

Clinical Diagnosis & History:

y/o male with left breast cancer (invasive ductal carcinoma (IDC)).

Specimens Submitted:

- 1: SP: Sentinel node #1, level 1, left axilla (fs)
- 2: SP: Left breast with levels one and two axillary contents

DIAGNOSIS:

- 1) LYMPH NODE, LEFT AXILLA, SENTINEL LYMPH NODE #1; LEVEL 1; BIOPSY:
  - METASTATIC CARCINOMA IN ONE LYMPH NODE (1/1).
  - THE METASTATIC DEPOSIT IS SEEN ONLY ON THE ACTUAL FROZEN SECTION AND MEASURES AT LEAST 2 MM. NO EXTRANODAL EXTENSION IDENTIFIED.
  - THE LYMPH NODE EXHIBITS INCIDENTAL BENIGN CAPSULAR NEVUS CELL AGGREGATES.
- 2) BREAST, LEFT, MASTECTOMY:
  - INVASIVE DUCTAL CARCINOMA, NOS TYPE, HISTOLOGIC GRADE III/III (SLIGHT OR NO TUBULE FORMATION), NUCLEAR GRADE III/III (MARKED VARIATION IN SIZE AND SHAPE), MEASURING 2.2 CM IN LARGEST DIMENSION MICROSCOPICALLY.
  - DUCTAL CARCINOMA IN-SITU (DCIS) IS ALSO IDENTIFIED, SOLID, CRIBRIFORM TYPE WITH HIGH NUCLEAR GRADE AND MODERATE NECROSIS.
  - THE DCIS CONSTITUTES <= 25% OF THE TOTAL TUMOR MASS, AND IS PRESENT ADMIXED WITH AND AWAY FROM THE INVASIVE COMPONENT.
  - THE INVASIVE CARCINOMA IS LOCATED IN THE LOWER INNER QUADRANT AND CENTRAL AREA (RETROAREOLAR).
  - THE NIPPLE IS INVOLVED BY INVASIVE CARCINOMA.
  - A FOCUS OF PERINEURAL INVASION BY CARCINOMA IS SEEN IN THE DERMIS OF THE NIPPLE REGION. THERE IS ALSO FOCAL LYMPHATIC INVASION IN THE NIPPLE REGION.
  - CALCIFICATIONS ARE PRESENT IN THE IN SITU CARCINOMA.
  - NO INVOLVEMENT OF THE SURGICAL MARGINS BY EITHER INVASIVE OR IN SITU CARCINOMA IS IDENTIFIED.
  - THE NON-NEOPLASTIC BREAST TISSUE IS UNREMARKABLE.
  - 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):-- METASTATIC CARCINOMA IN ONE OF EIGHT LYMPH NODES (1/8).
  - THIS IS A MACROMETASTASIS (1.8 CM).
  - THERE IS NO EXTRANODAL EXTENSION OF CARCINOMA.

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TCGA-AO-A1KQ-01A-PR

Redacted



ICD-0-3

Carcinoma, infiltrating ductal, NOS 8500/3  
Site breast, NOS C50.9 3/16/11  
lw

Criteria	Yes	No
Diagnosis Discrepancy		X
Primary Tumor Site Discrepancy		X
HPAA Discrepancy		X
Prior Malignancy History		X
Qual/Synchronous Primary Noted		
Site Is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	lw	lw
Date Reviewed	3/16/11	

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  
THIS REPORT.

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

Special Studies:

Result	Special Stain	Comment
	ER-C	
	PR-C	
	HER2-C	
	NEG CONT	
	NEG-HER2	
	IMM RECUT	

Gross Description:

1). The specimen is received fresh for frozen section consultation labeled,  
"Sentinel node #1, level 1, left axilla", and consists of one lymph node  
measuring 1.5 x 1.0 x 0.8 cm. The lymph node is bisected and submitted for  
frozen section diagnosis.

Summary sections:

FSC - frozen section control

2). The specimen is received fresh labeled, "Left breast with levels one and  
two axillary contents, stitch marks axillary tail" and consists of a breast  
measuring 19 x 18 x 3.5 cm with overlying skin ellipse measuring 19 x 11 cm,  
attached axillary contents measuring 11 x 10 x 3 cm. The axillary tail is  
marked with a black suture. Situated centrally on the skin surface is a  
flattened nipple measuring 0.8 x 0.8 cm and areola measuring 2.5 x 2.5 cm.  
There are no scars or lesions noted on the skin. A suture demarcates the  
axillary aspect. The posterior surface of the breast is inked black and the  
specimen is serially sectioned to reveal a well circumscribed stony hard  
white-tan tumor measuring 2.0 x 2.0 x 1.7 cm, and located 1.8 cm from the  
deep margin. The tumor is located subjacent to the nipple. The remainder of  
the breast tissue is yellow tan fatty and lobulated. The specimen is  
submitted for lymph node dissection. Representative sections are submitted.  
A sample of the tumor is given to

Summary of sections:

N nipple

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NB - nipple base  
 DM - deep margin  
 T - tumor  
 UIQ - upper inner quadrant  
 LIQ - lower inner quadrant  
 UOQ - upper outer quadrant  
 LOQ - lower outer quadrant  
 LN-lymph nodes

Summary of Sections:

Part 1: SP: Sentinel node #1, level 1, left axilla (fs)

Block	Sect.	Site	PCs
1		FSC	1

Part 2: SP: Left breast with levels one and two axillary contents

Block	Sect.	Site	PCs
1		dm	1
1		liq	1
5		LN	8
1		loq	1
1		n	1
1		nb	1
6		t	6
1		uiq	1
1		uoq	1

Procedures/Addenda:

Addendum

Date Ordered:	Status: Signed Out
Date Complete:	By:
Date Reported:	

Addendum Diagnosis

ADDEN----

SITE: #2, LEFT BREAST

- ER: >95% OF NUCLEAR STAINING WITH STRONG INTENSITY.  
 - PR: >80% OF NUCLEAR STAINING WITH STRONG TO MODERATE INTENSITY.  
 - HER-2/NEU  
 (Hercep Test): NEGATIVE (STAINING INTENSITY OF FOCAL 1+).  
 - CONTROLS ARE SATISFACTORY.

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Intraoperative Consultation:

Note: The diagnoses given in this section pertain only to the tissue sample examined at the time of the intraoperative consultation.

- 1) FROZEN SECTION DIAGNOSIS: METASTATIC CARCINOMA  
PERMANENT DIAGNOSIS: SAME.

\*\* End of Report \*\*