Clinical Diagnosis & History: Core biopsy of left breast shows infiltrating carcinoma with FNA of node positive for carcinoma. Right mastectomy is prophylactic.

Specimens Submitted:

- 1: SP: Right breast
- 2: SP: Left breast and axillary contents levels 1 and 2
- 3: SP: Sentinel node #1 level 1 right axilla
- 4: SP: Additional left breast upper flap tissue

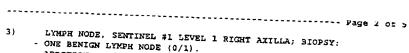
DIAGNOSIS:

- BREAST, RIGHT; PROPHYLACTIC MASTECTOMY:
- BENIGN BREAST TISSUE WITH FLORID SCLEROSING ADENOSIS, FOCAL DUCTAL HYPERPLASIA WITHOUT ATYPIA, SECRETORY CHANGES, CYSTS, FIBROADENOMATOID CHANGES AND A FEW MICROCALCIFICATIONS. - UNREMARKABLE NIPPLE.
- BREAST AND AXILLARY CONTENTS LEVELS 1 AND 2, LEFT; MODIFIED RADICAL MASTECTOMY AND AXILLARY LYMPH NODE DISSECTION:
- INVASIVE DUCTAL CARCINOMA, HISTOLOGIC GRADE II-III/III, NUCLEAR GRADE III/III, ASSOCIATED WITH LYMPHOCYTIC INFILTRATE AND MEASURING 1.9 CM IN LARGEST DIMENSION MICROSCOPICALLY.
- A MINOR COMPONENT OF DUCTAL CARCINOMA IN SITU (DCIS), SOLID AND MICROPAPILLARY TYPES WITH HIGH NUCLEAR GRADE AND NECROSIS, IS PRESENT ADMIXED WITH AND AWAY FROM THE INVASIVE CARCINOMA.
- NO INVOLVEMENT OF THE NIPPLE, SKIN OR THE SURGICAL MARGINS BY CARCINOMA IS IDENTIFIED.
 - LYMPHOVASCULAR INVASION IS PRESENT.
- THE NON-NEOPLASTIC BREAST TISSUE SHOWS PREVIOUS BIOPSY SITE CHANGES, FLORID SCLEROSING ADENOSIS, DUCTAL HYPERPLASIA WITHOUT ATYPIA AND A BENIGN
- THE LYMPH NODE STATUS IS AS FOLLOWS (EXPRESSED AS THE NUMBER OF POSITIVE LYMPH NODES IN RELATION TO THE TOTAL NUMBER OF LYMPH NODES EXAMINED):

 - LEVEL II: 1/7
- THERE IS FOCAL EXTRANODAL EXTENSION OF CARCINOMA (>2 MM) AND PERINODAL VASCULAR INVASION.
- RESULTS OF SPECIAL STAINS (ER, PR, HER-2/NEU) WILL BE REPORTED AS AN ADDENDUM.

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- ADDITIONAL H/E LEVELS AND CYTOKERATIN (AE1: AE3) IMMUNOSTAINS ARE ALSO NEGATIVE FOR METASTATIC TUMOR.

SOFT TISSUE, ADDITIONAL LEFT BREAST UPPER FLAP; EXCISION: - ADIPOSE TISSUE, NEGATIVE FOR TUMOR.

I ATTEST THAT THE ABOVE DIAGNOSIS IS BASED UPON MY PERSONAL EXAMINATION OF THE SLIDES (AND/OR OTHER MATERIAL), AND THAT I HAVE REVIEWED AND APPROVED

*** Report Electronically Signed Out ***

Special Studies:

Result

ER-C PR-C HER2-C NEG-HER2 NEG CONT IMM RECUT ER-C PR-C ER-C PR-C HER2-C NEG-HER2

Special Stain

NEG CONT IMM RECUT AE1:AE3 NEG CONT

IMM RECUT

Gross Description:

The specimen is received fresh, labeled *Right breast. Stitch marks axillary tail". It consists of a breast measuring 18 x 17 x 5 cm overlaid by white-tan skin, measuring 10 x 4.5 cm. There is a centrally placed, slightly inverted nipple, measuring 1.2 cm in diameter, surrounded by an unremarkable arcola, measuring 4 cm in diameter. Cross-sectioning of the specimen reveals dense fibroid tissue in the central portion of the specimen, but no discrete mass is identified. Representative sections are

