

Redacted



SURGICAL PATHOLOGY REPORT

Patient:
FMP/SSN:
DOB/Age/Sex:
Location:
Physician(s):

(Age:

Race:

Specimen #:

Taken:

Received:

Reported:

****AMENDED****

1CD-03

carcinoma, infiltrating
ductal, NOS 850d3

SPECIMEN:

A: LEFT BREAST LUMPECTOMY

B: NEW MEDIAL MARGIN, LEFT BREAST

C: SENTINEL LYMPH NODE #1 D: AXILLARY CONTENTS

Site: breast, NOS

C50.9 52312ed

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FINAL DIAGNOSIS:

A. BREAST, LEFT, LUMPECTOMY:

- INFILTRATING (INVASIVE) AND INTRADUCTAL CARCINOMA, COMEDO-TYPE, BLOOM-RICHARDSON GRADE 9 (3 + 3 + 3).
- TUMOR INVOLVEMENT AT INFERIOR, SUPERIOR, AND ANTERIOR MARGINS.
- SPECIAL STAINS PENDING, ADDENDUM TO FOLLOW.

B. BREAST, LEFT NEW MEDIAL MARGIN, BIOPSY:

- HIGH GRADE INTRADUCTAL CARCINOMA, COMEDO-TYPE, BLOOM RICHARDSON GRADE 9 (3 + 3 + 3).
- TUMOR INVOLVMENT PRESENT AT MARGIN.

C. LYMPH NODE, SENTINEL LYMPH NODE #1, BIOPSY:

- POSITIVE FOR METASTATIC CARCINOMA.
- CYTOKERATIN STAIN POSITIVE FOR METASTATIC CARCINOMA.

D. SOFT TISSUE, AXILLARY CONTENTS, BIOPSY:

- NO EVIDENCE OF MALIGNANCY.

AJCC PATHOLOGIC STAGING: pT2 pN1c pMX

COMMENT:

AMENDMENT

Case amended by Dr _____ in the absence of the primary pathologist, Dr _____ to report results of HER2 analysis by immunohistochemistry (Hercep Test):

HER2: WEAKLY POSITIVE (2+)

NOTE: HER2 by FISH analysis previously performed on amplified (1.3).

1. FISH: Not

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FINAL DIAGNOSIS (continued):

** Report Electronically Signed Out **

CLINICAL DIAGNOSIS AND HISTORY:

-year-old with diagnosis of left breast cancer.

GROSS DESCRIPTION:

A. LEFT BREAST LUMPECTOMY received fresh labeled with the patient's name and designated "LEFT BREAST LUMPECTOMY" is a piece of fatty tissue, 8.0 x 5.0 x 6.5 x 1.8 cm, impaled with a needle localization wire. The specimen is oriented with sutures (short=superior, long=lateral) and is inked as follows: Red=medial and lateral, blue=superior, green=inferior, yellow=anterior, black=posterior. The needle localization wire enters the specimen at the lateral margin. The tip of the wire is embedded in the mid portion of the specimen. The accompanying specimen radiograph is reviewed and shows numerous calcifications in the area of the wire localization. The specimen is serially sectioned, medial to lateral, revealing a poorly differentiated mass, 3.0 cm in greatest dimension, corresponding to the area of radiographic abnormality. The mass is firm and nodular, and contains at least two well-circumscribed masses with a tan, gritty cut surface. The largest of these well-circumscribed masses measures 1.2 cm in greatest dimension. The 3.0 cm mass abuts the superior and inferior margins. The remaining tissue is variably fatty and fibrous; the fibrous tissue is firm and nodular in some areas. Sections of tumor and grossly normal fibrous tissue are harvested for the rotocol. Matched sections for histology are as follows:

A1-A2: Tumor.

A3: Grossly normal fibrous tissue, medial portion of specimen.

A4: Medial most margin of specimen.

A5-A6: Full thickness cross section.

A7-A9: Full thickness cross section.

A10-A12: Full thickness cross section.

A13-A15: Full thickness cross section.

A16-A18: Full thickness cross section.

A19-A21: Full thickness cross section.

A22-A23: Full thickness cross section.

A24-A25: Full thickness cross section.

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GROSS DESCRIPTION (continued):

A26-A27: Full thickness cross section.
 A28-A30: Full thickness cross section.
 A31-A33: Full thickness cross section.
 A34-A35: Full thickness cross section.
 A36-A38: Full thickness cross section.
 38CFNS.

B. NEW MEDIAL MARGIN, LEFT BREAST received in formalin labeled with the patient's name and designated "NEW MEDIAL MARGIN, LEFT BREAST" are two fragments of yellow/tan fibrofatty soft tissue. The largest fragment measures 7.5 x 3.0 x 2.0 cm and the smaller tissue fragment measures 4.5 x 2.5 x 1.3 cm. The specimens are received unoriented. The specimens consist of lobulated, yellow/tan soft tissue with areas of interdigitating white, fibrous areas. The outer surface of each specimen is inked in black. Cross sectioning through both tissue fragments demonstrates homogeneous, yellow, lobulated soft tissue with interdigitating white, fibrous strands. No discrete masses or nodules are found.

Cassette key:

B1-B8: Largest tissue fragment.
 B9-B15: Smaller tissue fragment.

C. SENTINEL LYMPH NODE NUMBER ONE received in formalin labeled with the patient's name and designated "SENTINAL LYMPH NODE NUMBER ONE" is a 0.7 cm grossly apparent lymph node and a small amount of adherent fat. A small portion of the node is harvested for the protocol. The remaining lymph node is submitted.

D. AXILLARY CONTENTS received in formalin labeled with the patient's name and designated "AXILLARY CONTENTS" are three fragments of fibrofatty soft tissue measuring 3.5 x 3.5 x 2.0 cm in aggregate. Sectioning through the specimen demonstrates a mottled, yellow/red fibrofatty soft tissue.

Cassette key:

D1-D2: Largest tissue fragment.
 D3: Second largest tissue fragment.
 D4: Remaining tissue fragment.

Criteria	Yes	No
Diagnosis Discrepancy		/
Primary Tumor Site Discrepancy		/
IPAA Discrepancy		/
Prior Malignancy History		/
Local/Synchronous Primary Nodules		/
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	Date Reviewed: 5/14/12	