

**Date:** 20 June 2019. 98/4/29.

**Patient's Name:** SH.S.

**Responsible Physician:** Dr. Sedighi.

**Patient Presentation:**

- A 32 year old female with right breast cancer about on year ago (IDC, ER, HER2+, Ki67 80-90%, positive axillary LN) received NAC, followed by surgery and RT.

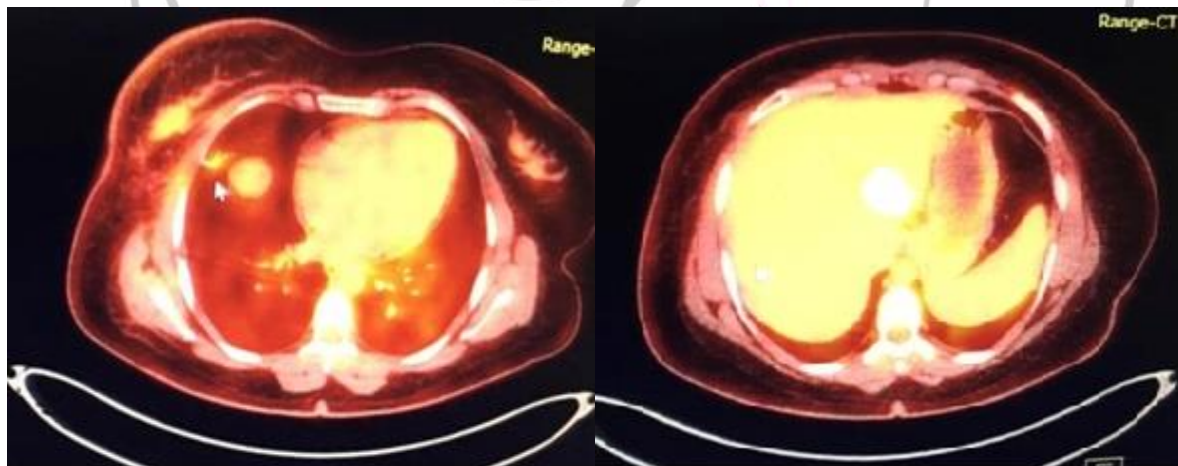
-Surgical Pathology: T=1.5cm, G3, free margins, 2 out of 9 LNs involved, ER-, PR-, HER-, Ki67 80%.

-She received Xeloda for 6 months.

-One month after treatment completion, she presented with right cervical LN. Her CA15-3 was elevated (59). PET-CT showed multiple cervical, mediastinal, and abdominopelvic LNs and multiple pulmonary and liver lesions in favor of metastases.

**Question:** Plan?

**Recommended Plan:** In PET-CT review multiple cervical, mediastinal, and abdominal LAP, and multiple pulmonary and liver lesions in favor of metastasis and a pelvic mass was reported. Pelvic US should be done and systemic therapy should be continued.



PET scan which shows pulmonary and liver lesions.