



1CD-0-3

carcinoma, infiltrating duct, NOS 8500/3
Site: breast, NOS C50.9 fu 10/27/11

SPECIMEN

- A. Left axillary sentinel node
- B. Left breast cancer

CLINICAL NOTES

CLINICAL HISTORY: -year-old female with multifocal breast cancer.

FROZEN SECTION DIAGNOSIS

FSA) Left axillary sentinel node - Negative for metastatic carcinoma.

GROSS DESCRIPTION

A. Submitted fresh for frozen labeled "left axillary sentinel node" consists of a nodular mass of fat-covered soft tissue 2 x 1 x 0.5 cm. Bisecting it reveals a rim of red-tan lymphoid tissue with a central fatty core. Submitted entirely for frozen section.

B. Received fresh, subsequently fixed in formalin, labeled

"left breast" is a 21 x 20 x 5.5 cm breast which is partially covered with an 8.5 x 6 cm white-tan wrinkled skin ellipse. No scars are grossly identified on the skin. The specimen

has a suture designating superior. The specimen is inked at the deep margin and sectioned from medial to lateral to show a yellow-white fibrofatty cut surface. There is a large firm nodule which is inferior central, measuring 3.5 x 2.5 x 3 cm. This comes within 2.5 cm of the deep margin and greater than 8 cm from the superior-inferior medial and lateral margins. The lateral aspect of this focus shows hemorrhagic tissue which is grossly consistent with the previous biopsy site. Representative sections of the tumor are submitted for tissue procurement. Also located in the inner upper quadrant is a hemorrhagic cavity which is 1.7 cm in greatest dimension, filled with white rice-like pellets. This comes within 2.7 cm of the deep margin, 5 cm from the superior margin, 6 cm from

GROSS DESCRIPTION

the medial margin and greater than 10 cm from the inferior and lateral margin. The apex of the specimen is sectioned and palpated to identify no discrete gross lesions or lymph nodes grossly identified. The remainder of the specimen is sectioned and palpated

to identify no other discrete gross lesions identified.

Representative sections of the specimen are submitted as follows.

Block 1 - Entire nipple with representative skin; block 2-4 - representative section of tumor which includes representative deep margin; blocks 5-7 - representative section of biopsy site in inner upper quadrant with representative deep margin; block 8 - representative lower inner quadrant; block 9 - representative lower outer quadrant; block 10 - representative upper outer quadrant; block 11 - representative central breast. RS-11 (8 through 11 show representative deep margins).

MICROSCOPIC DESCRIPTION

Invasive carcinoma:

Histologic type: Invasive ductal carcinoma.

Histologic grade: 2

Overall grade:

Architectural score: 2

Nuclear score: 3

Mitotic score: 1

Greatest dimension (pT): Residual tumor measures 3.5 x 2.5 x 3 cm (pT2)

Specimen margins: Deep margin of the mastectomy is free of tumor.

Vessel invasion: Negative.

Calcification: Positive.

Nipple: Free of tumor.

Invasion of skin or chest wall: Absent.

MICROSCOPIC DESCRIPTION

Ductal carcinoma in situ:
Histologic pattern: Solid and cribriform (multifocal).
Nuclear grade: 3
Central necrosis: Present
Tumor size (if pure in situ): Residual DCIS at the second
biopsy site measures maximally 1.9 cm.
% DCIS of total tumor (if mixed): 10% of the tumor at the
invasive site.
Extensive intraductal component (present/absent): Absent.
Specimen margins: Deep margin of mastectomy is free of tumor.
Calcification: Positive.

Description of non-tumorous breast: Post-biopsy changes are
present.

Lymph nodes:
Number of positive nodes of total: 0 of 1 (sentinel lymph node)
pN: pN0.

Distant metastasis (pM): Could not be assessed .

Prognostic markers: See prior core biopsy .

4x2, 14

DIAGNOSIS

A. Sentinel lymph node, left axilla, resection:
Single lymph node negative for metastatic ductal carcinoma
(0/1).

B. Breast, left, simple mastectomy:
Grade 2 invasive ductal carcinoma with nonextensive
cribriform

DIAGNOSIS

DCIS. Second biopsy site containing residual solid DCIS.
Post-biopsy changes present at both biopsy sites.
The nipple, deep margin of the mastectomy and overlying skin
are free of involvement by tumor.

M.D. (Electronic Signature)

--- End Of Report ---

Criteria	Yes	No
Diagnosis Discrepancy		✓
Primary Tumor Site Discrepancy		✓
HIPAA Discrepancy		✓
Prior Malignancy History		✓
Dual/Synchronous Primary: Noted		✓
Case is (circle):	QUALIFIED	UNQUALIFIED
Reviewer Initials	10/27/11	