1CD-0-3 Carcinoma, infiltrating ductal, NOS 8500/3 Sith Sreast, NOS C50.9 1/24/11 hr

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# SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

FMP/SSN:

Race: WHITE

Taken:

DOB/Age/Sex: Location:

Received:

Physician(s):

Reported:

#### SPECIMEN:

A: RIGHT BREAST B: ADDITIONAL RIGHT BREAST TISSUE

C: MUSCLE, LEFT BREAST, DEEP D: LEFT BREAST

E: ADDITIONAL LEFT BREAST TISSUE

F: RIGHT AXILLARY SENTINEL LYMPH NODE

G: RIGHT AXILLARY SENTINEL LYMPH NODE

H: ADDITIONAL LEFT BREAST TISSUE, INFRAMAMMARY CREASE

I: LEFT AXILLARY SENTINEL LYMPH NODE

J: LEFT AXILLARY SENTINEL LYMPH NODE #2

### FINAL DIAGNOSIS:

- A. BREAST, RIGHT, MASTECTOMY:
  - INFILTRATING DUCTAL CARCINOMA, GRADE II (3 FOR TUBULE FORMATION, 2 FOR PLEOMORPHISM, 1 FOR MITOSES = 6).
  - TUMOR MEASURES 2.2 X 2.0 X 1.5 CM (GROSS).
  - MARGINS NEGATIVE FOR TUMOR (APPROACHES 2.0 CM FROM DEEP MARGIN).
  - NO DUCTAL CARCINOMA IN SITU IDENTIFIED.
  - NO LYMPHVASCULAR INVASION IDENTIFIED.
  - USUAL DUCTAL HYPERPLASIA (A11).
  - BIOPSY SITE CHANGES.
  - UNREMARKABLE SKIN AND NIPPLE.
  - AJCC STAGE pT2N0MX.
- B. BREAST, RIGHT, EXCISION:
  - UNREMARKABLE FIBROADIPOSE TISSUE.
  - NO EVIDENCE OF MALIGNANCY.
- C. SOFT TISSUE, DEEP LEFT BREAST, EXCISION:
  - UNREMARKABLE SKELETAL MUSCLE AND MATURE ADIPOSE TISSUE.
  - NO EVIDENCE OF MALIGNANCY.
- D. BREAST, LEFT, MASTECTOMY:
  - INFILTRATING DUCTAL CARCINOMA, GRADE II (3 FOR TUBULE FORMATION, 2 FOR PLEOMORPHISM, 1 FOR MITOSES = 6) WITH ASSOCIATED NECROSIS.
  - TUMOR MEASURES 2.2 X 1.8 X 1.8 CM (GROSS).
  - TUMOR ABUTS THE DEEP MARGIN WITHOUT DEFINITIVE INVOLVEMENT (D4).
  - FOCAL ASSOCIATED DUCTAL CARCINOMA IN SITU, SOLID TYPE (D6 AND D7).
  - FOCAL VASCULAR INVASION (D6).
  - BIOPSY SITE CHANGES.



Patient:

Specimen #:

### FINAL DIAGNOSIS (continued):

- UNREMARKABLE SKIN AND NIPPLE.
- AJCC STAGE pT2N0MX.
- E. BREAST, LEFT, EXCISION:
  - UNREMARKABLE FIBROADIPOSE TISSUE.
- F. LYMPH NODE, RIGHT AXILLARY, EXCISION:
  - NO EVIDENCE OF MALIGNANCY BY HEMATOXYLIN AND EOSIN AND IMMUNO-HISTOCHEMICAL STAINS (0/1).
- G. LYMPH NODE, RIGHT AXILLARY, EXCISION:
  - NO EVIDENCE OF MALIGNANCY BY HEMATOXYLIN AND EOSIN AND IMMUNO-HISTOCHEMICAL STAINS (0/5).
- H. SOFT TISSUE, LEFT INFRAMAMMARY CREASE, EXCISION:
  - BENIGN BREAST TISSUE.
- I. LYMPH NODE, LEFT AXILLA, EXCISION:
  - NO EVIDENCE OF MALIGNANCY BY HEMATOXYLIN AND EOSIN AND IMMUNO-HISTOCHEMICAL STAINS (0/2).
- J. LYMPH NODE, LEFT AXILLA, EXCISION:
  - NO EVIDENCE OF MALIGNANCY BY HEMATOXYLIN AND EOSIN AND IMMUNO-HISTOCHEMICAL STAINS (0/1).

