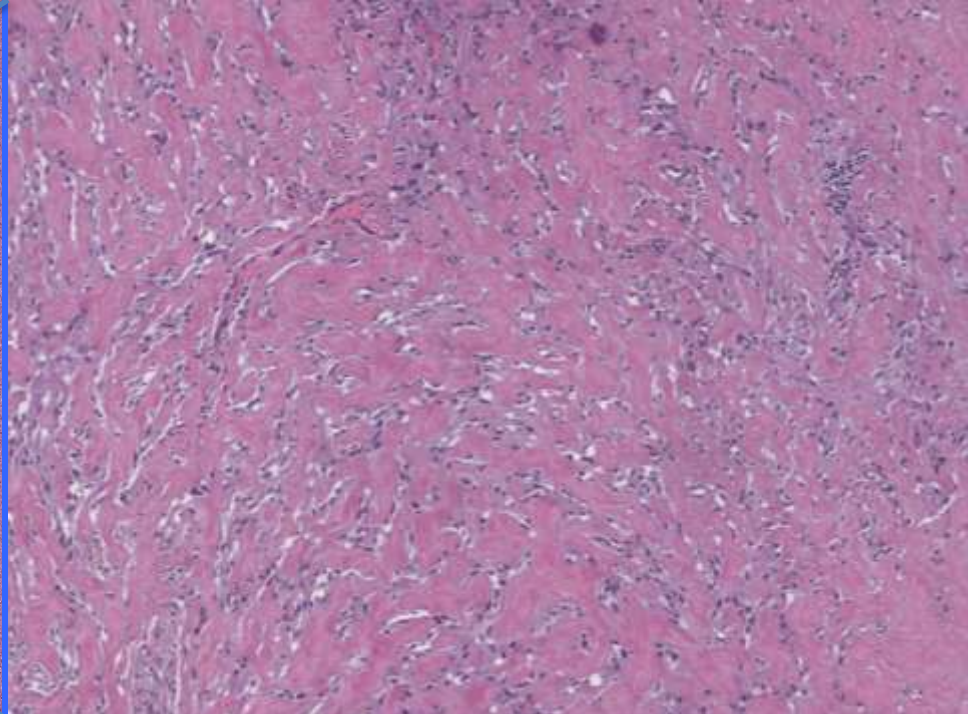
