Date: 17.05.2025; 1404/02/27

Patient's Name: A.B

Responsible Physician: Dr. Lashkari

Patient presentation:

62 Y/0 woman

 $\pmb{\text{US:}}\ 20\text{mm}\ \text{mass}\ \text{in farzone}\ \text{of left breast near pectorals muscle} + 5\ \text{pathologic}$

LN

CNB: IDC G2 **ER:** 25% **PR:** neg **HER2:** neg **Ki67:**25%

The patient underwent 4 sessions of neoadjuvant chemotherapy but didn't complete her treatment.

After 1 year, the patient underwent MRM surgery: IDC, Tumor size: 5.5 cm, Grade 3.

Skin and skeletal chest muscles were involved, (LVI): positive.

Lymph Node Dissection (LND):

9 lymph nodes positive, plus 7 positive lymph nodes in level 2. Under adjuvant radiotherapy, the patient presented with an axillary mass, which was biopsied: lymph node involved with IDC Luminal A.

Continued and finished radiotherapy:

The axillary mass disappeared, but now she has skin nodules in the axilla. In physical exam lymphedema

CT review:

Probable mass under pec major



Question: Best plan?

Recommended plan:

MRI of breast and liver And bone scan

