

ICD-0-3

Carcinoma, infiltrating duct, NOS
8500/3

Site Code: breast, NOS
C50.9

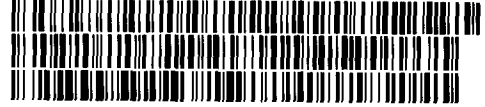
TSS Pt ID:

SPECIMENS:

- A. RIGHT BREAST NEEDLE LOCALIZATION LUMPECTOMY
- B. SENTINEL LYMPH NODE #1 RIGHT AXILLA
- C. LEFT BREAST LUMPECTOMY NEEDLE LOCALIZATION
- D. SENTINEL LYMPH NODE #1 LEFT AXILLA

UUID: 252A2D12-EC16-459E-8486-7814FF39E6C2
TCGA-E2-A105-01A-PR

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SPECIMEN(S):

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INTRAOPERATIVE CONSULTATION DIAGNOSIS:

- A. Right breast, needle localization (Gross Examination only): Tumor 0.8cm from nearest anterior margin.
By Dr., called to Dr. at
- C: Left breast, needle localization (Gross Examination only): Tumor 1.0cm from nearest anterior margin.
By Dr., called to at
- TPD: Sentinel lymph node #1, left breast (Smears only): Lymph node, negative for tumor.
By Dr., called to Dr. at

GROSS DESCRIPTION:

A. RIGHT BREAST NEEDLE LOCALIZATION LUMPECTOMY

The specimen, received fresh in a container labeled with patient name and designated as "right breast needle localization right breast lumpectomy" is a segment of breast tissue weighing 72gm and measuring 9.0x8.0x3.5cm. The specimen is oriented per Dr. as follows: single stitch-anterior, long double stitch-lateral, short double stitch-superior. A metallic wire penetrates through the breast tissue from medial to lateral direction. On serial section, a 1.1x1.1x1.0cm firm, stellate mass is identified. This mass is 0.8cm from the anterior margin, 1.5cm from lateral margin, 2.0cm from the posterior margin. The exterior surface of the specimen is inked as follows: anterior-blue, inferior-orange, superior-red, lateral-yellow, medial-green, posterior-black. Representative sections of the specimen are submitted from cassette A1 to cassette A26.

Block summary:

- A1-A7: the mass and the anterior margin
- A8-A11: mass and the posterior border (A8 and A9 are 2 consecutive sections connected by the red dot)
- A12-A17: mass and the lateral margin
- A18-A17: representative section from the superior border
- A20-A21: representative section from the inferior border
- A22-A23: representative section from the medial border
- A24: representative section from the firm area adjacent to the lateral border
- A25: representative section from the firm area adjacent to the posterior border
- A26: representative section at the area adjacent to the inferior margin

B. SENTINEL LYMPH NODE #1 RIGHT AXILLA

The specimen, received fresh in a container labeled with patient name and designated as "sentinel lymph node #1 right axilla" consists of 2 firm lymph node measuring 1.0x0.5x0.3cm and 2.0x1.0x0.5cm. The lymph node is submitted in toto in cassette B1 and B2.

*** C. LEFT BREAST LUMPECTOMY NEEDLE LOCALIZATION**

The specimen, received fresh in a container labeled with patient name and designated as "left needle localization lumpectomy" is a segment of breast tissue weighing 75 grams and measuring 8.5 x 5.5 x 3.4 cm. The specimen is oriented as follows: single stitch, anterior; double stitch, lateral; triple stitch, superior. The specimen is inked as follows: superior, red; inferior, orange; medial, green; lateral, yellow; anterior, blue; posterior, black. The specimen is serially sectioned and it reveals a firm, white stellate mass measuring 3 x 2.5 x 2 cm. Grossly, the tumor is 1 cm from the anterior margin, 1.6 cm from the posterior margin, 2.3 cm from the inferior margin, 2.6 cm from the superior margin, 1.3 cm from the medial margin and 1 cm from the lateral margin. The rest of the section of the specimen are submitted in cassettes C1 - C27.

Block summary:

- C1-C3: tumor and the anterior margin
- C4-C8: tumor and the lateral margin
- C9-C12: tumor and the medial margin
- C13-C20: posterior margin adjacent to the tumor
- C21-C23: representative section from the inferior margin
- C24-C27: representative section from the posterior lateral area of the breast

D. SENTINEL LYMPH NODE #1 LEFT AXILLA

The specimen, received fresh in a container labeled with patient name and designated as "sentinel lymph node #1 left axilla" consists of a fibroadipose fragment of tissue measuring 6.0x3.0x1.0cm. Within the tissue, 1 lymph node is identified measuring 1.3x1.2x1.0cm. Touch prep is prepared. The specimen is submitted in toto in cassette D1-D3.

DIAGNOSIS:

A. RIGHT BREAST, NEEDLE LOCALIZED EXCISIONAL BIOPSY:

- INVASIVE MAMMARY CARCINOMA, TUBULOLOBULAR TYPE, MODIFIED SBR GRADE I
- TUMOR IS 1.8 CM IN MAXIMUM DIMENSION MEASURED MICROSCOPICALLY
- FINAL SURGICAL MARGINS ARE FREE OF TUMOR
- SEE SYNOPTIC TEMPLATE AND COMMENT
- DUCTAL CARCINOMA IN SITU, LOW NUCLEAR GRADE, SOLID TYPE
- FINAL SURGICAL MARGINS ARE FREE OF DCIS
- DUCTAL HYPERPLASIA (USUAL TYPE), AND COLUMNAR CELL CHANGE WITH COLUMNAR CELL HYPERPLASIA.
- FIBROSIS, FAT NECROSIS AND HEMOSIDERIN CONSISTENT WITH PRIOR BIOPSY SITE CHANGE.