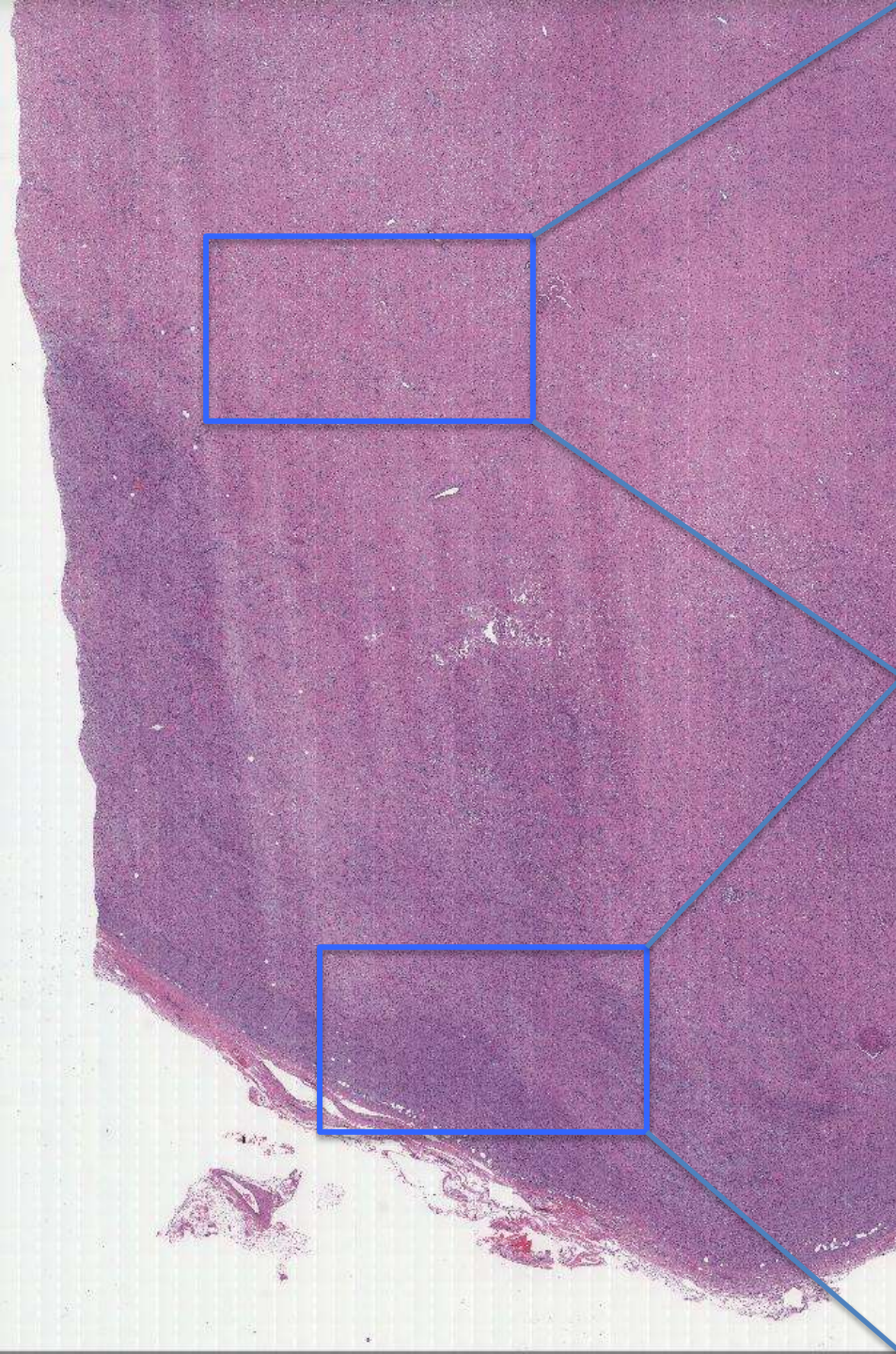
11B 22420

