Date: 10.12.2022; 1401/09/19

Patient's Name: F.H

Responsible Physician: Dr. Elahi

Patient presentation: A 52 year-old woman with right axillary mass. She underwent BCS and ALND on 1401/04 and she underwent adjuvant chemotherapy until 1401/08. Imaging: Right, UOQ, 14mm mass, BIRADS: 4b, Right axillary Lymph Nodes are thick (multiple)

Pathology: IDC, Grade: 2, margin completely involved, ER: negative, PR: negative, Her-2: double positive, CISH: positive, Ki67: 50%, Lymph Nodes: 3/3 are positive.

Mets WU: Negative

Chest CT: (after surgery)

Right axillary spiculated mass is 35mm. Thick Lymph Node is 18mm, and a Right UOQ 65mm spiculated mass.

Research

PE after chemotherapy: Post operation change, no palpable Lymph Nodes.

Sonography: Right breast small serum, no axillary Lymph Nodes.

Question:

Is Axillary surgery indicated?

Recommended plan:

1- Classic Axillary dissection is recommended.

Post Disease

Plan of breast is total mastectomy.