

ICD-O-3

Adenocarcinoma, duct, infiltrating 8500/3

Site Code: breast, NOS C50.9

1/17/11

Patient

Surgical Pathology: Final

Surg Path

UUID: C834E5F-30DC-46CF-AF33-AD11226FC09E
TCGA-B6-A012-01A-PR

Redacted

CLINICAL HISTORY:

Bilateral carcinoma of the breast.

GROSS EXAMINATION:

A. "Medial margin right breast biopsy", fresh. The specimen consists of 3.7 x 2.2 x 0.6 cm disc of firm white, unremarkable breast tissue; four sutures denote the true margin, which is inked black. Serial radial sections are submitted as follows:

BLOCK SUMMARY:

- A1 frozen section remnant Af1
- A2 frozen section remnant AF2.
- A3 frozen section remnant AF3.
- A4 additional tissue.

B. "Right breast biopsy sample". Contains an irregular 10 x 0.5 x 1.7 cm disc tan-brown coarsely papillary tissue. Portions are submitted for ER/PR and for tissue bank and for frozen section. Frozen section remnant submitted in Block B1.

C. "Left breast tumor, wide reexcision, long suture lateral, short suture superior", fresh. The specimen consists of a 4.5 x 4.3 x 2.2 cm wide reexcision of the breast. The long suture denotes the lateral aspect of the specimen and a short suture the superior. The superior pole of the tissue is inked black, and the inferior blue.

On cut section, there is a 1.3 x 1.3 x 1 cm round, white, firm, gritty, sharply-circumscribed tumor in the superior portion of the resection. The tumor extends to within 2 mm of the superior margin, and does not approach closely to any other margin. The remainder of the breast consists of firm, white and tan admixed breast parenchyma. Tissue is divided into deep (towards chest wall) and superficial (towards skin) halves and submitted from medial to lateral as follows:

BLOCK SUMMARY:

- C1 frozen section remnant Cf1.
- C2-C8 superficial half from medial to lateral.
- * C9-C15 deep half from medial to lateral.

D. "Right axillary dissection and wide reexcision", fresh. The specimen consists of an excisional breast biopsy and attached axillary dissection. The biopsy is incised, to obtain tissue for frozen section, ER/PR, and tissue bank, prior to receipt by pathology. The biopsy measures 6.7 x 6.5 x 3.2 cm. The axillary tail measures 10 x 2.3 x 0.9 cm. The medial surface (not a true margin) is inked in red, the inferior margin black and the superior margin in blue.

On cut section, there is a 4.5 x 2.3 x 2.5 cm white firm tumor, composed of tan-yellow loose aggregates of tumor. The tumor approaches to within 3 mm of the inked superior margin of resection and to within 1 cm of the superior and 5 mm of the inferior margin. Tumor approaches to within 4 mm of the deep margin of resection. The remainder of the breast is unremarkable

The axillary dissection is divided into low, mid and distal level. There are numerous lymph nodes, ranging from 0.3 to 1.4 cm, none grossly involved by tumor.

BLOCK SUMMARY:

Criteria	Yes	No
Diagnosis Discrepancy		X
Primary Tumor Site Discrepancy		X
HP/IA Discrepancy		X
Prior Malignancy History		X
Dual/Synchronous Primary Noted	X	
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	KMI	1/13/11

- D1-D5 Anterior (superficial) tumor from lateral to medial.
- D6-D10 Posterior (deep) tumor from lateral to medial.
- D11 - Lower lymph node candidate.
- D12 - One mid-level lymph node, bisected.
- D13 - Five mid-level lymph node candidates.
- D14 - Four distal lymph node candidates.
- D15 - Highest lymph node.

E. "Left axillary dissection, silk on apex", fresh. The specimen consists of a 6 x 9 x 1.7 cm lymph node dissection, with a black suture at one pole. The lymph node dissection is divided into three sections, lower, middle and distal. Numerous lymph nodes are identified ranging from 0.3 to 1.7 cm in greatest dimension. None grossly contains tumor


BLOCK SUMMARY:

- E1 Lower nodes, 3 lymph node candidates
- E2 Three lymph node candidates, lower node.
- E3 Middle nodes, 2 lymph node candidates.
- E4 Middle nodes, 2 lymph node candidates.
- E5 Three lymph node candidates, upper lobe.
- E6 Upper nodes, 1 lymph node candidate.
- E7 Upper node, 1 lymph node candidates, bisected.
- E8 Highest apical node.

INTRA OPERATIVE CONSULTATION:

- AF1-Af3: "Medial margin right breast biopsy": Inked margin free of carcinoma. (KR).
- Bf1: "Right breast biopsy sample": Carcinoma
- Cf1: "Left breast biopsy": Carcinoma

DIAGNOSIS:

- A. "MEDIAL MARGIN RIGHT BREAST BIOPSY":
BENIGN BREAST TISSUE.
- B. "RIGHT BREAST BIOPSY":
POORLY-DIFFERENTIATED ADENOCARCINOMA.
- C. "LEFT BREAST TUMOR, WIDE RE-EXCISION":
INVASIVE AND INTRADUCTAL ADENOCARCINOMA. 
1.3 X 1.3 X 1.3 CM.
NSABP HISTOLOGIC GRADE 3, NUCLEAR GRADE 3.
NON-COMEDO TYPE INTRADUCTAL COMPONENT COMPRISES 5% OF TUMOR.
VASCULAR SPACE INVASION IDENTIFIED (C13).
INKED MARGINS OF RESECTION FREE OF TUMOR.
EXTENDING TO WITHIN 1 MM OF INKED SUPERIOR MARGIN OF RESECTION (C14).
ASSOCIATED WITH MICROCALCIFICATION.
REMAINDER OF BREAST WITH APOCRINE METAPLASIA AND MICROCYST FORMATION.
- D. "RIGHT AXILLARY RESECTION OF BREAST AND WIDE RE-EXCISION":
INVASIVE AND INTRADUCTAL CARCINOMA.
4.5 X 2.3 X 2.5 CM.
NSABP HISTOLOGIC GRADE 3, NUCLEAR GRADE 2.
NON-COMEDO TYPE INTRADUCTAL CARCINOMA COMPRISES 5% OF TUMOR.
INTRADUCTAL CARCINOMA EXTENDS BEYOND TUMOR MASS.
VASCULAR SPACE INVASION NOT IDENTIFIED.
TUMOR APPROACHES TO WITHIN 100 MICRONS OF INKED MARGIN OF RESECTION
(D7, D8, D9, D10, D6), SEE NOTE.
REMAINDER OF BREAST WITH MICROCYST FORMATION AND FIBROADENOMATOUS CHANGE.
10 REGIONAL LYMPH NODES WITH NO TUMOR SEEN (0/10).
- E. "LEFT AXILLARY DISSECTION":
8 LYMPH NODES WITH NO TUMOR SEEN (0/8).

NOTE: FOCALLY, CAUTERY ARTIFACT EXTENDS TO TUMOR. (D9)
Verified by: