105-0-3 Carcinoma, infiltrating ductal, NOS 8500/3 Site: breast, NOS C50.9 1/24/11 for

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### SURGICAL PATHOLOGY REPORT

Patient:

FMP/SSN:

Race: WHITE

Specimen #:

DOB/Age/Sex:

Location: Physician(s):

Taken: Received:

Reported:

SPECIMEN:

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

C: LEFT BREAST D: LEFT SENTINEL LYMPH NODE

UUID:E4F7064C-9D81-49B5-9992-898155B3F11E TCGA-A2-A04Y-01A-PR Redacted 

FINAL DIAGNOSIS:

A&B. RIGHT BREAST, SIMPLE MASTECTOMY AND SENTINEL NODE BIOPSY:

- TUMOR TYPE: INFILTRATING DUCTAL CARCINOMA.

- NOTTINGHAM GRADE: POORLY DIFFERENTIATED (G3).

- NOTTINGHAM SCORE: 8/9

(Tubules = 3, Nuclei = 3, Mitoses = 2).

- TUMOR SIZE (GREATEST DIMENSION): 2.5 CM, MEASURED GROSSLY.
- TUMOR NECROSIS: ABSENT.
- MICROCALCIFICATIONS: PRESENT, IN BENIGN LESION.
- VENOUS / LYMPHATIC INVASION: PRESENT.
- MARGINS: NEGATIVE.
  - DISTANCE OF TUMOR FROM NEAREST MARGIN IS 0.3 CM, FROM SUPERFICIAL / SKIN MARGIN; 5.0 CM FROM DEEP MARGIN.
- INTRADUCTAL COMPONENT: ABSENT.
- LYMPH NODE: 1 OF 1 POSITIVE FOR MICROSCOPIC FOCUS OF TUMOR (0.47 MM); PRESENT WITHIN SUBCAPSULAR SINUS.
- NIPPLE INVOLVEMENT: ABSENT.
- SKIN INVOLVEMENT: ABSENT.
- MULTICENTRICITY: ABSENT.
- HORMONE RECEPTORS
  - ESTROGEN RECEPTOR: POSITIVE (90%)
  - PROGESTERONE RECEPTOR: POSITIVE (10%)
  - HER2: NEGATIVE (BY IMMUNOSTAINS AND FISH).
- ADDITIONAL PATHOLOGIC CHANGES: FIBROADENOMA, WITH CALCIFICATION.

C&D. LEFT BREAST, SIMPLE MASTECTOMY AND SENTINEL NODE BIOPSY:

- TUMOR TYPE: INFILTRATING DUCTAL CARCINOMA.
- NOTTINGHAM GRADE: POORLY DIFFERENTIATED (G3).
- NOTTINGHAM SCORE: 9/9
  - (Tubules =3, Nuclei = 3, Mitoses = 3).
- TUMOR SIZE (GREATEST DIMENSION): 5.0 CM, MEASURED GROSSLY.
- TUMOR NECROSIS: ABSENT.
- MICROCALCIFICATIONS: ABSENT.
- VENOUS / LYMPHATIC INVASION: ABSENT.

# SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

# FINAL DIAGNOSIS (continued):

- MARGINS: NEGATIVE
  - DISTANCE OF TUMOR FROM NEAREST MARGIN IS 0.3 CM FROM SUPERFICIAL / SKIN MARGIN; 1.0 CM FROM THE DEEP MARGIN.
- INTRADUCTAL COMPONENT: ABSENT.
- LYMPH NODES: ONE LYMPH NODE, NEGATIVE BY ROUTINE AND IMMUNO STAINS. - NIPPLE INVOLVEMENT: ABSENT.
- SKIN INVOLVEMENT: ABSENT.
- MULTICENTRICITY: ABSENT.
- HORMONE RECEPTORS (PREPARED ON
  - ESTROGEN RECEPTOR: POSITIVE (NEARLY 100%)
  - PROGESTERONE RECEPTOR: POSITIVE (40%)
- HER2: POSITIVE (3+ ON IHC, POSITIVE BY FISH).
- ADDITIONAL PATHOLOGIC CHANGES: FIBROADENOMA.

The lesion from the right side would be stage pT2 N1mi MX; COMMENT: the lesion from the left side would be stage pT2 NO(i-) MX.

