



Sample #

ICD 0-3

Carcinoma, lobular infiltrating
8520/3

FINAL PATHOLOGIC DIAGNOSIS

Sentinel node biopsy and partial mastectomy,

A. Right axillary sentinel node:

- Single lymph node, no tumor (0/1).

B. Right breast partial mastectomy:

- Invasive lobular carcinoma, SBR grade II, with focal necrosis.

- Focal atypical ductal hyperplasia and atypical columnar cell change.

- Uninvolved breast parenchyma with apocrine metaplasia.

Site: Path- B Breast UOQ
C50.4

CSCF B Breast, NOS
C50.9

9W 12/24/12

Breast Pathologic Parameters

1. Invasive carcinoma:

A. Combined gross and microscopic measurement: 3.2cm

B. Composite histologic (modified SBR) grade II

- Architecture: 3

- Nuclear grade: 2

- Mitotic count: 1

C. Associated ductal carcinoma in situ (DCIS): Absent

2. Excisional biopsy margins: Free of tumor

- Invasive carcinoma 1mm from superior (closest) margin (slide B14)

- Additional margins greater than 2mm away

3. Blood vessel and lymphatic invasion: Absent

4. Axillary lymph nodes: Negative for tumor

5. Special studies (see

- Expression of ER in 68% of invasive tumor nuclei

- Expression of PR in 66% of invasive tumor nuclei

- Her2/neu antigen (FISH): Non-amplified (ratio: 1)

6. pTNM: pT2, N0(sn), MX.

Clinical History:

This patient is a -year-old female with a right breast mass. The patient self-palpated a breast mass in the right upper outer quadrant in

was sent for diagnostic mammography and ultrasound which revealed a worrisome mass approximately 2.5 cm in size. An ultrasound-guided core biopsy and clip placement was done. This was read as 3invasive mammary carcinoma with lobular features4 by

The patient underwent a breast MRI on the which demonstrated an irregularly shaped, posteriorly positioned mass at 11 o'clock in the right breast measuring 4.5 x 2.5 cm. The

left breast and bilateral axillae were normal. The patient undergoes right sentinel lymph node biopsy and right breast partial mastectomy with needle localization.

Comment

The tumor cells are negative for E-cadherin consistent with a lobular phenotype. AE1/AE3 stain is negative on the sentinel node.

Specimens Received:

A: Right axillary sentinel lymph node

B: Right Breast Partial Mastectomy

Gross Description:

The specimen is received in two containers each labeled with the patient's name and medical record number.

A. Part A is additionally designated 31 right axillary sentinel node #14.

Received fresh for frozen diagnosis is a 0.9 x 0.7 x 0.6 cm lymph node which is bisected and entirely frozen and read as 3no evidence of metastatic tumor⁴ per

The remnant of frozen tissue is entirely submitted in cassette A1FS.

B. Part B is additionally designated 32. right breast partial mastectomy⁴.

Received fresh on an AccuGrid with accompanying radiograph is a 185.5 gm partial mastectomy specimen. The specimen bears two needle localization wires and a double long stitch as well as double short stitch for orientation. The overall measurements are as follows: superior to inferior 9.8 cm, medial to lateral 9.5 cm, anterior to posterior 3.7 cm. The requisition designates the double long stitch as lateral margin and short stitch as superior margin. The accompanying radiograph demonstrates an irregularly shaped stellate mass within the partial mastectomy specimen overlying quadrant C2, C3, D3 and D2. There is a needle localization wire which enters at A3 and terminates at E1. There is a second needle localization wire which enters A5 and terminates at E4. The mass is in between these two wires. There is a single clip in quadrant D2.

The specimen is inked as follows: anterior=black, posterior=red, lateral=violet, medial=yellow, superior=blue and inferior=green. The specimen is serially sectioned from lateral to medial into nine slices to demonstrate an irregularly shaped, firm, white-tan mass present in slices #4 through #8. Needle localization wires terminate in slices #3 and #8. The clip is not identified.

The dimensions of the mass are 2.8 x 2.4 x 1.5 cm. The mass is present 0.2 cm from the anterior margin, 2.7 cm from the inferior margin, 1.6 cm from the superior margin, and greater than 2 cm from both lateral and medial margins. The remainder of the specimen demonstrates grossly unremarkable breast parenchyma consisting of lobular, soft, yellow-tan tissue with intervening white fibrous septa. Representative sections are submitted as follows:

- B1,B2: lateral margin, serially sectioned, entirely submitted
- B3,B4: medial margin, serially sectioned, entirely submitted
- B5: closest approach of mass to anterior margin, slice #5
- B6: closest approach to superior margin, slice #6
- B7: closest approach of mass to inferior margin, slice #6
- B8: mass, representative section slice #6
- B9: additional representative section of mass, slice #7
- B10: representative section of tissue at termination of localization wire, slice #3
- B11,B12: tissue at needle localization wire termination, slice #8
- B13,B14: representative sections of nodular tan-white breast parenchyma, slice #9
- B15,B16: representative sections of nodular tan-white breast parenchyma, slice #10
- B17: representative section of unremarkable breast parenchyma, slice #8
- B18: representative section of unremarkable breast parenchyma, slice #12

Intraoperative Consult Diagnosis:

A1FS. Right axillary sentinel lymph node: No evidence of metastatic tumor.

Criteria	Yes	No
Diagnostic Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary		<input checked="" type="checkbox"/>
Case is (circle) QUALIFIED / DISQUALIFIED		
Reviewer Initials: <i>Wmt</i>	Date Reviewed: <i>12/20/12</i>	