



1CS-0-3

Carcinoma, ductal in situ, NOS 8500/2
 Site breast, NOS C50.9 /w 10/27/11

SPECIMEN

- A. Left sentinel lymph node #1
 - B. Left breast stitch 12 o'clock
 - C. Left breast, Tail of Spence
 - D. Left breast, Nodule inferior skin flap - stitch 6 o'clock
 - E. Right breast double long 12 o'clock single long hard mass 10 o'clock
 - F. Palpable area right axilla
 - G. Sentinel node #2, right breast
- REPORT REVISED ON AT

CLINICAL NOTES

PRE-OP DIAGNOSIS: Bilateral breast carcinoma.

FROZEN SECTION DIAGNOSIS

- A) Lymph node, sentinel node left, excision: One lymph node negative for metastatic carcinoma (0/1).
- FFS1, FFS2: Palpable area, right axilla, biopsy - Benign lymph node present.
- GFS: Sentinel node #2, right axilla, biopsy - One lymph node with no evidence of metastasis.

GROSS DESCRIPTION

- A. Received fresh for frozen section labeled "left sentinel lymph node #1" is an irregularly shaped fragment of blue stained tissue that measures 1.3 x 0.6 x 0.4 cm. in dimension. Tissue is entirely frozen.
- B. Received fresh, labeled "left breast stitch 12 o'clock" is a 26.0 cm. (medial to lateral) x 24.5 cm. (superior to inferior) x 4.5 cm. (anterior to posterior) diffusely cauterized and focally blue stained soft, lobulated tan gold-white portion of fibroadipose tissue in keeping with breast designated as left per requisition slip and container and oriented by a single suture as stated previously. A 5.5 cm. (medial to lateral) x 2.3 cm. (superior

GROSS DESCRIPTION

to inferior) portion of dusky tan white skin with a central, everted, 1.3 x 1.3 x 0.5 cm. nipple is present along the anterior aspect. The deep margin is inked black and the specimen is sectioned. There is a roughly spherical, 2.4 cm. clot-filled biopsy cavity within the lower inner quadrant. The cavity is present within 1.2 cm. of the anterior surface (inked blue see block 2) and 2.8 cm. of the inked deep margin (see block 1). Several cylindrical tan white firm structures are evident within the cavity. The periphery of the cavity is fibrotic with diffuse chalky yellow fat necrosis. Lateral to the cavity is an ill-defined focus of firm, tan white fibrous tissue with dilated ductal structures (see blocks 6 and 7). Within the center of the focus, there appears to be a

stellate 1.0 x 1.0 x 1.0 cm. rubbery tan white lesion which is 0.5 cm. from the inked deep margin (see blocks 7 and 8). The remaining cut surfaces throughout the specimen consists predominately of glistening lobulated golden yellow adipose tissue with a moderate amount of interspersed focally blue stained dense tan white fibrous tissue. No additional mass lesions are identified. Representative sections are submitted in fourteen blocks as labeled. RS-14.

BLOCK SUMMARY: 1 - Biopsy cavity to inked deep margin; 2 - biopsy cavity to anterior surface; 3-5 - biopsy cavity to adjacent parenchyma; 6 - firm area lateral to biopsy cavity; 7-8 - apparent lesion lateral to biopsy cavity to inked deep margin; 9 - random upper outer quadrant; 10 - upper inner quadrant; 11 - lower inner quadrant; 12 - lower outer quadrant; 13 - junction of the four quadrant; 14 - nipple.

C. Received fresh, labeled "tail of Spence", is a 5 x 4 x 1.6 cm. portion of soft, lobulated golden-yellow adipose tissue. Three soft tan-pink-gold tissues, in keeping with lymph nodes, measuring up to 1.5 cm. in greatest dimension, are recovered.

The lymphoid tissues are entirely submitted in three blocks, as

GROSS DESCRIPTION

labeled. RS-3

BLOCK SUMMARY: 1 - One whole presumptive node; 2,3 - one bisected presumptive node per cassette.

