

1CD-0-3

Carcinoma, infiltrating duct, NOS

8500/3 12/8/10
lw

Path Site Code: breast, upper outer quadrant C50.4
CQCF Site: breast, NOS C50.9

TSS

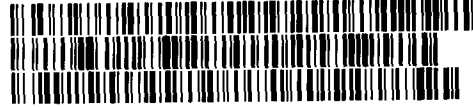
SPECIMENS:

- A. SENTINEL L NODE 1
- B. SENTINEL L NODE 2
- C. LEFT BREAST
- D. LEFT AXILLARY CONTENTS
- E. ADDITIONAL LEFT AXILLARY CONTENTS
- F. RIGHT BREAST
- G. LEFT TUBE AND OVARY
- H. RIGHT TUBE AND OVARY

UUID: AF740239-D3E2-AC74-844E-0F5AD1A905ED

TCGA-E2-A15S-01A-PR

Redacted



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INTRAOPERATIVE CONSULTATION DIAGNOSIS:

TPA1/TPA2-SLN #1: Negative for carcinoma (0/2).

TPB-SLN #2: Positive for carcinoma (1/1).

Diagnoses called by Dr. to Dr. at B).

G-H: Gross examination- left tube and ovary-right tube and ovary. No tumor identified. Diagnosis called to Dr. at by Dr.

GROSS DESCRIPTION:

A. SENTINEL L NODE 1

Received fresh labeled with the patient's identification and "sentinel lymph node #1" are two lymph node, 0.8 x 0.5 x 0.4 cm (A1) and 0.2 x 0.2 x 0.2 cm (A2). Two touch preps are performed; is submitted entirely/separately in cassettes A1-A2.

B. SENTINEL L NODE 2

Received fresh labeled with the patient's identification and "sentinel lymph node #2" is a 2 x 1 x 0.8 cm lymph node. Touch prep was performed and the lymph node is submitted entirely in cassette B1.

C. LEFT BREAST

Received fresh labeled with the patient's identification and "left breast" is an oriented 254 g, 15 x 15 x 2.5 cm mastectomy with 15 x 9.5 cm skin ellipse and 1.5 cm everted nipple. Ink code: Anterior/superior-blue, anterior/inferior-orange, posterior-black. The specimen is serially sectioned into 7 slices from lateral to medial with nipple in slice 3 revealing an ill-defined pink-tan infiltrating mass, measuring 4.6-cm, located in the upper inner and upper outer quadrants in slices 2 through 6 that is closest to the posterior margin at 0.2 cm. Tissue is procured. Representatively submitted:

C1: slice 1, UOQ-lateral to mass

C2: slice 2, UOQ-mass

C3-C4: slice 3, mid upper-mass

C5: slice 4, UIQ-mass and deep margin

C6: slice 5, UIQ-mass and deep margin

C7: slice 6, UIQ-mass

C8: slice 7, UIQ-medial to mass

C9: slice 5, LIQ

C10: slice 2, LOQ

C11-C12: nipple, perpendicular sections (skin in C12)

D. LEFT AXILLARY CONTENTS

Received fresh labeled with the patient's identification and "left axillary contents" is a piece of yellow-tan fat, 6.5 x 3.5 x 1.5 cm containing 8 possible lymph nodes ranging from 0.1 to 0.9 cm in greatest dimension. Submitted entirely:

D1-D2: 4 possible lymph nodes in each cassette

D3-D8: remainder of soft tissue

E. ADDITIONAL LEFT AXILLARY CONTENTS

Received fresh are multiple tan pink soft tissue fragments aggregating to 4.5 x 3.5 x 2.4cm. Dissection reveals 7 lymph nodes ranging from 0.3 x 0.3 x 0.3cm to 2.5 x 1.4 x 1cm.

E1: 5 lymph nodes

E2: 1 lymph node

E3-E4: 1 lymph node

F. RIGHT BREAST

Received fresh labeled with the patient's identification and "right breast" is a 212g, 19 x 15 x 2cm oriented (stitch in axilla) simple mastectomy with attached 17 x 8.5cm tan pink skin ellipse and 1.5cm everted nipple. Ink code: anterior-superior: blue, anterior-inferior: orange, posterior-black. The specimen is serially sectioned from lateral to medial into 13 slices with nipple in slice 9, revealing unremarkable fibrous parenchyma. Representatively submitted:

F1: nipple slice 9

F2: UOQ slice 5

F3: LIQ slice 7

F4: UOQ slice 7

F5: UOQ slice 8

F6: UC slice 9

F7: LC slice 9

F8: UIQ slice 10

F9: LIQ slice 10

F10: skin slice 11

F11: LIQ slice 11

F12: UIQ slice 12

G. LEFT TUBE AND OVARY

Received fresh is a 4 x 2 x 1.5cm tan pink ceribriform ovary with attached fimbriated fallopian tube 7 x 0.5 x 0.5cm. The ovary is bivalved to reveal multiple cysts, the largest of which is 0.4cm filled with clear straw like fluid. The remaining ovarian parenchyma is grossly unremarkable. The fallopian tube is serially sectioned to reveal a patent lumen. Entirely submitted:

G1-G5: left ovary

G6-G9: fallopian tube

H. RIGHT TUBE AND OVARY

Received fresh is a 4.5 x 3 x 1.5cm tan pink ceribriform ovary with attached fimbriated fallopian tube 5.8 x 0.8 x 0.5cm. The ovary is bivalved to reveal multiple cysts, the largest of which is 0.6cm filled with clear straw like fluid. The remaining ovarian parenchyma is grossly unremarkable. The fallopian tube is serially sectioned to reveal a patent lumen. Entirely submitted in H1-H7.

