



Name: [REDACTED]
 DOB: [REDACTED]
 Gender: F
 MRN: [REDACTED]
 Location: [REDACTED]
 Physician: [REDACTED]

Case #: [REDACTED]
 Collected: [REDACTED]
 Received: [REDACTED]
 Reported: [REDACTED]
 Copy To: [REDACTED]

Pathologic Interpretation:

A. SENTINEL NODE # 1 COUNT
 - No malignancy seen in one lymph node (0/1).
 - Keratin immunostain to follow.

B. SUSPICIOUS LYMPH NODE RIGHT BREAST:
 - No malignancy seen in one lymph node (0/1).
 - Keratin immunostain to follow.

*ICD-0-3
 carcinoma, papillary, intraductal, NOS
 8503/3*

C. SENTINEL NODE # 2 COUNT
 - No malignancy seen in one lymph node (0/1).
 - Keratin immunostain to follow.

Site: breast, NOS c50.9

D. SENTINEL NODE # 3 COUNT
 - No malignancy seen in one lymph node (0/1).
 - Keratin immunostain to follow.

*fw
 6/1/11*

E. SENTINEL NODE # 4 COUNT
 - No malignancy seen in one lymph node (0/1).
 - Keratin immunostain to follow.

F. SENTINEL NODE # 5 COUNT
 - No malignancy seen in one lymph node (0/1).
 - Keratin immunostain to follow.

G. RIGHT BREAST, SHORT STITCH SUPERIOR LONG LATERAL:
 - Invasive ductal carcinoma, poorly differentiated, Nottingham grade 2 (3 + 2 + 1 = 6), papillary type, 2.8 cm in greatest dimension.
 - Resection margin is free of tumor; closest margin, 1.5 mm.
 - Lymphovascular invasion is not identified.
 - Ductal carcinoma in situ, high grade (DIN 3), with necrosis.
 - Margins are free of DCIS.
 - See tumor summary.

TUMOR SUMMARY:

Specimen:

- Partial breast

Procedure:

- Other (specify): Partial mastectomy

Lymph Node Sampling:

- Sentinel lymph node(s)

Specimen Integrity:

- Single intact specimen (margins can be evaluated)

Specimen Size:

- Greatest dimension: 11 cm

* Additional dimension: 10 x 6 cm

Specimen Laterality:

- Right

Tumor Site: Invasive Carcinoma

- Upper outer quadrant

- Lower outer quadrant

Tumor Size: Size of Largest Invasive Carcinoma

- Greatest dimension of largest focus of invasion over 0.1 cm: 2.8 cm

Tumor Focality:

- Single focus of invasive carcinoma

Macroscopic and Microscopic Extent of tumor:

- Skin: Invasive carcinoma does not invade into the dermis or epidermis
- Skeletal muscle: No skeletal muscle present

Ductal Carcinoma In Situ (DCIS):

- DCIS is present
 - Extensive intraductal component (EIC) negative

- Architectural Patterns: Comedo

- Nuclear Grade: Grade III (high)

Lobular Carcinoma In Situ

- Not identified

Histologic Type of Invasive Carcinoma:

- Invasive papillary carcinoma

Histologic Grade: Nottingham Histologic Score

Glandular (Acinar)/Tubular Differentiation: Score 3: <10% of tumor area forming glandular/tubular structures

Nuclear Pleomorphism: Score 2: Cells larger than normal with open vesicular nuclei, visible nucleoli, and moderate variability in both size and shape

Mitotic Count: Score 3

Overall Grade: Grade 3: score of 8

Margins:

- Margins uninvolved by invasive carcinoma
 - Distance from closest margin: 15 mm

- Margins uninvolved by DCIS

Treatment Effect: Response to Presurgical (Neoadjuvant) therapy:

- In the Breast: No known presurgical therapy
- In the Lymph Nodes: No lymph nodes metastases and no prominent fibrous scarring in the nodes

Lymph-Vascular Invasion: Not identified.

- Dermal Lymph-Vascular Invasion: Not identified

Lymph Nodes:

- Number of sentinel lymph nodes examined: 6
- Total number of lymph nodes examined (sentinel and nonsentinel): 6
- Number of lymph nodes with macrometastases (>0.2 cm): 0

Extranodal Extension: Not identified

*Method of Evaluation of Sentinel Lymph Nodes: Hematoxylin and eosin (H&E), one level
Immunohistochemistry (PENDING)

Pathologic Staging (pTNM): pT2 N0 MX

Primary Tumor: pT2: Tumor >20 mm but ≤50 mm in greatest dimension

Regional Lymph Nodes: (sn): Only sentinel node(s) evaluated

pN0: No regional lymph node metastasis identified histologically

Distant Metastasis: Not applicable

Ancillary Studies:**Estrogen Receptor:**

- Performed on another specimen Results: Immunoreactive tumor cells present (≥1%)

Progesterone Receptor:

- Performed on another specimen Results: Immunoreactive tumor cells present (≥1%)

Her2:

- Performed on another specimen Results: Negative (Score 0)

FISH for HER2/neu: NOT PERFORMED

Microcalcifications: Not identified

NOTE: Some immunohistochemical antibodies are analyte specific reagents (ASRs) validated by our laboratory. These ASRs are clinically useful indicators that do not require FDA approval. These clones are used: ID5=BR, PgR 636=PR, A485=HER2, H-11=EGFR. All immunohistochemical stains are used with formalin or molecular fixed, paraffin embedded tissue. Detection is by Envision Method. The results are read by a pathologist as positive or negative.

