

Before Start of Surgery

- Review consent and confirm details of surgery with the patient and mark site of surgery
- Review pathology associated with each lesion(s) to be removed
- Confirm that all target lesions have been identified and/or localized
- Ensure all necessary preoperative images are available and reviewed
- □ Verify breast lesion can be identified in the patient
- For re-excision cases, verify the margin(s) with path report and/or imaging
- **Review anesthesia requirements** (eg, regional block, non-paralytics)
- **Confirm special equipment** (probes, tracer, imaging devices)
- Confirm sentinel node injection has been performed if needed

Before Closure

- Perform specimen imaging for non-palpable lesions
- Confirm imaging targets removed from breast/axilla
- □ Verify lumpectomy cavity is marked for radiation if applicable
- Address margins as needed
- Weigh specimen if needed
- **Consider intraoperative pain management options**
- Confirm drain has been placed if needed
- □ Verify specimen orientation and accurate labeling
- Confirm specimens placed in appropriate media
- Ensure a post-op bra or binder has been placed if needed
- **Review postoperative management and care plan with team** (eg, wound care, activity, follow-up)

Acknowledgements / Disclaimer

This resource was developed by a workgroup of the Society's Practice Management Committee and was approved by the Board of Directors on October 13, 2023. This resource is provided by the ASBrS to assist surgeons in clinical decision making. Use of this resource is voluntary and should not substitute for clinical judgment by the treating team.