

1CB-0-3

Carcinoma, Infiltrating duct, NOS  
8500/3

Site Code: breast, NOS C50.9 12/4/10

TSS Pt ID:

**SPECIMENS:**

- A. SENTINEL LYMPH NODE #1 RIGHT AXILLA
- B. SENTINEL LYMPH NODE #2 RIGHT AXILLA
- C. RIGHT BREAST LUMPECTOMY
- D. RIGHT AXILLARY CONTENTS LEVELS 1 AND 2
- E. SUPERIOR MARGIN
- F. MEDIAL MARGIN
- G. INFERIOR MARGIN

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TCGA-E2-A108-01A-PR

Redacted



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**INTRAOPERATIVE CONSULTATION DIAGNOSIS:**

TPA1: LN positive for carcinoma (SLN #1)  
TPB1 and TPB2: LY negative for carcinoma (SLN #2)  
C: Gross: Right breast, 1st lesion 2.2 cm, at distance from all margins (1.5 from closest superior margin)  
2nd lesion 3.0 cm from the 1st lesion, size 0.8 cm, 0.4 cm from the closest inferior margin.  
By Dr. called to Dr. at . (A, B) and )

**GROSS DESCRIPTION:**

A. SENTINEL LYMPH NODE #1 RIGHT AXILLA  
Received fresh labeled with the patient identification and "sentinel lymph node #1", is a 2.0 x 1.0 x 0.8-cm fatty lymph node displaying a 0.5 x 0.4 x 0.4-cm firm white tumor nodule. Touch preparations are performed. The lymph node is representatively submitted in cassette A1.

B. SENTINEL LYMPH NODE #2 RIGHT AXILLA  
Received fresh labeled with the patient identification and "sentinel lymph node #2, right axilla", are 2 tan-pink to fatty lymph nodes, 0.5 cm (B1) and 1.2 x 0.6 x 0.5 cm (B2). A touch preparation on each lymph node is performed and the lymph nodes are entirely submitted as follows:

B1: Smaller lymph node

B2: Largest lymph node

C. RIGHT BREAST LUMPECTOMY

Received fresh labeled with the patient identification and "right breast lumpectomy", is an oriented (single - anterior, double - lateral, triple - superior), 153.0-gram, 11.5 x 8.5 x 3.0-cm needle localized lumpectomy with radiograph. Ink code: Anterior - yellow, posterior - black, medial - green, lateral - red, superior - blue, inferior - orange. The specimen is serially sectioned into 9 slices revealing a 2.2 x 1.8 x 1.8-cm infiltrative firm gritty white tumor (mass #1 - 12 o'clock). Mass #1 is closest to the anterior and superior margins at 1.5 cm each. Tissue is procured. There is a second mass/biopsy site, 0.8 cm which is closest to the inferior margin at 0.4 cm and 3.0 cm from the first mass. The remaining fibrous tissue is finely lobulated with interspersed clear fluid-filled 0.2-cm cysts. No additional nodules are identified. A gross evaluation is performed. Representatively submitted:

C1: Slice 1, medial margin, perpendicular

C2-C3: Slice 4, tumor to closest anterior superior margins

C4-C6: Slice 6, tumor to superior posterior margins

C7: Slice 6, anterior margin

C8: Slice 6

C9: Slice 6, posterior margin

C10: Slice 6, anterior margin

C11: Slice 6

C12: Slice 6, posterior margin

C13: Slice 7, superior margin

C14: Slice 7, anterior margin

C15: Slice 7, posterior margin

C16: Slice 7, anterior margin

- C17: Slice 7
- C18: Slice 7, posterior margin
- C19: Slice 7, anterior margin
- C20: Slice 7, mass #2/biopsy cavity
- C21: Slice 7, posterior margin
- C22: Slice 9, lateral margin, perpendicular

**D. RIGHT AXILLARY CONTENTS LEVELS 1 AND 2**

Received in formalin labeled with the patient identification and "right axillary contents levels 1 and 2", is a 9.0 x 5.0 x 1.8-cm portion of adipose tissue, within which 20 possible lymph nodes are identified ranging from 0.2 to 3.5 cm. There are 2 tan-pink to fatty lymph nodes exhibiting infiltrative tumor, 0.4 and 0.5 cm. Also identified are 3 matted lymph nodes with an overall dimension of 2.2 cm. The specimen is representatively submitted as follows:

- D1: Four whole lymph nodes
- D2: Four whole lymph nodes
- D3: Three whole lymph nodes
- D4: One lymph node bisected
- D5: One lymph node bisected
- D6: Two whole lymph nodes
- D7: Two positive lymph nodes
- D8: Three possible matted lymph nodes
- D9-D20: Remaining soft tissue

**E. SUPERIOR MARGIN**

Received in formalin labeled with the patient identification and "new superior margin", is a 5.0-gram, 6.0 x 2.0 x 0.8-cm oriented portion of breast (suture at final margin). The final margin is inked black and on serial sectioning, no discrete lesions are identified. Entirely submitted in cassettes E1-E4.

