

Date: 2018/12/8

Patient's Name: S.A

Responsible Physician: Dr.Jalali

Patient presentation:

58 yr female, FH: neg

Left breast mass. Ultrasound: hypo-echoic mass with partially regular borders and internal micro-calcifications 19*16*11mm in upper outer quadrant of left breast.

Mammography: suspicious microcalcification in right breast, 20* 10 mm

speculated mass in left breast. Core needle biopsy of left mass: Invasive ductal carcinoma, ER -,PR- ,HER2-.

Underwent left breast lumpectomy + left Axillary lymph node dissection + right breast wire excision if microcalcification.

Pathology: Left side: 1.4 cm Invasive ductal carcinoma, Grade 3/3, DCIS present, free margins. 8/15 lymph nodes involved by tumor. Right side: DCIS, solid type, with extensive necrosis. Surgical margins invoved.

Question: plan?

Recommended tests: Right side diagnostic mammography to evaluate completeness of microcalcification resection

Recommended plan: Chemotherapy based on invasive disease followed by margin re-excision of right breast surgical site of DCIS resection, and then bilateral radiotherapy.



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مرکز

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