Carcinoma, infultrating ductal, NOS 8500/3 Site: breast, NOS 050.9 1/25/11 lw

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SURGICAL PATHOLOGY REPORT

Patient:

FMP/SSN:

DOB/Age/Sex:

Location:

Physician(s):

Specimen #:

Race: BLACK

Taken: Received: Reported:

UUID:964DFAC8-91EC-4C0E-8499-3ED5F2D70096 TCGA-A2-A0CQ-01A-PR Re Redacted

AMENDED

SPECIMEN:

A: RIGHT SENTINEL LYMPH NODE #1

B: LEFT SENTINEL LYMPH NODE #1 C: LEFT BREAST LUMPECTOMY

D: LEFT BREAST FINAL SUPERIOR MARGIN

E: RIGHT BREAST LUMPECTOMY

FINAL DIAGNOSIS:

- A. LYMPH NODE, RIGHT SENTINEL #1, EXCISION:
 - NEGATIVE FOR MALIGNANCY BY H&E AND CYTOKERATIN IMMUNOHISTOCHEMISTRY.
- B. LYMPH NODE, LEFT SENTINEL #1, EXCISON:
 - NEGATIVE FOR MALIGNANCY BY H&E AND CYTOKERATIN IMMUNOHISTOCHEMISTRY.
- C. BREAST, LEFT, 9:00 POSITION, NEEDLE LOCALIZATION, LUMPECTOMY:
 - PAPILLARY CARCINOMA IN-SITU WITH SURROUNDING DUCTAL CARCINOMA IN-SITU, COMEDO TYPE (SEE COMMENT).
 - TUMOR SIZE: 1.2 CM (GROSS MEASURMENT).
 - LOBULAR CARCINOMA IN-SITU, MULTIFOCAL.
 - DUCTAL CARCINOMA IN-SITU IS PRESENT LESS THAN 1.0 MM FROM SUPERIOR MARGIN (NOTE: SPECIMEN D, DESIGNATED "FINAL SUPERIOR MARGIN" IS NEGATIVE FOR TUMOR).
 - MICROCALCIFICATIONS IDENTIFIED IN DUCTAL CARCINOMA IN-SITU AND BENIGN BREAST TISSUE.
- D. BREAST, LEFT, FINAL SUPERIOR MARGIN, EXCISON:
 - BENIGN BREAST TISSUE.
 - NEGATIVE FOR MALIGNANCY.
- E. BREAST, RIGHT, 6:00 POSITION, NEEDLE LOCALIZATION, LUMPECTOMY:
 - INFILTRATING DUCTAL ADENOCARCINOMA, MODERATELY DIFFERENTIATED BY COMBINED NUCLEAR-HISTOLOGIC GRADE.
 - MAXIMUM TUMOR DIMENSION 1.8 CM (INVASIVE COMPONENT, MICROSCOPIC MEASUREMENT).
 - ASSOCIATED PAPILLARY CARCINOMA AND DUCTAL CARCINOMA IN-SITU, NUCLEAR GRADE 2 WITH NECROSIS.
 - LOBULAR CARCINOMA IN-SITU, MULTIFOCAL.

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Patient:

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FINAL DIAGNOSIS (continued):

- INVASIVE CARCINOMA INVOLVES THE SUPERIOR MARGIN, IS LESS THAN 1.0 MM FROM THE ANTERIOR MARGIN, AND IS 1.5 MM FROM THE POSTERIOR MARGIN.
- INTRADUCTAL PAPILLARY CARCINOMA IS PRESENT LESS THAN 1.0 MM FROM THE POSTERIOR MARGIN.
- MICROCALCIFICATIONS IDENTIFIED IN DUCTAL CARCINOMA IN-SITU AND BENIGN BREAST TISSUE.
- AJCC STAGE: pT1 pNO(i-) MX.

COMMENT:

On interdepartmental review, slide C4 (left breast) shows an area suspicious for invasive, micropapillary carcinoma. The size of this focus is 1.7mm. was notified of this amended diagnosis on

HRS by I at

Report Electronically Signed Out **

CLINICAL DIAGNOSIS AND HISTORY:

year-old female status post core biopsies, bilateral breast consistent with, on the right, infiltrating ductal carcinoma; on the left DCIS with cribiform features.

GROSS DESCRIPTION:

- A. RIGHT SENTINEL LYMPH NODE #1 Received fresh, labeled with the patient's name, designated "RIGHT SENTINEL LYMPH NODE #1". The specimen consists of a piece of fatty tissue, 3.0 cm x 1.7 cm x 0.2 cm, containing a 1.2 cm lymph node. A small portion of this node is submitted for the CBCP protocol.
- B. LEFT SENTINEL LYMPH NODE #1 Received fresh, labeled with the patient's name, designated "LEFT SENTINEL LYMPH NODE #1". The specimen consists of a 1.2 cm lymph node. A small portion is submitted for the CBCP protocol.
- C. LEFT BREAST LUMPECTOMY Received fresh, labeled with the patient's name, designated "LEFT BREAST LUMPECTOMY 9:00 POSITION (NEEDLE LOCALIZATION) ". The specimen consists of a piece of fatty tissue, 9.8 cm x 5.0 cm x 1.4 cm with an overlying ellipse of brown skin, 2.4 cm x 0.3 cm. A needle localization wire is in place and enters the specimen anteriorly,

SURGICAL PATHOLOGY REPORT

Patient:

Specimen #:

GROSS DESCRIPTION (continued):

through the skin. The accompanying radiograph is reviewed and shows a well-defined density anteriorly. The specimen is oriented with sutures and inked as follows: Yellow=medial, red=lateral, blue=superior, green=superior, black=posterior. Sectioning anterior to posterior reveals a well-defined, 1.2 cm tan, friable lesion with focal cavitation and hemorrhage anteriorly. Two sections of this lesion, as well as a section of skin and grossly normal fibrofatty tissue are submitted for the CBCP protocol (matching paraffin sections=C2-C4, C1, and C5 respectively). Sections are submitted from anterior to posterior.

Slide key: C1: Skin. C2-C4: Tumor. C5: Representative normal. C6-C7: Single representative section. C8-C10: Single representative section. C11-C12: Single representative section. C13: Single representative section. C14-C16: Single representative section. C11-C16 sections through the area sampled for CBCP protocol. C17-C18: Representative section. C20-21: Representative sections. C22: Cassette not submitted. C23-25: Representative sections.

- D. LEFT BREAST FINAL SUPERIOR MARGIN Received fresh, labeled with the patient's name, designated "LEFT BREAST FINAL SUPERIOR MARGIN". The unorientated specimen consists of a 4.5 cm x 2.1 cm x 0.5 cm fatty tissue fragment. Serial sectioning reveals abundant yellow adipose tissue admixed with a moderate amount of white, dense, interdigitating fibrous tissue. One side is arbitrarily inked in black.
- E. RIGHT BREAST LUMPECTOMY Received fresh, labeled with the patient's name, designated "RIGHT BREAST LUMPECTOMY 6:00". The specimen consists of a piece of fatty tissue, 8.5 cm x 4.5 cm x 2.8 cm impaled with a needle localization wire. A radiograph accompanies the specimen and shows a well-defined mass. The specimen is oriented with sutures; per discussion with Dr the long stitch indictates lateral and the short stitch superior. Ink code: Red=medial and lateral, blue=superior, green=inferior, yellow=anterior, black=posterior. On sectioning, the specimen reveals a firm, well-defined, tan tumor, 2.2 cm in greatest dimension, closely approximating the black inked margin. A portion of the tumor appears tan and friable. One section of tumor and one section of fibrofatty tissue is submitted for CBCP protocol (matching paraffin sections-E1 and E2 respectively).

Slide key: E1: Tumor. E2: Rest of the fibrofatty tissue. E3-E6: Single

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Patient:

Specimen #:

GROSS DESCRIPTION (continued):

representative sections medial to lateral. E7-E10: Mass. E11-E13: Sections through area of E1 mass. E14-E16: Single section of adjacent mass. E17-E19: Single section of adjacent mass. E20: Representative section. E21: Lateral portion. 21CF

Criteria

Diagnosis Discrepancy

Primary Tumor Site Discrepancy

HIPAA Discrepancy

Prior Malignancy History

Dual/Synchronous Primary Noted

Case is (circle):

Reviewer Initials

Date Reviewed:

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