

Redacted



Chief of Pathology

Phone

Fax

Patient: [REDACTED] (Continued)

Specimen: Received: Status: SOUT Req#: [REDACTED]
Spec Type: SURGICAL P Subm Dr:
GROSS DESCRIPTION (Continued)

C RECEIVED LABELED [REDACTED] RIGHT NONSENTINEL NODE #1 IS A 3.4 X 2 X 1.5 CM PORTION OF YELLOW FATTY TISSUE WHICH IS A GROSSLY FAT REPLACED LYMPH NODE SUBMITTED ENTIRELY LABELED C1 THROUGH C3.

D RECEIVED LABELED [REDACTED] RIGHT BREAST SIMPLE MASTECTOMY STITCH AT 12 O'CLOCK IS A 1,250 GRAM SIMPLE MASTECTOMY WHICH INCLUDES 4 IRREGULAR ADDITIONAL FRAGMENTS OF YELLOW-RED FATTY TISSUE IN AGGREGATE MEASURING 9 X 7 X 1 CM. THIS TISSUE IS NOT ORIENTED. THE MASTECTOMY ITSELF MEASURES 28.5 X 21 X 5 CM. THE NIPPLE IS FLATTENED AND SITS WITHIN A 26 X 13 CM SKIN ELLIPSE. THERE IS PALPABLE FIRMNESS IN THE LOWER OUTER QUADRANT. THE SUPERFICIAL ASPECT OF THE MASTECTOMY IS MARKED WITH BLUE INK, THE DEEP WITH BLACK. SECTIONING REVEALS 2 DISTINCT FIRM MASSES, ONE IN THE 12 O'CLOCK AREA AND THE 2ND CORRESPONDING TO THE PALPABLE FIRMNESS IN THE LOWER OUTER QUADRANT. THIS HAS A RIBBON CLIP AND THE 12 O'CLOCK LESION HAS A WING CLIP. THE DEEP MARGIN ASSOCIATED WITH THE LOWER OUTER QUADRANT LESION IS FIRM AND PINK-TAN FIBROUS TISSUE DOES EXTEND TOWARDS THE MARGIN BUT THE ACTUAL FIRM MASS IS GROSSLY WITHIN THE CONFINES. THE LOWER OUTER MASS MEASURES 2.5 X 2.5 X 2.5 CM. THE 12 O'CLOCK MASS IS SEPARATED BY 3 CM OF TISSUE AND MEASURES 3.5 X 2.5 X 2.5 CM IN GREATEST DIMENSION. ADDITIONAL PINK-TAN FIBROUS TISSUE IS FOUND IN THE MIDPORTION OF THE SPECIMEN WHICH IS THEN SURROUNDED BY YELLOW FATTY TISSUE. SECTIONS ARE SUBMITTED AS FOLLOWS: D1--NIPPLE, D2 AND 3--DEEP MARGIN OVER LOWER OUTER QUADRANT LESION, D4--DEEP MARGIN TO 12 O'CLOCK LESION, D5 AND 6--12 O'CLOCK LESION, D7 THROUGH D9--LONGITUDINAL SECTION OF 12 O'CLOCK LESION, D10--TISSUE BETWEEN THE 2 LESIONS, D11 AND 12--LOWER OUTER QUADRANT LESION LONGITUDINAL SECTION, D13--TUMOR LOWER OUTER QUADRANT. THE TISSUE TO THE 6 O'CLOCK MARGIN OF THE LOWER OUTER QUADRANT LESION IS NODULAR AND FOCALLY THERE IS BROWN DISCOLORATION. A SECTION IS SUBMITTED IN D14. THIS IS 1 CM FROM THE LOWER OUTER QUADRANT LESION AND 5 CM FROM THE 12 O'CLOCK LESION. OTHER NODULES DEMONSTRATE CYSTS AS A SECTION IN D15 DEMONSTRATES. D16--UPPER INNER QUADRANT (3 CM FROM 12 O'CLOCK LESION), D17--UPPER OUTER QUADRANT (5 CM FROM 12 O'CLOCK LESION), D18--LOWER OUTER QUADRANT (3 CM FROM LOWER OUTER QUADRANT LESION), D19--LOWER INNER QUADRANT (3 CM FROM LOWER OUTER QUADRANT LESION). THE SEPARATELY SUBMITTED PORTIONS OF FATTY TISSUE ARE GROSSLY UNREMARKABLE AND REPRESENTATIVE TISSUE IS SUBMITTED IN D20 AND 21.

E RECEIVED LABELED [REDACTED] RIGHT AXILLARY NODE CONTENTS IS YELLOW-RED FATTY TISSUE MEASURING 12 X 9.5 X 2.5 CM. THE TISSUE IS EXAMINED FOR LYMPH NODES. LYMPH NODES ARE IDENTIFIED AND SUBMITTED AS FOLLOWS: E1--ONE-HALF OF A FIRM NODE WITH MIRROR IMAGE SUBMITTED PER PROTOCOL, E2--1 NODE BISECTED, E3--1 NODE BISECTED (MAY ACTUALLY REPRESENT 2 IMMEDIATELY ADJACENT NODES), E4--1 NODE TRISECTED, E5--1 NODE BISECTED, E6--1 NODE BISECTED, E7--1 NODE TRISECTED, E8--3 NODES (1 BISECTED), E9--6 NODES, E10--1 NODE BISECTED.

1CD-0-3
carcinoma, infiltrating lobular NOS 8/5/20/3
Site: breast, NOS C50.9 dx 12/13/11

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Status: SOUT
Subm Dr:

Req#:

PREOPERATIVE DIAGNOSIS

RIGHT BREAST CANCER INVASIVE

OPERATION PERFORMED

DATE:

DOCTOR(S):

PROCEDURE: SENTINEL NODE BX/LYMPHADENECTOMY/SIMPLE MASTECTOMY/AXILLARY

PROCEDURE(CONT): NODE DISSECTION

TISSUE REMOVED

- A. RT SENTINEL NODE #1 - FS
- B. RT SENTINEL NODE #2 - FS
- C. RT AXILLARY NON SENTINEL NODE
- D. RT BREAST SIMPLE MASTECTOMY
- E. RT AXILLARY NODE CONTENTS

FROZEN SECTION DIAGNOSIS

- A. NEGATIVE FOR TUMOR
- B. METASTATIC CARCINOMA

GROSS DESCRIPTION

THE SPECIMEN IS RECEIVED IN 5 PARTS.

PART A IS RECEIVED DESIGNATED [REDACTED] RIGHT AXILLARY SENTINEL NODE 1 GAMMA HOT AT [REDACTED] IT IS RECEIVED IN THE FRESH STATE FOR FROZEN SECTION AND CONSISTS OF A 3.5 X 2.3 X 0.5 CM FRAGMENT OF YELLOWISH-PINK FIBROADIPOSE TISSUE WITH 2 PALPABLE NODULES MEASURING 2 X 1.2 X 0.6 CM AND 0.8 X 0.8 X 0.5 CM. EACH NODULE IS PINKISH-RED AND SECTIONING SHOWS REDDISH-PINK CROSS SECTION. ONE-HALF OF EACH IS SUBMITTED FOR FROZEN SECTION LABELED FSA. SUBSEQUENT TO THE FROZEN SECTION, THE FROZEN TISSUE IS SUBMITTED FOR PERMANENTS LABELED FSA. THE REMAINING UNFROZEN NODULES ARE SUBMITTED FOR PERMANENTS LABELED A.

PART B IS RECEIVED DESIGNATED [REDACTED] RIGHT AXILLARY SENTINEL NODE 2 GAMMA HOT/BLUE AT [REDACTED] IT IS RECEIVED IN THE FRESH STATE FOR FROZEN SECTION AND CONSISTS OF A 2.7 X 2.1 X 0.5 CM FRAGMENT OF YELLOWISH-PINK FIBROADIPOSE TISSUE WITH PALPABLE NODULE. THE NODULE IS ISOLATED AND FOUND TO MEASURE 1.7 X 1.4 X 0.5 CM. THE NODULE IS BISECTED SHOWING A REDDISH-PINK RIM SURROUNDING YELLOW ADIPOSE TISSUE WITH A GLISTENING WHITISH-TAN NODULE AT ONE MARGIN MEASURING 0.4 CM IN DIAMETER. SUBSEQUENT TO THE FROZEN SECTION, THE FROZEN TISSUE IS SUBMITTED FOR PERMANENTS LABELED FSB. THE REMAINDER OF THE NODULE IS SUBMITTED FOR PERMANENTS LABELED B.

