

ICD-0-3

Carcinoma, infiltrating duct, NOS

8500/3 12/8/10

Site Code: breast, NOS C50.9

TSS

**SPECIMENS:**

- A. WLE RIGHT BREAST NEEDLE LOC.
- B. ADDITIONAL MARGIN RIGHT BREAST
- C. WLE LEFT BREAST NEEDLE LOCALIZATION

UUID: AA486E2D-7503-4E51-BEA4-632CC994770A  
TCGA-E2-A150-01A-PR

Redacted



**SPECIMEN(S):**

- A. WLE RIGHT BREAST NEEDLE LOC.
- B. ADDITIONAL MARGIN RIGHT BREAST
- C. WLE LEFT BREAST NEEDLE LOCALIZATION

**GROSS DESCRIPTION:**

**A. WLE RIGHT BREAST NEEDLE LOC.**

Received fresh labeled with the patient's identification and "WLE right breast needle loc" is an oriented (short/1 clip-superior, long/2 clips-lateral, air knot-anterior) needle localized lumpectomy with radiograph. Ink code: Anterior-yellow, posterior-black, medial-green, lateral-red, superior-blue, inferior-orange. The specimen is serially sectioned from lateral to medial into 8 slices revealing a 2.4 x 1.9 x 1.6 cm firm tan stellate mass that is closest to the superior margin at 0.2 cm. Tissue is procured. Representatively submitted:

A1-A2: lateral margin, perpendicular resection

A3: slice 2, anterior/superior

A4: slice 2, posterior superior (mass)

A5: slice 3, anterior/superior (mass)

A6: slice 3, posterior superior (mass)

A7: slice 3, anterior/inferior (mass)

A8: slice 3, posterior inferior (mass)

A9: slice 4, anterior/superior (mass)

A10: slice 4, mid superior (mass)

A11: slice 4, posterior superior (mass)

A12: slice 4, anterior inferior (mass)

A13: slice 4, posterior inferior (mass)

A14: slice 5, anterior superior (mass)

A15: slice 5, mid superior (mass)

A16: slice 5, anterior inferior (mass)

A17: slice 5, mid inferior (mass)

A18: slice 6, anterior superior

A19: slice 6, mid superior (mass)

A20: slice 6, posterior superior

A21: slice 6, mid inferior

A22: medial margin, perpendicular sections

**B. ADDITIONAL MARGIN RIGHT BREAST**

Received fresh labeled with the patient's identification and "additional margin right breast" is in a oriented (short-superior, long-lateral) 11 g, 0.2 x 3.4 x 1.1 cm fibrofatty tissue. Margins are inked black. Serial sectioning reveals no discrete lesions. Inked margin submitted entirely in cassettes B1-B7.

NOTE: specimen was received with only 1 suture

**C. WLE LEFT BREAST NEEDLE LOCALIZATION**

Received fresh labeled with patient's identification and "WLE left breast needle localization" is an oriented (short/1 clip-superior, long/2 clips-lateral, loop-anterior) 42 g, 4 x 4 x 3.5 cm needle localized lumpectomy with radiograph. Ink code: Anterior-yellow, posterior-black, medial-green, lateral-red, superior-blue, inferior-orange. Specimen is serially sectioned from lateral to medial into 6 slices revealing a 2.4 x 1.9 x 1.8 cm firm tan stellate mass that is closest to the superior margin at 0.1 cm. Tissue is procured. Representatively submitted:

C1-C2: lateral margin, perpendicular sections

C3: slice 2, anterior superior (mass)

C4: slice 2, posterior superior (mass)

C5: slice 2, anterior inferior (mass)

C6: slice 2, posterior inferior (mass)

C7: slice 3, mid superior (mass)

C8: slice 3, posterior superior (mass)

C9: slice 3, mid inferior (mass)

C10: slice 3, posterior inferior (mass)

C11: slice 4, anterior superior

C12: slice 4, mid superior (mass)

C13: slice 4, posterior superior

C14: slice 5, anterior inferior

C15: slice 5, mid anterior  
C16: slice 5, anterior superior  
C17-C18: medial margin, perpendicular sections

**DIAGNOSIS:**

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

- INVASIVE DUCTAL CARCINOMA, SBR GRADE 2, MEASURING 2.4-CM
- INTERMEDIATE NUCLEAR GRADE, DUCTAL CARCINOMA IN SITU, SOLID AND CRIBRIFORM TYPES WITH CENTRAL NECROSIS AND MICROCALCIFICATIONS
- INVASIVE TUMOR PRESENT WITHIN 1-MM FROM SUPERIOR/MEDIAL SURGICAL RESECTION MARGIN
- LOBULAR CARCINOMA IN SITU
- BIOPSY SITE CHANGES WITH FIBROSIS
- SEE SYNOPTIC REPORT AND SEE NOTE.

