

Carcinoma, infiltrating ductal, NOS 8500/3
Site: breast, NOS C50.9

1/25/11 *fw*

Surgical Pathology

Surg Path

UUID:506BFD3B-240B-440E-B7A0-E596FC0B7F72
TCGA-B6-A0WV-01A-PR

Redacted



CLINICAL HISTORY:

S/P tru cut biopsy of 3.5 cm breast self detected lesion. Moderately differentiated NSABP II, grade adenocarcinoma. Breast carcinoma.

GROSS EXAMINATION:

A. "Right breast mass", in formalin. A 4 x 3 x 1.5 cm piece of yellow-white fibrofatty breast tissue containing a 3.5 x 3 x 2 cm firm, gritty, white-pink, infiltrating tumor. Margins are not an issue for this specimen per Dr.

therefore, the specimen is not inked. Representative sections of the tumor are submitted in Blocks A1-A3.

B. "Right breast", unfixed. A 22 x 15 x 5 cm mastectomy specimen with axillary tail. The breast has a 19 x 13 cm skin ellipse containing nipple and areola with a 6 cm long horizontal sutured biopsy site located directly above the nipple. The external surface of the breast is inked in black.

The skin surface, nipple and areola are grossly unremarkable.

Cross sectioning through the breast specimen reveals a soft yellow-white fibrofatty breast parenchyma along with an 8 x 6 x 5 cm hollow biopsy cavity running in a horizontal direction beneath the nipple which is lined by pink, thin, smooth, membranous tissue. No residual tumor is identified. The edges of the biopsy cavity lie 3 cm, 1 cm, 7 cm and 7 cm from the superior, deep/posterior and inferior inked tissue margins. No other lesions are noted.

BLOCK SUMMARY:

- B1 representative section of nipple.
- B2 biopsy cavity and corresponding inked deep/posterior surface.
- B3-B4 additional sections of biopsy cavity.
- B5-B6 representative sections of upper lateral portion of breast.
- B7-B8 representative sections of lower lateral portion of breast.
- B9-B10 representative sections of upper medial portion of breast.
- B11-B12 representative sections of lower medial portion of breast.
- B13 1 bisected lymph node candidate from most medial portion of axillary tail.
- B14 2 lymph node candidates from most medial portion of axillary tail.
- B15 3 lymph node candidates from the middle portion of the axillary tail.
- B16 2 lymph node candidates from the middle portion of the axillary tail.
- B17 1 bisected lymph node candidate from the middle portion of the axillary tail.
- B18 2 lymph node candidates from the middle portion of the axillary tail.
- B19 2 lymph node candidates from the most lateral portion of axillary tail.

Dr.

DIAGNOSIS:

A. "RIGHT BREAST", (BIOPSY):

INFILTRATING DUCTAL CARCINOMA

3.5 X 3 X 2

NSABP HISTOLOGIC GRADE 2 OF 3, NUCLEAR GRADE MODERATELY DIFFERENTIATED.
VASCULAR INVASION IDENTIFIED.

B. "RIGHT BREAST", (MASTECTOMY WITH AXILLARY TAIL):

BREAST:

NO RESIDUAL CARCINOMA.

BENIGN PROLIFERATIVE CHANGES, INCLUDING EPITHELIAL HYPERPLASIA OF USUAL TYPE AND BLUNT DUCT ADENOSIS.

RECENT BIOPSY CAVITY WITH NO EVIDENCE OF MALIGNANCY.

Criteria	Yes	No
Diagnosis Discrepancy		X
Primary Tumor Site Discrepancy		X
HIPAA Discrepancy		X
Prior Malignancy History		X
Dual/Synchronous Primary Noted		
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	<i>MB</i>	Date Reviewed: <i>2/16/12</i>

SKIN AND NIPPLE WITH NO HISTOLOGIC ABNORMALITY.

AXILLARY LYMPH NODES

METASTATIC CARCINOMA IN 4 OF 7 LYMPH NODES.

EXTRACAPSULAR SPREAD PRESENT.

LARGEST LYMPH NODE 2.1 CM.

Verified by:

M.D. Pager ID#

Date Signed:

COMMENT: