FINAL DIAGNOSIS: PART 1: LYMPH NODE, RIGHT AXILLARY, SENTINEL NODE NUMBER 1, SENTINEL NODE BIOPSY -ONE LYMPH NODE POSITIVE FOR METASTATIC CARCINOMA (1/1). PART 2: LYMPH NODE, RIGHT AXILLARY, SENTINEL NODE NUMBER 2, SENTINEL NODE BIOPSY -ONE LYMPH NODE POSITIVE FOR METASTATIC CARCINOMA (1/1). PART 3: LYMPH NODE, RIGHT AXILLARY, NONSENTINEL, LYMPH NODE BIOPSY -TWO LYMPH NODES NEGATIVE FOR METASTATIC CARCINOMA (0/2). PART 4: LYMPH NODE, RIGHT AXILLARY, SENTINEL NODE NUMBER 3, SENTINEL NODE BIOPSY -ONE LYMPH NODE POSITIVE FOR MICROMETASTATIC CARCINOMA (1/1). Carcinoma infiltrating duct, NOS 8500/3 PART 5: BREAST, RIGHT, SEGMENTAL MASTECTOMY -Sita: brest, NOS C50,9 3/13/11 hu A. INFILTRATING DUCTAL CARCINOMA. B. NOTTINGHAM SCORE 4/9, GRADE 1 (TUBULES 2, NUCLEI 1, MITOSES 1). NEOPLASM MEASURES 2.8 CM IN MAXIMUM DIMENSION (see comment). NO LYMPHOVASCULAR INVASION IDENTIFIED. E. NEOPLASM EXTENDS FOCALLY TO POSTERIOR MARGIN OF RESECTION IN THE INFERIOR ASPECT (BLOCK 5J), ALL OTHER MARGINS OF RESECTION FREE OF NEOPLASM. ER POSITIVE, PR NEGATIVE, HER-2/NEU NEGATIVE PER PREVIOUS REPORT. G. PATHOLOGIC STAGE: pT2, pN1, pMX. H. DUCTAL CARCINOMA IN SITU, CRIBRIFORM AND MICROPAPILLARY TYPES, NUCLEAR GRADE 1 WITH ASSOCIATED MICROCALCIFICATIONS AND FOCAL COMEDONECROSIS. IN SITU COMPONENT IS ADMIXED WITH INVASIVE COMPONENT AND IS IDENTIFIED IN EIGHT BLOCKS (THREE CONSECUTIVE SLICES MEASURING APPROXIMATELY 1.2 CM). MARGINS OF RESECTION FREE OF IN SITU COMPONENT, CLOSEST INFERIOR AT 0.3 CM. K. ATYPICAL DUCTAL HYPERPLASIA. FAT NECROSIS AND REPARATIVE CHANGES ASSOCIATED WITH PREVIOUS BIOPSY. FIBROCYSTIC CHANGES WITH SCLEROSING ADENOSIS, DUCTAL EPITHELIAL HYPERPLASIA, FIBROADENOMATOUS NODULE AND EPITHELIUM ASSOCIATED CALCIFICATIONS. PART 6: LYMPH NODES, RIGHT AXILLARY, AXILLARY DISSECTION -NINETEEN LYMPH NODES NEGATIVE FOR METASTATIC CARCINOMA (0/19).

CASE SYNOPSIS: SYNOPTIC - PRIMARY INVASIVE CARCINOMA OF BREAST LATERALITY: Right PROCEDURE: Segmental LOCATION: Not specified SIZE OF TUMOR: Maximum dimension invasive component: 2.8 cm MULTICENTRICITY/MULTIFOCALITY OF INVASIVE FOCI: TUMOR TYPE (invasive component): Ductal adenocarcinoma, NOS NOTTINGHAM SCORE: Nuclear grade: 1 Tubule formation: 2 UUID:7F75F15A-2476-4FFD-97B3-313F06568E21 TCGA-BH-A0BM-01A-PR Mitotic activity score: 1 Total Nottingham score: 4 Nottingham grade (1, 2, 3): 1 ANGIOLYMPHATIC INVASION: No **DERMAL LYMPHATIC INVASION:** Not applicable **CALCIFICATION:** Yes, benign zones Yes, malignant zones TUMOR TYPE, IN SITU: Cribriform Micropapillary DCIS admixed with invasive carcinoma Percent of tumor occupied by in situ component: 5 % SURGICAL MARGINS INVOLVED BY INVASIVE COMPONENT: Yes, focal SURG MARGINS INVOLVED BY IN SITU COMPONENT: Na Distance of in situ disease to closest margin: 3 mm LYMPH NODES POSITIVE: 3 LYMPH NODES EXAMINED: METHOD(S) OF LYMPH NODE EXAMINATION: H/E stain, Keratin stain SENTINEL NODE METASTASIS: Yes ONLY KERATIN POSITIVE CELLS ARE PRESENT: SIZE OF NODAL METASTASES: Diameter of largest lymph node metastasis: 25.0 mm LYMPH NODE METASTASIS(-ES) WITH EXTRACAPSULAR EXTENSION: No NON-NEOPLASTIC BREAST TISSUE: ADH, FCD T STAGE, PATHOLOGIC: iagnosis Discrepancy pT2 rimary Turnor Site Discrepancy N STAGE, PATHOLOGIC: pN1a M STAGE, PATHOLOGIC: IPAA Discrepancy nual/synchronous Primary No.
ase is (circle):
eviewer initials

Total Reviewed: pMX **ESTROGEN RECEPTORS:** positive PROGESTERONE RECEPTORS: negative HER2/NEU: zero or 1+