

TSS ID

SPECIMENS:

- A. SENTINEL LYMPH NODE #1 RIGHT AXILLA
- B. SENTINEL LYMPH NODE #2 RIGHT AXILLA
- C. RIGHT BREAST
- D. SENTINEL LYMPH NODE #3 RIGHT AXILLA

1CD-0-3

Carcinoma, infiltrating ductal, NOS 8500/3
Path Site: breast, upper outer quadrant C50.4
CQCF Site: breast, NOS C50.9

2/8/11

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UUID: ECD02213-B048-4776-B09B-982FE1260F80
TCGA-E2-A1IG-01A-PR

Redacted



INTRAOPERATIVE CONSULTATION DIAGNOSIS:

TPA/TPB/TPC: negative for tumor, by Dr. to Dr. at

(A, B) and

(C).

GROSS DESCRIPTION:

A. SENTINEL LYMPH NODE #1, RIGHT AXILLA

Received fresh is a 1.4 x 0.6 x 0.4 cm lymph node. One touch prep is performed. Lymph node is submitted entirely in cassette A1.

B. SENTINEL LYMPH NODE #2

Received fresh is a 1.2 x 0.7 x 0.4 cm lymph node. One touch prep is performed. Lymph node is submitted entirely in cassette B1.

C. RIGHT BREAST

Received fresh labeled with the patient's identification and "Right breast" is an oriented 636g, 21 x 16 x 3cm mastectomy with 7 x 3.5cm skin ellipse and 1.5cm partially inverted nipple. Ink code: anterior/superior-blue, anterior/inferior-orange, posterior-black. Specimen is serially sectioned into 11 slices from medial to lateral with nipple in slice 5 revealing several lesions:

- 1) 2 x 1.8 x 1.5 cm white-tan firm infiltrating subareolar mass in slice 5 that is closest to the anterior margin at 1.3 cm
- 2) 1.2 x 0.5 x 0.5 cm biopsy site at 12:00 in slice 5 that is 1 cm from the anterior margin and 2.5 cm superior to lesion #1
- 3) 0.6 x 0.5 x 0.5 cm that is present in UOQ in slice 6 that is 1 cm lateral to lesion #1 and 2 cm from the deep margin
- 4) 1 x 0.7 x 0.5 cm in UOQ, slice 8, that is 0.3 cm lateral to lesion #3 and is greater than 1 cm from all margins

Tissue is procured. Representatively submitted:

C1-C4: slice 5, lesion #1 including relationship to nipple and skin

C5: slice 5, fibrous tissue connecting lesion 1 and lesion 2

C6-C7: slice 5, lesion #2

C8-C9: slice 6, lesion #3

C10: slice 6, fibrous tissue nearest deep margin

C11: slice 7, granular tissue

C12: slice 8, lesion #4

C13: slice 9, granular tissue

C14: slice 10, lower outer quadrant including anterior margin

C15: slice 3, lower inner

C16: slice 4, upper inner

D. SENTINEL LYMPH NODE #3 RIGHT AXILLA

Received fresh is a 0.7 X 0.5 X 0.3 cm lymph node. One touch prep is performed. Lymph node is submitted entirely in cassette D1.

DIAGNOSIS:

A. SENTINEL LYMPH NODE #1, RIGHT AXILLA, BIOPSY:

- MICROMETASTATIC CARCINOMA TO ONE LYMPH NODE (1/1) (SEE NOTE).

NOTE: There is one focus of micrometastatic carcinoma in the capsule measuring 0.27 mm and another focus of isolated tumor cells in the capsule that is 0.18 mm. No extranodal extension is present. The touch prep was reviewed and shows no evidence of tumor.

B. SENTINEL LYMPH NODE #2, RIGHT AXILLA, BIOPSY:

- ONE LYMPH NODE, NO TUMOR SEEN (0/1).

C. BREAST, RIGHT, MASTECTOMY:

- MULTICENTRIC INVASIVE DUCTAL CARCINOMA, SBR GRADE 2, WITH MUCIN, INVOLVING SKIN DERMIS (SEE NOTE).
 - TUMOR MEASURES 2.3 CM, 0.9 CM, 0.6 CM, AND 0.2 CM.
 - MARGINS, NO TUMOR SEEN.
- DUCTAL CARCINOMA IN SITU (DCIS), NUCLEAR GRADE 2, SOLID AND CRIBRIFORM TYPES, INVOLVING LOBULES.
- PREVIOUS BIOPSY SITE CHANGES PRESENT.

NOTE: Several foci of tumor are identified – 2.3 cm subareolar, 0.9 cm at 12:00, 0.2 cm between the subareolar and 12:00 tumors, and 0.6 cm in the upper outer quadrant.

D. SENTINEL LYMPH NODE #3, RIGHT AXILLA, BIOPSY:

- ONE LYMPH NODE, NO TUMOR SEEN (0/1).

SYNOPTIC REPORT - BREAST

Specimen Type: Mastectomy

Needle Localization: No

Laterality: Right

Invasive Tumor: Present

Multifocality: Yes

WHO CLASSIFICATION

Invasive ductal carcinoma, NOS 8500/3

Tumor size: 2.3cm

Tumor Site: Upper outer quadrant

Central

Margins: Negative

Distance from closest margin: Greater than 1cm
all margins

Tubular Score: 2

Nuclear Grade: 2

Mitotic Score: 2

Modified Scarff Bloom Richardson Grade: 2

Necrosis: Absent

Vascular/Lymphatic Invasion: None identified

Lobular neoplasia: None

Lymph nodes: Sentinel lymph node only

Lymph node status: Positive 1 / 3 Isolated tumor cell clusters

Micrometastases: Yes

DCIS present

Margins uninvolved by DCIS

DCIS Quantity: Estimate 25%

DCIS Type: Solid

Cribriform

DCIS Location: Associated with invasive tumor

Nuclear grade: Intermediate

Necrosis: Absent

ER/PR/HER2 Results

ER: Positive

PR: Positive

HER2: Negative by IHC

Pathological staging (pTN): pT 2 N 1 mi

CLINICAL HISTORY:

Multicentric invasive cancer right breast

PRE-OPERATIVE DIAGNOSIS:

Right breast cancer

TSS ID

Gross Dictation: , M.D., Pathologist, (

Microscopic/Diagnostic Dictation: , M.D., Pathologist,

Final Review: , M.D., Pathologist

Final: , M.D., Pathologist, 1

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"/>
Dual/Synchronous Primary Noted		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED / DISQUALIFIED	
Reviewer Initials	Date Reviewed: 1/2/21	