

**Protocol for patients presenting to the ER with suspected breast infection/abscess**

If a patient presents to Saskatoon City Hospital ER between 8am-4pm with symptoms suspected to be a breast infection/abscess, contact the Breast Health Centre for availability of imaging work up and assessment by BHC surgeon.

If a patient presents to Saskatoon ERs on evenings or weekends, or during the day at SPH or RUH with symptoms suspected to be a breast infection/abscess and is being managed as an outpatient, then an urgent referral should be faxed to BHC (see below for information to include). If urgent surgical consultation is desired while the patient is in the ER:

- Consult the Acute Care General Surgeon on call (Note: SFCC consults will be directed to the SPH Acute Care General Surgeon on call)
  - The on-call ACS General Surgeon will assess the patient. If there is concerns for an acute infection / abscess treatment will be initiated.
  - If drainage is appropriate percutaneous aspiration should be performed.
  - The ACS General surgery team will complete a referral to the BHC, including appropriate contact information, for arrangement of follow up with the next available BHC surgeon.

Breast ultrasound for diagnosis of abscess and / or therapeutic aspiration can be performed outside of the BHC. If emergency same day breast ultrasound is required at RUH or SPH during regular working hours, use the current referral process for emergency ultrasound requests at RUH or SPH.

For any breast ultrasound needed after hours contact the on-call radiologist to discuss.

If the patient is being discharged from the ER and urgent outpatient imaging follow-up is required in the BHC

- The responsible physician should fax a requisition to the Breast Health Center.
- The on-call radiologist does not have to be contacted
- The requisition must include
  - Patient information including a contact number
  - Side (Right/left/bilateral) & symptoms
  - Pregnancy & lactation status
  - ER visit date & date of discharge from ER
- Additional helpful information to include on the requisition:
  - History of breast cancer
  - Any recent breast intervention (biopsy, aspiration, surgery)
  - Prior breast imaging (where and when)



The Breast Health Center is open Monday - Friday, 8 am-4 pm. It is not open on weekends, stat holidays or SCH bank days.

Patients discharged from the ER requiring next-day breast imaging for infection/abscess cannot be booked into the general Medical Imaging departments "next-day ER ultrasound slots" and should not be instructed to present to the Medical Imaging Dept or the Breast Health Centre at a specific time the next day.

Inform patients their information has been faxed to the Breast Health Center and to expect a call from the Centre the next day. The Breast Health Centre will call the patient and arrange an appointment time.

*\*Patients presenting with Breast symptoms that are not suspected to be due to infection (nipple discharge, palpable mass, focal non-cyclic breast pain with no other symptoms) should be given a requisition for imaging (bilateral mammogram + ipsilateral targeted US if  $\geq 30$  years old or ipsilateral targeted ultrasound +/- mammography if  $<30$ ) at one of the diagnostic mammography clinics in the community (AR or SMI). This requisition needs to identify which physician will follow up on the breast imaging results (ER doc, General Surgeon or family MD), as it is common clinic policy to call the responsible MD with the result if it is highly suspicious for breast cancer.*