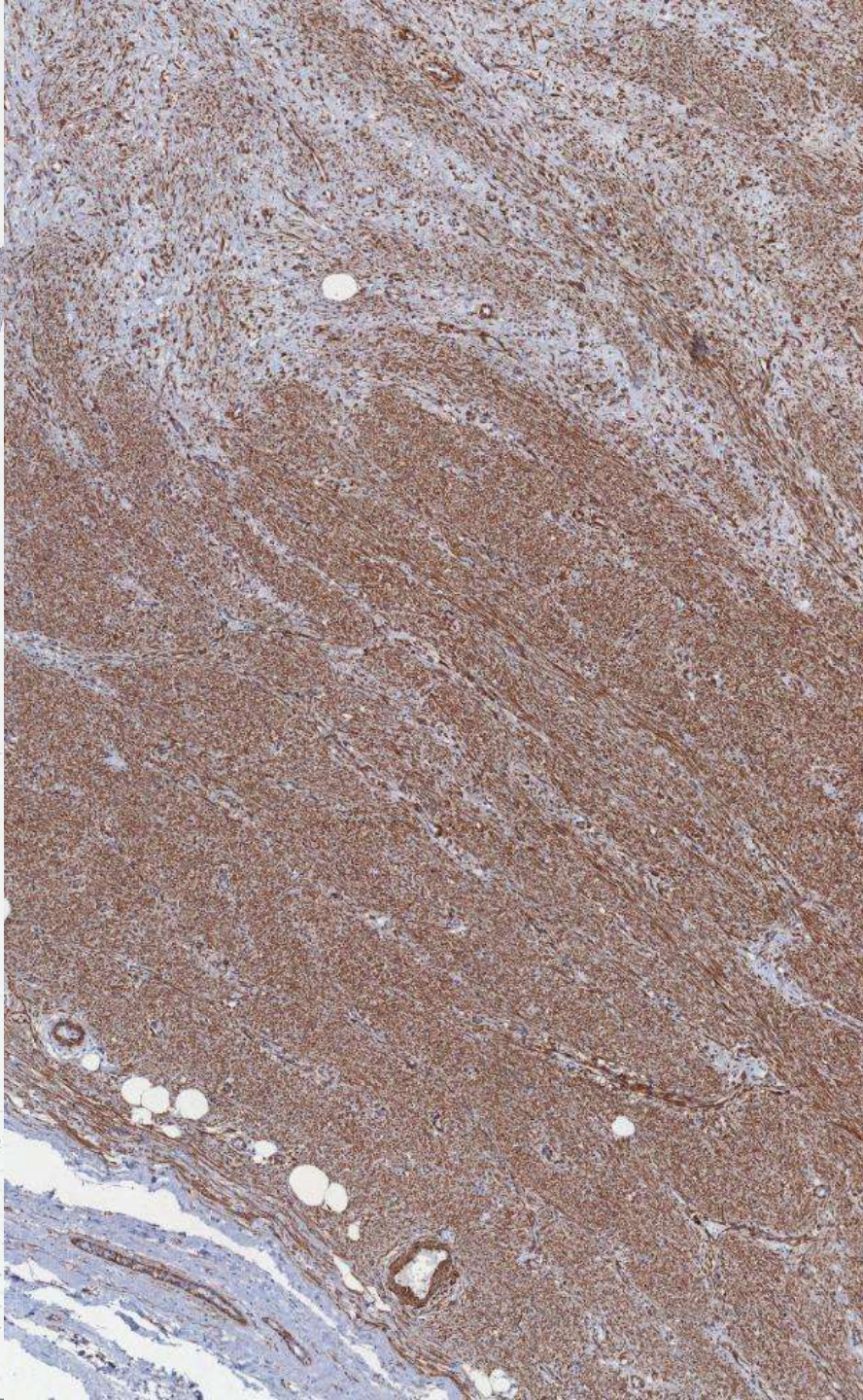


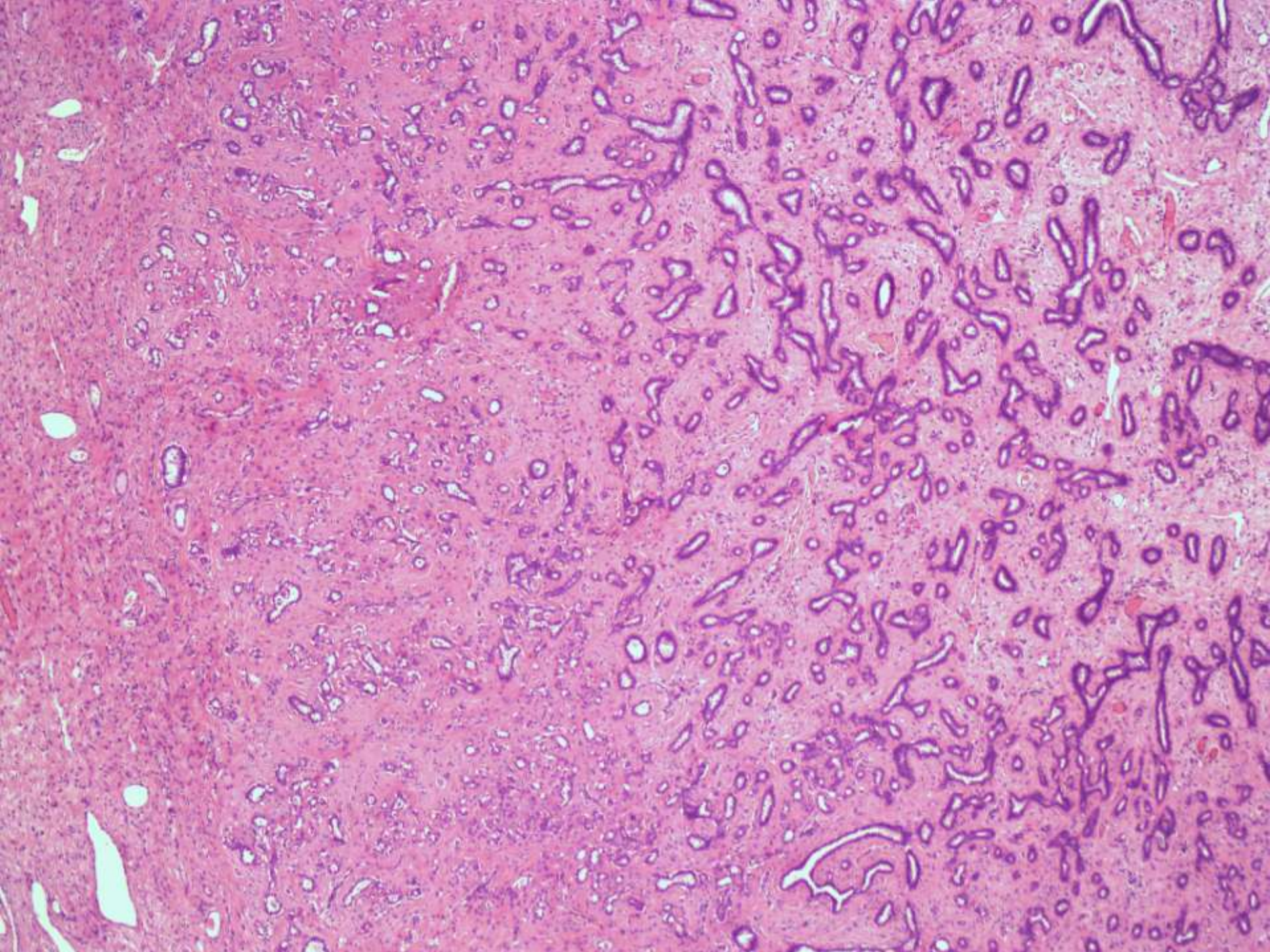


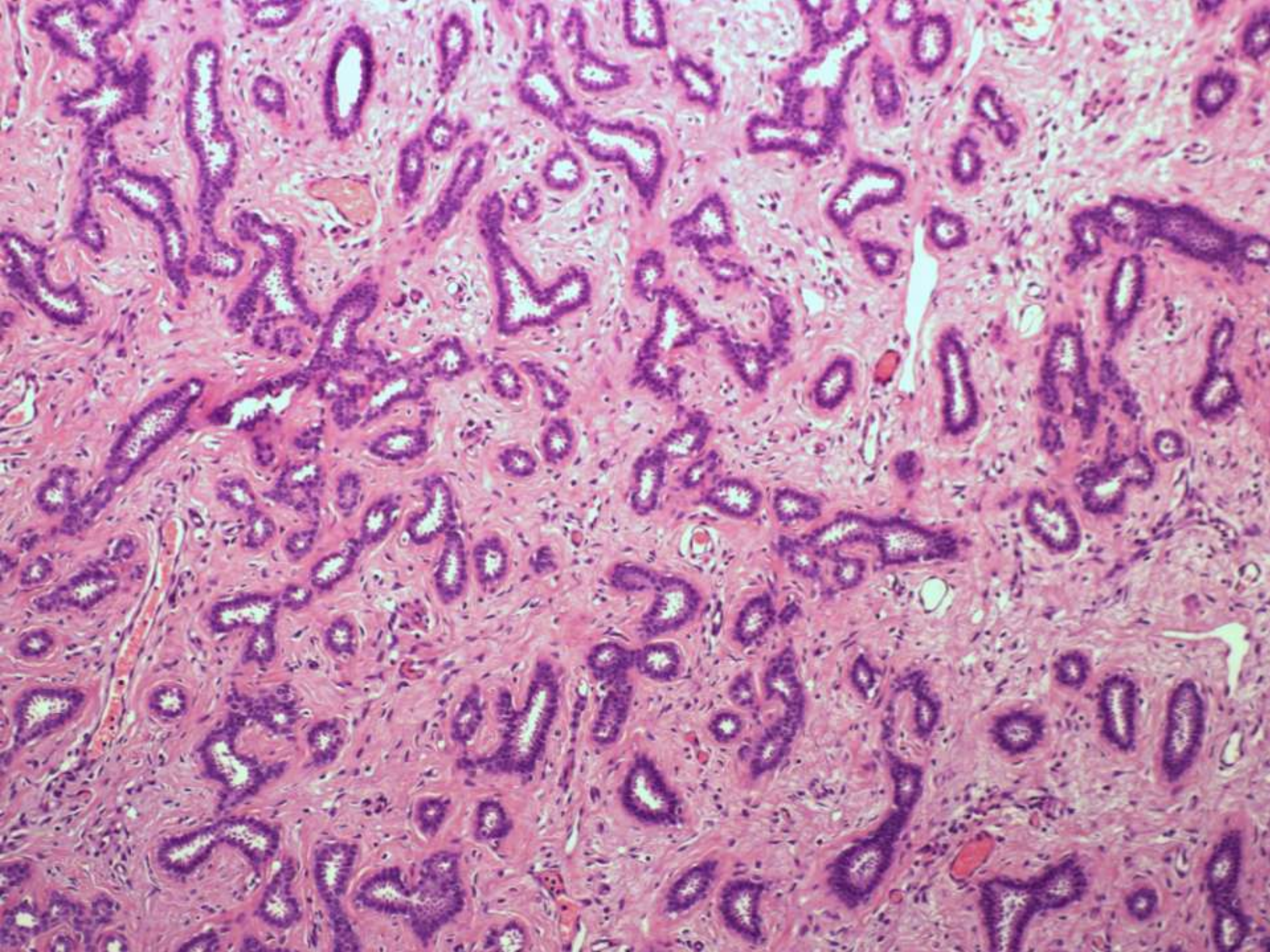