As the attending pathologist, I attest that I: (i) Examined the relevant preparation(s) for the specimen(s); and (ii) Rendered the diagnosis(es).

Electronically Signed Out By

Procedures/Addenda
Addendum

Date Ordered:
Date Complete:
Date Reported:

Status: Signed Out

Addendum Diagnosis

- A. **SENTINEL NODE # 1 COUNT**
- Keratin is negative by Immunohistochemistry.
 - B. **SUSPICIOUS LYMPH NODE RIGHT BREAST:**
- Keratin is negative by Immunohistochemistry.
 - C. **SENTINEL NODE # 2 COUNT**
- Keratin is negative by Immunohistochemistry.
 - D. **SENTINEL NODE # 3 COUNT**
- Keratin is negative by Immunohistochemistry.
 - E. **SENTINEL NODE # 4 COUNT**
- Keratin is negative by Immunohistochemistry.
 - F. **SENTINEL NODE # 5 COUNT**
- Keratin is negative by Immunohistochemistry.
-

Intraoperative Consultation

- A. Sentinel node # 1 count FS: Negative for carcinoma
 - B. Suspicious lymph node right breast FS: Negative for carcinoma
 - C. Sentinel node # 2 count FS: Negative for carcinoma
 - D. Sentinel node # 3 count FS: Negative for carcinoma
 - E. Sentinel node # 4 count FS: Negative for carcinoma
 - F. Sentinel node # 5 count FS: Negative for carcinoma
-

Clinical History:

Right breast cancer

Operation Performed

Right partial mastectomy with sentinel node biopsy and axillary node dissection

Pre Operative Diagnosis:

None provided

Specimen(s) Received:

- A: Sentinel node # 1 count FS
- B: Suspicious lymph node right breast FS
- C: Sentinel node # 2 count FS
- D: Sentinel node # 3 count FS
- E: Sentinel node # 4 count FS
- F: Sentinel node # 5 count FS
- G: Right breast, short stitch superior long lateral

Gross Description:

- A. Received fresh is one lymph node measuring 0.7 cm in diameter. Specimen was evaluated during frozen section and submitted in one cassette.
- B. Received fresh is one tiny lymph node measuring 0.3 cm in greatest dimension. Submitted in toto in one cassette for frozen section.
- C. Received fresh is one lymph node measuring 1 cm in greatest dimension. Specimen was evaluated during frozen section and submitted in toto in one cassette.
- D. Received fresh is one lymph node measuring 1.2 cm in greatest dimension. Frozen section submitted in one cassette. Rest of adipose tissue measuring 1.5 x 1 x 0.5 cm, submitted in cassette 2. Both specimens submitted in toto in two cassettes.
- E. Received fresh is one lymph node, bisected, measuring 0.9 cm in greatest dimension. The specimen was evaluated during frozen section examination. Submitted in toto in one cassette.
- F. Received fresh is one lymph node, bisected, measuring 0.3 cm in greatest dimension. Frozen section submitted in one cassette. Rest of adipose tissue measuring 1 x 0.5 x 0.5 cm, submitted in cassette 2.
- G. Received in formalin is a 195 grams, right partial mastectomy specimen measuring 11 x 10 x 6 cm. The specimen was already cut opened when received. A very soft skin ellipse measuring 4.5 x 2 cm is present at the anterior surface. No nipple is present. An irregular shaped tan white fibrotic mass measuring 2.8x 2.5 x 2.5 cm, is present at the junction of upper-outer and lower-outer quadrants. The mass is approximately 0.9 cm from the anterior skin margin and 2.5 cm from the posterior deep inked margin. A separate irregular shaped tan white nodular mass is present measuring 0.3 cm in greatest dimension, and 0.3 cm from the main tumor mass. Sections are as follows:
- 1 Deep margin
 - 2 Tumor with skin
 - 3 Tumor with anterior lateral and anterior inferior
 - 4&5 Composite sections of tumor
 - 6 Tumor
 - 7 Tumor with small nodule
 - 8 Upper outer quadrant
 - 9 Inner outer quadrant
 - 10 Lower inner quadrant
 - 11 Additional tumor

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HIPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	6/1/11	
Date Reviewed:	6/1/11	