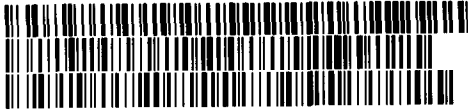


Patient: [REDACTED]



AP Surgical Pathology: Corrected ~~000000~~

Surg Path

CLINICAL HISTORY:

Not provided.

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HIPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case is <u>QUALIFIED</u> / DISQUALIFIED		
Reviewer Initials: <u>RM/S</u> Date Reviewed: <u>6/22/12</u>		

GROSS EXAMINATION:

A. "Left axilla non-sentinel node (AF1)". Received fresh for frozen section is a 1.8 x 1 x 0.6 cm tan-yellow lymph node candidate which is bisected and frozen as AF1, the frozen section remnant is submitted in block A1.

B. "Left sentinel node number one (BF1)". Received fresh for frozen section are three tan-yellow lymph node candidates. The larger lymph node candidate (2 x 1.2 x 1 cm) is bisected and frozen as BF1, and frozen section remnant is submitted in block B1. The remaining two lymph node candidates (0.5 x 0.5 x 0.3 cm and 1 x 0.7 x 0.4 cm lymph node candidate) are submitted in toto as frozen section BF2, and the frozen remnant is submitted in block B2.

C. "Left sentinel node number two (CF1)". Received fresh for frozen section is a 3 x 2.5 x 0.8 cm fragment of tan-yellow fibrofatty tissue. One lymph node candidate is identified (1.9 x 1 x 0.7 cm) which is bisected and frozen as CF1. The frozen section remnant is submitted in block C1.

D. "Left breast cancer, 1:00", received fresh and placed in formalin:

Procedure: Wire guided partial mastectomy

Specimen orientation: Suture: long=lateral, short-superior. Clips: two clips medial, one clip=inferior.

Specimen dimensions:

Medial to Lateral: 8.5 cm

Anterior to Posterior: 2.5 cm.

Superior to Inferior: 9.5 cm

Skin dimensions: 4.3 x 1.3 cm with a 0.4 cm long scar.

Margins inked:

Superior: Red

Inferior: Yellow

Anterior: Blue

Posterior: Black

Sectioned: Medial to lateral

\*\*\*\*\*

Gross findings: There is a tan-white indurated ill defined area with peripheral hemorrhage and fat necrosis. Lateral and superior to this area is a second focus of white-tan induration with adjacent thick white-tan fibrous tissue. The remaining parenchyma is tan-yellow lobulated adipose tissue.

\*\*\*\*\*

Gross tumor size: 2.3 x 2.1 x 1.2 cm

Multifocal tumor: Additional lesion is 1.2 x 0.8 x 0.5 cm which directly abuts the primary focus.

Distance of tumor from gross surgical margin for the primary tumor:

Superior: 2.1 cm

Inferior: 3.2 cm

Anterior: 0.6 cm

Posterior: 1.2 cm

Medial: 4.2 cm

Lateral: 1 cm

Additional lesion:

Superior: 3.1 cm

Inferior: 2 cm

1CD-03

Carcinoma, infiltrating ductal NOS  
8500/3

Site: breast, NOS c50.9  
7-2-12  
RO

Anterior: 1 cm  
Posterior: 1 cm  
Medial: 6.9 cm  
Lateral: 0.5 cm

Sectioned specimen radiographed? Yes

Radiograph findings:

Mass: Yes  
Microcalcifications: Yes  
Biopsy site microclip: No

Specimen photograph? Yes

Block diagram? Yes

Sections submitted from medial to lateral in blocks D1 through D35

Specimen completely submitted? No

#### BLOCK SUMMARY:

Medial margin-D1.

Lateral margin-D34 and D35.

Inferior margin: D13

Superior margin: D19

Anterior and posterior margins: D23

Primary tumor: D10, D11, D15, D16, D17, D18, D21, D22, D23, D24, D25, D27, D28, D31, D33.

Secondary lesion: D25, D27, D28, D31, D32, D33

Microcalcifications: D12, D15, D16, D17, D18, D20, D23, D25, D33.