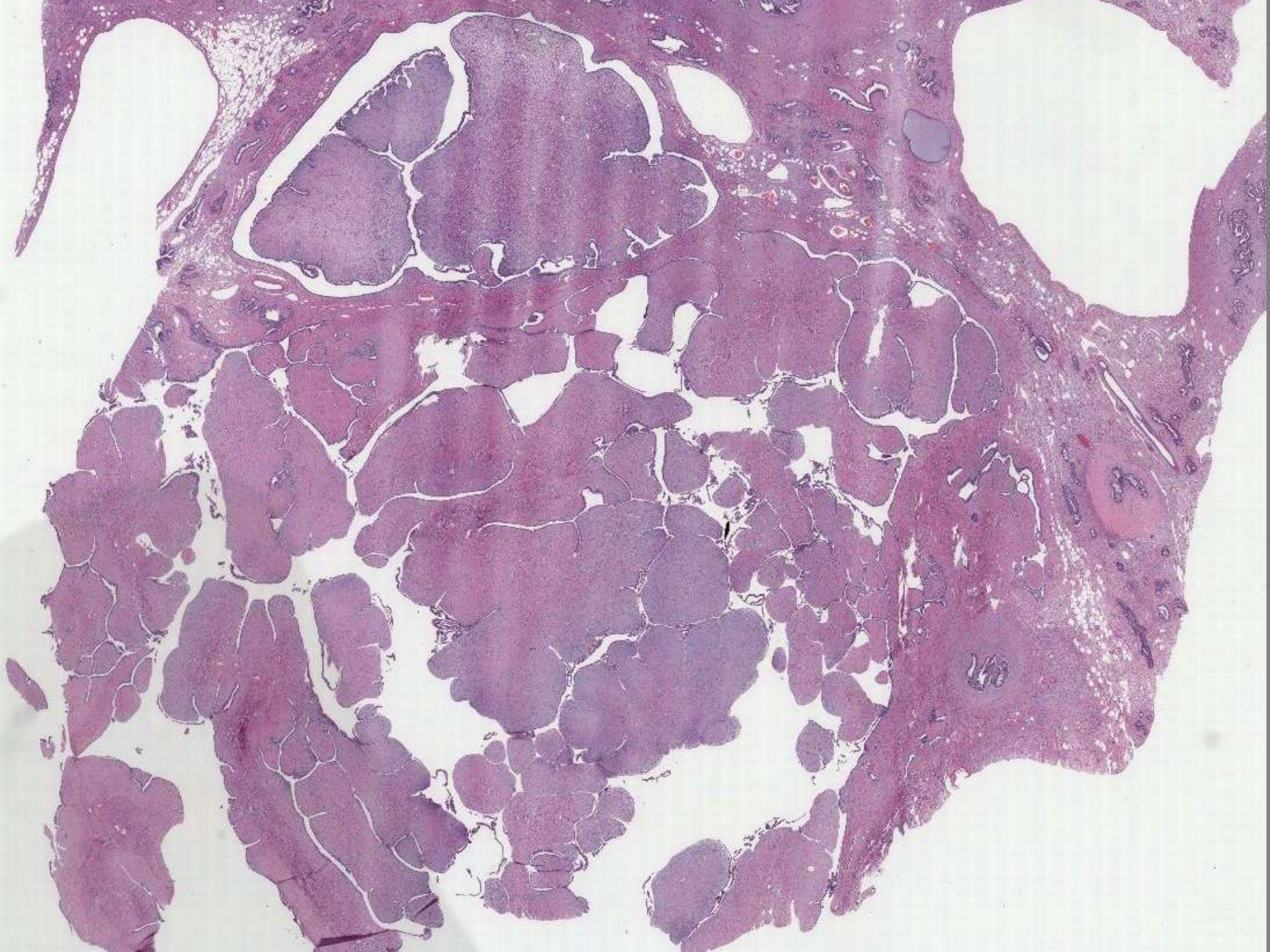


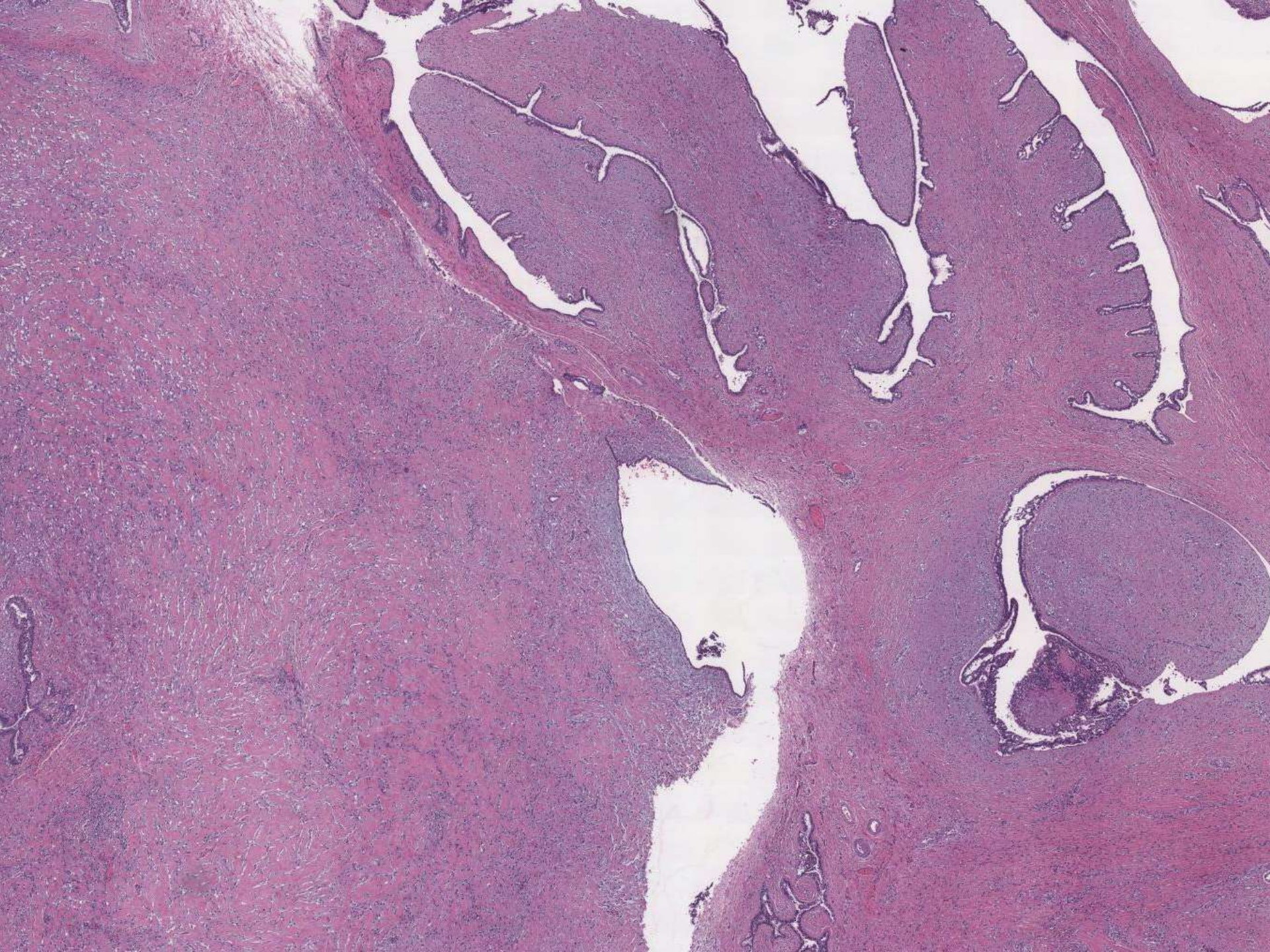


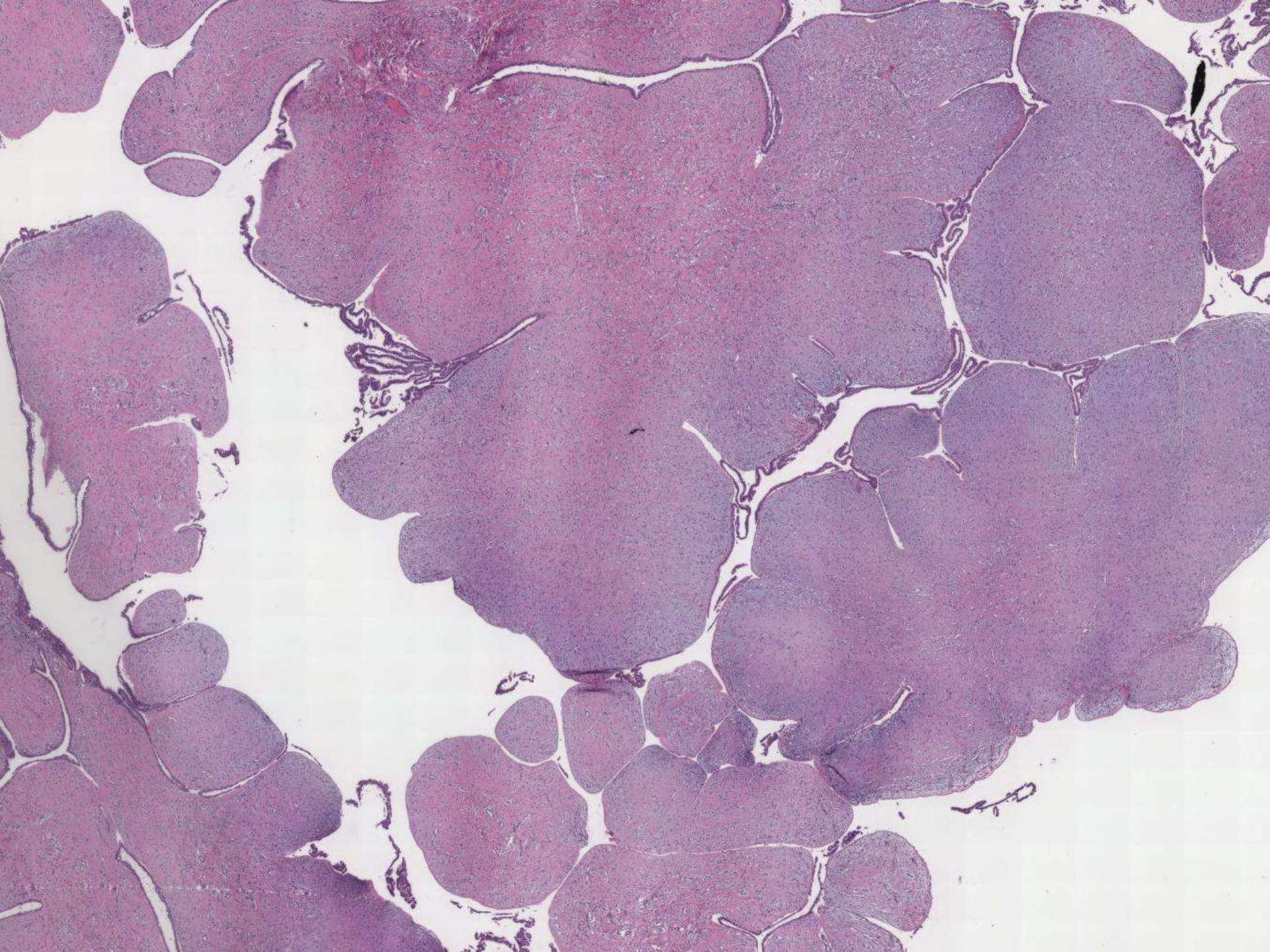










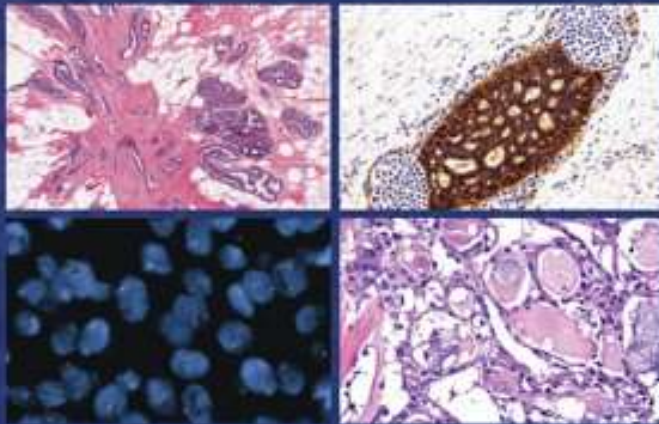