**B. BREAST, RIGHT, ADDITIONAL SUPERIOR MARGIN, EXCISION:**

- INVASIVE DUCTAL CARCINOMA INVOLVES NEW INKED SURGICAL RESECTION MARGIN, SEE NOTE.

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

- INVASIVE DUCTAL CARCINOMA, SBR GRADE 2, MEASURING 1.8-CM
- SURGICAL RESECTION MARGIN NEGATIVE FOR TUMOR
- LOBULAR CARCINOMA IN SITU
- BIOPSY SITE CHANGES WITH FIBROSIS
- SEE SYNOPTIC REPORT.

NOTE: Part B. was designated as superior by Dr. Therefore, invasive tumor is present at superior (part B) and within 1-mm from medial (part A) surgical resection margin.

E-cadherin is negative in LCIS component.

**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: 2.4cm

Margins: Involved at

superior  
and within 1-mm from medial

Extent: focal

Tubular Score: 2

Nuclear Grade: 2

Mitotic Score: 3

Modified Scarff Bloom Richardson Grade: 2

Necrosis: Absent

Vascular/Lymphatic Invasion: None identified

Lobular neoplasia: LCIS

Lymph nodes: Non-sentinel lymph node

**DCIS present**

Margins uninvolved by DCIS

DCIS Quantity: Estimate 10%

DCIS Type: Solid

Cribiform

DCIS Location: Associated with invasive tumor

Nuclear grade: Intermediate

Necrosis: Present

**ER/PR/HER2 Results**

ER: Positive

PR: Positive

HER2: Negative by IHC

Performed on Case:

Pathological staging (pTN): pT 2 N x

Pathological staging is based on the AJCC Cancer Staging Manual, 7th Edition

**SYNOPTIC REPORT - BREAST**

Specimen Type: Excision

Needle Localization: Yes

Laterality: Left

Invasive Tumor: Present

Multifocality: No

**WHO CLASSIFICATION**

Invasive ductal carcinoma, NOS 8500/3

Tumor size: 1.8cm

Margins: Negative

Distance from closest margin: 0.3cm  
superior

Tubular Score: 2

Nuclear Grade: 2

Mitotic Score: 2

Modified Scarff Bloom Richardson Grade: 2

Necrosis: Absent

Vascular/Lymphatic Invasion: None identified

Lobular neoplasia: LCIS

Lymph nodes: No lymph node sampling

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DCIS not present  
-----**ER/PR/HER2 Results**

ER: Positive

PR: Positive

HER2: Negative by FISH

Performed on Case: -----

Pathological staging (pTN): pT 1c N x

Pathological staging is based on the AJCC Cancer Staging Manual, 7th Edition

**CLINICAL HISTORY:**

female found with left breast lump. She had bilateral mammogram done showing bilateral breast masses. Bilateral core needle biopsies done on showed bilateral invasive ductal carcinoma. Bilateral needle localization scheduled and no sentinel lymph nodes will be taken as her axilla are clinically negative and it would not change post op management she will likely received radiation and endocrine therapy.

**PRE-OPERATIVE DIAGNOSIS:**

Bilateral invasive ductal carcinoma

Right-ER/PR+, Her2/neu -, SBR grade 2

Left-ER/PR+, SBR grade 1

**ADDENDUM:**

The right breast excision (Part A) measures 5x5x4.5-cm and weighs 63 gms.

Microscopic/Diagnostic Dictation: Pathologist,

Final Review: Pathologist.

Final: Pathologist,

Addendum: Pathologist, r

Addendum Final: Pathologist.

Criteria	Yes	No
Diagnosis Discrepancy		/
Primary Tumor Site Discrepancy		/
HPAA Discrepancy		/
Prior Malignancy History		/
Dual/Synchronous Primary Noted		/
Case is (circle): UNCLIFIED / MISQUANDED		
Reviewer Initials: [Signature] Date Reviewed: 11/30/10		