

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**
- One lymph node, no malignancy seen (0/1).
- Immunostains are in progress.
- B. **Sentinel node #2**
- One lymph node, no malignancy seen (0/1).
- Immunostains are in progress.
- C. **Sentinel node #3**
- One lymph node, no malignancy seen (0/1).
- Immunostains are in progress.
- D. **Non-sentinel lymph node:**
- Two lymph nodes, no malignancy seen (0/2).
- E. **Right breast mass, 1 short stitch superior, 1 long stitch lateral, lumpectomy:**
- Infiltrating ductal carcinoma, intermediate nuclear grade, 2.0 cm in greatest dimension.
- Focal ductal carcinoma in situ, cribriform type, intermediate nuclear grade with necrosis.
- Margins are free of tumor.
- Lymphovascular invasion is not seen.
- AJCC pT2N0Mx
- See tumor summary.
- Other areas of the breast show fibrocystic changes with microcalcifications.
- Skin with scar and foreign material (gel foam) deposition.
- Changes of [previous biopsy site].
- Focal changes of previous therapy effect noted on non-neoplastic breast tissue and a small portion of tumor.
- Immunostains are in progress.
- F. **Deep margin blue true deep:**
- Skeletal muscle, no malignancy seen.
- G. **Internal mammary sentinel node [REDACTED], 2nd intercostal [REDACTED]:**
- One lymph node, no malignancy seen (0/1).
- Immunostains are in progress.

ICD-O-3

Carcinoma, infiltrating ductal, NOS 8500/3

Site: breast, NOS C50.9 2/8/11 lw

UUID: 7C003A4F-DC30-43D0-AC61-ACE6BA118BEE
TCGA-EW-A1IY-01A-PR

Redacted



Tumor Summary:

Specimen Type: Excision

Lymph Node Sampling: Sentinel lymph nodes and one non-sentinel node

Specimen Size: Greatest dimension: 7.2 cm

Additional dimensions: 6.1 x 2.5 cm

Laterality: Right

Tumor Site: Not specified

Size of Invasive Component: Greatest dimension: 2.0 cm

Additional dimensions: 1.8 x 1.5 cm

Histologic Type: Invasive ductal carcinoma

Histologic Grade:

Tubule Formation: Moderate 10% to 75% (score = 2)

Nuclear Pleomorphism: Marked variation in size, nucleoli, chromatin clumping, etc (score = 3)

For a 40x objective with a field area of 0.152 mm²: 0 to 5 mitoses per 10 HPF (score = 1)

Total Nottingham Score: Grade II: 6-7 points

Pathologic Staging (pTNM)

Primary Tumor: pT2

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Regional Lymph Nodes: pN0
Number examined: 6
Number involved: 0
Distant Metastasis: pMX
Margins: Uninvolved by invasive carcinoma
Distance from closest margin: 2.0 mm
Specify which margin: Posterior (deep), see comment.
Venous/Lymphatic Invasion: Absent
Microcalcifications: Present in non-neoplastic tissue

Electronically Signed Out By

NOTE: Some immunohistochemical antibodies are analyte specific reagents (ASRs) validated by our laboratory (Her 2, Pervo, H. pylori, HScore). These ASRs are clinically useful indicators that do not require FDA approval. These clones are used: ID5=ER, PgR 636=PR, A485=HER2, H-11=EGFR, CCH2/DDG9=CMV, F39.4.1=AR and HPV by ISH. All immunohistochemical stains are used with formalin or molecular fixed, paraffin embedded tissue. Detection is by LSAB. 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).

Procedures/Addenda

Addendum

Date Ordered: _____

Status: Signed Out

Date Complete: _____

Date Reported: _____

Addendum Diagnosis

A, B, C, G. Immunohistochemistry for keratin is negative (Blocks A1, A2, B1, B2, C1 and G1).

E. Tumor cells are positive for ER and PR and negative for HER2-neu (block E7).

Intraoperative Consultation

AFS. Sentinel node #1 touch prep and FS:
Negative for tumor

BFS. Sentinel node #2 FS:
Negative for tumor

CFS. Sentinel node #3 FS:
Negative for tumor

FFS. Deep margin blue true deep FS:
Skeletal muscle, no malignancy seen

Clinical History:

Patient is a _____ year old female with history of right breast cancer.

Pre Operative Diagnosis:

Right breast cancer

Specimen(s) Received:

- A: sentinel node #1 touch prep and FS
- B: sentinel node #2 1 FS
- C: sentinel node #3 FS
- D: non-sentinel lymph node
- E: right breast mass, 1 short stitch superior, 1 long stitch lateral fresh
- F: deep margin blue true deep FS
- G: Internal mammary sentinel node , 2nd intercostal c

Gross Description:

- A. Received fresh and labeled "sentinel node #1 touch prep and FS" consists of a lymph node, 1.5 cm in greatest dimension. Specimen bisected and submitted in toto in two cassettes as follows.
 - 1 Half on lymph node for frozen
 - 2 The rest of lymph node for permanent
- B. Received fresh and labeled "sentinel node #2" consists of irregular shaped, yellow-tan, adipose tissue fragment, 1.4 x 0.7 x 0.2 cm. Specimen submitted in toto in two cassettes.
 - 1 One section from frozen
 - 2 The reminder of the specimen for permanent
- C. Received fresh and labeled "sentinel node #3" consists of irregular shaped, pale-tan, soft tissue fragment, 0.4 x 0.3 x 0.2 cm. Specimen bisected and submitted in toto in one cassette for frozen.
- D. Received in formalin and labeled "non-sentinel lymph node" consists of two irregular shaped, yellow-tan, soft tissue fragment, 1.4 x 0.8 x 0.3 cm and 1.0 x 0.5 x 0.2 cm. Examination of the specimen reveal two possible lymph nodes, 1.3 cm and 0.8 cm in greatest dimension. Specimen submitted in toto in two cassettes as follows.
 - 1 Large lymph node bisected
 - 2 Small lymph noe bisected
- E. Received fresh and labeled "right breast mass, 1 short stitch superior, 1 long stitch lateral" consists of an irregular by shaped, fibro-adipose tissue fragments measuring 7.2 x 6.1 x 2.5 cm and weighing 35.3 grams. Attached to the anterior aspect of the specimen there is a very thin ellipse of skin, 2.8 cm by 0.2 cm. For gross purpose the specimen is inked as follows: Anterior resection the skin surrounding the skin in yellow, superior resection margin is inked blue, inferior resection margin is inked green, medial resection margin is inked red, lateral resection margin is inked orange and posterior resection margin is inked black. Multiple cross sections reveal an ill-circumscribed, gray-white, hard and gritty mass, 2.0 x 1.8 x 1.5 cm. The mass is 0.2 cm from deep resection margin (nearest margin), 1.5 cm from the skin surface, 1.0 cm from medial resection margin, 1.7 cm from lateral resection margin, 2.0 cm from superior resection margin and 1.8 cm from inferior resection margin. The reminder of the specimen reveals an unremarkable fibro-adipose tissue. The stroma to fat ratio is 30.70%. Representative sections are submitted as follows.
 - 1 Superior resection margin
 - 2 Inferior resection margin
 - 3 Medial resection margin
 - 4 Lateral resection margin
 - 5&6 Composed sections of the mass in relation with deep resection margin (nearest margin)
 - 7-9 Additional representative section from the mass
 - 10 Representative section from skin
 - 11-14 Representative section from the reminder of the stroma
- F. Received fresh and labeled "deep margin blue true deep" consists of irregular shaped, yellow-tan, fibro-adipose tissue fragments, 1.8 x 1.5 x 0.2 cm. The resection margin inked black. Specimen multisectioned and submitted in toto in one cassette for frozen.
- G. Received in formalin and labeled "Internal mammary sentinel node , 2nd intercostal c" consists of irregular shaped, yellow-tan, soft tissue fragment, 0.5 x 0.4 x 0.1 cm. Specimen submitted in toto in one cassette.

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ICD-9(s): 174.8

Criteria	Yes	No
Diagnosis Discrepancy		/
Primary Tumor Site Discrepancy		/
HIPAA Discrepancy		/
Prior Malignancy History		/
Dual/Synchronous Primary Noted		/
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	Date Reviewed: 1/25/11	