Rosen's Breast Pathology

FOURTH EDITION



Syed A. Hoda
Edi Brogi
Frederick C. Koerner
Paul Peter Rosen

Wolters Kluwer | Lippincott Williams & Wilkins
Health

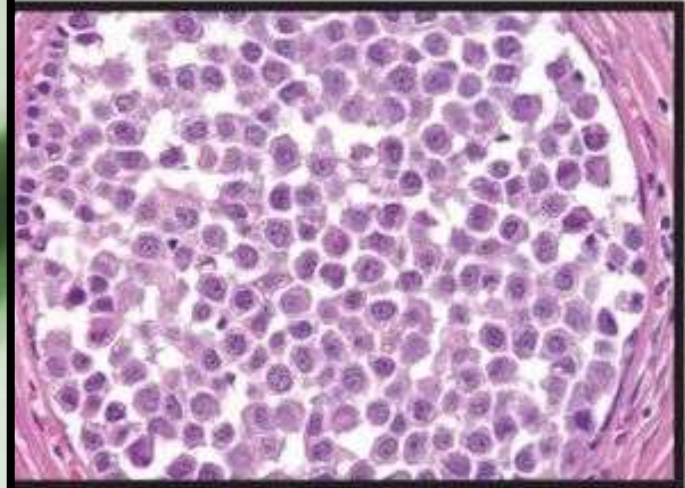
Includes
access to
full text and
image bank
online

ONLINE
ACCESS TO
FULL TEXT
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AND QUESTIONS
INCLUDED

BIOPSY INTERPRETATION SERIES

Biopsy Interpretation of the Breast

SECOND EDITION



STUART J. SCHNITT
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TUMOR FILODES BENIGNO SOBRE HAMARTOMA MIOIDE

