

ICD-0-3

Carcinoma, infiltrating duct, NOS

8500/3 12/8/10

TSS

Path  
CQCF

Site Code: breast, upper outer quadrant C50.4  
Site: breast, NOS C50.9

UUID: FE41053B-16F4-46B0-B243-571F4D5A1665  
TCGA-E2-A15I-01A-PR

Redacted

**SPECIMENS:**

- A. SENTINEL LYMPH NODE #1 LEFT AXILLA
- B. SENTINEL LYMPH NODE #2 LEFT AXILLA
- C. SENTINEL LYMPH NODE #3 LEFT AXILLA
- D. SENTINEL LYMPH NODE #4 LEFT AXILLA
- E. LEFT BREAST

**SPECIMEN(S):**

- A. SENTINEL LYMPH NODE #1 LEFT AXILLA
- B. SENTINEL LYMPH NODE #2 LEFT AXILLA
- C. SENTINEL LYMPH NODE #3 LEFT AXILLA
- D. SENTINEL LYMPH NODE #4 LEFT AXILLA
- E. LEFT BREAST

**INTRAOPERATIVE CONSULTATION DIAGNOSIS:**

TPA, Sentinel lymph node #1 left axilla: Negative for tumor  
TPB, Sentinel lymph node #2 left axilla: Negative for tumor  
TPC, Sentinel lymph node #3 left axilla: Negative for tumor  
TPD, Sentinel lymph node #4 left axilla: Negative for tumor  
Diagnoses called at by Dr.

**GROSS DESCRIPTION:**

**A. SENTINEL LYMPH NODE #1**

Received fresh labeled with the patient's identification and designated "Sentinel lymph node number one left axillary" is a fragment of lymphoid tissue measuring 0.5 x 0.4 x 0.3 cm. Touch preparation is performed. The entire specimen is submitted, A1.

**B. SENTINEL LYMPH NODE #2**

Received fresh labeled with the patient's identification and designated "Sentinel lymph node number two" is a fragment of lymphoid tissue measuring 0.4 x 0.3 x 0.3 cm. Touch preparation is performed. The entire specimen is submitted, B1.

**C. SENTINEL LYMPH NODE #3**

Received fresh labeled with the patient's identification and designated "Sentinel lymph node number three" is a fragment of lymphoid tissue measuring 1.2 x 0.6 x 0.4 cm. Touch preparation is performed. The entire specimen is submitted, C1.

**D. SENTINEL LYMPH NODE #4**

Received in formalin labeled with the patient's identification and designated "sentinel lymph node number four" is a fragment of lymphoid tissue measuring 1.3 x 1.1 x 0.5 cm. Touch preparation is performed. The entire specimen is submitted, D1.

**E. LEFT BREAST SIMPLE MASTECTOMY**

Received fresh labeled with the patient's identification and designated "left breast simple mastectomy" is an oriented (suture in axilla), 304 g, 21 x 14 x 3.5 cm mastectomy specimen with brown tan skin ellipse measuring 8.5 x 3.5 cm, and 0.5 cm flat nipple. Ink code: Anterior/superior-blue, anterior/inferior-orange, posterior-black. The specimen is serially sectioned from medial to lateral into 12 slices revealing a mass at the 6 o'clock position, central inferior (slice 6), measuring 1.2 x 1 x 1 cm, located 0.5-cm from the nearest anterior margin and 1.2-cm from the deep margin. A second ill-defined firm mass is identified 2-cm from mass number one located in the UOQ, 3 o'clock (slice 7 with clip), 3 x 2 x 2 cm, located 2-cm from the nearest anterior margin and 2.5-cm from the deep margin. A third mass is located approximately 1.5-cm from the mass at 3 o'clock measuring 1 x 0.9 x 0.7 cm. The third mass is located in the upper outer quadrant (one o'clock, slice 7) 1.2-cm from the nearest anterior margin and 2.5-cm from the deep margin. A portion of the specimen is submitted for tissue procurement. The specimen is representatively submitted:

E1-E3: Nipple

E4: Skin

E5-E6: Mass #1, central inferior, 6 o'clock, and nearest anterior margin, slice 6

