

Date: 01.02. 2025; 1403/11/13

Patient's Name: SA

Responsible Physician: Dr. Elahi

Patient Presentation:

A 46 Y/O male with a negative familial history.

He is diabetic and presented with Rt. Axillary skin nodule

Pathology of the skin nodule:

punch biopsy (reviewed):

metastatic carcinoma with breast origin,

CK7+, CK20 -, GATA3+, GCPFD15+, ER 100%

PR 100%, Her2 -, Ki-67: 40%

PH/E:

Breast normal, Rt. axillary incision with mild thickening, Rt. Axillary LN:
2 cm

US:

No breast mass, no lymphadenopathy

MRI:

Rt. axillary reactive lymph node 12*6mm

PET CT:

Rt. Axillary subcutaneous nodules SUV:3.2, Rt. Axillary reactive lymph
node

He underwent Rt. Axillary wide skin resection + SLNB + ALND:

Previous skin mass final review:

Invasive breast carcinoma (ductal) in dermis & subcutaneous at least 9mm,

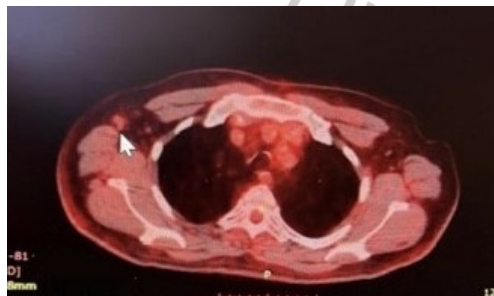
G2, LVI-, margins:? ER: 100%, PR: 90%, Her 2: -, Ki-67: 30%, GATA3: +,

CK5/6: -, P63: -, D2-40: -

2nd. Surgery:

No tumor residue, SLNB 1/7(12mm) NSLN1/4(15mm with ENE 2mm),

ALND LNs: free



PET scan shows a lesion in the axilla

Question:

What is the next plan?

Recommended plan:

Genetic consult + adjuvant therapy (chemoradiotherapy)

