

# Surgical Pathology Report

Name: [REDACTED]  
DOB: [REDACTED]  
Gender: F  
MRN: [REDACTED]  
Location: [REDACTED]  
Physician: [REDACTED]

Case #: [REDACTED]  
Collected: [REDACTED]  
Received: [REDACTED]  
Reported: [REDACTED]  
Copy To: [REDACTED]

## Pathologic Interpretation:

- A. Sentinel node #1 ( ) - FS:  
- One lymph node, no malignancy seen.  
- Keratin stain ordered.
- B. Sentinel node #2 ( ) - FS:  
- One lymph node, no malignancy seen.  
- Keratin stain ordered.
- C. Right breast mass oriental with 1 short stitch superior, 1 long stitch lateral:  
- Infiltrating moderately differentiated ductal adenocarcinoma, high nuclear grade (2.4 x 2.3 x 1.9 cm) with extensive prior therapy changes.  
- focal ductal carcinoma in situ, high nuclear grade, comedo and cribriform types associated to main tumor in 4 of 10 slides.  
- Intratumoral damages of previous biopsy site (fibrosis and hemorrhage).  
- Margins free of tumor.

ICD-O-3  
carcinoma, infiltrating ductal, NOS 8500/3  
Site: breast, NOS C50.9 3/12/11 lu

## Tumor Summary:

Specimen Type: Excision

Lymph Node Sampling: Sentinel lymph nodes only

Specimen Size (for excisions less than total mastectomy): 9 x 6.5 x 4 cm

Laterality: Right

Tumor Site: Not specified

Size of Invasive Component: 2.4 x 2.3 x 1.9 cm

Histologic Type: Ductal carcinoma in situ  
Invasive ductal carcinoma

UUID: 8F35E936-E4DD-4E35-8D9B-6CB7974E2765  
TCGA-EW-A1P7-01A-PR

Redacted



Histologic Grade (any grading system may be used; mitotic count is also required independent of the grading system):

- Tubule Formation: Minimal less than 10% (score =3)
- Nuclear Pleomorphism: Marked variation in size, nucleoli, chromatin clumping, etc (score =3)
- For a 40x objective with a field area of 0.152 mm<sup>2</sup>: Greater than 10 mitoses per 10 HPF (score =3)

Total Nottingham Score: Grade III: 8-9 points

## Pathologic Staging:

- Primary Tumor: pT2c
- Regional Lymph Nodes: pN0
- Distant Metastasis: pMX

Margins: Uninvolved by invasive carcinoma  
Uninvolved by DCIS

Venous/Lymphatic (Large/Small Vessel) Invasion (V/L): Absent

Microcalcifications: Not identified

Comment: On the prior biopsy tumor was negative for ER and PR and equivocal for Her 2-neu by immunohistochemistry. FISH for Her 2-neu was not amplified

NOTE: Some immunohistochemical antibodies are analyte specific reagents (ASRs) validated by our laboratory. These ASRs are clinically useful indicators that do not require FDA approval. These clones are used: ID5=ER, PgR 636=PR, A483=HER2, H-11=EGFR. All immunohistochemical stains are used with formalin or molecular fixed, paraffin embedded tissue. Detection is by Envision Method. The results are read by a pathologist as positive or negative.

*As the attending pathologist, I attest that I: (i) Examined the relevant preparation(s) for the specimen(s); and (ii) Rendered the diagnosis(es).*

a, MD

\*\*\*Electronically Signed Out By\*\*\*

**Procedures/Addenda**  
**Addendum**

**Date Ordered:**  
**Date Complete:**  
**Date Reported:**

**Status:** Signed Out

**Addendum Diagnosis:**

**Addendum**

- No tumor seen. Staining keratin by immunohistochemistry.

**Intraoperative:**

- A. Sentinel node #1 ( ) - No tumor seen.
- B. Sentinel node #2 ( ) - No tumor seen.

a, MD

**Clinical History:**

None provided

**Operation Performed**

Right breast lumpectomy with sentinel node biopsy

**Pre Operative Diagnosis:**

Breast cancer

**Specimen(s) Received:**

- A: Sentinel node #1 ( ) - FS
- B: Sentinel node #2 ( ) - FS
- C: Right breast mass oriental with 1 short stitch superior, 1 long stitch lateral

**Gross Description:**

- A. Received fresh is a pale tan to light brown lymph node, 1 x 0.8 cm. The specimen is submitted in toto in two cassettes for frozen section.
- B. Received fresh is a pale tan lymph node, 1.2 x 1 cm. The specimen is submitted in toto in one block for frozen section.
- C. Received in formalin is a yellow-tan fibroadipose tissue fragment, 110 grams, 9 x 6.5 x 4 cm. The specimen is oriented with a short stitch superior and a long stitch lateral margin. The specimen is inked as follows: superior margin - black,

# SURGICAL PATHOL Report

inferior margin – yellow, posterior margin – green, anterior margin – blue, lateral margin – orange, and medial margin – red. Cross sections through the specimen show a yellow-tan cut surface. Located 4 mm from the anterior and superior margin is an ill-defined, markedly firm, slightly hemorrhagic mass, 2.4 x 2.3 x 1.9 cm. No other firm masses are grossly identified. The large ill-defined mass does not appear to grossly involve any surgical margin. Sections are submitted as follows:

- 1 Anterosuperior margin
- 2 Inferior margin
- 3 Deep margin
- 4 Anterior margin
- 5 Lateral margin
- 6 Medial margin
- 7&8 Composite section of the largest axis of the mass
- 9&10 Additional sections from the mass in relation to the anterior margin

Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HPAA 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	Date Reviewed: 3/12/11	