Patient:

AP Surgical Pathology: Additional Info

UUID: 878150CC-1C5D-42D5-9951-9157A81316D5 TCGA-B6-A40C-01A-PR Redacted

Surg Path

CLINICAL HISTORY:

Spiculated mass with pleomorphic calcifications. If invasive carcinoma, please obtain ER, PR, EGFR, HER2/Neu by immunohistochemistry; for all 2+ IHC results please do FISH analysis. .

GROSS EXAMINATION:

A. "Left breast, seven cores, with calcifications, 1-2:00 region", in formalin. A 1.5 x 1.0 x 0.3 cm aggregate of multiple core biopsies of pink-tan tissue is entirely submitted in a mesh bag in Al.

MICROSCOPIC EXAMINATION: Microscopic examination is performed.

DIAGNOSIS:

A. "LEFT BREAST, SEVEN CORES, WITH CALCIFICATIONS, 1-2:00 REGION" (STEREOTACTIC NEEDLE CORE BIOPSY):

INVASIVE ADENOCARCINOMA OF THE BREAST.

HISTOLOGIC TYPE: LOBULAR.

NOTTINGHAM COMBINED HISTOLOGIC GRADE: 2 OF 3.

TUBULE FORMATION SCORE: 3.

NUCLEAR PLEOMORPHISM SCORE: 2.

MITOTIC RATE SCORE: 2.

10003

QUALIFIED

Sik: breast, Nos cso,9

Criteria. Diagnosis Discrepancy Primary Tumor Site Discrepancy

HIPAA Discrepancy Prior Malignancy History

Dual/Synchronous Primary Noted

IN-SITU CARCINOMA: PRESENT.

TYPE OF IN-SITU CARCINOMA: LOBULAR (FOCAL DUCTAL FEATURES NOTED).

NUCLEAR GRADE OF IN-SITU CARCINOMA: 1.

MICROCALCIFICATIONS: PRESENT IN ASSOCIATION WITH INVASIVE CARCINOMA.

ESTROGEN/PROGESTERONE RECEPTOR, HER2/NEU, AND EGFR ANALYSIS: PENDING. PARAFFIN BLOCK NUMBER: A1.

RESULTS WILL BE ISSUED IN A SEPARATE REPORT FROM THE IMAGE CYTOMETRY LAB.

I certify that I personally conducted the diagnostic evaluation of the above specimen(s) and have rendered the above diagnosis(es).

Electronically signed:

. ADDENDUM 1: Please see

tests.

for results of supplementary

I certify that I personally conducted the diagnostic evaluation of the above specimen(s) and have rendered the above diagnosis(es).

Electronically signed: