Surg Path

CLINICAL HISTORY: Not provided.

# UUID:BACD800B-F320-472C-ACFF-175E9F525E9F TCGA-B6-A0WT-01A-PR Redacted

### GROSS EXAMINATION:

A. "Left breast biopsy (AF1)", fresh. A 7 x 4.9 x 1.7 cm yellow-white fibrofatty breast biopsy notable for a 2.5 x 3.5 x 2 cm firm, white lesion. After consultation with Dr. , it was deemed that no surgical margins or orientation are required on this specimen. The tissue surface is inked in black, however. Tissue from the lesion is sent to the Tissue Bank for Estrogen and Progesterone receptor study. The frozen section remnant (AF1) was taken from the lesion area is submitted in Block A1. A representative sampling from the lesion area is submitted in Blocks A2-A5. Due to the fact that neither margins or orientation is an issue in the specimen, only a sampling of the lesion is taking— the entire breast biopsy is not submitted.

B. "Left breast", fresh. A mastectomy specimen consisting of a 19 x 10 cm ellipse of skin, a  $24 \times 15 \times 5$  cm breast and a  $11 \times 6 \times 3.5$  cm axillary tail. The deep surfaces of the breast are inked in black. The skin ellipse contains the nipple and surrounding areola and is notable for a 4.5 cm freshly sutured horizontal incision medial to the nipple.

The breast specimen is notable for a  $7 \times 6 \times 1.5$  cm hollow biopsy cavity lined by mildly firm, granular red-pink tissue 0.1 cm thick. At its closest point, the biopsy cavity is 1.5 cm from the posterior surface, 1.7 cm from the inferior surface, 9 cm from the superior surface, and 1.2 cm from the overlying anterior skin surface. The remainder of breast is diffusely composed of yellow-white fibrofatty tissue. No focal lesions are noted.

### BLOCK SUMMARY:

- B1- representative section of nipple.
- B2- representative section of biopsy cavity and closest approach to posterior surface.
- B3- representative section of biopsy cavity and closest approach to inferior surface.
- B4- biopsy cavity and closest approach to anterior skin surface.
- B5-B6- additional sections of biopsy cavity.
- B7-B8- representative sections of upper medial portion of breast.
- B9-B10- representative sections of lower medial portion of breast.
- B11-B12- representative sections of upper lateral breast.
- B13-B14- representative sections of lower portion of breast.
- B15- four lymph node candidates from most medial portion of axillary tail.
- B16- four lymph node candidates from mid portion of axillary tail.
- B17- three lymph node candidates from most lateral portion of axillary tail.
- B18- three lymph node candidates from most lateral portion of axillary tail.
- B19- three lymph node candidates from most lateral portion of axillary tail.

Dr

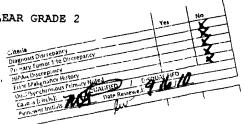
INTRA OPERATIVE CONSULTATION:

A. "Left breast biopsy": AF1- positive for invasive carcinoma

## DIAGNOSIS:

A. "LEFT BREAST BIOPSY":

INFILTRATING DUCTAL CARCINOMA, HISTOLOGIC GRADE 3, NUCLEAR GRADE 2 N.S.A.B.P..





MAXIMUM TUMOR SIZE 3.5 CM.

IN SITU DUCTAL COMPONENT REPRESENTS APPROXIMATELY 15 TO 20% OF TUMOR MASS.

B. "LEFT BREAST" (MASTECTOMY):

BREAST TISSUE WITH BIOPSY CAVITY.

NO EVIDENCE OF MALIGNANCY.

1 OF 15 LYMPH NODES POSITIVE FOR METASTATIC CARCINOMA (SEE NOTE).

BENIGN PROLIFERATIVE CHANGES OF THE BREAST INCLUDING EXTENSIVE FIBROSIS, DUCT ECTASIA, APOCRINE METAPLASIA, AND HYPERPLASIA OF THE USUAL TYPE.

NOTE: One large lymph node (B18) appears negative for malignancy but is being reprocessed for further examination. An addendum will be issued to this report documenting the findings in this lymph rade.

Verified by:

Date Signed:

# ADDENDUM 1:

Review of a reprocessed blocks (B18) shows three lymph nodes with no evidence of malignancy. The one large lymph node mentioned in the original report specifically contains no evidence of malignancy.

Verified by:

Date Signed: