

Clinical Diagnosis & History:

Left breast palpable mass biopsy showed inf. ductal carcinoma.

Specimens Submitted:

- 1: SP: Sentinel node left axilla (fs)
- 2: SP: Left breast lumpectomy
- 3: SP: Superior margin, left breast
- 4: SP: Medial margin, left breast
- 5: SP: Inferior margin, left breast
- 6: SP: Lateral margin, left breast
- 7: SP: Posterior pectoral fascia margin, left breast

DIAGNOSIS:

- 1) LYMPH NODE, SENTINEL NODE, LEFT AXILLA; RESECTION:
 - FOUR BENIGN LYMPH NODES (0/4).
 - ADDITIONAL DEEPER LEVELS AND IMMUNOSTAINS FOR CYTOKERATINS (AE1:AE3) ARE PENDING AND THE RESULTS WILL BE REPORTED IN AN ADDENDUM.
- 2) BREAST, LEFT; EXCISION:
 - INVASIVE DUCTAL CARCINOMA, NOS TYPE, HISTOLOGIC GRADE III/III (SLIGHT OR NO TUBULE FORMATION), NUCLEAR GRADE III/III (MARKED VARIATION IN SIZE AND SHAPE), MEASURING 1.7 CM IN LARGEST DIMENSION MICROSCOPICALLY (GROSSLY THE TUMOR IS MEASURED AT 1.9CM).
 - SCANT HIGH GRADE DUCTAL CARCINOMA IN SITU (DCIS) IS ADMIXED WITH INVASIVE CARCINOMA.
 - NO CALCIFICATIONS ARE IDENTIFIED IN EITHER THE INVASIVE OR IN SITU COMPONENT.
 - NO VASCULAR INVASION IS NOTED.
 - FOR SURGICAL MARGIN STATUS PLEASE SEE PARTS 3-7.
 - THE NON-NEOPLASTIC BREAST TISSUE SHOWS BIOPSY SITE CHANGES.
 - RESULTS OF SPECIAL STAINS (ER, PR, HER2-NEU) WILL BE REPORTED IN AN ADDENDUM.
- 3) BREAST, LEFT SUPERIOR MARGIN; EXCISION:
 - BENIGN BREAST PARENCHYMA.
- 4) BREAST, LEFT MEDIAL MARGIN; EXCISION:
 - BENIGN BREAST WITH FIBROADENOMATOUS CHANGES.

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UUID:8468518E-3D24-46F8-A68E-CE822C7D8F62
TCGA-AO-A0J4-01A-PR

Redacted



1

1CD-0-3

carcinoma, infiltrating duct, NOS 8500/3
Site: breast, NOS C50.9 bw 10/22/11

Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HPAA Discrepancy		<input checked="" type="checkbox"/>
Site: Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary Noted		<input checked="" type="checkbox"/>
Case is (circle):	ELIGIBLE	DISQUALIFIED
Reviewer Initials	bw 10/22/11	

- Page 2 of 6
- 5) BREAST, LEFT INFERIOR MARGIN; EXCISION:
- BENIGN BREAST PARENCHYMA.
 - 6) BREAST, LEFT LATERAL MARGIN; EXCISION:
- BENIGN BREAST PARENCHYMA.
 - 7) BREAST, LEFT POSTERIOR PECTORAL FASCIA MARGIN; EXCISION:
- BENIGN BREAST PARENCHYMA.
- SKELETAL MUSCLE TISSUE.

I ATTEST THAT THE ABOVE DIAGNOSIS IS BASED UPON MY PERSONAL EXAMINATION OF THE SLIDES (AND/OR OTHER MATERIAL), AND THAT I HAVE REVIEWED AND APPROVED THIS REPORT.

*** Report Electronically Signed Out ***

Gross Description:

M.D.

I.D.

1) The specimen is received fresh for frozen section labeled, "Sentinel node left axilla", and consists of four lymph nodes measuring 1.2 to 1.8 cm in greatest dimension. All lymph nodes are bisected and entirely submitted.

Summary of sections:

FscA, fscB, fscC, fscD -- lymph node frozen section control

2.) The specimen is received fresh, labeled "Left breast lumpectomy" and consists of an unoriented, previous incised, 3.7 x 2.2 x 1.9 cm, piece of fibrofatty breast tissue. The specimen is entirely inked black. Serial sectioning reveals a previously biopsied, 1.9 x 1.8 x 1.5 cm, firm, smooth nodular bordered, pink-white mass, located 0.2 cm with inked resection margin. The mass is partially surrounded by a 2.5 x 1.8 x 1.2 cm area of mildly dense, focally nodular, pink-white fibrous tissue. The remaining breast parenchyma consists of lobules of yellow adipose. A portion of tumor has previously been submitted to TPS. The remaining specimen is representatively submitted.

2

Summary of sections:

MT - tumor and closest tissue edge

FFT -- full face of tumor

T - tumor

RS -- present in sections of remaining fibrous tissue

.A.

