

Sample #

14D-0-3

Carcinoma, infiltrating
duct NOS 850013

Site @ Breast NOS
C50.9

JW 8/2/13

FINAL PATHOLOGIC DIAGNOSIS

A. Right axillary sentinel node #1:

- One lymph node, negative for metastatic carcinoma (0/1)

B. Right axillary sentinel node #2:

- One lymph node, negative for metastatic carcinoma (0/1)

UUID: 217745AA-6C5A-46C5-AC04-1C6581A96A04
TCGA-OL-A6VR-01A-PR

Redacted



C. Right breast simple mastectomy:

- Invasive ductal carcinoma, SBR grade I, with micropapillary features, see comment.
- Ductal carcinoma in situ, intermediate nuclear grade, cribriform, papillary and micropapillary type, associated with microcalcifications and necrosis.
- Margins of excision are negative for invasive carcinoma, DCIS is 1.5 mm from the anterior-inferior margin.
- Previous biopsy site identified.
- Fibroadenoma.
- Intraductal hyperplasia, usual type.
- Apocrine metaplasia.
- Sclerosing adenosis, focally associated with microcalcification.
- Microcalcifications in benign ductules.

Breast Pathologic Parameters

1. Invasive carcinoma:

A. Microscopic measurement: 6 mm (main lesion) and 3.2 mm (satellite)

B. Composite histologic (modified SBR) grade: I

- Architecture: 2

- Nuclear grade: 2

- Mitotic count: 1

C. Associated intraductal carcinoma in situ (DCIS):

- Within main mass (forming 95% of tumor volume)

- Extending away from main mass

2. Intraductal carcinoma:

A. Microscopic measurement: 3.6 cm (medial to lateral), and extending towards nipple, inferior and central aspect of breast

B. Type: Cribriform / Papillary / Micropapillary

C. Nuclear grade: Low / Intermediate

D. Associated features: Necrosis / Microcalcifications / Cancerization of lobules

3. Excisional biopsy margins: Free of tumor

- DCIS 1.5 mm from anterior-inferior (closest) margin

- Invasive carcinoma > 10 mm from anterior-inferior (closest) margin

4. Blood vessel and lymphatic invasion: Absent

5. Nipple: DCIS extending towards lactiferous duct

6. Skin: uninvolved

7. Skeletal muscle: absent

8. Axillary lymph nodes: Negative (0/2)

9. Special studies:

- ER: Strong expression in 30 % of invasive tumor nuclei
- PR: Strong expression in >90 % of invasive tumor nuclei
- Her2/neu antigen (FISH): pending

10. pTNM (AJCC, 7th edition, 2010): pT1b(m), N0(sn), Mx

Effective January 1, 2010 this Checklist utilizes the 7th edition TNM staging system for breast of the American Joint Committee on Cancer (AJCC) and the International Union Against Cancer (UICC).

Clinical History:

The patient is a -year-old female with recent breast cancer (DCIS) undergoing

*PM-TSS - OK - part of this tumor process.
BGR*

a right breast simple mastectomy and right breast sentinel lymph node biopsy.

Comment

Immunohistochemical stain for p63 supports absence of a myoepithelial cell layer.

Specimens Received:

A: Right axillary sentinel node #1

B: Right axillary sentinel node #2

C: Right breast simple mastectomy

Gross Description:

The specimens are received in three containers each labeled with the patient's name and medical record number.

Site	W 7/19/13	Yes	No
Diagnostic Discrepancy			✓
Primary Tumor Site Discrepancy			✓
IPAA Discrepancy			✓
Metastatic Malignancy History			✓
Test/S, not on as Primary			✓
Use in ()	QUALIFIED	DISQUALIFIED	
Reviewed by	W 7/19/13		