UUID:68E810A6-3D30-4F75-89B7-00C866553165 TCGA-A7-A26G-01A-PR Re Redacted Carcinoma, infiltrating duct and metaplastic, Nes (code to highest) 8575/3 Sitz: breast, NOS CSO. 9 Lw 4/27/11

DEPARTMENT OF PATHOLOGY AND LABORATORY MEDICINE

Date Coll:

SURGICAL PATHOLOGY REPORT

#### SPECIMEN

- A. Right axillary sentinel node (hot and blue)
- B. Right breast

#### CLINICAL NOTES

PRE-OP DIAGNOSIS: Right breast CA at 1 o'clock position

## FROZEN SECTION DIAGNOSIS

A. Benign on frozen section.

## GROSS DESCRIPTION

A. Received fresh in a container labeled "A. right sentinel lymph node" is a portion of partially blue stained fatty tissue containing a soft tan lymph node. The tissue is 3.5  $\ensuremath{\text{x}}$  $2.5 \times 0.8 \text{ cm}$  in greatest dimensions. On cut surface, there is tan lymph node tissue with focal blue staining, without grossly worrisome area. The specimen is entirely submitted for frozen section in three blocks.

B. Received fresh in a container labeled "right breast" is a breast resection specimen spanning an area 27 x 28 x 7.4  $\,$ cm. There is an overlying ellipse of brown skin, 27.5 x 15 cm. The centrally located areola spans an area 6  $\times$  7 cm, with the nipple measuring 1.7  $\times$  1.8  $\times$  0.5 cm. On the skin surface there is an area of scar as well as a 0.2 cm papillary lesion. The deep surface of the specimen is inked. The breast is serially sectioned, and there is a 2.3 cm in greatest dimension firm tan-white mass lesion, with focal changes compatible with reaction to prior biopsy. The location is compatible with the indicated 1 o'clock position. The mass is not near the deep margin. The specimen outside of this area consists of yellow adipose tissue with some interspersed tan tissue. There are no other focal lesions. RS-11, following fixation.

BLOCK SUMMARY: B1, B2 - nipple; B3 - skin lesion & skin scar; B4-B6 tumor; B7-B10 - representative breast respectively from upper outer, upper inner, lower outer, and lower inner quadrants; BRR1 - deep margin, deep to mass.

# MICROSCOPIC DESCRIPTION

A. Serial H&E stained sections and immunostains with antibodies to keratin (AE1-AE3) are examined. There is no identifiable tumor on H&E stained sections. There are, however, isolated cells that immunostain with antibodies to keratin [pN0 (i+)!.

> B. The following template summarizes the findings in this part:

Invasive carcinoma: Present

Histologic type: Invasive ductal carcinoma with metaplastic

features (areas of sarcomatoid carcinoma),

Histologic grade: Overall grade: 3 Architectural score: 3 Nuclear score: 3 Mitotic score: 2

10004

Greatest dimension (pT): 2.3 cm (pT2) Specimen margins: Negative

Vessel invasion: Not definitively identified

Calcification: Not identified

Nipple (Paget's): There is lobular neoplasia in the nipple, with this interpretation supported by diminished immunostaining on an immunostain for e-cadherin. Ductal carcinoma is not identified

involving the nipple.

Invasion of skin or chest wall: Not identified

Ductal carcinoma in situ: Present

Histologic pattern: Solid

Nuclear grade: 3

Central necrosis: Not definitively identified

Extensive intraductal component: Absent

Specimen margins: Negative Calcification: Not identified

Description of non-tumorous breast: Fibrocystic changes, with microcalcifications present. Biopsy site changes. There is a skin scar. There is also a squamous papilloma in the skin. Lobular neoplasia is also identified in one of the random sections of breast (block B9).

Prognostic markers: Previously performed (see

NOTE: This case has been reviewed in Intradepartmental Consultation, with concurrence with the interpretation.

4x2,14,15x2,20x2

### DIAGNOSIS

- A. Lymph node, right axillary sentinel, excision - No identifiable tumor on H&E stained sections, with isolated keratin positive cells present [pNO (i+)].
- B. Breast, right, excision
  - Invasive ductal carcinoma with metaplastic features (sarcomatoid carcinoma component), see microscopic description.
  - Skin and deep margin negative for malignancy.
  - Lobular neoplasia.
  - Changes compatible with reaction to prior biopsy.
  - Fibrocystic changes.

(Electronic Signature,

--- End Of Report ---

Criteria		Yes	No
Diagnosis Discrepancy			
Printery Tumor Site Discrepancy			
HIPAA Discrepancy			
Prior Malignancy History			
Dual/Synchronous Prigrary Noted	;		
Case is (circle):       QUALIFIED // C	OUA	MINED!	
Reviewer Initials Date Reviewed:	77	IIII	
	1	14/20	14
		7/21	1.1