D. Received fresh, labeled "nodule inferior skin flap - stitch 6 o'clock", is a 3.8 cm. (9 to 3 o'clock) x 0.9 cm. (12 to 6 o'clock) wrinkled tan-white skin ellipse, with a suture along one aspect, as stated previously. The 12 o'clock half is inked blue and the 6 o'clock half is inked black. There is a stellate, rubbery, 0.6 x 0.6 x 0.6 cm. tan-white nodular lesion within the 9 o'clock half of the specimen, which appears to extend to within less than 0.1 cm. of the inked 12 o'clock surface. The specimen is entirely submitted in a sequential manner from 3 to 9 o'clock in four blocks (nodule block 3).

E. Received fresh, labeled "right breast double long 12 o'clock, single long hard mass 10 o'clock" is 27.0 cm. (medial to lateral) x 23.5 cm. (superior to inferior) x 4.5 cm. (anterior to posterior) diffusely cauterized and focally blue stained soft, lobulated tan gold-white portion of fibroadipose tissue in keeping with breast designated as right per requisition slip and container and oriented by double suture as stated previously. A 4.4 cm. (medial to lateral) x 2.5 cm. (superior to inferior) dusky tan white skin ellipse with a central, everted, 1.0 x 1.0 x 0.6 cm. nipple is present along the anterior aspect. A second single suture is present at approximately 9-10 o'clock. The

intact deep margin is inked black and the specimen is sectioned. There is a moderately well circumscribed, 5.0 cm. (superior to inferior) x 3.4 cm. (medial to lateral) x 3.0 cm. (anterior to posterior) multi-loculated slightly firm cystic structure subjacent to the aforementioned single suture at the junction of the upper and lower outer quadrants. The cyst focally extends to within 0.3 cm. of the inked deep margin (see blocks 1 and 2) and is 1.5 cm. from

GROSS DESCRIPTION

the anterior surface (subsequently inked blue). A portion of the cystic focus and a portion of normal parenchyma are submitted for tissue procurement as requested. The cut surfaces throughout the remainder of the specimen consists predominately of glistening lobulated golden yellow adipose tissue with a moderate amount of interspersed diffusely cystic tan white fibrous tissue. No mass lesion or additional abnormalities are identified. Representative sections are submitted in 16 blocks as labeled. RS-16.

BLOCK SUMMARY: 1-2 - Cystic structure to inked deep margin; 3-4 - cystic structure to inked anterior margin; 5-10 - representative cystic structure to surrounding parenchyma including firm area sequentially from lateral to medial; 11 - random upper outer quadrant; 12 - upper inner quadrant; 13 - lower inner quadrant; 14 - lower outer quadrant; 15 - junction of the four quadrants; 16 - nipple.

F. Container F is labeled with the patient's name, medical record number and "palpable area right axilla". The specimen consists of a single fragment of fatty tissue measuring 2 x 1.5 x 1 cm. AS-1. Blocks FS1 and FS2. G. Container G is labeled "sentinel node #2 right axilla". The specimen consists of a single lymph node measuring 0.8 x 0.5 x 0.5 cm. ASF, GFF, bisected. This case is being handled by Dr.

MICROSCOPIC DESCRIPTION

B. Left Breast
Invasive carcinoma:
Histologic type: Ductal
Histologic grade: II

MICROSCOPIC DESCRIPTION

Overall grade: 6/9

Architectural score: 2
Nuclear score: 2
Mitotic score: 2
Greatest dimension (pT): No less than 1.5 cm (adjacent to
biopsy cavity)
Specimen margins: Negative
Vessel invasion: No definitive invasion identified
Calcification: Present
Nipple (Paget's): Negative
Invasion of skin or chest wall: Negative

Ductal carcinoma in situ:
Histologic pattern: Cribriform and solid
Nuclear grade: 3
Central necrosis: Present
% DCIS of total tumor (if mixed): 20%
Specimen margins: DCIS is 3 mm from deep margin (two small
foci)
Calcification: Present

Description of non-tumorous breast: Small papillomas; fibrocystic
changes with microcalcifications.
Comments: Previous core biopsy reviewed. Carcinoma
is lateral to prior biopsy site.
Prognostic markers: See core biopsy report,

D. "Left breast, Nodule inferior skin flap"
Invasive Carcinoma:
Histologic type: Ductal
Histologic grade: II
Overall grade: 6/9
Architectural score: 2

MICROSCOPIC DESCRIPTION

Nuclear score: 3
Mitotic score: 1
Greatest dimension (pT): 7 mm
Specimen margins: 1.5 mm from resection margin (several areas)
Vessel invasion: Negative
Calcification: Present

Comments: Skin not directly involved by carcinoma. Focal duct
present containing necrotic debris and calcification, without
definitive ductal carcinoma in-situ identified.

