Sex: Female D.O.B.:

Received Reported: Accession L

, y: (4

127

Acct / Reg #: **

UUID: 3D878253-2283-4A53-AE54-C0D95E085D81 TCGA-AC-A2B8-01A-PR

Redacted

A. Right axillary sentinel lymph node:

One lymph node, no evidence of metastatic carcinoma.

Confirms frozen section diagnosis and confirmed by negative staining for pancytokeratin.

DIAGNOSIS:

Residual invasive lobular carcinome.

Size: 8 cm.

Architectural score: 3 of 3. Nuclear score: 2 of 3. Mitatic score: 1 of 3.

Total score: 6 of 9 = grade 2

Carcinoma involves portions of the nipple.

No evidence of involvement of the overlying epidermis.

Deep margin of excision is free of carcinoma.

pTNM classification: T3pN0 (i-) MX.

Criteria		Yes	No
Diagnosis Discrepancy			TV
Primary Tumor Site Discrepancy			TX
HIPAA Discrepancy			- > -
Prior Malignancy History			16
Dual/Synchronous Primary Noted			-
Case is (circle):	QUALIFIED Y DISQUALIFIED,		
Reviewer Initials	L. e Reviseved	1111	
	415/27/11	דירו דג	

Electronic Signature:

CLINICAL INFORMATION

CLINICAL HISTORY:

Preoperative Diagnosis: Right modified radical mastectomy with sentinel node mapping with frozen section. Invasive lobular carcinoma. ER positive, PR positive, Ki-67 (MIB1) high - 28%.

Postoperative Diagnosis:

Symptoms/Radiologic Findings:

SPECIMENS:

A. Right axillary sentinel node #1300 with frozen section

B. Right breast

1CD-0-3 Carcinoma, infletrating lobular, Nos 8520/3 Site: brust, Nos C5U.9 hu 5/27/11 - ...

12:144

GROSS DESCRIPTION:

The specimen is received in two containers, labeled with the patient's name,

Container A is additionally labeled "right axiliary sentinel node," and contains a 2.0 cm, yellow-ten, firm, fatty nodule. It is bisected and entirely submitted for frozen section. The residual is entirely resubmitted for permanent section in cassette A, labeled '

Container B is received with formalin, additionally labeled "right breast," and contains an 685.4 gm, 19.0 x 13.5 x 7.5 cm, simple mastectomy specimen, partially surfaced by a 17.0 x 8.0 cm ellipse of pink-tan wrinkled skin, bearing a central 0.9 x 0.9 x 0.5 cm inverted nipple. The deep margin is inked and the specimen is serially sectioned to reveal a 8.0 x 4.0 x 2.5 cm, ill-defined, gray-white gritty mass that resides 2.0 cm from the deep margin and 2.5 cm below the skin surface. The remainder of the cut surface is comprised of yellow-tan adipose tissue admixed with moderate amounts of interconstant gray-white fibrous tissue. Additional masses are not identified. Representative sections are submitted in cassettes B1-11, labeled designated as follows: 1 -- nipple; 2 -- inked deep margin, perpendicular; 3-8 -- mass; 9-11 -- sections from the three uninvolved quadrants.

Additionally a yellow and green cassette are submitted for genomics research, each labeled

INTRA-OPERATIVE CONSULTATION:

A. FROZEN SECTION DIAGNOSIS: "Negative for tumor," per Dr

The sentinel node contains two small microscopic glands in the outer layer of the fibrous capsule of the node. I think they are benign glandular inclusions. They stain with cytokeratin but they do not look like the invasive lobular carcinoma cells.