Date: 04.09.2021; 1400.06.13

Patient's Name: F.D

Responsible Physician: Dr.Jalaeefar

Patient presentation:

A 43 year-old woman with pelvic pain and metastatic breast origin lesion in left ischium, then left UOQ breast mass and multiple bone metastases was found.

WBS: (4.23) Left ischial bone lesion (metastasis?)

CNBx of ischium: metastatic ACA, IHC compatible with breast origin

US: neck (-), breast (a 26mm B5 mass in left UOQ and a suspicious axillary lymph node)

CT: multiple bone metastases ((T12, T4, L1), left breast mass, lung nodules

Breast CNB: IDC, G2, ER+ (15%), PR+ (35%), HER2 -, Ki67 30%

Question:

What's the next plan? Systemic chemotherapy? Hormone therapy? Radiotherapy? Surgery?

Recommendation:

1.NIMAD trial if she accept (Chemotherapy then surgery)

in Disease

- 2. Reevaluation of left femoral bone by imaging
- 3. Spine & pelvic RT and HT(if it is not responsive, systemic chemotherapy is recommended)

Research

