Carcinoma infiltrating ductal, NOS 8500/3 Sit, breat, NOS C50.9 1/25/11 le

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SURGICAL PATHOLOGY REPORT

Patient:

FMP/SSN:

Specimen #:

TCGA-A2-A0CY-01A-PR

DOB/Age/Sex:

Location: Physician(s):

Race: WHITE

Taken: Received:

Reported:

SPECIMEN:

A: RIGHT BREAST B: LEFT BREAST C: SENTINEL LYMPH NODE #1

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D: LEFT AXILLARY CONTENTS E: NON SENTINAL , LT AXILLARY L.N.

A. BREAST, RIGHT, MASTECTOMY:

- BENIGN BREAST TISSUE WITH FIBROCYSTIC CHANGES INCLUDING SCLEROSIS, MICROCYST FORMATION, USUAL DUCTAL HYPERPLASIA, DUCT ECTASIA, AND UUID:CB780DE7-E98C-4F7E-9487-8F25FE80DC21

B. BREAST, LEFT, MASTECTOMY:

TUMOR TYPE: INVASIVE DUCTAL CARCINOMA. NOTTINGHAM GRADE: III/III

NOTTINGHAM SCORE: 9/9

(Tubules= 3, Nuclei= 3, Mitoses= 3)

TUMOR SIZE (GREATEST DIMENSION OF INVASIVE COMPONENT): 3.5 CM TUMOR NECROSIS: PRESENT.

VENOUS / LYMPHATIC INVASION: IDENTIFIED.

- DISTANCE OF TUMOR FROM NEAREST MARGIN IS 0.4 CM, FROM THE SUPERFICIAL LOWER OUTER QUADRANT (BLUE INK) MARGIN.

INTRADUCTAL COMPONENT: MULTIFOCAL, HIGH GRADE, SOLID AND COMEDO TYPE EXTENDING WELL BEYOND THE INVASIVE COMPONENT. LYMPH NODES: 1 OF 22 POSITIVE FOR TUMOR (PARTS C-E).

NIPPLE INVOLVEMENT: NOT IDENTIFIED.

SKIN INVOLVEMENT: NOT IDENTIFIED.

ESTROGEN RECEPTORS: POSITIVE (STRONG, >75% OF CELLS, FROM PROGESTERONE RECEPTORS: NEGATIVE (WEAK, <5% OF CELLS, FROM

HER 2 NEU by IHC: NEGATIVE (1+ STAINING, FROM

PATHOLOGIC STAGE: pT2 N1 MX.

ADDITIONAL PATHOLOGIC CHANGES: FIBROCYSTIC CHANGES INCLUDING MICROCYST FORMATION, DUCT ECTASIA, SCLEROIS, USUAL DUCTAL HYPERPLASIA, AND

C. LYMPH NODE, LEFT SENTINEL, EXCISION:

- ONE (1) LYMPH NODE NEGATIVE FOR METASTATIC CARCINOMA BY HEMATOXYLIN AND EOSIN AND IMMUNOHISTOCHEMICAL (CYTOKERATIN) STAINS.

SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

FINAL DIAGNOSIS (continued):

- D. LYMPH NODE, LEFT AXILLA, EXCISION:
 - TWENTY (20) LYMPH NODES NEGATIVE FOR METASTATIC CARCINOMA.
- E. LYMPH NODE, LEFT NON-SENTINEL, EXCISION:
 - ONE (1) LYMPH NODE POSITIVE FOR METASTATIC CARCINOMA.

COMMENT:

In specimen "E" the frozen section diagnosis of metastic carcinoma is

Report Electronically Signed Out **

CLINICAL DIAGNOSIS AND HISTORY:

year old white female with history of left breast cancer

FROZEN SECTION DIAGNOSIS:

SPECIMEN TYPE:LYMPH NODE (SPECIMEN "E").

TIME REPORTED:

REPORTED TO:

REPORTED BY AND

BLOCKS:

SCRAPE PREPS:1

FROZEN SECTION DIAGNOSIS: POSITIVE FOR METASTATIC CARCINOMA.

