

1CD-0-3  
Carcinoma, infiltrating ductal, Nos 8500/3  
Site: breast, Nos C50.9 1/26/11 hr

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## SURGICAL PATHOLOGY REPORT

Patient: Specimen #:  
FMP/SSN:  
DOB/Age/Sex: WHITE Taken:  
Location: Received:  
Physician(s): Reported:

### SPECIMEN:

A: RIGHT BREAST LUMPECTOMY B: ADDITIONAL INFERIOR MARGIN  
C: ADDITIONAL DEEP MARGINS D: SENTINEL NODE #1  
E: SENTINEL LYMPH NODE #2

UUID: 61462D57-DF98-4F89-BAEF-E8156A47E2DD  
TCGA-A2-A0EY-01A-PR

Redacted

### FINAL DIAGNOSIS:

#### A. BREAST, RIGHT, LUMPECTOMY:

- TUMOR TYPE: INFILTRATING DUCTAL CARCINOMA.
- NOTTINGHAM GRADE: MODERATELY DIFFERENTIATED.
- NOTTINGHAM SCORE: 6/9  
(Tubules= 2, Nuclei= 3, Mitoses= 1)
- TUMOR SIZE (GREATEST DIMENSION): 2.8 CM
- TUMOR NECROSIS: NOT IDENTIFIED.
- MICROCALCIFICATIONS: PRESENT ASSOCIATED WITH INFILTRATING CARCINOMA AND BENIGN DUCTS
- VENOUS / LYMPHATIC INVASION: NOT IDENTIFIED.
- MARGINS: UNINVOLVED.
  - DISTANCE OF INVASIVE TUMOR FROM NEAREST MARGIN IS 0.3 CM, FROM INFERIOR MARGIN. (measured microscopically)
- INTRADUCTAL COMPONENT: PRESENT; SOLID AND CRIBRIFORM, NUCLEAR GRADE 3, WITH CENTRAL NECROSIS.
- LYMPH NODES: SEE PARTS "D-E".
  - ONE OF TWO SENTINEL LYMPH NODES POSITIVE FOR METASTATIC CARCINOMA.
- SKIN INVOLVEMENT: NOT IDENTIFIED.
- ESTROGEN RECEPTORS: POSITIVE (SEE .)
- PROGESTERONE RECEPTORS: NEGATIVE (SEE .)
- HER 2 NEU by IHC: POSITIVE (SEE .)
- PATHOLOGIC STAGE: pT2 N1a MX
- ADDITIONAL PATHOLOGIC CHANGES: USUAL DUCTAL HYPERPLASIA, FIBROCYSTIC CHANGES, SCLEROSING ADENOSIS, UNREMARKABLE EPIDERMIS.

#### B. BREAST, "ADDITIONAL INFERIOR MARGIN", EXCISION:

- BENIGN BREAST TISSUE.
- MARGINS UNINVOLVED.
- PATHOLOGIC CHANGES: USUAL DUCTAL HYPERPLASIA, APOCRINE METAPLASIA, FIBROCYSTIC CHANGES, MICROCALCIFICATIONS.

#### C. BREAST, "ADDITIONAL DEEP MARGINS", EXCISION:

**SURGICAL PATHOLOGY REPORT**

Patient:

Specimen #:

**FINAL DIAGNOSIS (continued):**

- BENIGN FIBROADIPOSE TISSUE WITH NO EVIDENCE OF MALIGNANCY.
- NO BREAST GLANDULAR ELEMENTS PRESENT.
- MARGINS UNINVOLVED.

**D. LYMPH NODE, SENTINEL NODE #1, BIOPSY:**

- ONE LYMPH NODE POSITIVE FOR METASTATIC CARCINOMA.
- LARGEST METASTATIC FOCUS: 0.4 CM.
- EXTRACAPSULAR EXTENSION: NOT IDENTIFIED.

**E. LYMPH NODE, SENTINEL NODE #2, BIOPSY:**

- ONE LYMPH NODE NEGATIVE FOR METASTATIC CARCINOMA BY ROUTINE HISTOLOGY AND CYTOKERATIN IMMUNOHISTOCHEMISTRY.

