

Patient: [REDACTED]

 UID: 98C704DE-0914-49F1-80F9-36CFE52B8484
 TCGA-B6-A402-01A-PR

Redacted

AP Surgical Pathology:

Surg Path



Criteria	Yes	No
Significance Discrepancy		
Primary Tumor Site Discrepancy		
PAA Discrepancy		
or Malignancy History		
Local/Synchronous Primary Noted		
Case is Circumferential		
Reviewer Initials	[Signature]	
Date Reviewed	6/23/12	
QUALIFIED / DISQUALIFIED	[Initials]	

CLINICAL HISTORY:

Palpable 8:00 mass, rule out malignancy. If invasive carcinoma, please obtain ER, PR, EGFR, HER2/Neu by immunohistochemistry; for all 2+ IHC results please do FISH analysis.

GROSS EXAMINATION:

A. "USNCB right breast, three cores, 8:00 region", received in formalin is a 2.1 x 0.2 x 0.1 cm aggregate of fibrofatty needle core tissue fragments are submitted entirely in a mesh bag in block A1.

MICROSCOPIC EXAMINATION:

Microscopic examination is performed.

DIAGNOSIS:

A. "USNCB RIGHT BREAST, THREE CORES, 8:00 REGION" (ULTRASOUND GUIDED NEEDLE CORE BIOPSY):

INVASIVE ADENOCARCINOMA OF THE BREAST.

HISTOLOGIC TYPE: DUCTAL.

NOTTINGHAM COMBINED HISTOLOGIC GRADE: 3 OF 3.

TUBULE FORMATION SCORE: 3.

NUCLEAR PLEOMORPHISM SCORE: 3.

MITOTIC RATE SCORE: 3.

IN-SITU CARCINOMA: NOT IDENTIFIED.

VASCULAR INVASION: ABSENT.

CALCIFICATION: PRESENT.

ESTROGEN/PROGESTERONE RECEPTOR, HER2/NEU, AND EGFR ANALYSIS: PENDING.

PARAFFIN BLOCK NUMBER: A1.

RESULTS WILL BE ISSUED IN AN ADDENDUM.

I certify that I personally conducted the diagnostic evaluation of the above specimen(s) and have rendered the above diagnosis(es).

Electronically signed: [Signature]

ADDENDUM 1:

Please see tests.

for results of supplementary

I certify that I personally conducted the diagnostic evaluation of the above specimen(s) and have rendered the above diagnosis(es).

Electronically signed: [Signature]

Performed by: [Signature]

Attending MD: [Signature]

Ordering MD: [Signature]

ICD-O-3

carcinoma, infiltrating ductal NOS
8500/3

Site: breast, NOS C50.9 7-2-12 RD