

**Date:** 01.06.2024; 1403/03/12

**Patient's Name:** A.GH

**Responsible Physician:** Dr.Alipour

**Patient presentation:** A 46-year-old woman was examined for a left breast mass on 1402/11. Three masses at the 3 o'clock and retroareolar position and a suspicious lymph node in the left axilla. CNB showed IDC, grade 2 and 3, PNI: negative and LVI: negative. ER: positive, PR: positive, HER-2: triple positive and Ki67: 30-35%, the axillary lymph node sample was metastatic.

The metastasis workup showed several nodules in the middle lobe of the right lung. 6-session neoadjuvant chemotherapy was started in Bahman 1402. During chemotherapy ultrasound was performed in Farvardin, and showed suspicious lymph node in the right axillary region, and biopsy was done that were reactive. After neoadjuvant chemotherapy Chest CT scan is performed, suspicious lung lesions are not observed.

**Question:**

Pulmonary nodules seen in the first chest CTs may be metastatic lesions?

**Recommended plan:**

- 1- Follow up of lung nodules
- 2- Lung nodules are not typical for metastatic lesion



Figure 1&2: CT scan shows Lung nodules but not typical for metastatic lesion.