E7: Deep margin, mass #1, slice 6

E8: Tissue in between mass number one and mass number two, slice 7

E9: Mass #2, upper outer quadrant, 3 o'clock, slice 7

E10-E11: Mass #2, upper outer quadrant, 3 o'clock, slice 7, E10 with clip

E12: Deep margin over mass #2

E13: Tissue in between mass number two and mass number 3, slice 7

E14-E15: Mass number 3, upper outer quadrant, one o'clock, and nearest anterior margin, slice 7

E16: Possible additional mass #3, slice 8

E17: Deep margin, mass #3

E18: Representative section, LOQ, slice 8

E19: Representative section, UIQ, slice 4

E20: Representative section, LIQ, slice 4

**DIAGNOSIS:**

A. LYMPH NODE, SENTINEL #1, LEFT AXILLA, EXCISION:  
- ONE LYMPH NODE, NEGATIVE FOR METASTASES (0/1).

B. LYMPH NODE, SENTINEL #2, LEFT AXILLA, EXCISION:  
- ONE LYMPH NODE, NEGATIVE FOR METASTASES (0/1), SEE NOTE.

C. LYMPH NODE, SENTINEL #3, LEFT AXILLA, EXCISION:  
- ONE LYMPH NODE, NEGATIVE FOR METASTASES (0/1).

D. LYMPH NODE, SENTINEL #4, LEFT AXILLA, EXCISION:  
- ONE LYMPH NODE, NEGATIVE FOR METASTASES (0/1).

E. BREAST, LEFT, MASTECTOMY:

- MULTIPLE FOCI OF INVASIVE DUCTAL CARCINOMA, SBR GRADE 1, LARGEST FOCUS MEASURING 2.1-CM
- INTERMEDIATE NUCLEAR GRADE, DUCTAL CARCINOMA IN SITU, CRIBRIFORM TYPE WITH CENTRAL NECROSIS
- SURGICAL RESECTION MARGINS NEGATIVE FOR TUMOR
- BIOPSY SITE CHANGES WITH FIBROSIS
- SEE SYNOPTIC REPORT

NOTE: AE 1/3 negative on SLN#2.

**SYNOPTIC REPORT - BREAST**

Specimen Type: Mastectomy

Needle Localization: No

Laterality: Left

Invasive Tumor: Present

Multifocality: Yes

**WHO CLASSIFICATION**

Invasive ductal carcinoma, NOS 8500/3

Tumor size: 2.1cm

Tumor Site: Upper outer quadrant

Lower outer quadrant

Central

Margins: Negative

Distance from closest margin: 0.2cm

anterior inferior

Tubular Score: 2

Nuclear Grade: 2

Mitotic Score: 1

Modified Scarff Bloom Richardson Grade: 1

Necrosis: Absent

Vascular/Lymphatic Invasion: None identified

Lobular neoplasia: None

Lymph nodes: Sentinel lymph node only

Lymph node status: Negative 0 / 4

DCIS present

Margins uninvolved by DCIS

DCIS Quantity: Estimate 2%

DCIS Type: Cribriform

DCIS Location: Associated with invasive tumor

Nuclear grade: Intermediate

Necrosis: Present

Location of CA++: Benign epithelium

**ER/PR/HER2 Results**

ER: Positive

PR: Positive

HER2: Negative by FISH

Performed on Case:

Pathological staging (pTN): pT 2 N 0

**CLINICAL HISTORY:**

Left breast carcinoma with multiple lesions on MRI surrounded primary tumor suspicious of multicentric disease

**PRE-OPERATIVE DIAGNOSIS:**

Left breast carcinoma

**ADDENDUM:**

**ONCOTYPE DX BREAST CANCER ASSAY**

RESULTS: Recurrence Score: 9

CLINICAL EXPERIENCE: Patients with a recurrence score of 9 in the clinical validation study had an average rate of Distant Recurrence at 10 years of 6%

ER Score: 10.9 Positive

PR Score: 7.8 Positive

Her2 Score: 10.1 Negative

**Interpretation:**

ER Negative < 6.5 Positive >= 6.5

PR Negative < 5.5 Positive >= 5.5

Her2 Negative <10.7 Positive >=11.5 Equivocal = 10.7 - 11.4

See separate report for further information.

Test performed at:

Gross Dictation: 1

Microscopic/Diagnostic Dictation: Pathologist

Final Review: Pathologist,

Final: Pathologist,

Addendum: Pathologist,

Addendum Final: Pathologist,

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
IPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
See Is (Circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	Date Reviewed: 1/20/10	