

Date: 10.01.2026; 1404/10/20

Patient's Name: M.M

Responsible Physician: Dr. Alipour

Patient presentation:

63 Y/O female with history of papilloma in her right breast that underwent lumpectomy 1401

U/S: left, retro-areolar, 2 foci with greatest dimension 6mm+ NL axilla

MG: left, group of round and amorphous microcalcification in retro-areolar (B4b)

VAB: ILC, G2, ER: +, PR: +, HER-2: -, Ki67:30%

MRI: left, 9 O'clock, near zone, 15*11mm, no sign of multifocality and multicentricity.

Patient asks for bilateral mastectomy.

Question:

Is it necessary to perform mastectomy regarding microcalcification distribution and distance to nipple or BCS is possible?

Recommended plan:

MRI was reviewed and non-mass (28*17mm) in left breast was confirmed. Nipple is involved. Type of surgery should be elected with patient consult.

Breast Disease Research Center