Comment: The prior core biopsy specimen ( ), right breast, is reviewed. This case has received intradepartmental prospective peer review.

**\*\* Report Electronically Signed Out \*\***

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**CLINICAL DIAGNOSIS AND HISTORY:**

y/o female with history of right breast carcinoma.

**PRE-OPERATIVE DIAGNOSIS:**

None provided.

**POST-OPERATIVE DIAGNOSIS:**

None provided.

**GROSS DESCRIPTION:**

A. Received fresh, labeled with the patient's name, and designated "RIGHT BREAST LUMPECTOMY" consists of a breast lumpectomy specimen, measuring 9.0 cm from superior to inferior; 8.8 cm from medial to lateral; and 3.0 cm from superior to inferior. The specimen is oriented with a long suture marking the lateral margin; and a short suture marking the superior margin. The overlying ellipse of tan skin measures 6.0 x 1.8 cm. The specimen is differentially inked as follows: blue - superior; green - inferior; orange - anterior; black - posterior; red - lateral; and yellow - medial. The specimen is serially sectioned from

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## SURGICAL PATHOLOGY REPORT

Patient: -- -

Specimen #: -- -

## GROSS DESCRIPTION (continued):

anterior to posterior to reveal a sharply-circumscribed, firm, ovoid mass with a homogenous tan cut surface, measuring 2.8 x 2.6 x 1.6 cm in overall dimensions. This mass is located in the posterior half of the specimen, and measures 0.4 cm from the nearest margin (inferior). The remaining tissue is mostly fatty with admixed areas of fibrosis, especially posteriorly. Skin, tumor, and grossly unremarkable fibrous tissue are sampled for the CBCP Protocol with matching paraffin sections in cassettes A1, A2-A6 and A7. Representative sections are submitted as follows: A1-skin; A2-tumor; A3-6 - tumor with inferior margin; A7-fibrous tissue with posterior and superior margins; A8-fibrous tissue with superior margin; A9-10- anterior margin; A11-12- lateral margin; A13-14-medial margin.

B: Received in formalin, labeled with the patient's name, and designated "ADDITIONAL INFERIOR MARGIN" consists of an irregular fragment of tan-yellow, lobulated adipose tissue, measuring 5.5 x 1.9 x 0.8 cm in overall dimensions. The specimen is received oriented with steel surgical clips marking the true new margin. This new margin is inked blue, and the opposing surface is inked orange. The specimen is serially sectioned to reveal a tan-yellow, fatty cut surface without evidence of residual tumor. The specimen is entirely submitted in six cassettes.

C: Received in formalin, labeled with the patient's name, and designated "ADDITIONAL DEEP MARGINS" consists of an irregular portion of tan-yellow, lobulated adipose tissue measuring 4.7 x 3.9 x 1.1 cm in overall dimensions. The true new margin is marked with surgical clips, this margin is inked blue, and the opposing surface is inked orange. The specimen is serially sectioned to reveal a homogenous tan-yellow, fatty cut surface without evidence of residual tumor. Representative sections are submitted in six cassettes.

D: Received fresh, labeled with the patient's name, designated "SENTINEL NODE #1" consists of a single irregular fragment of tan-yellow adipose tissue, measuring 2.0 x 1.8 x 0.5 cm in overall dimensions. Palpation of the specimen reveals a single tan-pink lymph node, measuring 1.5 x 0.7 x 0.7 cm in overall dimensions. A small portion of the lymph node is sampled for the CBCP Protocol with matching paraffin section in D1, and the remainder of the specimen is submitted in cassette D2.

E: Received in formalin, labeled with the patient's name, and designated "SENTINEL LYMPH NODE #2" consists of a similar irregular

# SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

## GROSS DESCRIPTION (continued):

fragment of tan-yellow, lobulated adipose tissue measuring 2.4 x 2.0 x 1.1 cm in overall dimensions. The specimen is bisected to reveal a 2.2 cm firm, tan-pink lymph node. The specimen is entirely submitted in two cassettes.

Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HIPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary Noted		<input checked="" type="checkbox"/>
Casc Is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	Date Reviewed: 10/2/10	