Clinical Diagnosis & History: Left breast lump. FNA adenocarcinoma; core biopsy IFDC.

Specimens Submitted:

1: SP: Sentinel node #1, level one, left axilla (fs) 2: SP: Sentinel node #2, level one, left axilla (fs)

3: SP: Left breast

4: SP: Levels I and 11 left axillary contents

5: SP: Levels II and III left axillary contents

DIAGNOSIS:

- LYMPH NODES, SENTINEL #1, LEVEL I, LEFT AXILLA; EXCISION: 1) - TWO BENIGN LYMPH NODES (0/2).
- LYMPH NODES, SENTINEL #2, LEVEL I, LEFT AXILLA; EXCISION: 2) ONE OF ONE LYMPH NODE POSITIVE FOR METASTATIC CARCINOMA (1/1).

- EXTRANODAL EXTENSION IS NOT PRESENT.

- 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 6 CM IN LARGEST DIMENSION
 - THE INVASIVE CARCINOMA IS LOCATED IN THE UPPER OUTER QUADRANT.
 - NO INVOLVEMENT OF THE NIPPLE BY CARCINOMA IS IDENTIFIED.
 - CALCIFICATIONS ARE PRESENT FOCALLY IN BENIGN BREAST PARENCHYMA. - VASCULAR INVASION IS PRESENT.
- NO INVOLVEMENT OF THE SURGICAL MARGINS BY INVASIVE CARCINOMA IS IDENTIFIED. - NO SKIN INVOLVEMENT BY CARCINOMA IS IDENTIFIED.

 - THE ATTACHED SKELETAL MUSCLE IS NEGATIVE FOR TUMOR.
- THE NON-NEOPLASTIC BREAST TISSUE SHOWS FLORID PAPILLOMATOSIS OF THE NIPPLE, BIOPSY SITE CHANGES, FIBROCYSTIC CHANGES, AND SCLEROSING ADENOSIS. - 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): 2/4. THERE IS NO EXTRANODAL EXTENSION OF CARCINOMA.
 - ONE BENIGN INTRAMAMMARY LYMPH NODE (0/1).
- LYMPH NODES, LEFT AXILLARY, LEVELS I AND II; EXCISION: - EIGHT BENIGN LYMPH NODES (0/10).

** Continued on next page **

carcinoma, infittrating duct, NOS 8500/3 Site: breast, NOS C50,9 hu 10/22/11

Diagnosis Discrepancy Primary Tumor Site Discrepancy HIPAA Discrepancy Oual/Synchronous Primary Noted Case is [circle]: (UALIF Reviewer Initials U.



LYMPH NODES, LEFT AXILLARY, LEVELS II AND III; EXCISION:
 NINE BENIGN LYMPH NODES (0/9).

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

RECUT
RECUT
ER-C
PR-C
HER2-C
NEG CONT
IMM RECUT
NEG-HER2

Gross Description:

1) The specimen is received fresh for frozen section, labeled "Sentinel node #1, level 1, left axilla". It consists of two lymph nodes measuring 1.0 and 0.5 cm. They are bisected and entirely frozen.

Summary of Sections: FSC - Frozen section control

2) The specimen is received fresh for frozen section, labeled "Sentinel node #2, level 1, left axilla". It consists of one large lymph node, measuring 2.5 cm. The specimen is bisected and submitted in two cassettes.

Summary of Sections:

FSCA - Frozen section control A

FSCB - Frozen section control B

3) The specimen is received fresh, labeled "Left breast. Stitch marks axillary tail". It consists of a 34 x 22 x 6 cm mastectomy with a 30 x 12 cm ellipse of skin and a 1.5 cm everted nipple. A mass is palpable in the 12-3:00 position and the axillary tail is designated by a long black suture. The specimen is serially sectioned, revealing a $6.0 \times 5.0 \times 2.8$ cm

** Continued on next page **

2

----- Page 3 of 5 gray-white, ill-defined mass, grossly 2 cm from the deep margin. Multiple lymph nodes are identified in the axillary tail, ranging from 0.3 to 3.5 cm. A single intramammary lymph node is identified. All lymph nodes are submitted. TPS is submitted.

Summary of Sections:

N - Nipple

DM - Deep margin

MASS - Multiple sections of the mass

UOQ - Representative upper outer quadrant

Log - Representative lower outer quadrant UIQ - Representative upper inner quadrant

LIQ - Representative lower inner quadrant

SK - Representative skin

IMLN - Single intramammary lymph node

LN - Multiple lymph nodes

BLN - Bisected lymph node

SSLN - Largest serially sectioned lymph node

The specimen is received in formalin, labeled "Levels 1 and 2, left axillary contents". It consists of an 11 x 7 x 2 cm lobulated portion of fibrofatty tissue, with palpable lymph nodes ranging in size from 0.5 to 1.4 cm. A portion of a grossly positive lymph node is submitted for TPS. All

Summary of Sections: LN - Single lymph node per cassette

The specimen is received in formalin, labeled "Levels 2 and 3 left 5) axillary contents". It consists of a 3.0 x 2.0 x 1.5 cm lobulated, fatty tissue fragment with palpable lymph nodes. All lymph nodes are submitted.

Summary of Sections: LN - Lymph nodes

3

Summary of Sections:

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

Block

Sect. Site

fac

1

Part 2: SP: Sentinel node #2, level one, left axilla (fs)

Block

Sect. Site

fsca

1

** Continued on next page **

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1
                                             1
 Part 3: SP: Left breast
 Block
                                   PCs
 1
                      bln
                      dm
                      imln
                      liq
                      ln
                      log
                      mass
                      n
                      вk
                      ssln
                     uiq
                     uoq
 Part 4: SP: Levels I and II left axillary contents
 Block
               Sect. Site
                                  PCs
10
                      ln
                                           10
 1
                     tpsln
Part 5: SP: Levels II and III left axillary contents
Block
               Sect. Site
                                  PCs
4
                     ln
Procedures/Addenda:
Addendum
Date Ordered:
                                   Status: Signed Out
Date Complete,
                                    By:
Date Reported
Addendum Diagnosis
ADDRNDUM
SITE: LEFT BREAST
PART #3.
ER: 90% OF NUCLEAR STAINING WITH MODERATE INTENSITY.
PR: 40% OF NUCLEAR STAINING WITH MODERATE INTENSITY.
HER2/NEU (HERCEPTEST): NEGATIVE (STAINING INTENSITY OF 1+).
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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: BENIGN (0/2). PERMANENT DIAGNOSIS: SAME.

2) FPOOR 3ECTION DIAGNOSIS: METASTATIC CARCINOMA IN ONE LYMPH NODE (1/1).

PERMANENT DIAGNOSIS: SAME.

MD

** End of Report **