

PATIENT HISTORY:

The patient is a year-old woman with a core biopsy in ~~right breast~~ showing infiltrating ductal carcinoma, mucinous type, nuclear grade 1 (ER and PR positive, and HER-2/neu negative). 12/15/10 per

PRE-OP DIAGNOSIS: Right breast cancer; postmenopausal bleeding.

POST-OP DIAGNOSIS: Same.

PROCEDURE: Right total mastectomy, sentinel node biopsy, hysteroscopy, D&C.

CQCF: breast, NOS C50.9

FINAL DIAGNOSIS:

PART 1: BREAST, RIGHT, TOTAL MASTECTOMY -

- A. MULTIFOCAL INFILTRATING DUCTAL CARCINOMA, MUCINOUS TYPE, INVOLVING THE LOWER INNER QUADRANT.
- B. THE TWO FOCI OF INVASIVE CARCINOMA ARE BOTH 1.5 CM IN GREATEST DIMENSION.
- C. NOTTINGHAM SCORE 4 (TUBULE FORMATION, 2; NUCLEAR PLEOMORPHISM, 1; MITOTIC INDEX 1).
- D. DUCTAL CARCINOMA IN SITU (DCIS), SOLID TYPE, NUCLEAR GRADE 1.
- E. DCIS CONSTITUTES APPROXIMATELY 15% OF THE TUMOR MASS.
- F. NO ANGIOLYMPHATIC INVASION IS IDENTIFIED.
- G. SURGICAL MARGINS FREE OF CARCINOMA.
- H. PREVIOUS BIOPSY SITE IS IDENTIFIED.
- I. BENIGN BREAST TISSUE.
- J. SKIN AND NIPPLE NOT REMARKABLE.
- K. ONE LYMPH NODE NEGATIVE FOR CARCINOMA (0/1).

PART 2: RIGHT AXILLA, SENTINEL LYMPH NODE#1, BIOPSY -
ONE LYMPH NODE NEGATIVE FOR MALIGNANCY (0/1).

PART 3: ENDOCERVIX, CURETTAGE -

- A. RARE BENIGN ENDOCERVICAL CELLS AND MUCUS.
- B. NEGATIVE FOR ATYPIA OR CARCINOMA.

PART 4: ENDOMETRIUM, CURETTAGE -

- A. SCANT BENIGN ENDOMETRIUM WITH MUCUS AND CELL DEBRIS (Cross refer.
- B. NEGATIVE FOR ATYPIA OR CARCINOMA.

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TCGA-BH-A18S-01A-PR



COMMENT:

Estrogen and progesterone receptors and HER2/neu, performed on the previous core biopsy reported as follows:
ER positive, PR positive, HER-2/neu negative (score 1+).

were

| Criteria | Yes | No |
|----------------------------------|-----------------------------|----|
| Diagnosis Discrepancy | | |
| Primary Tumor Site Discrepancy | | |
| HIPAA Discrepancy | | |
| Prior Malignancy History | | |
| Dual/Synchronous Primary Nodules | | |
| Case is (circle): | | |
| Reviewer Initials: <i>MS</i> | Date Reviewed: <i>10/11</i> | |