

1CD-0-3

Carcinoma, infiltrating duct, NOS

8500/3 12/8/10

Site Code: breast, NOS C50.9

**TSS:**

**SPECIMENS:**

- A. WLE RIGHT BREAST
- B. SLN 1 RIGHT AXILLA
- C. SLN 2 RIGHT AXILLA
- D. SLN 3 RIGHT AXILLA

UUID: 46EE72F9-2F59-413F-8278-7A073760F095  
TCGA-E2-A152-01A-PR

Redacted



**SPECIMEN(S):**

- A. WLE RIGHT BREAST
- B. SLN 1 RIGHT AXILLA
- C. SLN 2 RIGHT AXILLA
- D. SLN 3 RIGHT AXILLA

**GROSS DESCRIPTION:**

**A. WLE RIGHT BREAST**

Received fresh labeled with the patient's identification and "right breast needle localization" is a previously inked 99g, 9 x 8.5 x 3.4cm needle localized lumpectomy with 2 radiographs. Ink code: anterior-yellow, posterior-black, superior-blue, inferior-orange, medial-green, lateral-red. Specimen is serially sectioned from lateral to medial into 10 slices revealing a 1.7 x 1.6 x 1.5cm tan pink well circumscribed mass at the posterior margin in slices 4-7. A second 0.5 x 0.5 x 0.5cm tan pink firm ill defined mass is identified, 0.3cm from the anterior-medial margin in slice 8, 1.9cm from the main mass. A portion of the specimen is submitted for tissue procurement. Representatively submitted:

A1-A2: lateral margin slice 1

A3: deep margin slice 2

A4-A5: next to mass with deep margin slice 3

A6-A8: deep margin with mass 1 in A6 slice 4

A9-A12: slice 5 with mass in A9

A13-A16: slice 6 with mass in A14-A15

A17: mass with deep margin slice 7

A18: anterior margin slice 7

A19-A21: slice 8 with mass 2 in A21

A22: next to mass 2 slice 9

A23: medial margin slice 10

**B. SLN 1 RIGHT AXILLA**

Received fresh is a tan pink lymph node 1.3 x 1.2 x 1cm. The specimen is serially sectioned and a touch prep is taken. Toto B1.

**C. SLN 2 RIGHT AXILLA**

Received fresh is a tan pink lymph node 1.8 x 1.5 x 1.3cm. The specimen is serially sectioned and a touch prep is taken. Toto C1.

**D. SLN 3 RIGHT AXILLA**

Received fresh is a tan pink lymph node 0.6 x 0.5 x 0.5cm. The specimen is serially sectioned and a touch prep is taken. Toto D1.

**DIAGNOSIS:**

**A. BREAST, RIGHT, WIDE LOCAL EXCISION:**

- INVASIVE DUCTAL CARCINOMA, SBR GRADE 3, MEASURING 1.8-CM

- HIGH NUCLEAR GRADE, DUCTAL CARCINOMA IN SITU, SOLID AND CRIBRIFORM TYPES WITH CENTRAL NECROSIS AND MICROCALCIFICATIONS

- INVASIVE TUMOR PRESENT 0.15-CM FROM POSTERIOR SURGICAL RESECTION MARGIN

- BIOPSY SITE CHANGES WITH FIBROSIS

- SEE SYNOPTIC REPORT AND SEE NOTE.

**B. LYMPH NODE, SENTINEL #1, RIGHT AXILLA, EXCISION:**

- ONE LYMPH NODE, NEGATIVE FOR METASTASES (0/1).

**C. LYMPH NODE, SENTINEL #2, RIGHT AXILLA, EXCISION:**

- ONE LYMPH NODE, NEGATIVE FOR METASTASES (0/1).

**D. LYMPH NODE, SENTINEL #3, RIGHT AXILLA, EXCISION:**

- ONE LYMPH NODE, NEGATIVE FOR METASTASES (0/1).

NOTE: Two nodules are grossly identified, larger located superior posterior and smaller located inferior anterior and more medial. Both tumors have the same histomorphology. The larger nodule extends from slice #4 to slice #7. The smaller nodule is located in slice #8. The tissue in between these two nodules shows DCIS. Therefore, given

the presence of DCIS between these two tumors and having the same histomorphology, these tumors are considered connected. The largest confluent tumor size is 1.8-cm.

#### SYNOPTIC REPORT - BREAST

Specimen Type: Excision  
Needle Localization: Yes - For mass  
Laterality: Right  
Invasive Tumor: Present  
Multifocality: No  
WHO CLASSIFICATION  
Invasive ductal carcinoma, NOS 8500/3  
Tumor size: 1.8cm  
Tumor Site: Not specified  
Margins: Negative  
Distance from closest margin: 0.15cm  
deep  
Tubular Score: 3  
Nuclear Grade: 3  
Mitotic Score: 2  
Modified Scarff Bloom Richardson Grade: 3  
Necrosis: Absent  
Vascular/Lymphatic Invasion: None identified  
Lobular neoplasia: None  
Lymph nodes: Sentinel lymph node only  
Lymph node status: Negative 0 / 3

DCIS present  
Margins uninvolved by DCIS  
DCIS Quantity: Estimate 15%  
DCIS Type: Solid  
Cribriform  
DCIS Location: Associated with invasive tumor  
Nuclear grade: High  
Necrosis: Present  
Location of CA++: DCIS

#### ER/PR/HER2 Results

ER: Positive  
PR: Negative  
HER2: Positive by IHC  
Performed on Case:

Pathological staging (pTN): pT 1c N 0

#### CLINICAL HISTORY:

Biopsy of proven cancer at wire- possible second lesion 2cm, medial to premarked tumor at triple stitch.

#### PRE-OPERATIVE DIAGNOSIS:

Right breast cancer.

#### INTRAOPERATIVE CONSULTATION:

A. GROSS EXAMINATION: Mass abuts the posterior margin, 2nd lesion is 0.3cm from the medial margin. Diagnosis called to Dr. at \_\_\_\_\_ by Dr..  
TPB-TPC-TPD: No tumor seen. Diagnosis called to Dr. at \_\_\_\_\_ / Dr..

#### Gross Dictation:

Final Review: Pathologist, \_\_\_\_\_

Final: Pathologist, \_\_\_\_\_

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
IPAA Discrepancy		
Prior Malignancy History		
Local/Synchronous Primary Noted		
Case Is (circle):		
Reviewer Initials		
Date/Review		