

Date: 2020/11/21; 1/9/99

Patient's Name: S.F

Responsible Physician: Dr. Elahi

Patient presentation:

- Female, 60yrs-, FH+ (1st degree)
- CC: right breast mass
- MG: UOQ speculated mass (B5) with multiple large suspicious axillary lymph nodes (LN)
- US: right 10o'clock 29*23mm B5 mass, right LN involved
- Core needle biopsy: mass: IDC, G3m, ER+(90%),PR+(90%),Her2-(score0),Ki-67+(20-25%) Axillary LN: positive
- Chest CT scan: Bulged mediastinal LNs up to 14 mm.
- US: NL
- Bone scan: multiple bone metastasis

Question: 1-Thoracic CT scan review?

2- Treatment plan?

Recommendations: mediastinal LNs aren't suspicious because 14 mm is the length not the short axis which is important so the patient only has multiple bone metastasis

Recommended plan: Could be considered in NIMAD project and primary site of tumor be operated.