Metastatic Lymph Node

UUID:3687AF42-4BB3-46E2-8091-E0C5C84F15E6 TCGA-E2-A15A-06A-PR

TSS:

SPECIMENS:

A. LEFT AXILLARY NON SLN #1

B. RIGHT AXILLARY SLN #1

C. RIGHT BREAST

D. LEFT BREAST

E. LEFT AXILLARY CONTENTS

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Carcinomo, infiltrating duct, NOS
8500/3

Site: hymph mode, axillarg c77.3

Mu
3/5/14

INTRAOPERATIVE CONSULTATION DIAGNOSIS:

TPA-left axillary non-sentinel lymph node #1: Positive for carcinoma. TPB-right axillary Sentinel lymph node #1: Negative for carcinoma.

Diagnoses called by Dr. to Dr. at

GROSS DESCRIPTION:

A. LEFT AXILLARY NON SLN #1

Received fresh labeled with the patient's identification and "left axillary non-sentinel lymph node #1" is a 1.3 x 1.1 x 0.4 cm lymph node. Bisected, a touch prep is performed, and specimen is submitted entirely in cassette A1. B. RIGHT AXILLARY SENTINEL LYMPH NODE #1

Received fresh labeled with the patient's identification and "right axillary Sentinel lymph node #1" is a 1.2 x 1.1 x 0.5 cm lymph node. It is bisected; touch prep is performed, submitted entirely in cassette B1. C. RIGHT BREAST

Received fresh labeled with the patient's identification and "right breast" is an oriented 243 g, 16 x 15 x 12 cm mastectomy with 5 x 2.5 cm skin ellipse and 1.7 cm everted nipple. Ink code: anterior/superior-blue, anterior/inferiororange, posterior-black. Specimen is serially sectioned into 11 slices from medial to lateral with nipple in slice 4 revealing a 1.5 x 1.3 x 1.2 cm biopsy site located in the upper outer quadrant, 0.4 cm from the deep margin and less than 0.1 cm from the anterior margin. Representatively submitted:

C1: slice 3, upper inner quadrant

C2: slice 5, upper inner quadrant

C3: slice 7, upper outer quadrant

C4: slice 10, upper outer quadrant

C6-C8: slice 11, upper outer quadrant (biopsy site)

C7: slice 9, lower outer quadrant

C8: slice 8, lower outer quadrant

C9: slice 4, lower inner quadrant

C10: slice 2, lower inner quadrant

C11-C12: nipple, perpendicular sections

C13: skin and nipple

D. LEFT BREAST

Received fresh labeled with the patient's identification and "left breast" is an oriented 359-g, 15 x 13.5 x 3 cm mastectomy with 9.5 x 3.7 cm skin ellipse and 1.4 cm everted nipple. Ink code: Anterior/superior-blue, anterior/inferior-orange, posterior-black. Specimen is serially sectioned into 11 slices from lateral to medial with nipple in slice 5 revealing 3 lesions:

- 1) 4 x 3.5 x 3 cm firm stellate mass in the upper inner quadrant slices 6-9 that is closest to the anterior margin at 1.1cm.
- 2) 1.5 x 1.2 x 1 cm firm nodule in the upper outer quadrant in slice 1 which is 0.8 cm from the deep margin and 5.7 cm lateral to lesion #1
- 3) 1.4 x 1.2 x 1.1 cm nodule in the lower outer quadrant in slice 1 which is less than 0.1-cm from the anterior margin and 1.6 cm inferior to lesion #2

Tissue is procured. Representatively submitted:

D1: slice 1, upper outer quadrant (nodule 2)

D2: slice 1, tissue connecting nodule 1 to nodule 2

D3: slice 1, lower outer quadrant (nodule 3)

D4: slice 2, posterior mid

D5: slice 3, mid section

D6: slice 4, mid section

D7: slice 5, mid section posterior to nipple

D8: slice 6, section (mass)

D9: slice 7, mass and posterior margin

D10-D13: mass including margins, en bloc

D14: slice 9, mass

D15: slice 10, medial to mass

D16: slice 6, upper outer quadrant

D17: slice 3, lower outer quadrant

D18: slice 4, upper outer quadrant

D19-D20: perpendicular sections of nipple and skin

E. LEFT AXILLARY CONTENTS

Received fresh labeled with the patient's identification and "left axillary contents" is an aggregate of yellow-tan soft tissue, 7 x 5 x 2.2 cm. Multiple lymph nodes are identified with firm pink-tan cut surfaces. Lymph nodes are submitted entirely.

