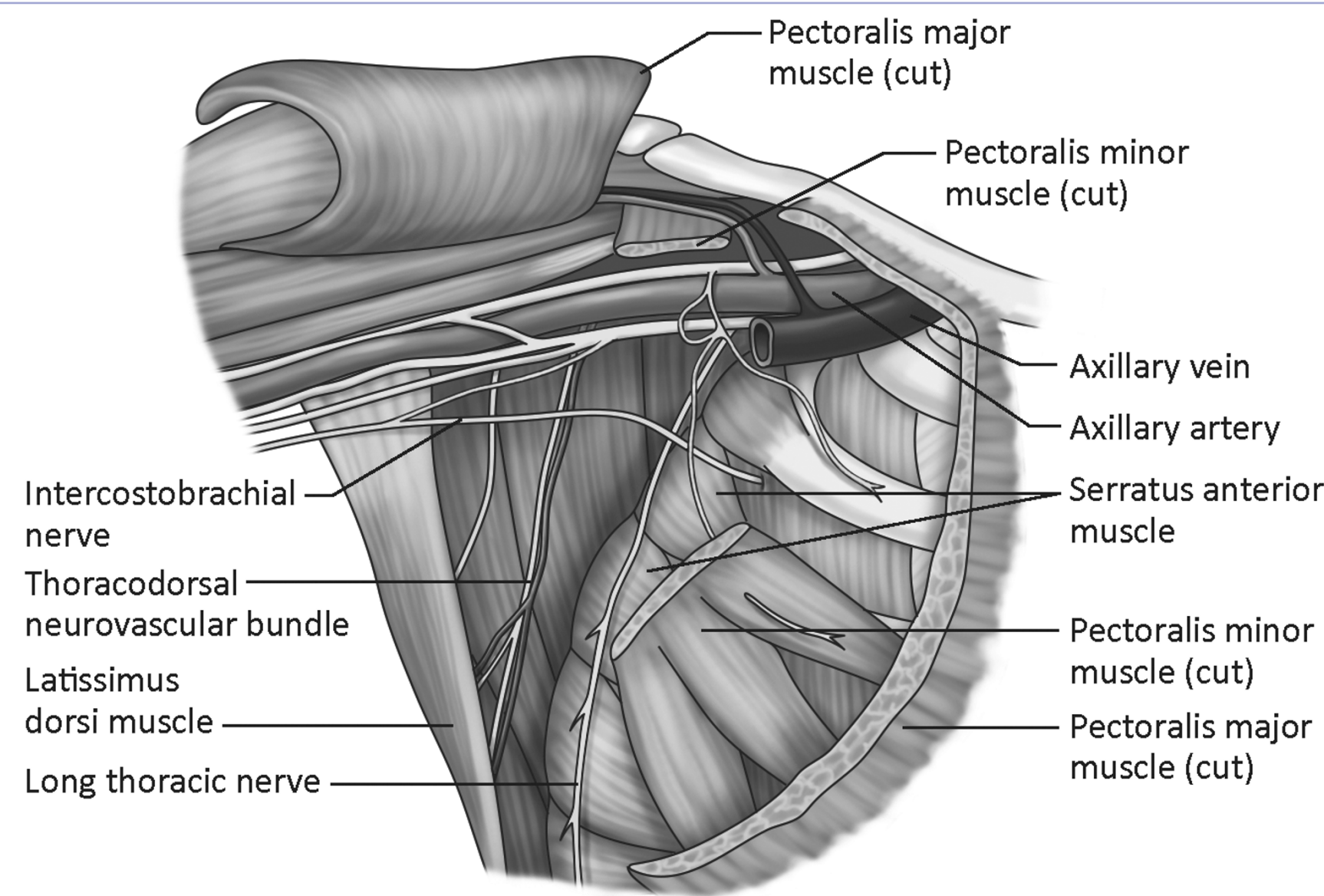


Standard 5.4: Axillary Lymph Node Dissection for Breast Cancer

Operation

For all axillary lymph node dissections performed with **curative intent** for patients with breast cancers of epithelial origin



Remove **level I and II** lymph nodes within:

- Axillary vein
- Latissimus dorsi
- Serratus anterior (chest wall)

Preserve long thoracic, thoracodorsal & intercostobrachial nerves when possible

Documentation

Required elements/ responses in synoptic format

- ✓ Curative intent
- ✓ Resection boundaries
- ✓ Preservation of vasculature
- ✓ Level III node removal (if applicable)

Timeline

2022
Document final plan for implementation

2023
Standard 5.4 takes full effect

2024
Site visits begin reviewing operative reports