Carcin oma, infritrating duct, NOS

Roth Site Code: breast, central proteir

C 50.1

COCF Site brust NOS 050.9

TSS:

SPECIMENS:

- A. NON-SENTINEL LYMPH NODE #1
- **B. RIGHT BREAST**
- C. LEFT BREAST WITH AXILLARY CONTENTS

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INTRAOPERATIVE CONSULTATION DIAGNOSIS:

TPA/FSA-non sentinel lymph node #1: Touch prep is negative for tumor; frozen section positive for metastatic carcinoma (0.4 cm). Diagnosis called by Dr. to Dr

GROSS DESCRIPTION:

A. NON-SENTINEL LYMPH NODE #1

Received fresh, labeled with matching patient identifiers, are 2 lymph nodes, 1.1 x 1 x 0.5 cm (A2) and 1.3 x 0.7 x 0.4 cm (A1). A1 contains a 0.4 cm white area of discoloration. A2 is used for touch prep; A1 is submitted for frozen section. Specimen is submitted entirely.

FSA1: frozen A1

A2: A2

B. RIGHT BREAST, NORMAL BREAST

Received fresh, labeled with the patient's identification and "right breast, normal breast" is an oriented 1154 g, 27 x 17 x 7 cm mastectomy with 25 x 9.5 cm skin ellipse and 1.7-cm flat nipple. Ink code: Anterior/superior-blue, anterior/inferior-orange, posterior-black. The specimen is serially sectioned into 12 slices with from medial to lateral with nipple in slice 6; no masses or lesions are identified. No lymph nodes are found. Representatively submitted.

B1: slice 3, upper inner quadrant

B2: slice 4, upper inner quadrant

B3: slice 5, upper inner quadrant

B4: slice 7, upper outer quadrant

B5: slice 8, upper outer quadrant

B6: slice 10, upper outer quadrant

B7: slice 10, lower outer quadrant

B8: slice 9, lower outer quadrant

B9: slice 6, lower outer quadrant B10: slice 5, lower inner quadrant

B11: slice 2, lower inner quadrant

B12: slice 1, lower inner quadrant

B13-B14: nipple and skin

C. LEFT BRESAST WITH AXILLARY CONTENTS

Received fresh labeled with the patient's identification and "left breast with axillary contents" is an oriented 1457 g, 29 x 22 x 7 cm mastectomy with 24 x 11.5 cm skin ellipse and 1.2-cm inverted nipple; there is a 0.7-cm nodule adjacent to the nipple and multiple skin lesions ranging from 0.2 to 0.4 cm. Ink code: Anterior/superior-blue, anterior/inferior-orange, posterior-black. Specimen is serially sectioned into 12 slices from medial to lateral with nipple and slice 6 revealing, in slices 5-7 a 2.5 x 2 x 1.8 cm firm tan lesion located in the mid upper region which is 3.2 cm from the deep margin and 1.7 cm from the anterior margin (#1), 2.4 cm inferior to lesion #1, in slice 8, is a 1.7 x 1.7 x 1.5 cm firm tan mass located in the mid section, 5 cm from the deep margin and 1 cm from the anterior margin (#2), 3 cm superior to lesion #2 is a firm 0.7 cm nodule located in the upper mid-quadrant in slice 8 which is 4.3 cm from the deep margin and 1.3 cm from the anterior margin. Clips are identified in slices 6, 7, and 8; multiple axillary lymph nodes are identified. Representative sections.

C1-C3: slice 6, lesion #1 including both margins (clip)

C4: slice 7, connecting tissue between lesions #1 and #2

C5: slice 7, lesion #2 (clip)

C6: slice 8, lesion #2 (clip)

C7: slice 8, tissue connecting lesion #2 and #3 (including #3)

C8: slice 11, upper outer quadrant

C9: slice 10, upper outer quadrant

C10: slice 10, lower outer quadrant

C11: slice 4, lower inner quadrant

C12: slice 3, lower inner quadrant

C13-C15: nipple and adjacent nodule

C16: skin lesions

C17: 5 lymph nodes

C18: 3 lymph nodes C19-C22: 1 lymph node each C23-C24: 1 lymph node

DIAGNOSIS:

- A. LYMPH NODE, NON-SENTINEL, LEFT AXILLA, EXCISION:
- METASTATIC CARCINOMA TO ONE OF ONE LYMPH NODE (1/1), MEASURING 0.25-CM WITH FOCAL EXTRANODAL EXTENSION.

B. BREAST, RIGHT, MASTECTOMY:

- LOBULAR CARCINOMA IN SITU (E-CADHERIN NEGATIVE)
- FIBROADENOMA (0.6-CM), COLUMNAR CELL CHANGES AND HYPERPLASIA WITHOUT ATYPIA, USUAL DUCTAL HYPERPLASIA WITHOUT ATYPIA, MICROCALCIFICATIONS IN BENIGN DUCTS, FIBROCYSTIC CHANGES WITH FIBROSIS AND APOCRINE METAPLASIA.
- C. BREAST, LEFT, MASTECTOMY WITH AXILLARY NODE DISSECTION:
- MULTIPLE FOCI OF INVASIVE DUCTAL CARCINOMA, SBR GRADE 2, LARGEST FOCUS MEASURING 2.5-CM INTERMEDIATE NUCLEAR GRADE, DUCTAL CARCINOMA IN SITU, SOLID AND CRIBRIFORM TYPES WITH CENTRAL NECROSIS AND MICROCALCIFICATIONS
- SURGICAL RESECTION MARGINS NEGATIVE FOR TUMOR
- METASTATIC CARCINOMA TO TWO OF FORTEEN LYMPH NODES (2/14), LARGEST MEASURING 1.3-CM WITH EXTRANODAL EXTENSION
- BIOPSY SITE CHANGES WITH FIBROSIS, GRANULATION TISSUE AND FOREIGN BODY GIANT CELL REACTION
- SEE SYNOPTIC REPORT AND SEE NOTE.

NOTE: Multiple foci of invasive ductal carcinoma identified around the central region. One focus of tumor involves nipple without skin ulceration.

SYNOPTIC REPORT - BREAST Specimens Involved A: NON-SENTINEL LYMPH NODE #1 Specimens: C: LEFT BREAST WITH AXILLARY CONTENTS

Specimen Type:

Mastectomy

Needle Localization:

Laterality: Left

Invasive Tumor: Present

Multifocality: Yes

WHO CLASSIFICATION

Invasive ductal carcinoma, NOS 8500/3

Tumor size: 2.5cm Tumor Site: Central Margins: Negative Tubular Score: 3

Nuclear Grade:

Mitotic Score: 1

Modified Scarff Bloom Richardson Grade:

Necrosis: Absent

2

Vascular/Lymphatic Invasion:

None identified Lobular neoplasia: LCIS

Lymph nodes: Sentinel lymph node and axillary dissection Lymph node status: Positive 3 / 15 Extranodal extension No

Micrometastases:

DCIS present

Margins uninvolved by DCIS DCIS Quantity: Estimate 5%

DCIS Type: Solid

Cribriform

DCIS Location: Both associated and separate from invasive tumor mass

2

Nuclear grade: Intermediate Necrosis: Present

ER/PR/HER2 Results

ER: Positive PR: Positive **HER2**: Negative Performed on Case: Pathological staging (pTN): pT 2 N 1a

CLINICAL HISTORY:

None given

PRE-OPERATIVE DIAGNOSIS:

Left breast cancer

Microscopic/Diagnostic Dictation: Pathologist, Final Review: Pathologist, Final: Pathologist, ____

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JiPAA Discrepancy

Juan Ji