3). The specimen is received fresh, labeled "superior margin left breast" and consists of a piece of fibrofatty breast tissue measuring 2.6 x 2.6 cm, and 0.6 cm thick. A stitch marks the new margin of excision, which is inked black. The tissue is serially sectioned and entirely submitted.

** Continued on next page **

Summary of sections:
SS - sequential sections

4). The specimen is received fresh, labeled "medial margin left breast" and consists of a piece of fibrofatty breast tissue measuring 3 x 1.8 cm, and 0.9 cm thick. A stitch marks the new margin of excision, which is inked black. The tissue is serially sectioned and entirely submitted.

Summary of sections:
SS - sequential sections

5). The specimen is received fresh, labeled "inferior margin left breast" and consists of a piece of fibrofatty breast tissue measuring 2.5 x 2.2 cm, and 0.8 cm thick. A stitch marks the new margin of excision, which is inked black. The tissue is serially sectioned and entirely submitted.

Summary of sections:
SS - sequential sections

6). The specimen is received fresh, labeled "lateral margin left breast" and consists of a piece of fibrofatty breast tissue measuring 3.5 x 3.2 cm, and 1 cm thick. A stitch marks the new margin of excision, which is inked black. The tissue is serially sectioned and entirely submitted.

Summary of sections:
SS - sequential sections

7). The specimen is received fresh, labeled "posterior pectoral fascia margin left breast fresh" and consists of a piece of fibrofatty breast tissue measuring 2.6 x 1.6 cm, and 0.7 cm thick. A stitch marks the new margin of excision, which is inked black. The tissue is serially sectioned and entirely submitted.

Summary of sections:
SS - sequential sections

Summary of Sections:

Part 1: SP: Sentinel node left axilla (fs)

Block	Sect.	Site	PCs
1		fscA	2

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1	fscB	2
1	fscC	2
1	fscD	2

Part 2: SP: Left breast lumpectomy

Block	Sect.	Site	PCs	
1		FFT		1
1		MT		1
2		RS		4
3		T		5

Part 3: SP: Superior margin, left breast

Block	Sect.	Site	PCs	
4		SS		7

Part 4: SP: Medial margin, left breast

Block	Sect.	Site	PCs	
4		SS		8

Part 5: SP: Inferior margin, left breast

Block	Sect.	Site	PCs	
5		SS		7

Part 6: SP: Lateral margin, left breast

Block	Sect.	Site	PCs	
6		SS		8

Part 7: SP: Posterior pectoral fascia margin, left breast

Block	Sect.	Site	PCs	
3		SS		7

4

Procedures/Addenda:

Addendum

Date Ordered:

Date Complete:

Date Reported:

Status: Signed Out

By: M.D.

Addendum Diagnosis

PART #2

LEFT BREAST:

Immunohistochemical stains were performed on formalin-fixed tissue with the following results for invasive carcinoma (block 2):

ESTROGEN RECEPTOR

0% nuclear staining

PROGESTERONE RECEPTOR

0% nuclear staining

HER2 (

** Continued on next page **

Negative (0)

Page 5 of 6

(0% of invasive tumor cells exhibit complete membranous staining;
Uniformity of staining: absent;
Homogeneous, dark circumferential pattern: absent)

Comment: Controls are satisfactory.

PATHWAY anti-HER-2/neu is an FDA-approved rabbit monoclonal primary antibody (clone 4B5) directed against the internal domain of the c-erbB-2 oncoprotein (HER2) for immunohistochemical detection of HER2 protein overexpression in breast cancer tissue routinely processed for histologic evaluation. The HER2 test results are reported in accordance with the ASCO/CAP guideline recommendations for HER2 testing in breast cancer (J Clin Oncol 2007; 25(1):118-145). The ER and PR rabbit monoclonal antibodies are also FDA approved.

1. SENTINEL LYMPH NODE(S), LEFT AXILLA (PART 1)

Additional H/E stained sections and immunohistochemical stains for cytokeratins (AE1:AE3) show no evidence of metastatic tumor.

Some of the immunohistochemistry and ISH tests were developed and their performance characteristics were determined by They have not been cleared or approved by the US Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. These tests are used for clinical purposes. They should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA '88) as qualified to perform high complexity clinical laboratory testing.

M.D.

5

Intraoperative Consultation:

Note: The diagnoses given in this section pertain only to the tissue sample examined at the time of the intraoperative consultation.

1) FROZEN SECTION DIAGNOSIS: SP: SENTINEL NODE LEFT AXILLA (FS):
BENIGN LYMPH NODES
PERMANENT DIAGNOSIS: SAME.

D

Note: The diagnoses given in this section pertain only to the tissue sample examined at the time of the intraoperative consultation.

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----- Page 6 of 6
1) FROZEN SECTION DIAGNOSIS: SP: SENTINEL NODE LEFT AXILLA (FS):
BENIGN LYMPH NODES)
PERMANENT DIAGNOSIS: SAME.

pg. 6

** End of Report **