

Date: 26 Oct 2019. 98/8/4

Patient's Name: A. G.

Responsible Physician: Dr. Babae

Patient Presentation:

- A 51 year old female known case of bilateral inflammatory breast cancer, bilateral edema and ulcer
 - Mammography: bilateral scattered micro calcifications, BIRADS V
 - Pathology: invasive ductal carcinoma with apocrine feature
 - Immunohistochemistry: ER-, PR-, HER2 +, Ki67 70%
 - Thoraco-abdominopelvic CT scan: normal
 - Bone scan: normal
 - Neo-adjuvant: Herceptin, Xeloda
- She responded to chemotherapy but after 4 months diffuse ulcerative skin lesions appeared
- Bone scan: multiple bone metastases in spine (T1-T5), tibia, calcaneus bone
 - Thoraco-abdominopelvic CT scan: normal

Question: What is the next plan?

Recommended Plan: MRI of tibia and calcaneus bone if metastases confirmed, then radiation to this bones should consider. Discussion with patient about risk of recurrence after surgery. Second line chemotherapy agent should prescribe.