\*\* Report Electronically Signed Out \*\*

CLINICAL DIAGNOSIS AND HISTORY:

white female with synchronous bilateral infiltrating

breast carcinoma.

## FROZEN SECTION DIAGNOSIS:

C. SPECIMEN TYPE: CHEST WALL

TIME RECEIVED:

TIME REPORTED:

REPORTED TO: DR.

REPORTED BY: DR.

# BLOCKS: 2

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Patient:

Specimen #:

## FROZEN SECTION DIAGNOSIS (continued):

# SCRAPE PREPS: 0

FROZEN SECTION DIAGNOSIS:
-NEGATIVE FOR TUMOR BASED ON TISSUE SUBMITTED.

#### GROSS DESCRIPTION:

A. Received fresh, labeled with the patient's name, designated "RIGHT BREAST" is a 980 gram simple mastectomy specimen measuring 23.5 cm superior to inferior, 18.0 cm medial to lateral, and 5.1 cm anterior to posterior. The overyling ellipse of nipple bearing skin measures 7.4 x 3.8 cm, and is without gross abnormalities. Ink code: blue=superior/anterior, green=inferior/anterior, and black=posterior. Sectioning reveals a 2.2 x 2.0 x 1.5 cm stellate tumor with a tan, gritty, and focally hemorrhagic cut surface in the lower outer quadrant, 2.0 cm from the deep margin, and 2.5 cm from the inferior/anterior margin. The remaining tissue is mostly fatty with interspersed lengths of soft, white, parenchyma. Multiple tissue sections are submitted for CBCP protocol with matching paraffin sections in cassette A1, A2, A3, and A7.

## Slide key:

A1: Skin. A2: Tumor. A3: Tumor.

A4-A6: Margins nearest tumor.

A7: Fibrosis (central).

A8: Nipple.

A9: Upper inner quadrant. A10: Lower inner quadrant. A11: Lower outer quadrant.

A12: Upper outer quadrant. 12CF

B. Received in formalin, labeled with the patient's name, designated "ADDITIONAL RIGHT BREAST TISSUE" are two fragments of tan-yellow, fibrofatty, non-oriented, soft tissue. The larger measures  $11.0 \times 9.5 \times 3.5$  cm. The smaller measures  $7.5 \times 7.0 \times 3.8$  cm. The outer portion of both specimens is inked entirely in black. Sectioning reveals a uniform, glistening, yellow, lobular cut surface admixed with a scant portion of white, fibrous appearing connective tissue. Representative sections are submitted.

Patient:

Specimen #:

# GROSS DESCRIPTION (continued):

Slide key:

B1-B6: Random sections of larger fragment.

B7-B10: Random sections of smaller fragment. 10CF

C. Received fresh for intraoperative consultation, labeled with the patient's name, designated "ADDITIONAL CHEST WALL DEEP AT SITE OF TUMOR, LEFT BREAST SHORT SUPERIOR, LONG LATERAL DOUBLE DEEP" is a 7.5 x 3.5 x 0.8 cm fragment of red-brown, soft tissue. The surface appears to be muscle grossly. Sectioning reveals a white, fibrous appearing band 0.3 cm thick, running the length of the center of the specimen parallel to the deep margin. The specimen is inked deep in black, superior in yellow, and inferior in green. The specimen is entirely submitted lateral to medial.

Slide key:

C1: Inferior portion of section 1.0 cm from the lateral margin contiguous

C2: Inferior portion of section submitted for frozen contiguous with C10.

