

## FINAL DIAGNOSIS:

PART 1: LEFT AXILLARY SENTINEL LYMPH NODE #1, BIOPSY –  
ONE LYMPH NODE, NEGATIVE FOR TUMOR (0/1).

PART 2: BREAST, LEFT, SEGMENTAL MASTECTOMY –

- A. INVASIVE DUCTAL CARCINOMA, NOTTINGHAM GRADE 3, (TUBULE FORMATION – 3, NUCLEAR GRADE – 3, MITOTIC RATE – 3, TOTAL SCORE: 9/9).
- B. INVASIVE CARCINOMA MEASURES 1.8 CM IN GREATEST DIMENSION (SLIDE 2B).
- C. DUCTAL CARCINOMA IN SITU (DCIS), NUCLEAR GRADE 3, SOLID AND MICROPAPILLARY TYPES WITH COMEDO NECROSIS AND ASSOCIATED CALCIFICATIONS.
- D. DCIS IS PRESENT OUTSIDE OF INVASIVE CARCINOMA COMPONENT (see comment).
- E. MARGINS OF RESECTION ARE NEGATIVE FOR INVASIVE CARCINOMA, INVASIVE CARCINOMA IS 0.9 CM FROM CLOSEST (ANTERIOR) MARGIN OF RESECTION.
- F. DCIS IS PRESENT AT INFERIOR MARGIN OF RESECTION.
- G. NO LYMPHOVASCULAR INVASION IS IDENTIFIED (see comment).
- H. ATYPICAL DUCTAL HYPERPLASIA.
- I. FIBROCYSTIC CHANGES WITH COLUMNAR CELL CHANGE AND DUCTAL EPITHELIAL HYPERPLASIA.
- J. INVASIVE CARCINOMA IS NEGATIVE FOR ESTROGEN AND PROGESTERONE RECEPTORS AND NEGATIVE FOR HER-2/NEU WITH A SCORE OF 0, AS PER PREVIOUS PATHOLOGY REPORT

1CD-0-3

Carcinoma, infiltrating ductal, NOS 8500/

Site: breast, NOS C50.9 3/13/11 lw

### COMMENT:

The in situ carcinoma is noted outside of invasive carcinoma component, near the inferior margin, focally involving the inferior margin, in three out of fifty-eight slides. Entire specimen was submitted for histological evaluation.

No definite lymphovascular invasion was seen in the current specimen. No lymphatic invasion was seen in the previous biopsy specimen confirmed by D2-40 stain. However, vascular space invasion was seen in the previous biopsy confirmed by CD31 stain. This data will be used for filling the synoptic template.

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TCGA-BH-A0BG-01A-PR

Redacted



Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HIPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Nodal		
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	lw	3/13/11