Dr. Robert Guarino Highlights Why Communication Between Specialists Matters in Breast Cancer Diagnosis

Breast pathologist Dr. Robert Guarino discusses how communication between pathology, radiology, surgery, and oncology contributes to a more complete understanding of breast disease and supports informed patient care.

New York City, New York Nov 12, 2026 (Issuewire.com) - A breast cancer diagnosis involves more than a single test or medical appointment. While patients may interact primarily with their surgeon, oncologist, or other treating physician, several medical specialists often contribute information that helps determine the nature of a breast abnormality and the appropriate next steps in care.

Dr. Robert Guarino, a physician specializing in breast pathology, highlights the importance of communication among these specialists, particularly when findings from different diagnostic procedures must be evaluated together.

Breast pathology focuses on examining tissue to identify and characterize breast disease. Pathologists evaluate biopsy and surgical specimens, looking for features that help distinguish benign conditions from malignancies and inform clinical decision-making.

However, pathology findings are often most useful when considered alongside a patient's medical history, imaging studies, and other clinical information.

"Very strong knowledge base, a dedication and passion to your career duties, and most importantly a commitment to help those in the community have good positive outcomes if they are dealing with breast disease," Guarino has said when describing the qualities he considers important in his field.

His perspective reflects the broader responsibility of physicians to apply their individual expertise while recognizing how their findings contribute to the work of other specialists.

Why Pathology and Imaging Must Be Considered Together

Breast abnormalities are frequently identified through mammography, ultrasound, magnetic resonance imaging, or a clinical examination. When a biopsy is recommended, a pathologist examines the tissue sample to determine what is present.

Although imaging and pathology examine the same area of concern, they provide different types of information.

Radiologists evaluate an abnormality's appearance, location, and characteristics through imaging. Pathologists examine tissue at the microscopic level to identify cellular changes and determine whether a particular disease process is present.

Communication between these specialists becomes especially important when the pathology findings do not appear to explain the abnormality identified on imaging.

For example, a biopsy may reveal benign tissue even though the imaging findings remain suspicious. In such situations, the medical team must consider whether the biopsy adequately sampled the area of concern and whether additional evaluation is necessary.

This process, often described as radiologic-pathologic correlation, helps physicians assess whether different diagnostic information is consistent with one another.

The purpose is not to assume that one specialist's findings are more important than another's. Rather, it determines whether the available evidence provides a sufficiently complete explanation.

The Role of Communication in Surgical and Treatment Planning

Once a breast abnormality has been evaluated, pathology findings may become an important part of discussions involving surgeons and oncologists.

For patients diagnosed with breast cancer, a pathology report can provide information about the type of cancer, its microscopic characteristics, and other features that may be relevant to treatment planning.

Depending on the clinical circumstances, additional testing may also be performed to identify the tumor's biological characteristics.

Surgeons may use pathology information to assess disease extent and evaluate surgical options. Medical oncologists may incorporate pathology findings alongside clinical information when discussing systemic treatment. Radiation oncologists may also consider relevant findings when participating in treatment planning.

Pathology alone does not drive these decisions. They require integrating multiple sources of information, including patient preferences, overall health, disease characteristics, and established clinical guidelines.

Clear communication helps ensure physicians responsible for different aspects of care understand important findings.

It also gives specialists opportunities to ask questions, clarify terminology, and discuss findings that may influence subsequent decisions.

When Findings Are Unexpected

Not every breast pathology case presents a straightforward diagnostic picture.

Some tissue findings may be uncommon, while others may resemble more than one condition under the microscope. In certain situations, a diagnosis may require additional tissue sections, specialized laboratory studies, or consultation with another pathologist.

Unexpected findings can also raise questions for other members of the care team.

A surgeon may need clarification about a particular feature described in a report. A radiologist may want to discuss whether the tissue findings correspond to the abnormality seen on imaging. An oncologist may request additional information relevant to a patient's clinical situation.

These discussions are a normal and valuable part of multidisciplinary medicine.

Guarino's professional background includes advanced fellowship training in surgical pathology and breast pathology at The Mount Sinai Hospital in New York City. His work in breast pathology has involved the evaluation of breast disease and collaboration with physicians across different areas of

breast care.

That experience has shaped his understanding of how diagnostic information moves between specialists and why communication matters when a case requires further consideration.

Supporting a More Complete Understanding of Breast Disease

Breast cancer is not a single, uniform disease. Different tumors can have distinct microscopic and biological characteristics, and those differences may influence how physicians evaluate individual cases.

The same principle applies to benign breast conditions, which can vary considerably in their appearance and clinical significance.

For this reason, effective breast care depends on more than identifying whether a tissue sample contains cancer. Physicians must also understand how the findings relate to the patient's broader clinical situation.

Multidisciplinary discussions can help bring those perspectives together.

In some healthcare settings, breast care teams participate in case conferences where they review imaging, pathology, surgical findings, and treatment considerations collectively. These discussions can be particularly useful when a case involves unusual findings, complex clinical circumstances, or questions that benefit from input across specialties.

The goal is to ensure that relevant information is available and that potential discrepancies receive appropriate attention.

For patients, much of this coordination happens outside the examination room. They may receive their results from one physician without seeing the discussions and evaluations that contributed to the final assessment.

Nevertheless, those interactions can be an important part of the diagnostic and treatment process.

Recognizing the Value of Every Specialty

Guarino emphasizes viewing pathology as one component of a larger medical process rather than an isolated laboratory function.

Pathologists bring specialized knowledge of tissue and disease characteristics, while radiologists, surgeons, oncologists, and other healthcare professionals contribute different forms of clinical expertise.

Each perspective can help address questions that another specialty may not be positioned to answer independently.

As diagnostic technologies and treatment options continue to develop, communicating findings clearly across medical specialties remains an important part of patient care.

For Guarino, the central consideration is that diagnostic information should help the broader medical team develop an accurate understanding of disease and make informed decisions for the people

receiving care.

While patients may never meet every specialist involved in their diagnosis, those physicians remain connected through the shared goal of providing careful, coordinated medical care.

About Dr. Robert Guarino

Dr. Robert Guarino is a physician specializing in breast pathology, anatomic pathology, and clinical pathology. He earned his undergraduate degree in biological sciences from Rutgers University and his medical degree from the University of Medicine and Dentistry of New Jersey–New Jersey Medical School.

Following his pathology residency, he completed fellowship training in surgical pathology and breast pathology at The Mount Sinai Hospital in New York City. His professional experience includes diagnostic pathology, medical education, and scholarly research. His interests include breast disease, diagnostic medicine, and multidisciplinary approaches to patient care.

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