

Date: 18.10.2025; 1404/07/26

Patient's Name: M.A

Responsible Physician: Dr. Omranipour

Patient presentation:

55 Y/O female

1400/03:

Had a B5 mass (11*12*16mm, 2 o'clock, far zone) in Rt breast with clinically negative axilla

CNB: IDC,

1400/04:

BCS+SLNB

IDC, 1.8cm (first mass) + 1.6 (second mass)

G3, DCIS: present, EIC: Neg, free margins, LVI: Pos, pathologic stage: T1N0

ER: 60-70%, PR: 5%, HER-2: Neg, Ki67:25%

8 sessions of Chemotherapy+ No RT + MRI

1400/10:

MST + breast Implant

Uneventful follow ups until CA 15-3 rise

PET scan:

Local tumoral recurrence medial to the prosthesis in the right side of chest wall, in close contact with sternal body. Rt infraclavicular LN highly suspicious for metastasis

Question:

Is the metastasis inside the previous breast tissue or in a chest wall?

Does it need a surgical excision or systemic therapy?

Recommended plan:

Surgical excision is recommended as core needle biopsy is too risky.