1CD-0-3 Carcinoma, infaltrating ductal, NOS 8500/3 gitz: breat, NOS C50.9 1/27/11 for -

SURGICAL PATHOLOGY REPORT

Name:

Lab No.:

Sex:

F

Date Collected:

Age:

Date Received:

Doctor:

M.R. No.:

Room No:

Hosp.No:

CLINICAL HISTORY:

PREOPERATIVE DIAGNOSIS: Right Breast Cancer

POSTOPERATIVE DIAGNOSIS:

OPERATION: Lumpectomy Right Breast, Right Sentinel Lymph Node Biopsy

SPECIMEN: A) Right Breast Mass – 1 Short Anterior – 2 Short Superior – 1 Long Medial, B) Sentinel Node #1 F.S., C) Sentinel Node #2 F.S., D) Axillary Contents E) Gross Margin Additional Inferior Margin Right Breast Mass suture New Inferior Margin

FROZEN SECTION DIAGNOSIS:

- A) GROSS MARGINS: VERY CLOSE (LESS THAN 1 MM), TO INFERIOR MARGIN.
- B) SENT LYMPH NODE #1 POSITIVE FOR METASTATIC CARCINOMA.
- C) SENT LYMPH NODE #2 POSITIVE FOR METASTATIC CARCINOMA.



Name:

F

Lab No.:

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FINAL DIAGNOSIS:

A) RIGHT BREAST TISSUE - POORLY DIFFERENTIATED
INFILTRATING DUCTAL CARCINOMA.
SCARFF-BLOOM-RICHARDSON GRADE III/III.
THE TUMOR MEASURES 3.5 CM. IN MAXIMUM DIMENSION AND
FOCALLY CLOSE TO ANTERIOR AND POSTERIOR SURGICAL
MARGINS, (LESS THAN 1 MM.), SLIDES #5 AND #6.
THE REMAINING SURGICAL MARGINS ARE FREE OF THE
LESION.
LYMPHOVASCULAR INVASION IS IDENTIFIED.
MICROCALCIFICATIONS ARE IDENTIFIED.

- B) SENTINEL LYMPH NODE ONE (1) POSITIVE LYMPH NODE, (1/1).
- C) SENTINEL LYMPH NODE ONE (1) POSITIVE LYMPH NODE, (1/1).
- D) AXILLARY CONTENTS 2 OF 13 LYMPH NODES ARE POSITIVE FOR MALIGNANCY, (2/13).
- E) ADDITIONAL RIGHT BREAST TISSUE NEGATIVE FOR MALIGNANCY.

PTNM CLASSIFICATION: PIIIa, T2, N2, MX.

PATHOLOGIST

	Yes	No
Criteria		//
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HIPAA Discrepancy		-+
Prior Malignancy History	↓	+-~/
Dual/Synchronous Primary/Noted		
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Revie wer Initials Date Reviewed:	#15	
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