

Date: 12.02.2022; 1400.11. 23

Patient's Name: Sh.R

Responsible Physician: Dr.Alipour

Patient presentation: A 78 year-old lady with family history of endometrial cancer in her sister that underwent left mastectomy because of microcalcification in 1399/5. Pathology result was probably DCIS. Triple negative and 3 sentinel LN negative and 2 non-sentinel LNs are involved.

Pathology: IDC, 2.6 cm, G1, LVI-, margin free, DCIS +, ER+80%, PR +80%, HER-, Ki67 18%

She underwent chemotherapy and XRT and received aromatase inhibitor. She presented with bloody nipple discharge from contralateral breast a few months after her surgery.

Sonography: mild ductal ectasia in right breast

Mammography: benign type microcalcification in right breast (stable) & asymmetrical density in right breast central part B2

MRI: mild duct ectasia in right breast B2

Bone scan: negative

CT: normal

Question:

What's the next plan?

Recommendation:

Duct excision is recommended.