Date: 08.04.2023; 1402/01/19

Patient's Name: P.A

Responsible Physician: Dr. Elahi

**Patient presentation:** A 34 year-old woman with negative family history and self-history of left nipple adenoma at 1396, has a 4\*2 cm well defined mass at 4 o'clock of right breast and negative for lymphnodes, that underwent right Breast-Conserving Surgery (BCS), Sentinel lymph node biopsy (SLNB) & contralateral mammoplasty. MRI: Right, LIQ, 40\*18 mass, BIRADS: 4.

CNBx: Low grade DCIS & IDP.

Mammography: Right, LIQ, 2 ill-defined Masses, BIRADS: 4.

ios Disease

Pathology: Right IDP & atypia, size: 23 mm, SLNB: 0/2, Margins: wide free (10 mm deep margin), Total specimen: 22\*18\*5 cm.

Review pathology: Low grade DCIS, solid & cribriform, ER & PR: Diffuse Strong positive, CK 5/6 negative, single cell necrosis, Micro calcification: present, size of DCIS: 20mm. Other pathology: IDP, SA, UDH, SLNB: 0/2.

## Question:

Is Radiotherapy necessary?

## Recommended plan:

Radiotherapy is recommended but if the patient didn't accept it, it could be omitted.

Research