Report Electronically Signed Out \*\*

CLINICAL DIAGNOSIS AND HISTORY:

Bilateral breast cancer.

#### GROSS DESCRIPTION:

A. Received fresh labeled with the patient's name designated "RIGHT BREAST" consists of a 1134 gram mastectomy specimen oriented with a short stitch superior and a long stitch lateral. The specimen measures 27 cm medial to lateral, 21 cm superior to inferior and 4.5 cm superficial to deep. The lightly pigmented superficial skin ellipse measure s6.0 x 3.5 cm and displays a 1.0 cm centrally located, everted nipple free of discharge. The deep margin is inked black and a portion of superficial margin is inked blue. Serial sections reveal a 2.5  $\times$  1.5  $\times$  1.0 cm well circumscribed pink white mass located in the upper mid breast. The mass comes to within 0.3 cm of the inked superficial margin and is located 5 cm from the deep margin. Located in the lower outer quadrant is a 1.0  $\times$ 0.7 x 0.7 cm well circumscribed markedly calcified nodule (consistent with a calcified fibroadenoma). The remainder of the breast is predominantly composed of lobulated yellow tan adipose tissue admixed with unremarkable tibrous tissue. No additional lesions are identified. No lymph nodes are

### SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

# GROSS DESCRIPTION (continued):

identified. Sections are submitted as follows:

A1: skin A2: mass

A3-A4: mass with superficial margin

A5: upper outer quadrant A6: lower outer quadrant

A7: central

A8: lower inner quadrant A9: upper inner quadrant

A10: nipple

All: upper outer quadrant

A12: lower outer quadrant with calcified nodule

A13: lower inner quadrant A14: upper inner quadrant.

Matched section of A1, A2 and A6-A9 are preserved in OCT for CBCP protocol.

B. Received fresh labeled with the patient's name designated "SENTINEL NODE #1 RIGHT SIDE" consists or a 2.4 x 2.0 x 0.8 cm irregular portion of soft tissue. Sectioning reveals 2.0 x 1.0 x 0.5 cm pink tan lymph node. The lymph node is unevenly bisected. The specimen is entirely submitted as follows:

B1: lymph node

B2: adipose tissue.

A matched section of B1 is submitted in OCT for CBCP protocol.

C. Received fresh labeled with the patient's name designated "LEFT BREAST" consists of a 1321 gram mastectomy specimen oriented with a short stitch superior and long lateral. The specimen measures 28.0 cm superior to inferior, 23 cm medial to lateral, and 4.0 cm anterior to posterior. The lightly pigmented superficial skin ellipse measures 7.0 x 4.0 cm and displays a 1.0 cm centrally located everted nipple. Scattered irregular portions of red brown muscle are noted on deep resection margin. The deep margin is inkd black and a portion of superficial margin is inked blue. Serial sections reveal a well circumscribed gritty pink tan mass involving the upper mid and upper inner quadrant of the breast. The mass measures 5.0 x 4.2 x 2.7 cm and is located 3.0 cm from deep margin and 0.2 cm from superficial surface. Located 1.0 cm from the mass, within the central portion of the breast, is remainder of the breast is composed of lobulated yellow tan adipose tissue

### SURGICAL PATHOLOGY REPORT

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Patient:

Specimen #:

# GROSS DESCRIPTION (continued):

admixed with a small amount of tan white fibrous tissue. No additional lesions are identified. No lymph nodes are identified. Sections are

C1: skin C2: mass

C3: mass with superficial margin

C4: mass

C5: upper inner quadrant C6: lower inner quadrant

C7: central nodule

C8: lower outer quadrant C9: upper outer quadrant

C10: nipple

C11: upper inner quadrant C12: lower inner quadrant C13: lower outer quadrant

C14: upper outer quadrant.

Matched sections of C1-C2 and C4-C9 are submitted in OCT for CBCP

D. Received fresh labeled with the patient's name ' designated "LEFT SIDE SENTINEL NODE #1" consists of a 2.5  $\times$  2.0  $\times$  0.5 cm irregular portion of soft tissue. The specimen is bisected to reveal a 1.7  $\times$  1.0  $\times$  0.5 cm pink tan lymph node. The specimen is entirely submitted in D1. A matched section of D1 is submitted in OCT for CBCP protocol.