E. "Left axillary mass, long stitch-lateral, short-superior", received fresh and placed in formalin:

Procedure: Wire guided partial mastectomy

Specimen orientation: Long stitch lateral, short stitch superior

Specimen dimensions:

Medial to Lateral: 5.6 cm

Anterior to Posterior: 1 cm.

Superior to Inferior: 3.6 cm

Margins inked:

Superior: Red

Inferior: Yellow

Anterior: Blue

Posterior: Black

Sectioned: Medial to lateral

\*\*\*\*\*

Gross findings: A well circumscribed white-brown nodule with an embedded microclip in the medial portion. Lateral to this first nodule is a second ill defined firm nodule. The remaining parenchyma is yellow-tan lobulated adipose tissue.

Gross tumor size: 1.6 x 0.6 x 0.5 cm

Multifocal tumor: Second lesion is 1.2 x 0.5 x 0.4 cm, and it is 0.7 cm from the first.

Distance of tumor from gross surgical margin:

First nodule:

Superior: 1.8 cm

Inferior: 0.6 cm

Anterior: 0.2 cm

Posterior: 0.2 cm

Medial: 2 cm

Lateral: 3.6 cm

Second nodule:

Superior: 1.7 cm  
Inferior: 1 cm  
Anterior: 0.2 cm  
Posterior: 0.3 cm  
Medial: 5.9 cm  
Lateral: 1.8 cm

Sectioned specimen radiographed? Yes

Radiograph findings:

Mass: Yes

Microcalcifications: Yes

Biopsy site microclip: Yes

Specimen photograph? Yes

Block diagram? Yes

Sections submitted from medial to lateral in blocks E1 through E21

Specimen completely submitted? Yes.

BLOCK SUMMARY:

Medial margin-E1

Lateral margin:E21

Anterior, posterior, inferior margins for first nodule=E8.

Anterior, posterior, superior, inferior margin for second nodule-E13.

First nodule-E6, E7, E8, E9, E10, E11.

Second nodule:E13, E14, E15, E16

Microclip: E11

Microcalcifications: E8, E13, E19

F. "Left axillary contents". Received fresh and placed in formalin is a 6.5 x 6.5 x 2 cm aggregate of multiple fragments of tan-yellow fibrofatty tissue. Fourteen lymph node candidates are identified ranging in size from 0.5 x 0.5 x 0.4 cm to 3.5 x 1.5 x 1.3 cm. The smallest lymph node candidate is submitted in blocks F1-F3, and the two largest lymph node candidates are inked blue and black, bisected and submitted in blocks F4-F6.

A.

REPORT REVISED ON .

INTRA OPERATIVE CONSULTATION:

A. "Non-sentinel node right axilla": AF1- one lymph node candidate, bisected (1.3 x 1 x 0.6 cm)- no tumor is seen (Dr.

B. "Sentinel node number one": BF1 (one lymph node candidate, bisected, 2 x 1.6 x 1 cm) positive for metastatic cancer (micrometastases) (Dr.

BF2 (two lymph node candidates, intact (0.5 x 0.5 x 0.3 cm) and 1 x 0.6 x 0.4 cm, no tumor is seen (Dr.

C. "Sentinel node number two": CF1- one lymph node candidate, bisected, 1.9 x 2 x 0.7 cm, positive for metastatic cancer (micrometastases) (Dr.

MICROSCOPIC EXAMINATION:

Microscopic examination is performed.

PATHOLOGIC STAGE:

PROCEDURE: Partial mastectomy, sentinel lymph node biopsy with completion axillary dissection.

PATHOLOGIC STAGE (AJCC Edition): pT2 pN2a pMX

NOTE: Information on pathology stage and the operative procedure is transmitted to this Institution's Cancer Registry as required for accreditation by the Commission on Cancer. Pathology stage is based solely

upon the current tissue specimen being evaluated, and does not incorporate information on any specimens submitted separately to our Cytology section, past pathology information, imaging studies, or clinical or operative findings. Pathology stage is only a component to be considered in determining the clinical stage, and should not be confused with nor substituted for it. The exact operative procedure is available in the surgeon's operative report.

