

Date: 15 June 2019 . 98/3/25.

Patient's Name: F.SH.

Responsible Physician: Dr.Omranipour.

Patient Presentation:

-A 42 year old female with left breast cancer underwent lumpectomy with no axillary staging 9 months ago. Pathology examination reported IDC with medullary features, T=5cm, G3, LVI+, free margins[tumor is very close to inferior inked margin, but does not touched it(less than 0.5mm)]; ER-, PR-, HER2-, Ki67 70-80%.

-She received 16 sessions of adjuvant chemotherapy(finished at 98/3/11), and then referred for adjuvant RT. She was referred to surgeon for axillary staging by radiotherapist.

-Thoracic and abdominopelvic CT scan is normal. Bone scan has shown increased uptake in proximal of right femur which is suspicious for metastasis and radiologic correlation is recommended.

-Now, She is scheduled for margin re-excision and SLNB.

Question: Will SLNB change patient's management? Regarding the time of her first surgery, should she be referred for adjuvant RT after completion surgery?

Recommended Plan: margin re-excision and SLNB, followed by adjuvant RT is recommended.