E1-E2: 6 lymph nodes each E3-E8: 1lymph node each E9-E10: 1 lymph node, bisected E11-E12: 1 lymph node, bisected

DIAGNOSIS:

A. LYMPH NODE, SENTINEL #1, LEFT AXILLA, EXCISION:

- METASTATIC CARCINOMA TO ONE OF ONE LYMPH NODE (1/1), MEASURING 0.8-CM WITH NO EXTRANODAL EXTENSION.

B. LYMPH NODE, SENTINEL #1, RIGHT AXILLA, EXCISION:

- ONE LYMPH NODE, NEGATIVE FOR METASTASES (0/1).

C. BREAST, RIGHT, MASTECTOMY:

- MULTIPLE FOCI OF LOBULAR CARCINOMA IN SITU
- FLAT EPITHELIA ATYPIA AND ATYPICAL DUCTAL HYPERPLASIA
- BIOPSY SITE CHANGES WITH FIBROSIS
- MULTIPLE RADIAL SCARS, FIBROCYSTIC CHANGES WITH FIBROSIS, COMPLEX SCLEROSING ADENOSES AND APOCRINE METAPLASIA, AND MICROCALCIFICATIONS IN DUCTAL EPITHELIUM, NO DCIS OR INVASIVE CARCINOMA IDENTIFIED
- SEE NOTE

D. BREAST, LEFT, MASTECTOMY:

- MULTIPLE FOCI OF INVASIVE DUCTAL CARCINOMA, SBR GRADE 2, LARGEST FOCUS MEASURING 4.0-CM
- INTERMEDIATE NUCLEAR GRADE, DUCTAL CARCINOMA IN SITU, SOLID AND CRIBRIFORM TYPES WITH CENTRAL NECROSIS AND MICROCALCIFICATIONS
- INVASIVE TUMOR PRESENT AT ANTERIOR INFERIOR SURGICAL RESECTION MARGIN
- BIOPSY SITE CHANGES WITH FIBROSIS
- SEE SYNOPTIC REPORT.

E. LYMPH NODES, LEFT AXILLARY CONTENTS, AXILLARY DISSECTION:

- METASTATIC CARCINOMA TO TWELVE OF EIGHTEEN LYMPH NODES (12/18), LARGEST MEASURING 2.2 CM WITH EXTRANODAL EXTENSION

NOTE: E-Cadherin is positive in the ADH focus and negative in the LCIS.

Drs. and concur on presence of ADH in the right breast.

SYNOPTIC REPORT - BREAST

Specimens Involved

Specimens: A: LEFT AXILLARY NON SLN #1

D: LEFT BREAST

E: LEFT AXILLARY CONTENTS

Specimen Type:

Mastectomy

Needle Localization:

No

Laterality: Left

Invasive Tumor:

Present

Multifocality: Yes WHO CLASSIFICATION

Invasive ductal carcinoma, NOS 8500/3

Tumor size: 4cm Margins: Invo

Involved at

Anterior-inferior

Extent::

1-cm

Tubular Score: 3 Nuclear Grade:

Mitotic Score: 1

Modified Scarff Bloom Richardson Grade:

2

Necrosis: Absent

Vascular/Lymphatic Invasion:

Present

Extent: extensive

Lobular neoplasia: LCIS

Lymph nodes: Sentinel lymph node and axillary dissection Lymph node status: Positive 13 / 19 Extranodal extension

DCIS present

Margins uninvolved by DCIS DCIS Quantity: Estimate 10%

DCIS Type: Solid

Cribriform

DCIS Location: Associated with invasive tumor

Nuclear grade: Intermediate Necrosis: Present

crosis: Present

ER/PR/HER2 Results

ER/PR/HER2 N

PR: Positive

HER2: Negative by FISH Performed on Case:

Pathological staging (pTN):

pT 2 N 3a

CLINICAL HISTORY:

None given

PRE-OPERATIVE DIAGNOSIS:

Left breast cancer

ADDENDUM:

Specimen A was incorrectly designated in the diagnosis field as "LYMPH NODE, SENTINEL #1, LEFT AXILLA, EXCISION"; the correct designation of the specimen is "LYMPH NODE, NON-SENTINEL #1, LEFT AXILLA, EXCISION." Only the specimen description is changed, the diagnosis remains the same.

Microscopic/Diagnostic Dictation: Pathologist,

Final Review: Pathologist,

Final: Pathologist,

Addendum Review: Pathologist, Addendum Final: Pathologist,

Metadatic Axillary Lyoph Node

Criteria
Diagnosis Discrepancy
Primary Tumor Site Discrepancy
HIPAA DIS

Prior Malignancy History
Dual/Synchronous Primes Noted
Case is (circle): QUALIFIED / DISDIAN