Patient: [REDACTED]

(Continued)

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Spec Type: SURGICAL P

Subm Dr:

GROSS DESCRIPTION

(Continued)

PATH PROCEDURES

PROCEDURES:

88305, 88307/2, 88309, PATH FS /2, A BLK, B BLK, C BLK, D BLK/21, E BLK/10, FS-A, FROZ.SEC.-B

FINAL DIAGNOSIS

PART A RIGHT AXILLARY SENTINEL LYMPH NODE #1, BIOPSY: NO EVIDENCE OF MALIGNANCY. *0/1 SN*

PART B RIGHT AXILLARY SENTINEL LYMPH NODE #2, BIOPSY: METASTATIC BREAST CARCINOMA HAVING A MAXIMUM MICROSCOPIC DIMENSION OF 0.6 CM IS IDENTIFIED IN 1 LYMPH NODE EXAMINED. THERE IS NO EVIDENCE OF EXTRANODAL EXTENSION OF TUMOR. *1/1 SN*

PART C RIGHT AXILLARY NONSENTINEL LYMPH NODE, BIOPSY: NO EVIDENCE OF MALIGNANCY IN 1 LYMPH NODE EXAMINED. *0/1 AN*

PART D RIGHT BREAST, SIMPLE MASTECTOMY:

1. MULTICENTRIC INTRALOBULAR, AND INFILTRATING LOBULAR CARCINOMA OF THE PLEOMORPHIC TYPE. THE INVASIVE COMPONENT SHOWS NUCLEAR GRADE 2/3, LOW MITOTIC INDEX, AND TUBULE FORMATION 3 WITH TOTAL NOTTINGHAM SCORE OF 6. LCIS OF THE PLEOMORPHIC TYPE, NUCLEAR GRADE 2/3, AND LOW MITOTIC INDEX COMPRISES APPROXIMATELY 50% OF THE TUMOR. *ILC 3/2/1*
50% LCIS & 2 pleo
2. THE LARGEST FOCUS OF INVASIVE TUMOR MEASURES 3.5 CM IN GREATEST DIMENSION AND IS LOCATED IN THE 12 O'CLOCK PORTION OF THE BREAST. THE SECOND LARGEST MEASURES 2.5 CM AND IS SEEN IN THE LOWER OUTER QUADRANT. ADDITIONAL SMALLER FOCI OF INVASION MEASURING FROM 1 MM TO 5 MM IN GREATEST DIMENSION ARE PRESENT. LCIS IS SEEN ON 14 OF 21 BLOCKS EXAMINED HAVING A MAXIMUM CALCULATED DIMENSION OF 5.6 CM. *3.5cm 12^o*
2.5cm LOQ
3. THE MARGINS OF RESECTION AND NIPPLE SKIN ARE FREE OF TUMOR. *⊖ marg, n.p*
4. LYMPHOVASCULAR INVASION IS NOT IDENTIFIED. *-LVI*
5. PROLIFERATIVE FIBROCYSTIC CHANGES INCLUDING INTRADUCTAL PAPILLOMAS, INTRADUCTAL PAPILLOMATOSIS, MICROSCOPIC COMPLEX SCLEROSING LESIONS, ADENOSIS, APOCRINE METAPLASIA, MICROCYST FORMATION, PATCHY DENSE STROMA AND RARE LUMINAL CALCIFICATIONS. *FCC c/f*
pap
SA
AM

cat

Patient: [REDACTED]		(Continued)	
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<div style="display: flex; justify-content: space-between;"> FINAL DIAGNOSIS [REDACTED] (Continued) </div>			
<p>6. THE BIOPSY SITES () ARE PRESENT.</p> <p>PART E RIGHT AXILLA, LYMPH NODE DISSECTION: METASTATIC BREAST CARCINOMA IS IDENTIFIED IN 1 OF 16 LYMPH NODES EXAMINED. NO EVIDENCE OF EXTRANODAL EXTENSION BY TUMOR.</p> <div style="text-align: right; margin-top: 10px;">1/16</div>			
<div style="display: flex; justify-content: space-between;"> [REDACTED] CODE </div>			
<div style="display: flex; justify-content: space-between;"> 1 </div>			
Signed _____			(prelim.)
<div style="display: flex; justify-content: space-between;"> _____ Electronically signed by: _____ </div>			

Criteria	Yes	No
Diagnosis Discrepancy		/
Primary Tumor Site Discrepancy		/
HIPAA Discrepancy		/
Prior Malignancy History		/
Dual/Synchronous Primary Noted		
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	Date Reviewed: 12/13/11	