**\*\*REVISED DIAGNOSIS\*\*:**

**A. "LEFT AXILLA, NON-SENTINEL LYMPH NODE" (BIOPSY):**

ONE LYMPH NODE, NO EVIDENCE OF MALIGNANCY (0/1).

**B. "LEFT AXILLA, SENTINEL LYMPH NODE # 1" (BIOPSY):**

METASTATIC ADENOCARCINOMA IN THREE LYMPH NODES (3/3).  
SIZE OF LARGEST METASTASIS: 6 MILLIMETERS.  
EXTRACAPSULAR INVASION: ABSENT.

**C. "LEFT AXILLA, SENTINEL LYMPH NODE # 2" (BIOPSY):**

METASTATIC ADENOCARCINOMA IN ONE LYMPH NODE (1/1).  
SIZE OF LARGEST METASTASIS: 4 MILLIMETERS.  
EXTRACAPSULAR INVASION: ABSENT.

**D. "LEFT BREAST CANCER, 1:00" (WIRE GUIDED PARTIAL MASTECTOMY):**

**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

GROSS TUMOR SIZE: 2.3 X 2.1 X 1.2 CM.

SIZE OF INVASIVE COMPONENT: 2.3 CM.

LOCATION OF THE TUMOR: ADJACENT TO PREVIOUS BIOPSY SITE.

LYMPHATIC/VASCULAR INVASION: PRESENT.

MULTIFOCAL TUMOR: ABSENT (SECOND MASS LESION DESCRIBED GROSSLY IS FAT NECROSIS).

**IN-SITU CARCINOMA: PRESENT.**

TYPE OF IN-SITU CARCINOMA: COMEDO.

NUCLEAR GRADE OF IN-SITU CARCINOMA: 3 OF 3.

NECROSIS: PRESENT.

DCIS EXTENDING OUTSIDE INVASIVE TUMOR MASS: ABSENT.

SIZE OF IN-SITU CARCINOMA: NOT APPLICABLE.

SKIN STATUS: FREE OF TUMOR.

STATUS OF NON-NEOPLASTIC BREAST TISSUE: NEEDLE CORE BIOPSY SITE, AND FAT NECROSIS.

SURGICAL MARGIN STATUS: NEGATIVE (GREATER THAN 2 MM).

ESTROGEN/PROGESTERONE RECEPTOR, CELL CYCLE, EGFR AND HER2/NEU ANALYSIS:  
PENDING, PARAFFIN BLOCK NUMBER D11.

RESULTS WILL BE ISSUED SEPARATELY FROM THE IMAGE CYTOMETRY LAB.

**E. "LEFT AXILLARY MASS" (EXCISION):**

METASTATIC ADENOCARCINOMA IN ONE OF FOUR AXILLARY LYMPH NODES (1/4).  
SIZE OF METASTASIS: 1.6 CM.  
EXTRACAPSULAR INVASION: PRESENT.

CHANGES CONSISTENT WITH A NEEDLE CORE BIOPSY SITE ARE PRESENT.  
MARGIN STATUS: NEGATIVE.

F. "LEFT AXILLARY CONTENTS" (COMPLETION NODE DISSECTION):  
METASTATIC ADENOCARCINOMA IN ONE OF TWENTY LYMPH NODES (1/20).  
SIZE OF METASTASIS: 0.5 MILLIMETERS.  
EXTRACAPSULAR INVASION: ABSENT.

COMMENT: This report revised to correct the site for specimens A-C,  
which were received labelled as "right". Per the correct site is  
left. is notified of this revision.

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

\_\_\_\_\_  
Electronically signed: \_\_\_\_\_

DIAGNOSIS:  
\*\*\*\*\*SEE REVISED REPORT\*\*\*\*  
REPORT REVISED ON \_\_\_\_\_

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

\_\_\_\_\_  
Electronically signed:

CI 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: \_\_\_\_\_

Performed by:

Ordering MD: \_\_\_\_\_