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Redacted

ICA-0-3

Carcinoma, infiltrating duct and lobular 8522/3

Site: breast, NOS C50.9 lw 9/13/11

SPECIMEN

- A. Right axillary sentinel lymph node
- B. Left axillary sentinel lymph node
- C. Right breast biopsy - stitch is long anterior, short superior
- D. Left breast biopsy - long stitch anterior, short stitch superior
- E. Superior margin - long stitch anterior, short stitch superior

CLINICAL NOTES

CLINICAL HISTORY: -year-old white female with lobular carcinoma.
PRE-OP DIAGNOSIS: Left breast cancer. POST-OP DIAGNOSIS: Left breast cancer.

FROZEN SECTION DIAGNOSIS

- AFS1-AFS3: Right axillary sentinel node.
-No metastasis identified in 4 nodes. (0/4)
- BFS1, BFS2: Left axillary sentinel lymph node, excision.
-No metastasis identified in 1 node. (0/1)

GROSS DESCRIPTION

- A. Container A is labeled with the patient's name, medical record number and "right axillary sentinel lymph node". The specimen container holds a single piece of fibrofatty tissue. When dissected, there are four separate lymph nodes. The largest measures 1.8 x 1.5 x 1 cm. The remainder three smaller lymph nodes average 0.3 cm. AS-AFS1, AFS2 - One lymph node bisected; AFS3 - three remaining nodes.
- B. Container B is labeled "left axillary sentinel lymph node". The specimen container holds a single rubbery tan lymph node, measuring 1.5 x 1 x 1 cm. AS-Block BFS-1, BFS-2 - Bisected.
- C. Container C is labeled with the patient's name, medical

GROSS DESCRIPTION

record number and "right breast". The specimen container holds a single piece of fatty tissue, oriented by two sutures and measuring 5 cm. from medial to lateral, 3.1 cm. from anterior to posterior and 3 cm. from superior to inferior. The specimen margins are inked as follows: Blue-anterior, black-posterior, red-superior, green-inferior, yellow-medial, orange-lateral. The specimen is serially sectioned. On cut section, there is a firm tan mass,

measuring 2.1 x 1.8 x 1.5 cm., located approximately 3 mm. from the inferior margin of resection. ASC1-C15.

D. Received fresh labeled "left breast biopsy" is a 4.5 cm

(anterior to posterior) x 4.3 cm (medial to lateral) x 2.1 cm (superior to inferior) diffusely cauterized soft, lobulated, tan-gold-white portion of fibroadipose tissue with two sutures, as stated previously. The superior surface appears in keeping with the

lining of a prior breast biopsy. The margins are inked as follows: Superior - blue, inferior - black, medial - green, and lateral - orange. The specimen is sectioned from anterior to posterior. Cut surfaces throughout the specimen consist predominantly of

glistening lobulated golden yellow adipose tissue with a moderate amount of interspersed dense, focally nodular, tan-white fibrous tissue. No definitive mass lesion is noted. The specimen is entirely submitted

in a sequential manner from anterior to posterior in 9 blocks, as labeled. AS-9.

E. Received fresh labeled "superior margin" is a 2.5 cm (anterior to posterior) x 1.8 cm (medial to lateral) x 1.7 cm (superior to inferior) soft, lobulated tan-gold-white portion of fibroadipose tissue with two sutures, as stated previously. The margins are inked as follows: Superior - blue, inferior - black, medial - green, and lateral - orange. The specimen is sectioned from anterior to posterior. The cut surfaces consist predominantly of glistening lobulated golden yellow adipose tissue with a moderate

amount of interspersed tan-white fibrous tissue. No discrete mass lesion or abnormality is identified. The specimen is entirely

GROSS DESCRIPTION

submitted in a sequential manner from anterior to posterior in five blocks, as labeled. AS-5.

BLOCK SUMMARY: 1 - Perpendicular sections entire anterior margin cap, 2-4 - sequential sections, 5 - perpendicular sections entire posterior margin cap.

MICROSCOPIC DESCRIPTION

A. Sections of the right axillary sentinel lymph node demonstrate no evidence of metastasis in four lymph nodes. The lymph nodes in sections ASF1 through ASF3 were examined by multi-level sectioning with H&E stain, as well as the

immunohistochemistry for pankeratin.

