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		14 WOLF - WARRING TO BE WANTED	10000000000000000000000000000000000000	-
	Sex: Female	INITE ACCORDE ADAR ASSES		ŀ
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	SURGICAL PA	THOLOGY REPORT		
	DI/	Carcurona, ICD. Carcurona, Site & Br		
DIAGNOSIS:	·			
A. Left axillary Sentinel lymph	node: One lymph node, no evidence of me	tastatic carcinoma.	人_つ :	
Confirmed by negative staining	for pancytokeratin.	1004	J-7	
0.1-0.5			L 1 + 1	INS
B. Left breast mastectomy:	eas of chondroid differentiation	(AL RIM DOMA)	melachlastic ~	ب
Size: 11 cm.	as of Giordicia differentiation	Caracian	057	5/3
Architectural score: 3 of 3.			00/	uic
Nuclear score: 3 of 3.		C 1 1 100	1 .40	
Mitotic score: 3 of 3. Total score: 9 of 9.		> Fo (6) You	I MOD -	
Grade 3.			150	1
No evidence of in situ carcinon	na.			•
No evidence of angiolymphatic	invasion.	•	1 1 1 1 1 1 3	
Prognostic panel to follow.			40 10121.0	
All surgical margins of excision			•	
No evidence of skin or nipple in	ivoivement.	•		
TMN: T3pN0(i-)				
	Electronic Signatur	e:		
	Chimoni	INFORMATION		COLUMN CONTRACT
CLINICAL HISTORY:				
Preoperative Diagnosis: Left b.	reast mass			
Postoperative Diagnosis:				
Symptoms/Radiologic Findings	:			
SPECIMENS:				
A. Left axillary sentinel lymph r	nodes			
8. Left breast - short stitch sup				

GROSS DESCRIPTION:

A. Container A is labeled submitted in cassettes A1-A2 labeled

SPECIMENIDATA Received in formalin, is a $3.0 \times 1.3 \times 0.8$ cm slightly blue-dyed tan lymph node. The specimen is sectioned and

B. Container B is labeled ...eft breast. Received in formalin, is a 1,044 gram, 23.0 x 17.5 x 5.0 cm left simple mastectomy surfaced on one aspect by a 20.0 x 11.2 cm ellipse or ran-white skin with a low-central 1.2 x 1.2 x 0.3 cm nipple which exudes no discharge. Surrounding the nipple, there is a 6.0 cm diameter patch of intense blue-dyed discoloration. The specimen is oriented with a suture at the mid aspect of one long axis indicating superior. The deep aspect of the specimen has been previously sectioned for collection of tissue for genomics studies. At the previous incision site, the cut surfaces give rise to a subareolar, 11.0 x 10.0 x 6.0 cm indurated, well circumscribed, focally cystic and mucinous tumor. The tumor is 3.5 cm from the nearest deep margin and 3.2 cm from the nearest skin resection margin. The remaining breast parenchyma is 20% fibrous tissue. There are no lymph nodes near the upper outer quadrant.

Sections are submitted in two casts the for canonics studies labeled and epresentative sections of the remaining tissue are submitted in cassettes labeled as follows: B1 representative nipple; B2-B7 representative tumor; B8-B9 representative uninvolved upper outer quadrant; B10-B11 representative of upper inner quadrant; B12-B15 representative of lower inner quadrant; B14-B15 representative of lower outer quadrant.

The left breast mass consists of a malignant neoplasm composed predominantly of spindle cells. There are areas or chondroid differentiation and areas of multinucleated tumor giant cells. A broad panel cytokeratins was utilized. The tumor cells were negative for high molecular weight keratin SK. There is focal positivity for cytokeratin AE 1,3. Rare tumor cells are positive for pancytokeratin. Rare tumor cells are positive for cytokeratin CKC 7 and CK 20. There is strong positivity for P 63. This is indicative of a metaplastic carcinoma.

Criteria

Diagnosis Discrepancy

Furnary Tumor Site Discrepanc