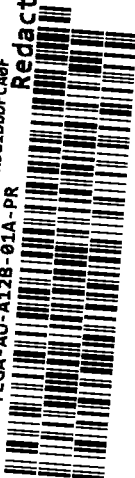


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TCGA-AO-A12B-01A-PR

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Clinical Diagnosis & History:
Right breast cancer on cone biopsy and left breast abnormality for right TM,
SLNE, possible right ALND, and left breast needle localization and excision.

Specimens Submitted:

- 1: SP: Sentinel node #1 level 1 right axilla
- 2: SP: Non-sentinel right axilla
- 3: SP: Left breast segmental resection
- 4: SP: Right breast

DIAGNOSIS:

- 1) SENTINEL NODE #1, LEVEL 1, RIGHT AXILLA; BIOPSY:
 - ONE BENIGN LYMPH NODE (0/1).
 - DEEPER LEVEL RECTS AND SPECIAL STAINS HAVE BEEN ORDERED. THE RESULTS WILL BE REPORTED IN AN ADDENDUM.
- 2) NON-SENTINEL LYMPH NODE, RIGHT AXILLA; BIOPSY:
 - ONE BENIGN LYMPH NODE (0/1).
- 3) BREAST, LEFT; SEGMENTAL RESECTION:
 - BREAST TISSUE SHOWING DUCT HYPERPLASIA WITHOUT ATYPYA AND STROMAL FIBROSIS.
- 4) BREAST, RIGHT; MASTECTOMY:
 - INVASIVE DUCTAL CARCINOMA WITH A SOLID PAPILLARY ARCHITECTURE, HISTOLOGIC GRADE III/III (SLIGHT OR NO TUBULE FORMATION), NUCLEAR GRADE II/III (MODERATE VARIATION IN SIZE AND SHAPE, MEASURING 2.3 CM IN LARGEST DIMENSION GROSSLY).
 - DUCTAL CARCINOMA IN SITU (DCIS) IS ALSO IDENTIFIED, SOLID TYPE WITH INTERMEDIATE NUCLEAR GRADE AND MINIMAL NECROSIS.
 - THE DCIS CONSTITUTES <25% OF THE TOTAL TUMOR MASS AND IS PRESENT AWAY FROM THE INVASIVE COMPONENT.
 - THE INVASIVE CARCINOMA IS LOCATED IN THE UPPER AND LOWER INNER QUADRANTS AND CENTRAL AREA.
 - THE DCIS IS LOCATED IN THE CENTRAL AREA.
 - NO INVOLVEMENT OF THE NIPPLE BY EITHER IN SITU OR INVASIVE CARCINOMA IS IDENTIFIED.
 - NO CALCIFICATIONS ARE IDENTIFIED IN EITHER THE INVASIVE OR IN SITU

** Continued on next page **

ICD-0-3
carcinoma, infiltrating duct, NOS 8500/3
Site: breast, NOS C50.9 bx 10/22/14

Check	Yes	No
Diagnosis (Primary)		
Primary Tumor Site (Primary)		
Site (Metastasis)		
Diagnosis (Metastasis)		
Site (Metastasis)		
Diagnosis (Primary)		
Site (Primary)		
Diagnosis (Primary)		
Site (Primary)		

DATE RECEIVED: 10/22/14
DATE RECEIVED: 10/22/14

COMPONENT.

- NO VASCULAR INVASION IS NOTED.
- NO INVOLVEMENT OF THE SURGICAL MARGINS BY EITHER INVASIVE OR IN SITU CARCINOMA IS IDENTIFIED.
- NO SKIN INVOLVEMENT BY CARCINOMA IS IDENTIFIED.
- THE NON-NEOPLASTIC BREAST TISSUE SHOWS BIOPSY SITE CHANGES.
- RESULTS OF SPECIAL STAINS (ER, PR, HER2-NEU AND NEUROENDOCRINE MARKERS) WILL BE REPORTED AS AN ADDENDUM.

NOTE:

HAS REVIEWED THE CASE AND CONCURS.

I ATTEST THAT THE ABOVE DIAGNOSIS IS BASED UPON MY PERSONAL EXAMINATION OF THE SLIDES (AND/OR OTHER MATERIAL), AND THAT I HAVE REVIEWED AND APPROVED THIS REPORT.

*** Report Electronically Signed Out ***

Special Studies:

Result

Special Stain

Comment

AE1:AE3
NEG CONT
IMM RECUT
RECUT
RECUT
RECUT
ER-C
PR-C
HER2-C
CHR
SYN
CD56
E-CADHERIN
NEG-HER2
NEG CONT
IMM RECUT
RECUT

Gross Description:

- 1) The specimen is received fresh for frozen section, labeled "Sentinel Node #1 Level 1 Right Axilla". It consists of a 0.6 cm lymph node surrounded by adipose tissue. Entirely frozen.

