166-0-3

Redacted

Post Site code: breast, lower outer quadrent C50.5

COCF Site: breast, NOS C50.9

UUID:7CA117DA-5D1C-4F8B-8330-5C58FE05DE36 TCGA-E2-A159-01A-PR Re

TSS:

#### SPECIMENS:

- A. RIGHT TUBE AND OVARY
- B. UTERUS WITH LEFT TUBE, OVARY AND CERVIX
- C. SENTINEL LYMPH NODE #1 LEFT AXILLA
- D. SENTINEL LYMPH NODE #2 LEFT AXILLA
- E. SLN #3
- F. SLN #4
- G. WLE LEFT BREAST NEEDLE LOCALIZATION

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## **GROSS DESCRIPTION:**

# A. RIGHT TUBE AND OVARY

Received fresh is a 90 gm ovary and fallopian tube. There is a 7 x 5 x 4.5 cm thin walled multiloculated, translucent paratubal cyst filled with clear fluid. There are no papillary excrescences seen. Representative sections submitted for frozen section and resubmitted for permanent examination in cassette FSA1. The ovary measures 3.5 x 3 x 2 cm. The ovary is bisected to reveal pale yellow cut surface. One corpus luteum cyst is present measuring 1.5 x 0.8 x 0.7 cm. The fallopian tube measures 7.5 cm in length, 0.5 cm in diameter. Serial section through the fallopian tube to reveal unremarkable cut surface. Representative sections submitted for microscopic examination as follows:

A1: cyst

A2: section from the ovary

A3: 3 sections from the fallopian tube

A4: 2 sections from the paratubal cyst

# B. UTERUS WITH LEFT TUBE, OVARY AND CERVIX

Received in formalin is a 1,421 gm uterus with left fallopian tube and ovary. The uterus measures 19 cm from superior to inferior, 10 cm from right to left, 14 cm from anterior to posterior. The cervix measures 5.5 cm in length, 4 cm in diameter. Serosal surface is pale, smooth and glistening. Multiple leiomyomas are identified protruding from the anterior surface ranging in size from 2.5 cm in diameter to 9 x 5.5 x 4 cm. The anterior uterus is inked in blue, posterior is inked in black. The uterus is bivalved to reveal multiple leiomyomas in the myometrium and right under endometrium ranging in size from 0.7 cm in diameter to 8 cm in diameter. The endometrial cavity is distorted by the leiomyomas. The leiomyoma is serial sectioned to reveal white whorled cut surface with focal necrosis. The uterine cervix is sectioned to reveal a cystic lesion containing yellow sticky material at posterior cervix measuring 2.5 cm in diameter. The left ovary measures 3 x 2 x 1.5 cm. The left fallopian tube measures 8 cm in length and 0.6 cm in diameter. A paratubal cyst measuring 2 cm in diameter is identified with thin wall and contains clear fluid. The ovary and fallopian tube are serial sectioned to reveal unremarkable cut surface. Summary of sections submitted for microscopic examination as follows:

B1: anterior cervix

B2: posterior cervix with cyst

B3-B4: 2 sections from the anterior uterus endometrium

B5-B6: 2 sections from the posterior uterus endometrium

B7-B10: each has 2 sections from the largest leiomyoma

B11-B12: each has 2 sections from the 2nd largest leiomyoma

B13: section from left ovary including cyst

B14: 3 sections from the fallopian tube

B15-B16: each has 2 sections from the largest leiomyoma.

# C. SENTINEL LYMPH NODE #1 LEFT AXILLA

Received fresh are two tan pink lymph nodes 1.5 x 1.2 x 0.7cm and 2 x 1.5 x 1cm. The specimens are sectioned and a touch prep is taken.

C1: 1 lymph node

C2: 1 lymph node

D. SENTINEL LYMPH NODE #2 LEFT AXILLA

Received fresh is a tan pink lymph node 0.5 x 0.4 x 0.4cm. The specimen is sectioned and a touch prep is taken.

Toto D1.

E. SLN #3

Received fresh is a  $\tan pink \ lymph \ node \ 1 \times 0.5 \times 0.4 cm$ . The specimen is sectioned and a touch prep is taken. Toto E1.

F. SLN #4

Received fresh is a tan pink lymph node  $0.5 \times 0.4 \times 0.4$ cm. The specimen is sectioned. Toto F1. G. WLE LEFT BREAST NEEDLE LOCALIZATION

Received fresh labeled with the patient's identification and "left breast needle localization" is an oriented 58g,  $6.5 \times 6.5 \times 4.8 \text{cm}$  needle localized lumpectomy with radiograph. Ink code: anterior-orange, posterior-black, superior-blue, inferior-yellow, medial-green, lateral-red. Specimen is serially sectioned from medial to lateral into 7 slices revealing a 2 x 2 x 2cm tan white firm well circumscribed mass, 0.6cm from the closest posterior margin in slices 3-5. A portion of the specimen is submitted for tissue procurement. Representatively submitted:

G1: medial margin slice 1
G2-G3: next to mass slice 2
G4-G5: superior margin slice 3
G6: deep margin slice 3
G7-G8: inferior margin slice 3
G9: anterior margin slice 3
G10-G11: mass slice 3
G12-G17: slice 4
G18: mass slice 5
G19: deep margin slice 5
G20: next to mass slice 6
G21-G24: lateral margin slice 7

#### **DIAGNOSIS:**

- A. OVARY AND FALLOPIAN TUBE, RIGHT, SALPINGO-OOPHORECTOMY:
  - BENIGN OVARY.
  - FALLOPIAN TUBE WITH PARATUBAL CYST.
- B. UTERUS, OVARY AND FALLOPIAN TUBE, LEFT, HYSTERECTOMY AND SALPINGO-OOPHORECTOMY:
- WEAKLY PROLIFERATIVE ENDOMETRIUM.
- ADENOMYOSIS.
- LEIOMYOMAS, LARGEST MEASURING 9 CM.
  - BENIGN CERVIX, OVARY AND FALLOPIAN TUBE.
- C. SENTINEL LYMPH NODE #1, LEFT AXILLA, BIOPSY:
- TWO LYMPH NODES, NO TUMOR SEEN (0/2).
- D. SENTINEL LYMPH NODE #2, LEFT AXILLA, BIOPSY:
- ONE LYMPH NODE, NO TUMOR SEEN (0/1).
- E. SENTINEL LYMPH NODE #3, LEFT AXILLA, BIOPSY:
- ONE LYMPH NODE, NO TUMOR SEEN (0/1).
- F. SENTINEL LYMPH NODE #4, LEFT AXILLA, BIOPSY:
- FIBROADIPOSE TISSUE, NO LYMPH NODE OR TUMOR SEEN.
- G. BREAST, LEFT, NEEDLE LOCALIZATION WIDE LOCAL EXCISION:
   INVASIVE DUCTAL CARCINOMA, SBR GRADE 3, WITH NECROSIS,
- LYMPHOID INFILTRATE, AND FOCAL SQUAMOUS FEATURES.
  - TUMOR MEASURES 2.2 CM.
  - MARGINS, FREE OF TUMOR
- DUCTAL CARCINOMA IN SITU (DCIS), SOLID TYPE, NUCLEAR GRADE 3, MINOR COMPONENT.

SYNOPTIC REPORT - BREAST

Specimen Type: Excision
Needle Localization: Yes - For mass

Laterality: Left

Invasive Tumor: Present

Multifocality: No WHO CLASSIFICATION

Invasive ductal carcinoma, NOS 8500/3

Tumor size: 2.2cm
Tumor Site: 4:00
Margins: Negative

Distance from closest margin: Greater than 0.5cm

all margins Tubular Score: 3

Nuclear Grade: 3

Mitotic Score: 3 Modified Scarff Bloom Richardson Grade: Necrosis: Present None identified Vascular/Lymphatic Invasion: Lobular neoplasia: None Lymph nodes: Sentinel lymph node only Negative 0/4 Lymph node status: DCIS present DCIS Quantity: Estimate 5% Solid DCIS Type: DCIS Location: Associated with invasive tumor Nuclear grade: High ER/PR/HER2 Results ER: Negative PR: Negative HER2: Negative by FISH Pathological staging (pTN): pT 2 N 0

SYNOPTIC REPORT - BREAST, ER/PR RESULTS

Specimen: Surgical Excision

Block Number: G18

ER: Negative Allred Score: 0 = Proportion Score 0 + Intensity Score 0
PR: Negative Allred Score: 2 = Proportion Score 1 + Intensity Score 1

## COMMENT:

The Allred score for estrogen and progesterone receptors is calculated by adding the sum of the proportion score (0 = no staining, 1 = <1% of cells staining, 2 = 1 - 10% of cells staining, 3 = 11-30% of cells staining, 4 = 31-60% of cells staining, 5 = >60% of cells staining) to the intensity score <math>(1 = weak intensity of staining, 2 = intermediate intensity of staining, 3 = strong intensity of staining), with a scoring range from 0 to 8.

ER/PR positive is defined as an Allred score of >2 and ER/PR negative is defined as an Allred score of less than or equal to 2.

# METHODOLOGY:

Tissue was fixed in 10% neutral buffered formalin for no less than 8 and no longer than 24 hours. Immunohistochemistry was performed using the mouse anti-human ER (ER 1D5, 1:100) and PR (PGR 136, 1:100) provided by Dako

) following the manufacturer s instructions. This assay was not modified. Interpretation of the ER/PR immunohistochemical stain is guided by published results in the medical literature, information provided by the reagent manufacturer and by internal review of staining performance.

#### **CLINICAL HISTORY:**

year-old

remale G3 P3 with invasive ductal cancer of the left breast and uterine fibroid

### PRE-OPERATIVE DIAGNOSIS:

Left breast DCIS, Adnexal cyst and uterine fibroid

## INTRAOPERATIVE CONSULTATION:

FSA: Right tube and ovary: Benign cyst-defer further classification to permanent.

Diagnosis by Dr., called to Dr. at

TPC1-2/TPD/TPE: SLN #1, 2, 3, lent axilla - No tumor seen.

F. GROSS EXAMINATION: SLN #4 left axilla: No tumor seen.

Diagnosis called to Dr. at (C-F) by Dr.

#### Gross Dictation: 1

Microscopic/Diagnostic Dictation: Pathologis

Final Review: Pathologist 1

Final: Pathologist,

Oriteria	Yes	No /
Diagnosis Discrepancy		
Primary Turnor Site Discrepancy		
HPAA Discrepancy		
Prior Malignancy History		
Dual/Syrichronous Primary Auted		
Case is (circle):   QUALIFIED	/ DISCUMMED, M	
teviewer Initials Date	viewed: ////	
7,1	<del>// / / /</del> —	