GROSS DESCRIPTION:

A. Received in fresh labeled with the patient's name labeled "RIGHT BREAST SHORT STITCH SUPERIOR, LONG STITCH LATERAL" CONSISTS of a 927 gram mastectomy specimen oriented with a short stitch superior and long lateral. The specimen measures 24 cm medial to lateral, 19 cm superior to inferior, and 5 cm anterior to posterior. The lightly pigmented superficial skin ellipse measures 17 x 11.5 cm and displays a 1.0 cm centrally located everted nipple. No discharge or scar is noted. The deep margin is inked in black. Serial sections reveal lobulated yellow tan adipose tissue admixed with 10% moderately dense tan white fibrous tissue. The fibrous tissue is predominantly centrally located and shows catted blue grey cysts measuring up to 0.4 cm in greatest dimension. No

SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

GROSS DESCRIPTION (continued):

discrete mass or lesion identified. No lymph nodes are identified. A1: skin

A2: central A3: upper outer quadrant A4: lower outer quadrant A5: lower inner quadrant A6: upper inner quadrant A7: upper outer quadrant A8: lower outer quadrant A9: lower inner quadrant Alo: upper inner quadrant

All: representative section of nipple.

Matched sections of A1-A6 are submitted in OCT for CBCP protocol.

B. Received fresh labeled with the patient's name designated "LEFT BREAST SHORT STITCH SUPERIOR, LONG LATERAL" is a 954 gram mastectomy specimen oriented with a short stitch superior and long lateral. The specimen measures 24 cm medial to lateral, 18 cm superior to inferior, and 6 cm anterior to posterior. The lightly pigmented superficial skin ellipse measures 19 x 12.5 cm and displays a medially located 1.5 cm everted nipple free of discharge. No scar is noted. The deep margin is inked black and the superficial lower outer quadrant is inked blue. Serial sections reveal $3.5 \times 3.2 \times 2.8$ cm well defined lobulated pink white indurated mass with focal hemorrhage. The mass is located within the lower outer quadrant and comes within 3.5 cm of the deep margin and 0.4 cm of the inked superficial surface. The remainder of the specimen is composed of approximately 50% dense tan white fibrous tissue which is diffusely nodular and focally cystic. The admixed adipose tissue is unremarkable. No additional masses are identified. No lymph nodes identified. Cassette summary: B1: skin

B2: lower outer quadrant mass

B3: lower outer quadrant B4: upper outer quadrant B5: upper inner quadrant B6: lower inner quadrant

B7: representative section of closest deep margin

B8-B9: representative sections of mass with closest point of approach to blue ink margin

10: representative section of nipple. 10CF

SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

GROSS DESCRIPTION (continued):

- C. Received fresh labeled with the patient's name SENTINEL LYMPH NODE #1" consists of a 2.0 x 1.7 x 1.0 cm pink yellow fatty lymph node. The specimen is trisected. Two thirds of the lymph node are placed in cassette C1 and C2. Matched section of C1 is placed in
- D. Received fresh labeled with the patient's name designated "LEFT AXILLARY CONTENTS" consists of an unoriented irregular portion of adipose tissue measuring 9.0 \times 9.0 \times 2.0 cm. Sectioning reveals multiple pink yellow fatty lymph nodes ranging in size from 0.4 to 2.4 cm

D1-D3: one lymph node each D4-D7: one lymph node bisected

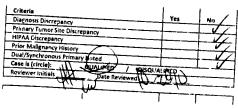
D8: two lymph nodes bisected, one inked black

D9: four intact lymph nodes D10: one lymph node bisected

D11: two lymph nodes

D12: four possible lymph nodes. 12CF

E. Received fresh labeled with the patient's name designated "NON SENTINEL CLINCALLY SUSPICOUS LEFT AXILLARY LIMPH NODE" consists of a 1.7 \times 1.5 \times 1.3 cm lymph node. Cut surface is homogeneous and firm. A portion is submitted for frozen section. 1C1



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