DIAGNOSIS:

A. LYMPH NODES, SENTINEL #1, LEFT AXILLA, EXCISION:

- TWO LYMPH NODES, NEGATIVE FOR METASTASES (0/2).

B. LYMPH NODE, SENTINEL #2, LEFT AXILLA, EXCISION:

- METASTATIC CARCINOMA TO ONE OF ONE LYMPH NODE (1/1), MEASURING 0.8-CM WITH NO EXTRANODAL EXTENSION.

C. BREAST, LEFT, MASTECTOMY:

- INVASIVE DUCTAL CARCINOMA, SBR GRADE 3, MEASURING 4.6-CM
- INTERMEDIATE NUCLEAR GRADE, DUCTAL CARCINOMA IN SITU, SOLID AND CRIBRIFORM TYPES WITH CENTRAL NECROSIS AND MICROCALCIFICATIONS
- SURGICAL RESECTION MARGINS NEGATIVE FOR TUMOR
- EXTENSIVE LYMPHOVASCULAR INVASION IDENTIFIED
- SEE SYNOPTIC REPORT.

D. LYMPH NODES, LEFT, AXILLARY DISSECTION:

- SEVEN LYMPH NODES, NEGATIVE FOR METASTASES (0/7).

E. LYMPH NODES, LEFT, AXILLARY DISSECTION:

- SEVEN LYMPH NODES, NEGATIVE FOR METASTASES (0/7).

F. BREAST, RIGHT, MASTECTOMY:

- BREAST TISSUE, NO TUMOR SEEN.

G. OVARY AND FALLOPIAN TUBE, LEFT, RESECTION:

- OVARY AND FALLOPIAN TUBE, NO TUMOR SEEN.

H. OVARY AND FALLOPIAN TUBE, RIGHT, RESECTION:

- OVARY AND FALLOPIAN TUBE, NO TUMOR SEEN.

SYNOPTIC REPORT - BREAST

Specimens Involved

Specimens: A: SENTINEL L NODE 1

B: SENTINEL L NODE 2

C: LEFT BREAST

D: LEFT AXILLARY CONTENTS

E: ADDITIONAL LEFT AXILLARY CONTENTS

Specimen Type: Mastectomy
 Needle Localization: No
 Laterality: Left
 Invasive Tumor: Present
 Multifocality: No
 WHO CLASSIFICATION
 Invasive ductal carcinoma, NOS 8500/3
 Tumor size: 4.6cm
 Tumor Site: Upper outer quadrant
 Upper inner quadrant
 Margins: Negative
 Tubular Score: 3
 Nuclear Grade: 3
 Mitotic Score: 3
 Modified Scarff Bloom Richardson Grade: 3
 Necrosis: Absent
 Vascular/Lymphatic Invasion: Present
 Extent: extensive
 Lobular neoplasia: None
 Lymph nodes: Sentinel lymph node
 Axillary dissection
 Lymph node status: Positive 1 / 17
 Micrometastases: No

DCIS present
 Margins uninvolved by DCIS
 DCIS Quantity: Estimate 20%
 DCIS Type: Solid
 Cribriform
 DCIS Location: Associated with invasive tumor
 Nuclear grade: High
 Necrosis: Present

ER/PR/HER2 Results
 ER: Positive
 PR: Negative
 HER2: Negative by FISH
 Performed on Case:

Pathological staging (pTN): pT 2 N 1
 Pathological staging is based on the AJCC Cancer Staging Manual, 7th Edition

CLINICAL HISTORY:

year-old BRCA2 (+) left breast invasive ductal carcinoma DCIS, right prophylactic mastectomy, left therapeutic breast mastectomy with sentinel lymph node dissection

PRE-OPERATIVE DIAGNOSIS:

Left breast cancer

Microscopic/Diagnostic Dictation:

Final Review: Pathologist,

Final: Pathologist, (

| Criteria | Yes | No |
|--------------------------------|---------------|-------------|
| Diagnosis Discrepancy | | / |
| Primary Tumor Site Discrepancy | | / |
| HIPAA Discrepancy | | / |
| Prior Malignancy History | | / |
| Dual/Synchronous Primary Noted | | / |
| Case is (circle): | QUALIFIED | UNQUALIFIED |
| Reviewer Initials | Date Reviewed | |