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Patient preferences in access to breast reconstruction



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ABSTRACT

Background: Patient access to breast reconstruction is an important component of comprehensive breast cancer care. There is currently considerable variability in the timing of consultation with a plastic and reconstructive surgeon after the initial diagnosis of breast cancer. This study aims to elucidate patients' preferences for the timing of plastic surgery consultation as part of the preoperative evaluation and planning process.

Methods: A 16-question electronic survey instrument was developed based on formative patient comments and discussion between the breast oncology and plastic surgery teams. The survey was administered to all patients referred to the plastic and reconstructive surgery clinic for initial reconstructive consultation during the study period.

Results: A total of 31 responses were collected. The largest number of patients (48%) indicated they would prefer to see a plastic surgeon 1 wk after their first consultation with a breast surgeon. Only one patient reported a desire to see both surgeons on the same day. Most patients indicated that having a family member or friend accompany them to the appointment (45%) and having time to process their cancer diagnosis before seeing the plastic surgeon (32%) were key factors in deciding when they would like to discuss reconstruction. Conclusions: Most patients in our study indicated a preference for delay between initial consultation with a breast surgeon and initial consultation with a plastic surgeon. Incorporating patient preferences into the preoperative evaluation and planning process allows patients to optimize available support from loved ones and to begin coping with their diagnosis.

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1. Introduction

Access to breast reconstruction has been recognized as a critical component of comprehensive breast cancer care. Several potential barriers exist during the pretreatment period, including availability of general or breast surgeons as well as plastic and reconstructive surgeons. Breast cancer treatment is unique in the level of patient involvement in both the oncologic and reconstructive aspects of care and has become increasingly consumer-driven. Enabling patients to

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