



ICD-0-3

Carcinoma - Infiltrating Duct, NOS  
8500/3

PECIMEN

- A. Left sentinel node
- B. Left breast tissue
- C. Axillary contents

Site: breast, NOS c50.9  
lw

lw  
11/16/10

CLINICAL NOTES

PRE-OP DIAGNOSIS: Left breast cancer.

CLINICAL HISTORY: Left breast cancer.

FROZEN SECTION DIAGNOSIS

FSA) Left sentinel node - Two of three lymph nodes positive for metastatic carcinoma (2/3).

GROSS DESCRIPTION

A. Submitted fresh for frozen section as "left sentinel node" are two portions of fatty tissue, the larger of the two is 2 cm. in size, the smaller 1.2 cm. in size. The section through the tissue reveals three small nodules which may be lymph nodes varying in size from 6 mm. to a centimeter. All three submitted for frozen section.

B. Received fresh, subsequently fixed in formalin labeled "left breast tissue" is a 7.8 x 7.5 x 4.0 cm. yellow lobular fatty tissue fragment which is partially covered with a 4.0 x 1.2 cm. pink-tan wrinkled skin ellipse. The specimen has a long suture designating lateral and a short suture designating superior. The specimen is inked as follows: Superior orange, anterior blue, posterior black, inferior green and the specimen is sectioned from medial to lateral to show a yellow lobular fatty cut surface with minimal fibrous tissue. There is also a white tan firm nodule which is centrally located, measuring 3.5 x 2.5 x 2.5 cm. This comes within 2 cm. of superior-inferior margin and comes within 1.5 cm. of the anterior and posterior margin. This was located equal distance between the medial and lateral margins. Representative sections of the specimen are submitted as follows: Block 1 - representative

GROSS DESCRIPTION

medial margin; block 2 - representative lateral margin; block 3-10 representative sections additional margins and skin. RS-10.

C. Received fresh, subsequently fixed in formalin labeled "axillary content" is a 7 x 6 x 1.5 cm. aggregate of yellow lobular fatty tissue fragments which are palpated to identify possible lymph nodes. Multiple lymph nodes are grossly identified which range from 0.5 cm. to 2.0 cm. in greatest dimension. The lymph nodes are entirely submitted as follows: block 1 - two

possible lymph nodes; block 2 - three possible lymph nodes; block 3  
- two possible lymph nodes; block 4 - one possible lymph node  
bisected. RS4.

#### MICROSCOPIC DESCRIPTION

A. Sections of the left sentinel lymph nodes demonstrate  
metastatic carcinoma involving 2 of 3 lymph nodes. The  
largest metastasis is 1.2 cm and extracapsular extension is  
present.

B. The following template applies to the left breast.  
Invasive Carcinoma: Present  
Histologic type: Infiltrating ductal carcinoma  
Histologic grade:  
Overall grade: 3  
Architectural score: 3  
Nuclear score: 3  
Mitotic score: 3

Greatest dimension: 3.5 cm (pT2)  
Specimen margins: Negative, nearest 1.3 cm, posteriorly  
Vessel invasion: Present

#### MICROSCOPIC DESCRIPTION

Calcification: Present  
  
Ductal carcinoma in situ: Present  
Histologic pattern: Solid and comedo  
Nuclear grade: 3  
Central necrosis: Present  
%DCIS of total tumor: Less than 10%  
Extensive intraductal component (present/absent): Absent  
Specimen margins: Negative  
Calcification: Present

Description of non-tumorous breast: Proliferative changes.  
Comments: None  
Prognostic markers: Previously performed.

9

C. There is no evidence of metastatic disease present in additional left axillary lymph nodes.

14, 4x3

DIAGNOSIS

- A. Left axillary sentinel lymph nodes, excision:
  - Metastatic carcinoma present in 2 of 3 lymph nodes (2/3).
  - Size of largest metastasis 1.2 cm.
  - Extracapsular extension present.
- B. Left breast, excisional biopsy:
  - Infiltrating ductal carcinoma, grade 3, 3.5 cm, margins negative.
  - Ductal carcinoma in situ, grade 2, margins negative.
- C. Left axillary contents, resection:
  - No evidence of metastasis in nine lymph nodes (0/9).

DIAGNOSIS

-----  
M.D, (Electronic Signature)

--- End Of Report ---

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HPAA Discrepancy		
Prior Malignancy History		
Local/Synchronous Primary Noted		
Case is (Circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	huv	LEW/10
Date Reviewed		