

1CD-0-3

Carcinoma, infiltrating
ductal, NOS
8500/3

SURGICAL PATHOLOGY REPORT

Site: breast, NOS C50.9 1/24/11 hr

Patient:
 FMP/SSN:
 DOB/Age/Sex: _____ Race: WHITE
 Location: _____
 Physician(s): _____

Specimen #:

Taken:
 Received:
 Reported:

SPECIMEN:

A: SENTINEL NODE RIGHT BREAST B: RIGHT BREAST TISSUE

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FINAL DIAGNOSIS:

A. SENTINEL NODE, RIGHT, AXILLARY:

- ONE (1) LYMPH NODE NEGATIVE FOR METASTATIC CARCINOMA BY H&E AND IMMUNOHISTOCHEMISTRY.

B. BREAST, RIGHT, NEEDLE-LOCALIZED EXCISION:

TUMOR TYPE: INFILTRATING DUCTAL CARCINOMA, NOS, MULTIFOCAL.

NOTTINGHAM GRADE: III/III (G3)

NOTTINGHAM SCORE: 8/9

(Tubules= 3, Nuclei= 3, Mitoses= 2; mitotic count 13 per 10 HPF at
 40x power - field diameter = 0.63 mm)

TUMOR SIZE (greatest dimension, measured grossly):

MASS #1: 1.0 CM

MASS #2: 0.5 CM

MASS #3: 1.2 CM

TUMOR NECROSIS: PRESENT

MICROCALCIFICATIONS: PRESENT ASSOCIATED WITH CARCINOMA AND IN THE MEDIA OF VESSELS (MEDIAL CALCIFIC SCLEROSIS).

VENOUS / LYMPHATIC INVASION: NOT IDENTIFIED

MARGINS: INVASIVE (B7) AND IN SITU (B4,7) CARCINOMA PRESENT LESS THAN 0.1 CM FROM THE MEDIAL MARGIN (YELLOW).

INTRADUCTAL COMPONENT: DUCTAL CARCINOMA IN SITU, NUCLEAR GRADE 3 (SOLID AND COMEDO TYPES)

LYMPH NODES: SEE SPECIMEN "A"

ESTROGEN RECEPTORS: : POSITIVE (95%)

PROGESTERONE RECEPTORS: : POSITIVE (95%)

HER 2 NEU by IHC: NEGATIVE (1+)

PATHOLOGIC STAGE: pT1c N0 MX

ADDITIONAL PATHOLOGIC CHANGES: FIBROCYSTIC CHANGES, MAMMOMARK IDENTIFIED.

COMMENT: Three clearly separate tumor foci have been identified grossly and on the accompanying specimen radiograph, favoring the designation of 'multifocal' rather than one large tumor.

UUID: 4264989A-29D4-4D85-A78C-AC801792ADEB
 TCGA-A2-A0EU-01A-PR

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ILY - PERSONAL DATA - PRIVACY ACT OF 1974

SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

FINAL DIAGNOSIS (continued):

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

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CLINICAL DIAGNOSIS AND HISTORY:

year old female undergoing needle localized lumpectomy of the right breast with sentinel node biopsy.

GROSS DESCRIPTION:

A. Received fresh, labeled with the patient's name, designated "SENTINEL NODE RIGHT BREAST" is a 2.5 x 2.0 x 1.0 cm irregular portion of soft tissue. Sectioning reveals a single, pink-yellow, lymph node measuring 1.5 x 0.5 x 0.3 cm. The lymph node is bisected. A matched section of the specimen is submitted in cassette A1 is submitted in for the CBCP protocol. The specimen is entirely submitted as follows:

Cassette Key:

A1: Lymph node.

A2: Adipose tissue.

B. Received fresh, labeled with the patient's name, designated "RIGHT BREAST TISSUE" is an irregular portion of soft tissue oriented as follows: short stitch is superior aspect, long stitch is lateral aspect, and double stitch is the deep aspect. The specimen measures 8.5 cm from medial to lateral, 8.5 cm from superior to inferior, and 2.5 cm from anterior to posterior. The specimen is received with an accompanying radiograph, and two embedded localization wires. The specimen is inked as follows: superior aspect is inked in blue, inferior aspect is inked in green, the medial aspect is inked in yellow, the lateral aspect is inked in red, the anterior aspect is inked in orange, and the posterior aspect is inked in black. Serial sectioning reveals three fairly well defined, pink-white masses. Mass #1 measures 1.0 x 0.7 x 0.5 cm and is located 0.7 cm from the deep margin. Mass #2 measures 0.5 x 0.3 x 0.3 cm, and is located 0.5 cm anterior to mass #1 in approximately the same plane of tissue, and coming to within 0.2 cm of the anterior and lateral margins. Mass #3 measures 1.2 x 1.0 x 0.6 cm, and is located 1.0 cm medial to mass #1 and mass #2 coming to within 0.2 cm of the anterior margin. The remainder of the specimen is composed of lobulated, yellow-tan, adipose tissue admixed with minimal fibrous tissue. No

SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

GROSS DESCRIPTION (continued):

additional lesions are identified. At the time of processing, the specimen will have spent 51 hours fixing in formalin. The specimen is submitted as follows:

Cassette Key:

B1: Representative section of mass #1.

B2: Margins of specimen submitted in cassette B1.

B3-B4: Representative sections from mass #2.

B5: Normal appearing breast tissue adjacent to cassette B4.

B6: Representative section of mass #3 with nearest margin.

B7: Representative section of mass #3 with nearest margin.

B8-B9: Additional margins from mass #1.

B11-B14: Additional margins from mass #2.

B15: Area of fibrous tissue medial to mass #3.

Matched sections of specimen is submitted in cassettes B1, B5, and B7 are submitted in for the clinical breast care project protocol.

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"/>
Local/Synchronous Primary Noted		<input checked="" type="checkbox"/>
Case is (circle) <u>QUALIFIED</u> <u>UNQUALIFIED</u>		
Reviewer Initials: <u>WJ</u>	Date Reviewed: <u>10/2/10</u>	