Summary of Sections: N - Nipple NB - Nipple base

DM - Deep margin

The second second

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Comment

Common the Common Commo



FT - Fibroadipose tissue LIQ - Lower inner quadrant LOQ - Lower outer quadrant UIQ - Upper inner quadrant UOQ - Upper outer quadrant

The specimen is received fresh, labeled "Left breast and axillary 1.6 cm. The axillary tail has 2 tags designating levels 1 and 2. The specimen is overlaid by white-tan, unremarkable skin, measuring 10.5×1.3 cm. The is a centrally placed, everted nipple, measuring 1.0 cm in diameter, surrounded by unremarkable areola, measuring 4 cm in diameter. Cross-sectioning of the specimen reveals a firm to hard, fairly circumscribed, centrally placed mass, measuring 1.7 x 1.5 x 1.5 cm, approximately 1.0 cm from the deep margin. The mass, arbitrarily designated T1 is surrounded by dense fibrous tissue. Approximately 5 cm lateral and 3 cm anterior to T1 is a mass measuring 1.0 cm in diameter and approximately 4 cm from the deep margin. The second mass, which is arbitrarily designated T2, has a central cavity filled with necrotic material grossly. The remainder of the breast tissue consists of unremarkable fibroadipose tissue. Examination of the axillary tail show several lymph nodes at level 1, ranging from 0.5 cm to 2.0 cm and at level 2 ranging from 0.5 cm to 2.5 cm. The smaller lymph nodes are submitted in toto. The largest lymph nodes are bisected, alternatively inked and submitted entirely.

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Summary of Sections:

N - Nipple

NB - Nipple base

FT - Fibrous tissue

DM - Deep margin

T1 - Centrally-placed mass, 1 cm to the deep margin T2 - Laterally-placed mass

LIQ - Lower inner quadrant

LOQ - Lower outer quadrant

UIQ - Upper inner quadrant

UOQ - Upper outer quadrant

LN1 - Level 1 lymph node

BLN1 - Bisected level 1 lymph node

BLLN1 - Bisected largest level 1 lymph node

LN2 - Level 2 lymph node

BLN2 - Bisected level 2 lymph node

BLLN2 - Bisected largest level 2 lymph node

The specimen is received in formalin, labeled "Sentinel node #1, level 1, right axilla". It consists of an apparent lymph node, measuring $1.2 \times 1.0 \times 0.5$ cm, surrounded by pink-tan, unremarkable adipose tissue, measuring $1.0 \times 1.0 \times 0.2$ cm. The lymph node is bisected and submitted in toto, in addition to the surrounding fibroadipose tissue.

Summary of Sections:

The second

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4) The specimen is received in formalin, labeled "Additional left breast upper flap tissue". It consists of yellow-tan fibroadipose tissue, measuring 4 x 3 x 0.5 cm. Cross-sectioning of the specimen reveals grossly unremarkable adipose tissue. The specimen is entirely submitted.

Summary of Sections: FA - Fibroadipose tissue

Summary of Sections: Part 1: SP: Right breast

Block	Sect. Site		
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Part 2: SP: Left breast and axillary contents levels 1 and 2

Block	_	· · · · = -
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2	bln1	2
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1	ln2	2
1	log	1
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3	t1	1
2	t2	3
1	uiq	2
1	nod	ı
	LOQ	1

Part 3: SP: Sentinel node #1 level 1 right axilla

Block Sect. Site PCs sln 1

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Page 5 of 5 Part 4: SP: Additional left breast upper flap tissue

Block

Sect. Site

fa

PCs

Procedures/Addenda: Addendum Addendum
Date Ordered:
Date Complete:
Date Reported:

Status: Signed Out

By:

Addendum Diagnosis

ADDENDUM REPORT

SITE: LEFT BREAST (PART #2) ER: 0% NUCLEAR STAINING PR: 0% NUCLEAR STAINING

HER-2/NEU (HERCEPTEST): POSITIVE (STAINING INTENSITY OF 3+)

CONTROLS ARE SATISFACTORY

** End of Report **