

# Surgical Pathology Report

Name: [REDACTED]  
DOB: [REDACTED]  
Gender: F  
MRN: [REDACTED]  
Location: [REDACTED]  
Physician: [REDACTED]

Case #: [REDACTED]  
Collected: [REDACTED]  
Received: [REDACTED]  
Reported: [REDACTED]  
Copy To: [REDACTED]

## Pathologic Interpretation:

- A. **Left breast lumpectomy with needle localization (short stith- superior, long lateral):**
- Invasive ductal carcinoma, Nottingham grade 2 (3+2+2), 2.5 cm in greatest linear dimension.
  - Associated ductal carcinoma in situ, intermediate grade (DIN2), cribriform type with necrosis.
  - The margins are free from tumor.
  - Distance from the nearest margin is 1.8 cm (superior).
  - Lymphovascular space invasion is identified.
  - No malignancy seen in skin.
  - Microcalcifications.
  - Previous biopsy site.
- B. **Skin left breast:**
- No malignancy seen in skin.
- C. **Additional tissue superior to the two small nodules blue indicates true margin:**
- Invasive ductal carcinoma, 0.4 cm in greatest linear dimension.
  - The distance from the true margin is 1.0 cm.
- D. **Left axillary contents:**
- Metastatic carcinoma in one out of thirteen lymph nodes with extranodal extension (1/13).
  - Size of metastatic tumor is 2.0 cm.
- E. **Right breast tissue:**
- No malignancy seen in skin.
  - Fibroadenoma.

ICD-0-3

Carcinoma, infiltrating ductal, NOS 8500/3  
Site: breast, NOS C50.9 3/12/11 Jw

UUID: A68B2364-89DA-4DC7-9AA7-A08BBCC85025  
TCGA-EW-A1PA-01A-PR

Redacted

## Tumor Summary (Invasive Carcinoma of the Breast):

**Specimen Type:** Partial breast  
**Procedure:** Excision with wire-guided localization  
**Lymph Node Sampling:** Axillary dissection (partial or complete dissection)  
**Specimen Integrity:** Single intact specimen (margins can be evaluated)  
**Specimen Size:** Greatest dimension: 16cm  
**Additional dimensions:** 12 x 3 cm  
**Specimen Laterality:** Left  
**Tumor Size:** Size of Largest Invasive Carcinoma: Greatest dimension of largest focus of invasion: 2.5 cm  
**Additional dimensions:** 2 x 1 cm  
**Tumor Focality:** Multiple foci of invasive carcinoma  
**Number of foci:** 2  
**Sizes of individual foci:** 2.5 cm and 0.4 cm  
**Macroscopic and Microscopic Extent of Tumor:**  
**Skin:** Invasive carcinoma does not invade into the dermis or epidermis  
**Nipple:** DCIS does not involve the nipple epidermis  
**Skeletal Muscle:** No skeletal muscle present  
**Ductal Carcinoma In Situ:** DCIS is present  
**Histologic Type of Invasive Carcinoma:** Invasive ductal carcinoma (no special type or not otherwise specified)  
**Histologic Grade:**  
**Glandular (Acinar)/Tubular Differentiation:** Score 3  
**Nuclear Pleomorphism:** Score 2  
**Mitotic Count:** Score 2  
**Overall Grade:** Grade 2  
**Margins:** Uninvolved by invasive carcinoma  
**Distance from closest margin:** 1.0 cm (superior)  
**Lymph-Vascular Invasion:** Present  
**Dermal Lymph-Vascular Invasion:** Not identified  
**Lymph Nodes:**

## SURGICAL PATHOL Report

Number of sentinel lymph nodes examined: 0  
Total number of lymph nodes examined (sentinel and nonsentinel): 12  
Number of lymph nodes with macrometastases: 1  
Number of lymph nodes with isolated tumor cells: 2.0 cm  
Extranodal Extension: Present  
Method of Evaluation of Sentinel Lymph Nodes: Hematoxylin and eosin (H&E), one level

### Pathologic Staging (pTNM)

Primary Tumor: pT2  
Regional Lymph Nodes: pN1a  
Distant Metastasis: Not applicable

### Ancillary Studies:

Estrogen Receptor: Performed on another specimen  
Specify specimen:  
Results: Immunoreactive tumor cells present  
Progesterone Receptor: Performed on another specimen  
Specify specimen:  
Results: Immunoreactive tumor cells present  
Her2: Performed on another specimen  
Specify specimen:  
Results: Negative (Score 0)

Microcalcifications: Present in invasive carcinoma

\*\*\*Electronically Signed Out By\*\*\*

NOTE: Some immunohistochemical antibodies are analyte specific reagents (ASRs) validated by our laboratory (Her 2, Parvo, H. pylori, HBcore). These ASRs are clinically useful indicators that do not require FDA approval. These clones are used: ID5=ER, PgR 636=PR, A485=HER2, H-11=EGFR, CCH2/DDG9=CMV, F39.4.1=AR and HPV by ISH. All immunohistochemical stains are used with formalin or molecular fixed, paraffin embedded tissue. Detection is by LSAB. The results are read by a pathologist as positive or negative.

MD

As the attending pathologist, I attest that I: (i) Examined the relevant preparation(s) for the specimen(s); and (ii) Rendered the diagnosis(es).

### Clinical History:

Female with left breast cancer

### Pre Operative Diagnosis:

Left breast cancer

### Specimen(s) Received:

- A: Left breast lumpectomy with needle localization (short stith- superior, long lateral ) fresh
- B: Skin left breast (perm)
- C: Additional tissue superior to the two small nodules blue indicates true margin (perm)
- D: Left axillary contents (perm)
- E: Right breast tissue (perm)

### Gross Description:

- A. Received fresh and labeled "left breast lumpectomy with needle localization (short stith- superior, long lateral ) fresh" specimen is inked for evaluation of margins as follows: posterior, black; anterior, yellow; superior, blue; inferior, green; lateral, orange; medial, red. The specimen weighs 299.0 grams and measures 16.0 cm from medial to lateral, 12.0 cm inferior to superior and 3.0 cm anterior to posterior. It is oval in shape, yellow in color, soft in consistency. The specimen has an ellipse of skin measuring 3.0 x 1.0 cm. Serial sectioning of the specimen reveals an oval mass with infiltrating borders and measures approximately 2.5 x 2.0 x 1.0 cm. The mass occupies 10% of the entire specimen. It is white in color and firm in consistency. The distance of the mass from the margin is as follows: posterior 2.0 cm, inferior 2.0 cm, anterior 3.0 cm, superior 3.0 cm, medial 10.0 cm, lateral 9.0 cm. The remaining of the breast parenchyma appears unremarkable with fat to stroma ratio 90:10. The mass has a clip. A section of mass was submitted to tissue bank. Sections submitted as follows:

# SURGICAL PATHOL Report

- 1-8 Sections of the mass in toto
- 9&10 Representative section from the superior margin)
- 11&12 Representative section from inferior margin
- 13&14 Representative section from lateral margin
- 15&16 Representative section from medial margin
- 17&18 Representative section from posterior margin
- 19&20 Representative section from anterior margin
- 21 Representative section from the remaining breast parenchyma
- 22 Representative section of the skin

- B. Received in formalin and labeled "skin left breast" is a skin tag measuring 5.0 x 1.0 cm. Representative section submitted in one cassette.
- C. Received in formalin and labeled "additional tissue superior to the two small nodules blue indicates true margin (perm)" is oval in shape. The surgeon inked the true margin in blue. Resident inked true margin in black. It measures 3.0 x 1.0 x 1.0 cm. It is submitted in toto in eight cassettes.
- D. Received in formalin and labeled "left axillary contents (perm)" is axillary contents measuring 10.0 x 8.0 x 3.5 cm. It is yellow in color and soft in consistency. There are 13 lymph nodes. The largest lymph node measures 2.0 x 2.0 cm. The lymph nodes are submitted as follows:
- 1-8 One lymph node per cassette
  - 9 Two lymph nodes
  - 10 Three lymph nodes
- E. Received in formalin and labeled "right breast tissue (perm)" is a soft, yellow breast tissue measuring 14.0 x 5.0 x 3.0 cm. Serial sectioning does not reveal any gross lesions. The breast parenchyma appears to be normal with fat to stroma ratio 90:10. It has a skin tag measuring 3.0 x 1.0 cm. Sections are submitted as follows:
- 1 Section from skin
  - 2-4 Representative section of stroma

MD

**ICD-9(s):** 174.8 196.3 217

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HIPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Listed		
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	Date Reviewed: 3/12/11	