

1CD-0-3

Carcinoma, infiltrating duct, NOS 8500/3  
Site: breast, NOS C50.9 *lu*  
5/24/11

Criteria	5/24/11 <i>lu</i>	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"/>
Case is (circle):	QUALIFIED / DISQUALIFIED		
Reviewer Initials	<i>MG</i>	Date Reviewed	6/20/11

## DIAGNOSIS

(A) SENTINEL LYMPH NODE #1, LEFT AXILLA, BIOPSY:

One lymph node, free of tumor. (See Comment)

(B) SENTINEL LYMPH NODE #2, LEFT AXILLA, BIOPSY:

One lymph node, free of tumor. (See Comment)

(C) LEFT BREAST, NEEDLE LOCALIZATION SEGMENTAL MASTECTOMY:

INVASIVE DUCTAL CARCINOMA OF BREAST, MODIFIED BLACK'S NUCLEAR GRADE 3 (POORLY DIFFERENTIATED).

INVASIVE CARCINOMA MEASURES 1.2 CM IN GREATEST DIMENSION.

Lymphatic/vascular invasion is not identified.

INTRADUCTAL CARCINOMA (DCIS), MODIFIED BLACK'S NUCLEAR GRADE 3 (POORLY DIFFERENTIATED), COMPRISING SOLID TYPE, WITH NECROSIS, COMPRISING <5% OF THE TUMOR AREA.

INVASIVE CARCINOMA EXTENDS TO WITHIN 5.0 MM OF THE NEAREST DEEP MARGIN.

All margins are free of tumor.

(D) LEFT BREAST, SECOND DEEP MARGIN, EXCISION:

Skeletal muscle, no tumor present.

(E) LEFT BREAST, SECOND MEDIAL MARGIN, EXCISION:

No tumor present.

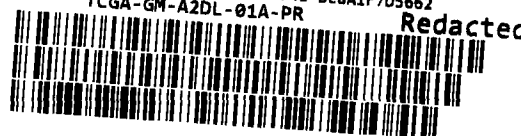
(F) LEFT BREAST, SECOND SUPERIOR MARGIN, EXCISION:

No tumor present.

(G) LEFT BREAST, SECOND INFERIOR MARGIN:

No tumor present.

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TCGA-GM-A2DL-01A-PR



Entire report and diagnosis completed by v

## COMMENT

Immunohistochemical stains for cytokeratins have been requested on tissue sections from both sentinel lymph nodes. Those results will be reported as an addendum. Molecular pathologic assays have been requested on tissue sections from block C1 of the primary tumor. Those results will be reported as an addendum. The invasive carcinoma measures 1.2 cm in greatest microscopic diameter (slide C1) and focally invades pectoralis muscle, extending to within 5.0 mm of the deep margin (slide C2).

## GROSS DESCRIPTION

(A) LEFT AXILLA, SENTINEL LYMPH NODE BIOPSY #1, IN VIVO 216, EX VIVO 4 - A 0.8 x 0.6 x 0.4 cm lymph node. The specimen is transected and two touch imprints were performed. The remnant of the tissue is submitted in toto in A.

\*TP/DX: NO CARCINOMA IDENTIFIED.

(B) LEFT AXILLA SENTINEL BIOPSY #2, IN VIVO 416, EX VIVO 887 - A 2.0 x 1.0 x 0.6 cm lymph node with surrounding fat tissue. Specimen is bisected and two touch imprints are performed. A remnant of the lymph node is submitted in B1-B2.

\*TP/DX: NO CARCINOMA IDENTIFIED.

(C) LEFT NEEDLE LOCALIZATION, SEGMENTAL MASTECTOMY - A segmental mastectomy specimen (7.0 x 7.0 x 4.0 cm) with a skin ellipse (2.8 x 1.2 cm). The specimen has two clips indicating anterior aspect and one clip indicating the middle aspect. The specimen is serially sectioned from medial to lateral. The cut surface shows an ill-defined, white-firm lesion measuring 0.8 x 0.6 x 0.6 cm that is 0.7 cm from the deep margin. The remnant of the breast tissue is predominantly composed of fatty tissue.

INK CODE: Green - inferior; blue - superior; black - deep; yellow - superficial; red - lateral; orange - medial.

SECTION CODE: C1-C2, tumor in relation to the deep margin; C3, extra section from the tumor; C4-C5, random section from the breast including the skin.

(D) SECOND DEEP MARGIN, CLIP ON TRUE MARGIN - An oriented irregular fragment of skeletal muscle measuring 3.0 x 1.5 x 0.5 cm. The specimen is oriented as clip on true margin. The true margin is inked in black. The specimen is serially sectioned and entirely submitted in D1-D2.

(E) SECOND MEDIAL MARGIN, CLIP ON TRUE MARGIN - An oriented irregular fragment of adipose tissue measuring 4.0 x 2.0 x 0.8 cm. The specimen is oriented as clip on true margin. The true margin is inked in black. The specimen is serially sectioned and entirely submitted in E1-E4.

(F) SECOND SUPERIOR MARGIN, CLIP ON TRUE MARGIN - An oriented irregular fragment of adipose tissue measuring 3.5 x 2.0 x 0.8 cm. The specimen is oriented as clip on true margin. The true margin is inked in black. The specimen is serially sectioned and entirely submitted in F1-F3.

(G) SECOND INFERIOR MARGIN - An oriented irregular fragment of adipose tissue measuring 3.5 x 2.5 x 0.6 cm. The specimen is oriented as clip on true margin. The true margin is inked in black. The specimen is serially sectioned and entirely submitted in G1-G3.

#### CLINICAL HISTORY

Left breast cancer.

#### SNOMED CODES

T-04050, M-85003, M-85002, T-C4714, M-00110

"Some tests reported here may have been developed and performance characteristics determined by  
These tests have not been specifically cleared or approved by the U.S. Food and Drug Administration.

Released by:

Start of ADDENDUM

#### ADDENDUM

Addendum completed by ..

#### COMMENT

Immunohistochemical stains for cytokeratin were reviewed on tissue sections from both sentinel lymph nodes and were negative.

Released by:

Start of ADDENDUM #2

#### ADDENDUM

Addendum completed by '

This report is issued to give immunohistochemistry results.

Immunohistochemical staining is performed on a representative section of INVASIVE DUCTAL CARCINOMA, left breast, block C1.

MARKER	RESULTS	% POSITIVE	STAINING INTENSITY
Estrogen Receptor	Positive	100 %	N/A

CC # 52

Progesterone Receptor	Positive	90 %	N/A
c-erbB-2 (HER-2/neu) overexpression	Negative	0 %	0
Ki-67	High (>35%)	50 %	N/A

**FOOTNOTE**

Estrogen receptor was assessed by immunohistochemistry using antibody 6F11 (

Progesterone receptor was assessed by immunohistochemistry using antibody 1A6

c-erbB-2 (HER-2/neu) was assessed by immunohistochemistry using antibody AB8

Ki-67 was assessed by immunohistochemistry using antibody MIB1

Released by:

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