Breast Prognostic Marker Report (Part D)

Results

Estrogen receptor:.....80%
Progesterone receptor:...0%

Her2/neu by IHC:.....0-1+

Interpretation

Estrogen receptor:.....Positive
Progesterone receptor:...Negative
Her2/neu by IHC:.....Negative

Part E. Right breast.

Ductal carcinoma in situ: Outer breast

Histologic pattern: Solid, papillary and micropapillary

Nuclear grade: 2

Central necrosis: Absent

Tumor size (if pure in situ): 5 cm

Specimen margins: DCIS is focally 2 mm from deep margin and 3
mm from anterior margin.

MICROSCOPIC DESCRIPTION

Calcification: Present

Comments: Fibrocystic changes are intermixed within this
complex

mass lesion, the majority of which is composed of ducts involved
by carcinoma in-situ. Invasive carcinoma is not identified
(p63 performed to evaluate). Portions of case also reviewed
by Dr.

Nipple: large ducts of nipple involved by ductal carcinoma
in-situ.

Breast Prognostic Marker Report (Part E)

Results

Estrogen receptor:.....100%
Progesterone receptor:...0%

Interpretation

Estrogen receptor:.....Positive
Progesterone receptor:...Negative

Prognostic markers were done by immunohistochemical stain on
paraffin sections from 10% neutral buffered formalin fixed tissue
using antibodies on a Benchmark automated
stainer.

The Her2/neu antibody is clone 4B5 and has been approved by the FDA
as an aid in the assessment of breast cancer patients for whom

Herceptin treatment is considered.

This laboratory meets the test validation and quality assurance requirements of the ASCO/CAP guidelines for Her2 testing for carcinoma of the breast (Arch Pathol Lab Med 2007;131:18-43).

MICROSCOPIC DESCRIPTION

[A few of the antibodies used in our laboratory may be classified as

analyte specific reagents. These antibodies are monitored and controlled in our laboratory and their performance for in vitro diagnosis is well described in the medical literature. They have not been cleared or approved by the FDA.]

4x6, 3, 14x3, 15, 20x2, 25x5

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AT

DIAGNOSIS

- A. Left breast, sentinel lymph node #1, biopsy:
One negative lymph node (0/1).
- B. Breast, left, mastectomy:
Invasive ductal carcinoma, grade II, size no less than 1.5 cm., with associated ductal carcinoma in-situ, grade 3, with necrosis.
- C. Lymph node, Tail of Spence, left breast, regional resection:
Three negative lymph nodes (0/3).
- D. Breast, left, inferior skin flap nodule, excisional biopsy:
Invasive ductal carcinoma, grade II, 7 mm., close to excisional margin.
- E. Breast, right, mastectomy:
Ductal carcinoma in-situ, grade 2, involving 5 cm area and large ducts of nipple.
No invasive carcinoma identified.
- F. Lymph node, right axilla, biopsy:
One negative lymph node (0/1).
- G. Sentinel lymph node #2, right axilla, biopsy:
One negative lymph node (0/1).

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DIAGNOSIS

MD (Electronic Signature)

REVISED REPORT -

Clarification of specimen identification

Criteria	Yes	No
Diagnosis Discrepancy <i>in situ sent</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Primary Tumor Site Discrepancy	<input checked="" type="checkbox"/>	<input type="checkbox"/>
HIPAA Discrepancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Prior Malignancy History	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Dual/Synchronous Primary Noted <i>3.4.11 CA</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Case is (circle): QUALIFIED / DISQUALIFIED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reviewer Initials	Date Reviewed: <i>10/27/11</i>	