**F. MEDIAL MARGIN**

Received in formalin labeled with the patient identification and "medial margin", is an oriented (suture at final margin) 5.0-gram, 4.5 x 2.8 x 1.7-cm fibrofatty tissue. The final margin is inked black and on serially sectioning, no discrete lesions are identified. Entirely submitted in cassettes F1-F4.

**G. INFERIOR MARGIN**

Received in formalin labeled with the patient identification and "inferior margin", is an oriented (suture at final margin) 4.0-gram, 4.0 x 1.5 x 1.3-cm fibrofatty tissue. The final margin is inked black and on serially sectioning, no discrete lesions are identified. Entirely submitted in cassettes G1-G3.

**DIAGNOSIS:**

**A. LYMPH NODE, SENTINEL #1, RIGHT AXILLA, EXCISION:**

- METASTATIC CARCINOMA TO ONE OF ONE LYMPH NODE (1/1), MEASURING 0.4-CM WITH NO EXTRANODAL EXTENSION.

**B. LYMPH NODES, SENTINEL #2, RIGHT AXILLA, EXCISION:**

- TWO LYMPH NODES, NEGATIVE FOR METASTASES (0/2).

**C. BREAST, RIGHT, WIDE LOCAL EXCISION:**

- INVASIVE DUCTAL CARCINOMA, SBR GRADE 3, MEASURING 2.2-CM
- HIGH NUCLEAR GRADE, DUCTAL CARCINOMA IN SITU, SOLID TYPE WITH CENTRAL NECROSIS AND LOBULAR EXTENSION
- SURGICAL RESECTION MARGINS NEGATIVE FOR TUMOR
- BIOPSY SITE CHANGES WITH FIBROSIS AND GRANULATION TISSUE
- SEE SYNOPTIC REPORT AND SEE NOTE.

**D. LYMPH NODES, RIGHT AXILLARY CONTENTS, LEVELS 1 AND 2, DISSECTION:**

- METASTATIC CARCINOMA TO FOUR OF TWENTY FOUR LYMPH NODES (4/24), LARGEST MEASURING 1.0-CM WITH FOCAL EXTRANODAL EXTENSION.

**E. BREAST, SUPERIOR MARGIN, EXCISION:**

- BREAST TISSUE, NO TUMOR SEEN.

**F. BREAST, MEDIAL MARGIN, EXCISION:**

- BREAST TISSUE, NO TUMOR SEEN.

**G. BREAST, INFERIOR MARGIN, EXCISION:**

- BREAST TISSUE, NO TUMOR SEEN.

NOTE: Grossly, two tumor masses are identified, one larger located in the superior anterior and one smaller located in the inferior lateral aspect of the specimen. The larger mass is composed of invasive ductal carcinoma measuring 2.2-cm. The smaller tumor is composed of biopsy site changes with granulation tissue intermixed with clusters of neoplastic ducts located only in the lymphatic channels (CD31 and D2-40 mark involved spaces). Located in the same level (slice #7) more towards the center of the specimen is a microscopic focus of DCIS.

#### SYNOPTIC REPORT - BREAST

Specimen Type: Excision

Needle Localization: Yes

Laterality: Right

Invasive Tumor: Present

Multifocality: No

#### WHO CLASSIFICATION

Invasive ductal carcinoma, NOS 8500/3

Tumor size: 2.2cm

Tumor Site: Not specified

Margins: Negative

Tubular Score: 3

Nuclear Grade: 3

Mitotic Score: 3

Modified Scarff Bloom Richardson Grade: 3

Necrosis: Absent

Vascular/Lymphatic Invasion: Present

Extent: at 9:00 position

Lobular neoplasia: None

Lymph nodes: Sentinel lymph node and axillary dissection

Lymph node status: Positive 5 / 27 Extranodal extension

Micrometastases: No

DCIS present

Margins uninvolved by DCIS

DCIS Quantity: Estimate 2%

DCIS Type: Solid

DCIS Location: Separate from invasive tumor mass

Nuclear grade: High

Necrosis: Present

#### ER/PR/HER2 Results

ER: Positive

PR: Positive

HER2: Negative

Performed on Case:

Pathological staging (pTN): pT 2 N 2a

#### CLINICAL HISTORY:

-year-old female multifocal IDC right breast, 2 areas at 12 and 9 o'clock. Now for lumpectomy/SNB.

#### PRE-OPERATIVE DIAGNOSIS:

None given

Gross Dictation: Pathologist,

Microscopic/Diagnostic Dictation: 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): <u>QUALIFIED</u> / <u>DEQUALIFIED</u>		
Reviewer Initials: <u>[Signature]</u> Date Reviewed: <u>[Date]</u>		