

Date: 25 May 2019 . 98/3/4.

Patient's Name: S.B.

Responsible Physician: Dr.Elahi.

Patient Presentation:

- A 77 year old female with positive family history of breast cancer referred for screening.
- In mammography, focal asymmetry in UOQ of right breast was reported which had been increased in size in comparison to previous imaging (B4). Breast US reported a hypoechoic irregular mass measuring 8 mm in UOQ of right breast. In breast MRI an irregular mass was showed in 9-10 o'clock of right breast.
- CNB of mass was done and pathologic examination showed IDC with feature of ILC, G1.
- The patient underwent wire guided BCS and SLNB. Pathology report was as follows:
*Mixed ductal and lobular invasive carcinoma, G2, 8mm, LVI -, DCIS (low grade, cribriform), free margins, no LN involvement(0/1), ER 95%, PR 95%, Her2 -, Ki67 5%.

Question: Does she need adjuvant chemotherapy? Can adjuvant RT be omitted?

Recommended Plan: No adjuvant chemotherapy is needed; RT can be omitted; hormone therapy (AI) is recommended.