

## SURGICAL PATHOLOGY REPORT

Patient: Specimen #:  
 FMP/SSN:  
 DOB/Age/Sex: (Age: F Race: WHITE Taken:  
 Location: Received:  
 Physician(s): Reported:

SPECIMEN: LEFT BREAST

100-0-3

Carcinoma, infiltrating lobular, NOS 8520/3

Site: breast, NOS C 50.9

1/26/11 *kw*

## =====

## BREAST, LEFT, MASTECTOMY:

- MODERATELY DIFFERENTIATED (GRADE II/III) INFILTRATING LOBULAR CARCINOMA.
  - \* NOTTINGHAM SCORE: 6 OF 9 (Tubule formation = 3; Nuclear pleomorphism = 2, and Mitotic activity = 1).
  - \* TUMOR SIZE (GREATEST DIMENSION): 3.5 CM (MEASURED GROSSLY) (SEE COMMENT).
  - \* TUMOR NECROSIS: NOT PRESENT.
  - \* MICROCALCIFICATIONS: FOCALLY PRESENT, ASSOCIATED WITH INVASIVE CARCINOMA, AS WELL AS, BENIGN DUCTS.
  - \* VENOUS / LYMPHATIC INVASION: NOT IDENTIFIED.
  - \* MARGINS: NEGATIVE.
    - DISTANCE OF TUMOR FROM NEAREST INKED BLACK (DEEP) TISSUE EDGE IS 0.5 CM (SLIDE A7).
  - \* INTRADUCTAL COMPONENT: LOBULAR CARCINOMA IN SITU.
  - \* NIPPLE INVOLVEMENT: NOT PRESENT.
  - \* SKIN INVOLVEMENT: NOT PRESENT.
  - \* LYMPH NODES: ONE (1) SENTINEL LYMPH NODE NEGATIVE PER PRIOR SURGICAL SPECIMEN
  - \* ESTROGEN RECEPTORS: POSITIVE (95% NUCLEAR STAINING PER PRIOR SURGICAL SPECIMEN
  - \* PROGESTERONE RECEPTORS: NEGATIVE (NO DETECTABLE NUCLEAR STAINING PER PRIOR SURGICAL SPECIMEN
  - \* HER2/NEU: WEAKLY POSITIVE BY IMMUNOHISTOCHEMISTRY (2+). NEGATIVE BY FISH (HER2/CEP17 RATIO: 0.9) PER PRIOR SURGICAL SPECIMEN
  - \* PATHOLOGIC STAGE: pT2 N0 MX.
- ADDITIONAL PATHOLOGIC CHANGES:
  - \* FLORID USUAL DUCTAL HYPERPLASIA.
  - \* FIBROADENOMATOID CHANGE.
  - \* FIBROCYSTIC CHANGES TO INCLUDE STROMAL FIBROSIS, CYST FORMATION, AND APOCRINE METAPLASIA.
  - \* PRIOR BIOPSY SITE CHANGES.

Comment: The lobular differentiation is supported by negative E-cadherin cytoplasmic staining and strongly positive 34betaE12 ( ) perinuclear cytoplasmic staining. There are microscopic foci of infiltrating lobular carcinoma and LCIS in a random representative section of the lower outer quadrant (slide A10). The morphology is identical to the main tumor

UUID:6860A718-FAAB-44A1-A3C1-E4A9EC1EC805  
 TCGA-A2-A0ES-01A-PR

Redacted

Page 1

Continued on Next Page

- PERSONAL DATA - PRIVACY ACT OF 1974



## SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

**FINAL DIAGNOSIS (continued):**

mass. These foci likely represent extension of the main tumor rather than true multifocal carcinoma.

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

=====

**CLINICAL DIAGNOSIS AND HISTORY:**  
{None Given}

**GROSS DESCRIPTION:**

A. Received fresh labeled with the patient's name and designated "LEFT BREAST" is a 413 gram simple mastectomy specimen oriented with sutures (long lateral, short superior) measuring 22 cm medial to lateral, 16 cm superior to inferior, and 4.8 cm anterior to posterior. An ellipse of unremarkable nipple bearing skin measuring 5.5 x 3 cm is present. The specimen is inked as follows: blue superior superficial, green inferior superficial, black deep. Sectioning reveals a 3.5 x 3.5 x 3 cm firm poorly defined mass at the 2-3:00 position, 0.2 cm from the inked deep margin. The cut surface of the tumor is yellow tan and gritty. The remaining tissue is mostly fatty with admixed patches of white fibrous tissue located centrally. Two sections of tumor, a single section of skin, and a single section of grossly normal breast are collected for CBCP protocol with matched paraffin sections in A2, A3, A1, and A4 respectively. The specimen was in formalin for 76 hours and 5 minutes. Summary of cassettes:

- A1: skin
- A2: tumor lateral
- A3: tumor medial
- A4: grossly normal breast central
- A5-A7: random additional sections of tumor
- A8: left upper outer quadrant
- A9: left upper inner quadrant
- A10: left lower outer quadrant
- A11: left lower inner quadrant
- A12: nipple.

Criteria	Yes	No
Diagnosis Discrepancy		/
Primary Tumor Site Discrepancy		/
HIPAA Discrepancy		/
Prior Malignancy History		/
Dual/Synchronous Primary Noted		/
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	Date Reviewed: 1/29/11	