

Date: 3 Aug 2019. 98/5/12.

Patient's Name: SH.A.

Responsible Physician: Dr. Miri.

Patient Presentation:

-A 56 year old female with left breast cancer underwent MRM followed by chemoRT.

-She was evaluated because of dyspnea and multiple hilar LAPs and pericardial effusion was detected. She underwent pericardial fluid drainage and received chemotherapy and her symptoms was improved (There are no information about biopsy of the LNs or cytologic evaluation of the pericardial effusion).

-Now, she has presented with a 5mm suspicious lesion (B4a) in her right breast which CNB confirmed it as IDC.

Question: What should be done for right breast?

Recommended Plan: As there is no information about biopsy of the hilar LNs or cytologic evaluation of the pericardial effusion, at first it should be confirmed that the disease is metastatic. If it is proved to be metastatic, surgical treatment of right breast is not indicated.

