

SURGICAL PATHOLOGY REPORT

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

Specimen #:

Taken:
Received:
Reported:

SPECIMEN:

A: RIGHT AXILLIARY SENTINAL L.N.
B: RIGHT BREAST MASTECTOMY C: RIGHT BREAST TISSUE
D: LEFT BREAST MASTECTOMY

100-0-3
Carcinoma, infiltrating lobular, Nos 8520/3
Site: breast, Nos C50.9
1/26/11 *lw*

FINAL DIAGNOSIS:

- A. RIGHT AXILLIARY SENTINEL LYMPH NODE, BIOPSY:
-ONE LYMPH NODE WITH RARE INDIVIDUAL CYTOKERATIN-POSITIVE CELLS BY IMMUNOHISTOCHEMISTRY, (LESS THAN 0.2 MM IN DIAMETER).
- B. RIGHT BREAST, MASTECTOMY:
INFILTRATING LOBULAR CARCINOMA, MODERATELY DIFFERENTIATED (BLOOM-RICHARDSON SCORE 6).
-MAXIMUM TUMOR SIZE 2 CM (GROSS MEASUREMENT).
-EXTENSIVE LOBULAR CARCINOMA IN SITU (LN3).
-ANTERIOR MARGIN POSITIVE FOR INVASIVE CARCINOMA.
-ESTROGEN RECEPTOR POSITIVE; PROGESTERONE RECEPTOR NEGATIVE (SEE S04-)
-HER 2 NEU NOT AMPLIFIED (SEE . . .)
- C. RIGHT BREAST TISSUE, EXCISION:
-NEGATIVE FOR TUMOR.
- D. LEFT BREAST, MASTECTOMY:
FOCAL LOBULAR CARCINOMA IN SITU (LN3).
USUAL DUCTAL EPITHELIAL HYPERPLASIA.
COLUMNAR CELL CHANGE.

b. later and

COMMENT: The AJCC stage for the right breast carcinoma is T1cN0(i+)(sn)MX.
ER/PR and Her2 neu studies were performed on the previous biopsy, and are not repeated.

** Report Electronically Signed Out **

====
UUID: F76120C1-0282-46EE-AAE1-57B05D258ED1
TCGA-A2-A0EP-01A-PR

Redacted



Page 1

Continued on Next Page

PERSONAL DATA - PRIVACY ACT OF 1974

SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

CLINICAL DIAGNOSIS AND HISTORY:

-year-old with diagnosis of breast cancer, 1.0 cm spiculated mass right breast.

GROSS DESCRIPTION:

A. Received fresh, labeled with the patient's name, designated "RIGHT AXILLARY SENTINEL LYMPH NODE" consists of a 2.0 x 1.6 x 1.0 cm piece of fatty tissue containing a 1.0 cm lymph node. The node is bisected and a 1.0 mm thick section of one of the halves is submitted for the CBCP protocol.

Cassette key:

A1: Bisected lymph node.

A2: Remainder of the fatty tissue.

B. Received fresh, labeled with the patient's name, designated "RIGHT BREAST MASTECTOMY" consists of a 950.0 gram simple mastectomy specimen, measuring 22.5 cm medial to lateral, 21.0 cm superior to inferior, and 3.8 cm anterior to posterior. The overlying ellipse of nipple bearing skin measures 15.0 x 7.5 cm and is notable for a well-healed, curvilinear scar 4.3 cm in length, near the superior lateral edge. The specimen is oriented with sutures. The anterior margin is inked blue, the posterior margin is inked black. Sectioning reveals a 2.0 cm area of indurated area in the lower inner quadrant at the 5:00 position, abutting the anterior medial margin. The remaining tissue is predominantly fatty and unremarkable. Multiple tissue sections taken for the protocol; matching paraffin sections are as follows:

B1: Skin, lateral tip.

B2-B4: Tumor.

B5: Fibrofatty tissue, 2.0 cm from tumor, lower inner quadrant.

B6: Fibrofatty tissue, 14.0 cm from tumor, lower outer quadrant.

B7: Fibrous tissue, 15.0 cm from tumor, upper outer quadrant.

B8: Fibrofatty tissue, 9.0 cm from the tumor, upper inner quadrant.

B9-B10: Nipple. 10C16

C. Received in formalin, labeled with the patient's name, designated "RIGHT BREAST INFERIOR TISSUE" consists of a 6.5 x 6.0 x 3.5 cm fragment of fatty tissue. The surface is inked in black. Sectioning reveals predominantly fatty tissue with a minimal fibrous component. Representative sections from throughout the lesion are placed in cassettes C1 through C5.

D. Received fresh, labeled with the patient's name, designated "LEFT BREAST MASTECTOMY" consists of a 1540.0 gram simple mastectomy specimen measuring 24.5 cm medial to lateral, 19.0 cm superior

1 SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

GROSS DESCRIPTION (continued):

to inferior, and 5.0 cm anterior to posterior. The overlying ellipse of nipple bearing skin measures 21.0 x 11.5 cm. The specimen is oriented with sutures and inked as follows: Blue=anterior, black=posterior. Sectioning reveals predominantly fat and admixed patches of white, fibrous tissue. No discrete masses are identified. One section of skin and one section of fibrofatty tissue from each quadrant is submitted for the protocol. Matching paraffin sections are as follows:

- D1: Skin.
- D2: Upper outer quadrant.
- D3: Upper inner quadrant.
- D4: Lower inner quadrant.
- D5: Lower outer quadrant.
- D6: Nipple.
- D7: Upper outer quadrant.
- D8: Upper inner quadrant.
- D9: Lower inner quadrant.
- D10: Lower outer quadrant.

Criteria	Yes	No
Diagnosis Discrepancy		///
Primary Tumor Site Discrepancy		///
HIPAA Discrepancy		///
Prior Malignancy History		///
Dual/Synchronous Primary Noted		///
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	Date Reviewed: 1/24/11	