

PATIENT HISTORY:

CHIEF COMPLAINT/ PRE-OP/ POST-OP DIAGNOSIS: Left breast invasive ductal carcinoma.

LMP DATE: Not applicable

PROCEDURE: Left segmental mastectomy with sentinel lymph node biopsy.

SPECIFIC CLINICAL QUESTION: Not listed.

OUTSIDE TISSUE DIAGNOSIS: Not listed.

PRIOR MALIGNANCY: Not listed.

CHEMORADIATION THERAPY: Not listed.

OTHER DISEASES: Not listed.

10D-0-3

Carcinoma, infiltrating ductal, NOS 8500/3
Site: breast, NOS 250.9 hr 3/24/11**FINAL DIAGNOSIS:****PART 1: LYMPH NODE, NON-SENTINEL, BIOPSY -**

ONE (1) LYMPH NODE, NEGATIVE FOR METASTATIC CARCINOMA (0/1).

PART 2: LYMPH NODE, LEFT AXILLA, SENTINEL #1, BIOPSY -

ONE (1) LYMPH NODE, NEGATIVE FOR METASTATIC CARCINOMA (0/1).

PART 3: LYMPH NODE, LEFT AXILLA, SENTINEL #2, BIOPSY -

ONE (1) LYMPH NODE, NEGATIVE FOR METASTATIC CARCINOMA (0/1).

PART 4: BREAST, LEFT, SEGMENTAL MASTECTOMY -

A. INVASIVE DUCTAL CARCINOMA, NO SPECIAL TYPE.

B. NOTTINGHAM GRADE III (TUBULE FORMATION: 3, NUCLEAR PLEOMORPHISM: 3, MITOTIC ACTIVITY: 3; TOTAL SCORE: 9/9).

C. THE INVASIVE TUMOR MEASURES 2.6 CM IN LARGEST DIMENSION.

D. DUCTAL CARCINOMA IN SITU, NUCLEAR GRADE 3, SOLID TYPE WITH COMEDO NECROSIS.

E. THE DUCTAL CARCINOMA IN SITU CONSTITUTES 40% OF THE TOTAL TUMOR VOLUME AND IS PRESENT ADMIXED WITH THE INVASIVE COMPONENT.

F. NO LYMPHOVASCULAR SPACE INVASION IS NOTED.

G. RESECTION MARGINS ARE NEGATIVE FOR CARCINOMA.

H. INVASIVE CARCINOMA IS 0.4 CM FROM THE NEAREST (ANTERIOR) MARGIN.

I. DUCTAL CARCINOMA IN SITU IS 0.3 CM FROM THE NEAREST (ANTERIOR) MARGIN.

J. ATYPICAL DUCTAL HYPERPLASIA.

K. THE NON-NEOPLASTIC BREAST SHOWS DUCTAL EPITHELIAL HYPERPLASIA, INTRADUCTAL PAPILLOMA, RADIAL SCAR, COLUMNAR CELL CHANGES, AND FIBROCYSTIC CHANGES.

L. PREVIOUS BIOPSY SITE CHANGES.

PART 5: LYMPH NODE, LEFT "INTRAMAMMARY", EXCISIONAL BIOPSY -

A. ONE (1) LYMPH NODE, NEGATIVE FOR METASTATIC CARCINOMA (0/1).

B. BENIGN PERINODAL ADIPOSE TISSUE.

C. NO DUCTAL BREAST TISSUE SEEN.

COMMENT:

Part 4: The invasive tumor was reported to be positive for Estrogen Receptors (H-score: 250), positive for Progesterone Receptors (H-score: 75) and also positive for HER2, as per previous pathology report (Redacted).

CASE SYNOPSIS:**SYNOPTIC - PRIMARY INVASIVE CARCINOMA OF BREAST****LATERALITY:**

Left

PROCEDURE:

Segmental

LOCATION:

Clock position: 12

SIZE OF TUMOR:

Maximum dimension invasive component: 26 mm

MULTICENTRICITY/MULTIFOCALITY OF INVASIVE FOCI:

No

TUMOR TYPE (invasive component):

Ductal adenocarcinoma, NOS

NOTTINGHAM SCORE:

Nuclear grade: 3

Tubule formation: 3

Mitotic activity score: 3

Total Nottingham score: 9

Nottingham grade (1, 2, 3): 3

ANGIOLYMPHATIC INVASION:

No

DERMAL LYMPHATIC INVASION:

Not applicable

CALCIFICATION:

No

TUMOR TYPE, IN SITU:

Solid

Comedo

SURGICAL MARGINS INVOLVED BY INVASIVE COMPONENT:

No

SURG MARGINS INVOLVED BY IN SITU COMPONENT:

No

Distance of invasive tumor to closest margin: 4 mm

LYMPH NODES POSITIVE:

0

LYMPH NODES EXAMINED:

4

METHOD(S) OF LYMPH NODE EXAMINATION:

H/E stain

SENTINEL NODE METASTASIS:

No

NON-NEOPLASTIC BREAST TISSUE: Radial scar, Papilloma, FCD**T STAGE, PATHOLOGIC:**

pT2

N STAGE MODIFIER:

(sn)

N STAGE, PATHOLOGIC:

pN0

M STAGE:

Not applicable

ESTROGEN RECEPTORS:

positive, H-score: 250

PROGESTERONE RECEPTORS:

positive, H-score: 75

HER2/NEU:

3+

UUID: 57323AE5-3EFE-4492-8522-D9A6DB3F1BE0
TCGA-BH-A202-01A-PR

Redacted



Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HIPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary Noted		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	ME	3/28/11