Hello All,

We have gotten many kind calls, texts and emails today asking about my appointments and how we are doing. We are overwhelmed by the amount of information we received and processing the implications of the information. We want to share everything with each you but we are not up for multiple phone calls to explain everything. Writing everything down has helped us process what we learned. We appreciate everyone’s support and offers to help. At this point, we are still trying to figure out how to process the news so please don’t be offended if we don’t get back to you. As we figure out what we need and what would be helpful we will definitely reach out to you.

We spent 7+ hours at the hospital meeting with multiple doctors and we have many more meetings to go. Everyone knows how much I love lists, so here are some helpful lists for you.

* Details
  + I have \_\_\_\_\_(scientific name of cancer)\_\_\_\_\_\_\_ (This is a \_\_(real person language)\_\_\_\_ in my \_\_\_(location of tumor)\_\_\_\_. The pathology results indicate that this type of tumor has access to send cancer cells to the lymph nodes. The lymph nodes appear to be clear but a biopsy will confirm)
  + My staging is not fully complete but it is estimated to be a \_(stage of your cancer)\_ Staging will be confirmed once we have the exact tumor size confirmed and once lymph nodes are tested
    - Lymph node biopsy will be performed next week. They will remove the first group of lymph nodes where any escaped cancer cells would initially be trapped if they spread from the tumor.
  + The tumor is considered a grade \_(grade of tumor)\_\_, which means the cells are actively multiplying. This is a general descriptor of the tumor and not to be confused with the stage of the cancer.
  + Surgery and some form of chemotherapy will be required. The decision about what type of surgery and specific chemotherapy approach will be determined based on the results from the genetic testing, the biopsy and our fertility choices.
    - Surgery Options
      * Lumpectomy
      * Single Mastectomy
      * Double Mastectomy (Bi-lateral mastectomy is the most effective option for cancer removal and prevention of future cancer in the breasts)
      * Reconstructive surgery is available. If radiation is not needed this will be done at the same time as surgery. If radiation is needed, the reconstruction will be done later.
    - Chemo
      * I will lose my hair. It will come back. I have plans to get an awesome wig ☺
      * Treatment will be approx. 1 year long
      * Women my age usually rebound quickly from chemo side effects but each person’s response is unique.
  + Stats: About 1 in 8 women will develop breast cancer. 1 in 228 my age are expected to develop breast cancer.
  + Genetic testing will be done due to my age and family history.
  + Causes: We are not focused on cause, only treatment.
  + Fertility preservation is high on our priority list and we are discussing options privately.
  + Survival rates are high and doctors are optimistic. Our number one priority is to get me cancer free.
* “Your Questions”
  + How are you doing?
    - We are going through the full range of emotions. We have our good moments and our bad moments. We are trying to focus on the positive, but sometimes we just need to be sad. Being there through our roller coaster of emotions is greatly appreciated.
    - We want to keep hearing about your life and what is going on with you. It is a happy distraction from the cancer discussions. We want to keep social plans and do as much of our normal activities as we can for as long as we can. Once/if the treatment impacts our daily life; we will adjust and let you know. Obviously surgeries and appointments are taking priority now, but we are trying not to stop living because of the cancer diagnosis.
  + How can I help?
    - We appreciate the outpour of support. Supportive words are great and we know that you all are sending us so much love.
    - Other than learning the news and going to doctors visits, not a lot has changed in our day to day right now aside from the added stress. As treatment begins we will learn where we need help and we will not be shy about asking for it. We know you all are available to help as soon as we need it.
    - Medical advice and suggestions can be more overwhelming than helpful. We have a team of 5+ expert doctors offering the best medical advice available.
    - Coordinating our move into the new house (late August) with treatment and surgery may be difficult and this is an area we will most likely need your help.
  + How is \_(caregiver / spouse name)\_\_\_\_?
    - *\*It is very helpful to include information about the caregiver/spouse. Many times he/she is overlooked. Family and friends will be worried and it is helpful to share how he/she is feeling and how others can be helpful. For my husband this meant giving him space and trusting that he would reach out when he needed support.*

If you want to look up information, their doctors have recommended the following as the most credible, up to date resources:

* + - * cancer.gov
      * cancer.org
      * cancer.net
* Schedule *\* We found it was helpful to share our upcoming appointments dates. This helped family and friends stay up to date with my treatment, provide support and know when we might know more or need a check in.*

It will be a long difficult road ahead for the next year and beyond. It is not the year we had planned for but we will make it through. We don’t want to wish this year away; we want to make the most of this experience. We love you all very much and feel very lucky to have you on our side as we fight this. We will keep you updated as we learn more.

Mac & Anna