Summary of Sections:

FSC - frozen section control

** Continued on next page **

2) The specimen is received fresh for frozen section, labeled "Non-sentinel Right Axilla". It consists of a 1.8 cm lymph node, sectioned and entirely submitted.

Summary of Sections:

FSCA - frozen section control A
FSCB - frozen section control B

3) The specimen is received fresh, labeled "Left Breast Segmental Resection (short stitch superior, long stitch lateral)". It consists of a 4.5 x 3.8 x 0.9 cm irregular fragment of fibroadipose tissue oriented with a long suture for the lateral and a short suture for the superior aspect. The specimen is inked with standard colors: anterior - yellow, posterior - black, inferior - red and superior - blue. Serial sections reveal a mostly fibrous appearance on cut surface with focal adipose areas. No gross identifiable mass is seen. The specimen is serially sectioned and entirely submitted.

Summary of Sections:

LM - lateral margin
MM - medial margin
S serial sections from the lateral to medial aspect

4) The specimen is received fresh, labeled "Right Breast (stitch marks axillary tail)". It consists of a 22.5 x 16.3 x 3.2 cm breast, oriented with a stitch for the axillary tail and displaying a centrally located areola. The ellipse of skin measures 8.5 x 6 cm with a centrally located 1.5 x 0.6 cm unremarkable nipple. In the same container, multiple fragments of adipose tissue are labeled "Go With Breast", measuring 3.5 x 2.5 x 0.5 cm. Serial sections of the breast parenchyma reveal a 2.3 x 2.1 x 1.5 cm, firm, fleshy, tan mass with relatively well-circumscribed borders, located centrally, retroareolar, on the upper inner and lower inner quadrants, and is located at 2.3 cm from the deep margin. The uninvolved breast parenchyma is yellow, lobular, mostly with focal areas of fibrosis. Representative sections are submitted. The axillary tail is dissected and several possible lymph nodes are submitted. A representative section is submitted for TPS.

Summary of Sections:

N - nipple
T sections of the tumor including the deep margin
UIQ upper inner quadrant
UOQ upper outer quadrant
LIQ lower inner quadrant
LOQ lower outer quadrant
GWB tissue labeled "go with breast"
LN - possible lymph nodes

** Continued on next page **

Summary of Sections:

Part 1: SP: Sentinel node #1 level 1 right axilla

Block	Sect. Site	PCs
1	fsc	0

Part 2: SP: Non-sentinel right axilla

Block	Sect. Site	PCs
1	(not entered)	
1	fsc	1

Part 3: SP: Left breast segmental resection

Block	Sect. Site	PCs
2	lm	0
2	mm	0
8	s	0

Part 4: SP: Right breast

Block	Sect. Site	PCs
1		
2	gwb	3
6	liq	0
2	LN	6
2	loq	0
4	n	4
2	t	6
2	uiq	0
2	uoq	4

Procedures/Addenda:

Addendum

Date Ordered:

Date Complete:

Date Reported:

Status: Signed Out

By:

Addendum Diagnosis
ADDENDUM

SITE: SENTINEL LYMPH NODE #1, LEVEL I, RIGHT AXILLA:
PART #1.

- ADDITIONAL H&E STAINED SECTIONS AND IMMUNOHISTOCHEMICAL STAINS FOR
CYTOKERATINS (AE1:AE3) SHOW NO EVIDENCE OF METASTATIC TUMOR.

** Continued on next page **

Addendum
Date Ordered:
Date Complete
Date Reported

Status: Signed Out
By:

Addendum Diagnosis
ADDENDUM

SITE: RIGHT BREAST
PART #4.

ER: 95% OF NUCLEAR STAINING WITH STRONG INTENSITY.
PR: 95% OF NUCLEAR STAINING WITH STRONG INTENSITY.
HER2/NEU (HERCEPTEST): NEGATIVE (STAINING INTENSITY OF 0).
CONTROLS ARE SATISFACTORY.

Addendum
Date Ordered:
Date Complete:
Date Reported:

Status: Signed Out
By:

Addendum Diagnosis
ADDENDUM

SITE: LEFT BREAST
PART #3

- CALCIFICATIONS ARE PRESENT IN BENIGN DUCTS AND CRYSTALS CONSISTENT WITH
CALCIUM OXALATE ARE PRESENT IN APOCRINE CYSTS.

Intraoperative Consultation:
Note: The diagnoses given in this section pertain only to the tissue sample
examined at the time of the intraoperative consultation.

** Continued on next page **

1) FROZEN SECTION DIAGNOSIS:
PERMANENT DIAGNOSIS: SAME.

NEGATIVE LYMPH NODE.

2A) FROZEN SECTION DIAGNOSIS:
PERMANENT DIAGNOSIS: SAME.

NEGATIVE LYMPH NODES (2 SECTIONS).

2B) FROZEN SECTION DIAGNOSIS:
PERMANENT DIAGNOSIS: SAME.

NEGATIVE LYMPH NODES (2 SECTIONS).

6/

** End of Report **