



Sample #

FINAL PATHOLOGIC DIAGNOSIS

A. Right axillary sentinel node #1; biopsy:

-One lymph node, no tumor (0/1).

B. Right axillary sentinel node #2; biopsy:

-One lymph node, no tumor (0/1).

C. Right breast lumpectomy; lumpectomy:

-Invasive ductal carcinoma with tubulo-lobular features, similar to previous biopsy, extending into dermis, see below.

-Separate focus of infiltrating ductal carcinoma (1.0 cm) with dermal involvement, histologically similar to and superior to first mass.

-Hemorrhagic fat necrosis at previous biopsy site.

ICD-O-3
Carcinoma, infiltrating duct NOS
8500/3
Site R Breast NOS
050.9
JW 5/16/13

Breast Pathologic Parameters

1. Invasive carcinoma:

A. Microscopic measurement: 1.9 cm

B. Composite histologic (modified SBR) grade: I

- Architecture: 2

- Nuclear grade: 2

- Mitotic count: 1

2. Intraductal carcinoma: not identified

3. Excisional biopsy margins: Free of tumor (2 mm from anterior margin)

4. Blood vessel and lymphatic invasion:

- Present in dermal lymphatics (C20 and C27)

5. Nipple: N/A

6. Skin: direct extension of tumor. Inked edges free of tumor.

7. Skeletal muscle: absent

8. Axillary lymph nodes: Negative

9. Special studies (see)::

- ER: Strong expression in >90% of invasive tumor nuclei

- PR: Strong expression in >90% of invasive tumor nuclei

- Her2/neu antigen (FISH): Non-amplified (ratio: 1.10)

10. pTNM (AJCC, 7th edition, 2010): pT1c(m)N0MX

Effective - this Checklist utilizes the 7th edition TNM staging system for breast of the American Joint Committee on Cancer (AJCC) and the International Union Against Cancer (UICC).

Clinical History:

The patient is a -year-old female with right breast lump undergoing right breast lumpectomy, right axillary s-node biopsy. On , bilateral diagnostic mammography/R UTS-Right revealed a 1.7 cm area of architectural distortion in the mid posterior depth in the right breast with no associated calcifications. Breast MRI on showed a right breast unifocal suspicious abnormality at 5 o'clock that measures 19 x 19 x 14 mm. On right UTS core biopsy at 5 o'clock revealed IDC, with tubular-lobular features, Grade 1 with associated microcalcifications.

Specimens Received:

- A: Right axillary sentinel node #1
- B: Right axillary sentinel node #2
- C: Right breast lumpectomy; lumpectomy

Gross Description:

The specimens are received in three containers each labeled with the patient's name and medical record number.

A. The first container is additionally identified as, 'right axillary s-node

-1'. Received fresh for frozen section diagnosis is one lymph node measuring 2.0 x 1.6 x 0.5 cm, which is bisected for frozen and diagnosed as, 'one lymph node, no tumor present,' per Dr. Specimen is entirely submitted in A1 FS.

B. The second container is additionally identified as, 'right axillary s-node

-2'. Received fresh for frozen section diagnosis is one lymph node measuring 1.5 x 0.5 x 0.3 cm that is frozen and read as, 'one lymph node, no tumor present,' per Dr. The specimen is entirely submitted in B1 FS.

C. The third container is additionally identified as, 'right breast

lumpectomy'. Received fresh is a 92.6 gm lumpectomy specimen measuring 9.6 cm from medial to lateral, 7.7 cm from superior to inferior and 2.7 cm from anterior to posterior. A double short suture designates superior, and a double long suture designates lateral. No single short stitch is found although the container label states that there is a single short stitch at the anterior aspect; however there is a portion of skin that designates the anterior aspect that measures 7.5 x 1.5 cm.

The margins are inked as follows:

anterior- black

posterior - red

superior - blue

inferior - green

medial - yellow

lateral - violet

The specimen is serially sectioned from medial to lateral into 17 slices. There is a 1.5 x 1.0 x 0.9 cm firm, white, stellate mass, with a central dark gray-brown area, located in slices 8 through 10 in the anterior/central aspect of the specimen. It is located 1.0 cm from the black margin, 2.2 cm from the red margin, 2.0 cm from the blue margin and 2.0 cm from the green margin. A metallic clip is identified in slice #10, adjacent to the mass. Superior to the mass and in slices 6 through 11 is a brownish focus consistent with hemorrhage measuring up to 1.0 x 1.0 cm, most prominent in slice 11. Representative sections are submitted as follows:

C1: Entire medial margin, serially sectioned

C2-C3: Entire lateral margin, serially sectioned

C4-C8: Slice #9 including lesion

C9-C14 Slice #10 including lesion

C15-C18: Slice #8 with some tissue removed for banking

C19-C22: Slice #7

C23-C27: Slice #11, with hemorrhagic lesion most prominent in C26

C28-C29: Slice #3, including skin in C29

C30-C33: Slice #15

Tissue fixed for at least 6 hours in 10% NBF and no more than 72 hours.

, M.D.

Pathologist Sign Out:

Criteria	Yes	No
Diagnosis Discrepancy		✓
Primary Tumor Site Discrepancy		✓
IHHPAA Discrepancy		✓
Prior Malignancy History		✓
Dual/Synchronous Primary Noted		
Case is (circle):	QUALIFIED	IS QUALIFIED
Reviewer Initials:	Date Reviewed: 4/11/13	