UUID:A614B6B7-256F-4148-8941-6145B2D9B8B5
TCGA-A2-A3XT-01A-PR Redacted , 1974

#### SURGICAL PATHOLOGY REPORT

Patient:

111 .

FMP/SSN:

DOB/Age/Sex:

Location:

Physician(s):

Specimen #:

Taken:

Received:

Reported:

CO-0-3

\*\*AMENDED\*\*

carcinoma, in filtrating ductal, NOS

SPECIMEN: LEFT BREAST TISSUE

Site: breast, NOS

5-23-12 ep

FINAL DIAGNOSIS:

### BREAST, LEFT, LUMPECTOMY:

- POORLY DIFFERENTIATED ADENOCARCINOMA, CONSISTENT WITH INFILTRATING DUCTAL CARCINOMA. SEE COMMENT.
- NOTTINGHAM GRADE: POORLY DIFFERENTIATED, 9/9 (TUBULES=3, MITOSES=3, NUCLEI=3).
- TUMOR SIZE 4 CM (GROSS).
- TUMOR NECROSIS: EXTENSIVE, ALL INFILTRATING COMPONENT.
- LYMPHOVASCULAR INVASION PRESENT (EXTENSIVE).

(Age:

- MARGINS: POSITIVE (INFERIOR AND ANTERIOR, A10, A6).
- NO INTRADUCTAL COMPONENT IDENTIFIED.

ESTROGEN RECEPTOR: NEGATIVE (NO NUCLEAR STAINING, 0%).
PROGESTERONE RECEPTOR: NEGATIVE (NO NUCLEAR STAINING, 0%).
HER2 BY IMMUNOHISTOCHEMISTRY: NEGATIVE (SCORE 0).

SEE COMMENT.

#### COMMENT:

There is extensive lymphovascular invasion as well as foci of high grade tumor cells in grossly normal tissue sections away from the tumor. This report will be amended pending stains to confirm a breast primary origin. Dr. was notified of these results at on the clinical history was incorrect, and has been changed alled discussion with Dr.

AMENDED COMMENTS:

The tumor is CK7+, CK20-, and GCPFD-. The pattern is consistent with a

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Continued on Next Page

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# SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

# FINAL DIAGNOSIS (continued):

poorly differentiated infiltrating duct carcinoma, however, a metastatic process cannot be entirely excluded.

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

## CLINICAL DIAGNOSIS AND HISTORY:

with enlarging complex cystic lesion in the left breast.

## PRE-OPERATIVE DIAGNOSIS:

left breast palpable lesion

### GROSS DESCRIPTION:

A. Received in formalin labeled with patient's name designated "LEFT BREAST TISSUE SINGLE SHORT BLACK SUPERIOR, SINGLE LONG BLACK LATERAL, SINGLE BLUE MEDIAL, DOUBLE BLUE DEEP ON PECTORAL FASCIA, SINGLE GREEN INFERIOR STITCH". Specimen consists of an ovoid portion of fibrofatty tissue oriented as designated on label. Specimen measures 8 cm superior to inferior, 7 cm medial to lateral, 3.5 cm anterior to posterior. Specimen is inked as follows: superior blue, inferior green, medial red, lateral yellow, anterior orange, posterior black. Serial sections reveal centrally located 4 x 3.2 x 3.2 cm fleshy pink tan well circumscribed mass with scattered foci of hemorrhage and necrosis. Mass abuts anterior margin and located 0.2 cm from posterior margin and 1.5 cm from superior inferior margin. Surrounding tissue is densely fibrous with multiple cysts. Cassette summary:

A1-A2: mass

A3: adjacent normal

A4: lateral section adjacent to mass

A5: lateral portion of mass near orange margin

A6-A7: contiguous sections adjacent to A2 near orange and black margin

A8-A9: contiguos sections medial to A6-A7

A10: medial sections to A8-A9 nearing green margin

All: most medial glandular section of specimen

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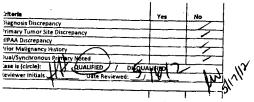
# SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

GROSS DESCRIPTION (continued):

A12: inferior glandular appearing portion in same section as A8-A9. Matched sections of A1-A3 are submitted in for



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End of Report