



Surg Path Final Report

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ICD-O-3
Carcinoma, tubular infiltrating
Site ① Breast NOS 8520/3
150.9
JW 5/10/13

SURG PATH FINAL REPORT

SURGICAL PATHOLOGY

Collected:

Accession:

Physician:

PROCEDURE

Bilateral simple breast mastectomy with sentinel node biopsy left breast.

A. Right breast. B. Left breast with attached sentinel nodes.

HISTORY

Left breast cancer.

GROSS

A. Received in formalin in a container labeled "right breast" is a mastectomy (22 x 18 x 5 cm). Orientation of the specimen is not provided. The skin ellipse (20 x 15 cm) has a central unremarkable nipple and areola. The posterior margin is composed of thin fascia without attached skeletal muscle. The margins are marked with black ink.

The specimen is serially sectioned. The parenchyma has discrete and ill-defined areas of soft white fibrous tissue. A suspicious lesion is not palpated.

1. Nipple and areola. 1NS
2. Subareolar parenchyma. 2SS
- 3-6. Representative sections from four quadrants.

B. Received fresh in a container labeled "left breast" is a mastectomy (23 x 17 x 5 cm) with a 7 cm axillary tail. The skin ellipse (20 x 12 cm) has a central unremarkable nipple and areola.

The parenchyma is serially sectioned. The medial hemisphere has a 2.6 cm in greatest dimension hard gray-white sclerotic neoplasm with an ill-defined radially infiltrating border measuring approximately 1 cm from the posterior margin, 2.2 cm from the skin surface and 1 cm from the nearest (inferomedial) radial margin. A representative portion of the tumor along with normal parenchyma away from the neoplasm is submitted for TCGA/. The remaining parenchyma has scattered areas of ill-defined fibrous tissue without a palpable mass. The axillary tail has numerous fatty lymph nodes up to 2.5 cm in greatest dimension.

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1. Small lymph node.
- 2-7. Bisected lymph nodes (1 lymph node per cassette).
- 8-10. Large lymph node.
11. Nipple and areola.
12. Skin and posterior margin nearest neoplasm.
13. Inferomedial quadrant nearest neoplasm.
- 14-16. Neoplasm.
17. Superolateral quadrant.
18. Inferolateral quadrant.

MICROSCOPIC

A-B. Performed.

DIAGNOSIS

- A. Right simple mastectomy:
Nonproliferative breast parenchyma with acellular dense
stromal fibrosis and rare microcalcification.
Nipple, free of lesion.

CPT 88307

- B. Left mastectomy with attached sentinel nodes:
Invasive lobular carcinoma, Nottingham grade 1 (previously
diagnosed,
Nipple and skin of posterior margin (nearest neoplasm), free
of lesion.
Eight of eight sentinel lymph nodes, free of metastatic
carcinoma.

CPT 88309

BREAST CARCINOMA SUMMARY:

SPECIMEN: Left breast.
PROCEDURE: Left breast with attached sentinel lymph nodes.
SPECIMEN INTEGRITY: Intact.
SPECIMEN LATERALITY: Left.
SPECIMEN SIZE: 23 x 17 x 5 cm.
LYMPH NODE SAMPLING:
SENTINEL LYMPH NODES: 8 of 8, negative for metastatic
carcinoma.
TUMOR SIZE: 2.6 cm.
TUMOR FOCALITY: Single focus.
SKIN INVOLVEMENT: Negative for cancer.
NIPPLE INVOLVEMENT: Negative for cancer.
SKELETAL MUSCLE INVOLVEMENT: N/A.
DUCTAL CARCINOMA IN SITU (DCIS): Not present.
LOBULAR CARCINOMA IN SITU (LCIS): N/A.
HISTOLOGIC TYPE: Lobular carcinoma.
GRADING (NOTTINGHAM):
Tubular Formation Score: 3.
Nuclear Pleomorphism Score: 1.
Mitotic Rate Score: 1.

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COMBINED GRADE (NOTTINGHAM): 1.
LYMPHOVASCULAR INVASION: Not seen.
MARGIN OF EXCISION: Negative for carcinoma.
LYMPH NODES: See above.
MICROCALCIFICATION: Not seen.
OTHER FINDINGS: N/A.
HORMONE RECEPTORS: ER positive. PR positive.
HER2: Negative (1+).
PATHOLOGIC [REDACTED] (AJCC Seventh Edition): pT2 pN0

[REDACTED] (Electronic Signature) [REDACTED]

Completed Action List:

* Order by [REDACTED] on

Type: Surg Path Final Report
Date:
Status: Auth (Verified)
Title: SURG PATH FINAL REPORT
Encounter info: [REDACTED]
Contributor system: [REDACTED]

Printed by: [REDACTED]
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SP 1st Addendum Report

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SP 1ST ADDENDUM REPORT

SURGICAL PATHOLOGY

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Physician:

ADDENDUM REPORT

E-cadherin immunostain is performed on block B15 to confirm the lobular nature of the infiltrating mammary carcinoma. The stain is negative, supporting the diagnosis of invasive LOBULAR carcinoma. Positive and negative tissue controls perform as expected.

88342

(Electronic Signature)

Completed Action List:

* Order by

Type:

SP 1st Addendum Report

Date:

Status:

Auth (Verified)

Title:

SP 1ST ADDENDUM REPORT

Encounter info:

Contributor system:

Criteria	Yes	No
Diagnosis Discrepancy		✓
Primary Tumor Site Discrepancy		✓
HPAA Discrepancy		✓
Prior Malignancy History		✓
Dual/Synchronous Primary	✓	✓
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer initials	LM	3/1/13

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