D. Received fresh, labeled with the patient's name, designated "LEFT BREAST" is a 984 gram simple mastectomy specimen. The specimen measures 26.0 cm superior to inferior, 18.0 cm medial to lateral, and 5.8 cm anterior to posterior. The overlying ellipse of nipple bearing skin measures 7.2 x 3.5 cm, and is notable for an inverted nipple. Ink code: blue=superior/anterior, green=inferior/anterior, and black=posterior. Sectioning reveals a 2.2 x 1.8 x 1.8 cm tumor with stellate margins, and tan, gritty, hemorrhagic cut surface in the lower outer quadrant abutting the deep margin. The remaining tissue is mostly fatty with interspersed widths of soft, white parenchyma. Multiple tissue sections are submitted for CBCP protocol with matching paraffin sections in cassettes D1, D4, and D5.

Slide key:

D1: Skin (medial tip).

D2-D4: Tumor with margin.

D5: Fibrous, upper outer quadrant, 5.0 cm from tumor.

D6-D8: Remaining lateral portion of tumor including deep black inked margin.

D9: Two sections of nipple.

Patient:

Specimen #:

## GROSS DESCRIPTION (continued):

D10: Upper outer quadrant. D11: Lower outer quadrant. D12: Lower inner quadrant.

D13: Upper inner quadrant. 13CF

- E. Received in formalin, labeled with the patient's name, designated "ADDITIONAL LEFT BREAST TISSUE" is an unoriented, yellow-tan, fibrofatty fragment measuring 8.3 x 6.5 x 3.5 cm. The entire outer portion of the specimen is inked in black. Sectioning reveals a uniform, tan-yellow, glistening, lobular, cut surface admixed with widths of soft, white, parenchyma. Representative sections are submitted. 4C6
- F. Received fresh, labeled with the patient's name, designated "RIGHT AXILLARY SENTINEL LYMPH NODE" is a 1.9 x 1.4 x 1.2 cm lymph node with adherent fat. Half of the node is submitted for the CBCP protocol. The remaining half is submitted for paraffin sections. 1C1
- G. Received fresh, labeled with the patient's name, designated "RIGHT AXILLARY SENTINEL LYMPH NODE #2" is a 1.4 x 1.3 x 0.8 cm lymph node with adherent fat. Half of the node is submitted for the CBCP protocol. The remaining half is submitted for paraffin section in G1. The remaining fatty tissue is bisected, and entirely submitted in cassettes G2 and G3. 3CF
- H. Received in formalin, labeled with the patient's name, designated "ADDITIONAL LEFT BREAST TISSUE, INFRAMAMMARY CREASE" is a 9.5 x 7.0 x 4.5 cm fragment of tan-yellow, glistening, fibrofatty, lobulated, soft tissue. The specimen arrives unoriented. The entire outer portion is inked in black. Sectioning reveals a smooth, glistening, lobulated, fibrofatty, yellow-tan, cut surface admixed with widths of soft, white parenchyma. Representative sections are submitted. 8CF
- I. Received fresh, labeled with the patient's name, designated "LEFT AXILLARY SENTINEL LYMPH NODE" are two lymph nodes with adherent fat measuring 2.2 and 2.0 cm in greatest dimension. Half of the larger node is submitted for the CBCP protocol. The remaining half is submitted for paraffin section in cassette I1. The smaller node is in cassette I2. The remaining fatty tissue is submitted in cassettes I3 through I6. 6CF
- J. Received in formalin, labeled with the patient's name, ... designated "LEFT AXILLARY SENTINEL LYMPH NODE #2" is a 3.2  $\times$  2.0  $\times$  1.2 cm

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# SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

# GROSS DESCRIPTION (continued):

yellow-tan fragment of fibrofatty, soft tissue. Within the soft tissue there is a single identifiable lymph node measuring 0.9 cm in greatest dimension. The node is submitted in J1. The remainder of fibrofatty, soft tissue is submitted in J2. 2C2

Criteria

Disgnosis Discrepancy
Primary Tumor Site Discrepancy
111PAA Discrepancy
Prior Malignancy History
Dual/Synchronous Primary Artor
Case is [circle]: UQUALIFIED / DCOUALIFIED
Reviewor Initials Date Reviewed: U. L.

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