

**Date: 22.02. 2025; 1403/12/04**

**Patient's Name: RF**

**Responsible Physician: Dr. Tavakkol**

**Patient Presentation:**

A 44 Y/O F, known case of Rt. breast mass,  
1401:

US:

Rt. Breast mass, lower part. 40 mm + satellite lesions (4c)

IDCII/III, ER:95%, PR:30%, HER-2: 3 +, Ki-67: 30% / LN+

Bone scan:

Multiple bone metastases

She received neoadjuvant chemotherapy every 3 weeks and Xgeva +  
microlenin monthly up to now.

1403/11/1

PET SCAN:

No evidence of hypermetabolic primary or metabolic tumor lesion

**Question:**

Next plan?

**Recommended plan:**

Bone scan is the best modality for evaluation of bone lesions, so she needs to do a  
bone scan to compare with previous one.