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

- ONE LYMPH NODE NEGATIVE FOR CARCINOMA (0/1)

C. LEFT BREAST, NEEDLE LOCALIZED EXCISIONAL BIOPSY:

- INVASIVE DUCTAL CARCINOMA, MODIFIED SBR GRADE II
- TUMOR IS 3.0 CM IN MAXIMUM DIMENSION
- FINAL SURGICAL MARGINS ARE FREE OF TUMOR
- SEE SYNOPTIC TEMPLATE
- DUCTAL CARCINOMA IN SITU, INTERMEDIATE NUCLEAR GRADE, SOLID TYPE
- SURGICAL MARGINS ARE FREE OF DCIS
- FIBROCYSTIC CHANGES WITH DUCTAL HYPERPLASIA (USUAL TYPE)
- COLUMNAR CELL CHANGE AND COLUMNAR CELL HYPERPLASIA
- BENIGN INTRADUCTAL PAPILLOMA
- FIBROSIS SUGGESTIVE OF PRIOR BIOPSY SITE CHANGE

D. SENTINEL LYMPH NODE, #1 LEFT AXILLA, BIOPSY:

- ONE LYMPH NODE NEGATIVE FOR CARCINOMA (0/1)

COMMENT: The invasive tumor present in the right breast (specimen) shows a morphology that is predominantly that of lobular carcinoma. In many areas, however, and particularly on slide A5 the tumor shows small tubular structures with angulated contours and apocrine snouting. This combined morphology is that of tubulolobular carcinoma. This tumor was e-cadherin positive on the original biopsy, a finding that normally favors ductal carcinoma. Tubulolobular carcinoma, however, has been reported to be e-cadherin positive also. Since the WHO currently includes tubulolobular carcinoma as a variant of lobular carcinoma, that is how it is listed on the synoptic template since there is no option for tubulolobular carcinoma in that template.

SYNOPTIC REPORT - BREAST

Specimens Involved

Specimens: A: RIGHT BREAST NEEDLE LOCALIZATION LUMPECTOMY

Specimen Type: Excision

Needle Localization: Yes

bi lateral breast eff.

(L) invasive ductal carcinoma

Laterality: Right
 Invasive tumor: Present
 Multifocality: No
 WHO CLASSIFICATION
Invasive lobular carcinoma 8520/3
 Specimen size: Size of Invasive focus 1.8cm
 Additional dimensions: 1.1cm x 1cm
 Tumor Site: Not specified
 Margins: Negative
 Distance from closest margin: 0.3cm
 Margin: anterior
 Tubular score: 3 (<10% tubule)
 Nuclear grade: 1
 Mitotic score (Olympus 40x): 1 (0-6/10)
 Modified Scarff Bloom Richardson Grade: I (3-5 points)
 Necrosis: Absent
 Vascular/Lymphatic Invasion: None identified
 Lobular neoplasia: None
 Lymph nodes: Sentinel lymph node only
 Lymph node status: Negative 0 / 1
 Non-neoplastic areas: Ductal hyperplasia.
 DCIS present
 Margins uninvolved by DCIS
 DCIS Quantity: Estimate % 5
 DCIS type: Solid
 DCIS location: Associated with invasive tumor
 Nuclear grade: Low
 Necrosis: Absent
 Location of CA++: Benign epithelium
 Pathological staging (pTN): pT 1c N 0
 Comment(s):
 Tubulolobular type carcinoma is not listed as a separate entity in this template. It is considered a variant of lobular carcinoma in the WHO classification system, despite frequently being e-cadherin positive.

SYNOPTIC REPORT - BREAST

Specimens Involved

Specimens: C: LEFT BREAST LUMPECTOMY NEEDLE LOCALIZATION

Specimen Type: Excision
 Needle Localization: Yes
 Laterality: Left
 Invasive tumor: Present
 Multifocality: No
 WHO CLASSIFICATION
Invasive ductal carcinoma, NOS 8500/3
 Specimen size: Size of Invasive focus 3cm
 Additional dimensions: 2.5cm x 2cm
 Tumor Site: Not specified
 Margins: Negative
 Distance from closest margin: 0.4cm
 Margin: Lateral, medial and anterior.
 Tubular score: 3 (<10% tubule)
 Nuclear grade: 2
 Mitotic score (Olympus 40x): 2 (7-13/10)
 Modified Scarff Bloom Richardson Grade: II (6-7 points)
 Necrosis: Absent
 Vascular/Lymphatic Invasion: None identified
 Lobular neoplasia: None
 Lymph nodes: Sentinel lymph node only
 Lymph node status: Negative 0 / 1

Non-neoplastic areas: Papilloma, fibrocystic changes with ductal hyperplasia.
 DCIS present
 Margins uninvolved by DCIS
 DCIS Quantity: Estimate % 10
 DCIS type: Solid
 DCIS location: Associated with invasive tumor
 Nuclear grade: Intermediate
 Necrosis: Present
 Location of CA++: Benign epithelium
 Pathological staging (pTN): pT 2 N 0

CLINICAL HISTORY:

None given

PRE-OPERATIVE DIAGNOSIS:

Bilateral breast ca

Gross Dictation:.,
 Microscopic/Diagnostic Dictation:., Pathologist,
 Microscopic/Diagnostic Dictation:., Pathologist,
 Final Review:., Pathologist,
 Final Review: Pathologist, ^
 Final: Pathologist, ^

Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HIPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary Noted		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	WJ	WJ
Date Reviewed:		