B. The left axillary sentinel lymph node demonstrates no evidence of metastatic disease in one lymph node.

Sections

BFS1 and BFS2 are examined by multi-level sectioning with H&E staining as well as the immunohistochemistry for pankeratin.

C. The following template applies to the right breast biopsy:

Invasive Carcinoma: Present

Histologic type: Mixed infiltrating lobular and grade I ductal carcinoma

Histologic grade:

Overall grade: 1

Architectural score: 3

Nuclear score: 1

Mitotic score: 1

Greatest dimension (pT): 2.3 cm (pT2)

Specimen margins: Extremely close. invasive carcinoma is 0.9 mm from the lateral margin (orange ink block C12).

MICROSCOPIC DESCRIPTION

Vessel invasion: Not identified.

Calcification: Present.

Ductal carcinoma in situ: Present.

Histologic pattern: Solid.

Nuclear grade: 2.

Central necrosis: Not identified.

% DCIS of total tumor (if mixed): Less than 5%.

Extensive intraductal component (present/absent): Absent.

Specimen margins: Negative.

Calcification: Present.

Description of non-tumorous breast: Extensive proliferative changes.

Comments: None.

Prognostic markers: Previously reported.

D. The following template applies to the left breast biopsy.

Invasive Carcinoma: Not identified.

Ductal carcinoma in situ: Present.

Histologic pattern: Cribriform.

Nuclear grade: 2.

Central necrosis: Not identified.

Tumor size (if pure in situ): Less than 2 mm.

Specimen margins: Negative, nearest greater than 2 mm.

Calcification: Not identified.

Description of non-tumorous breast: Extensive proliferative fibrocystic changes and extensive lobular carcinoma in situ.

Comments: E-cadherin stain was performed and demonstrates lack of

MICROSCOPIC DESCRIPTION

membranous staining within foci of lobular carcinoma in situ in blocks D5 and D7.

E. The following template applies to the superior margin of the left breast.

Invasive Carcinoma: Present.

Histologic type: Mixed grade 1 ductal and invasive lobular carcinoma.

Histologic grade:

Overall grade: 1.

Architectural score: 3.

Nuclear score: 1.

Mitotic score: 1.

Greatest dimension (pT): 1.2 cm (pT1).

Specimen margins: Positive, invasive carcinoma extends to the green and black ink representing medial and inferior margins.

Vessel invasion: Not identified.

Calcification: Present.

Ductal carcinoma in situ: Not identified.

Comments: Immunohistochemical stain for pankeratin was utilized on two blocks to highlight the extent of tumor and the relationship to the margins.

Prognostic markers: Previously performed.

14x2, 15x3, 4x5, 20X9

DIAGNOSIS

A. Right axillary sentinel lymph nodes, resection:

No evidence of metastasis to four lymph nodes (0/4).

B. Left axillary sentinel lymph node, resection:

SURGICAL PATHOLOGY REPORT

DIAGNOSIS

No evidence of metastasis to one lymph node (0/1).

- C. Right breast, excisional biopsy:
Infiltrating ductal carcinoma, mixed grade 1 ductal and lobular carcinoma, 2.3 cm in greatest dimensions.
Invasive carcinoma 0.9 mm from the lateral margin.
Ductal carcinoma in situ, solid and cribriform in subtype, nuclear grade 2, surgical margins negative.
- D. Left breast, excisional biopsy:
Ductal carcinoma in situ, nuclear grade 2, cribriform and in solid subtype, less than 2 mm.
In situ carcinoma 2 mm from the surgical margin.
Proliferative fibrocystic changes and extensive lobular carcinoma in situ.
- E. Left breast, superior margin, excisional biopsy:
Infiltrating carcinoma, mixed grade 1 ductal and invasive lobular carcinoma, 1.2 cm.
Invasive carcinoma extends to the medial and inferior margins of resection.

M.D. (Electronic Signature)

Criteria	Yes	No
Diagnosis Discrepancy		✓
Primary Tumor Site Discrepancy		✓
IIIPAA Discrepancy		✓
Prior Malignancy History		✓
Dual/Synchronous Primary Noted		✓
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials:	W	9/3/11