FINAL DIAGNOSIS: PART 1: BREAST, RIGHT, SEGMENTAL MASTECTOMY AT 10 O'CLOCK -A. INVASIVE DUCTAL CARCINOMA, NO SPECIAL TYPE, WITH ABUNDANT CALCIFICATIONS. NOTTINGHAM GRADE 2 (TUBULE FORMATION: 2, NUCLEAR PLEOMORPHISM: 2, MITOTIC ACTIVITY: 2; TOTAL SCORE = 6/9). THE INVASIVE TUMÓR MEASURES 1.8 CM IN LARGEST DIMENSION. D. DUCTAL CARCINOMA IN SITU, NUCLEAR GRADE 2, CRIBRIFORM TYPE WITH CALCIFICATIONS. E. THE DUCTAL CARCINOMA IN SITU CONSTITUTES 5% OF THE TOTAL TUMOR VOLUME AND IS PRESENT ADMIXED WITH THE INVASIVE COMPONENT. LYMPHOVASCULAR SPACE INVASION IS NOTED. F. G. RESECTION MARGINS ARE NEGATIVE FOR CARCINOMA. H. INVASIVE CARCINOMA IS 0.1 CM FROM THE NEAREST (ANTERIOR) MARGIN AND IS 0.2 CM FROM THE POSTERIOR MARGIN (PLEASE SEE PART #2 FOR NEW ANTERIOR MARGIN). THE NON-NEOPLASTIC BREAST SHOWS FIBROCYSTIC CHANGES AND COLUMNAR CELL CHANGES. ١. PREVIOUS BIOPSY SITE CHANGES. THE INVASIVE TUMOR CELLS ARE POSITIVE FOR ESTROGEN RECEPTORS (H SCORE OF 200), PROGESTERONE RECEPTOR (H SCORE OF 290) AND NEGATIVE FOR HER-2 AS PER PREVIOUS **PATHOLOGY REPORT** PART 2: BREAST, RIGHT, NEW ANTERIOR MARGIN, RE-EXCISION -BENIGN BREAST TISSUE. PART 3: LYMPH NODES, RIGHT AXILLA, SENTINEL #1, EXCISION -A. METASTATIC CARCINOMA INVOLVING ONE OF TWO LYMPH NODES (1/2). B. THE METASTATIC FOCUS MEASURES 0.1 CM IN LARGEST DIMENSION. C. NO EXTRACAPSULAR EXTENSION IS IDENTIFIED. Carcinoma, infrittrating ductal, Nos 8500/3 Site: breast, NOS C50,9 3/13/11 lu PART 4: LYMPH NODES, RIGHT AXILLA, SENTINEL #2, EXCISION -THREE I YMPH NODES, NEGATIVE FOR METASTATIC TUMOR (1/1/3) CASE SYNOPSIS: SYNOPTIC - PRIMARY INVASIVE CARCINOMA OF BREAST LATERALITY: Right Segmental PROCEDURE: Upper outer quadrant LOCATION: SIZE OF TUMOR: Maximum dimension invasive component: 1.8 cm **MULTICENTRICITY/MULTIFOCALITY OF INVASIVE FOCI:** No TUMOR TYPE (invasive component): Ductal adenocarcinoma, NOS **NOTTINGHAM SCORE:** Nuclear grade: 2 Tubule formation: 2 Mitotic activity Total Nottingham score: 6 Nottingham grade (1, 2, 3): 2 ANGIOLYMPHATIC INVASION: Yes **DERMAL LYMPHATIC INVASION:** Not applicable CALCIFICATION: Yes, malignant zones TUMOR TYPE, IN SITU: Cribriform SURGICAL MARGINS INVOLVED BY INVASIVE COMPONENT: UUID: C9AD69EB-506A-4442-B1C2-C8F09B519CB2 TCGA-BH-A0HO-01A-PR Re No Redacted SURG MARGINS INVOLVED BY IN SITU COMPONENT: No LYMPH NODES POSITIVE: 1 LYMPH NODES EXAMINED: 5 METHOD(S) OF LYMPH NODE EXAMINATION: H/E stain, Keratin stain SENTINEL NODE METASTASIS: SIZE OF NODAL METASTASES: Diameter of largest lymph node metastasis: 1 mm

LYMPH NODE METASTASIS(-ES) WITH EXTRACAPSULAR EXTENSION: Νo

NON-NEOPLASTIC BREAST TISSUE: FCD

pT1c T STAGE, PATHOLOGIC: N STAGE, PATHOLOGIC: pNX **M STAGE, PATHOLOGIC:** pMX **ESTROGEN RECEPTORS:** positive **PROGESTERONE RECEPTORS:** positive HER2/NEU:

Primary Tumor Site Discrepancy
HIPAA Discrepancy Prior Malignancy History
Dual/Synchronous Primary Notes Case is (circl..): **3|**13/11

Diagnosis Discrepancy

Comment: The tumor N stage is at least pN1mi. If a sentinel node is positive, then a final "N stage" can be assigned only after complete lymph node dissection.