

**Department of Pathology**

VIEW: 30-Jun-2025 20:35:39

**Histopathology Report**

Page 1 of 2

MRNO : 001-80005657879  
Name : KHURSHIDA BIBI  
Date of Birth : 01-JAN-1975  
Age/Sex : 50 Year(s)/Female  
Phone : 92 0318 7651019,92 03209844649

Dept Ref# : 001HIS25053185  
Ordered By : Ahmed Naeem  
Referring Physician : Dr Abdul Majid  
In-house Consultant :  
Report Destination : Collection Centre - Cc254  
Requested : 18-JUN-2025 20:38:09  
Specimen Collected : 18-JUN-2025 20:42:17  
Specimen Received : 19-JUN-2025 17:33:55  
Reported : 30-JUN-2025 16:37:11

Specimen is brought to Lab

Test : Histopathology (Gross, Microscopy, Special

Specimen Nature: TRUCUT BIOPSIES

Specimen Site: RIGHT BREAST, RIGHT AXILLARY LYMPH NODE

History: Right breast malignant looking lesion and enlarged ipsilateral axillary lymph node.

## Gross: SPECIMEN # 1:

Specimen container is labeled with the patient's name and medical record number and labeled as 1.

Fixation: Formalin

Number of cores: 2 cores and 2 core fragments

Core size and block key: Cores measure 18 mm, 17 mm, and two core fragments collectively measuring 3 x 2 mm. The entire specimen is submitted in single block.

## SPECIMEN # 2:

Specimen container is labeled with the patient's name and medical record number and labeled as 2.

Fixation: Formalin

Number of cores: One fragile core and 2 core fragments

Core size and block key: Core measure 6 mm and two core fragments collectively measuring 2 x 2 mm.

The entire specimen is submitted in single block.

(Gross assisted by: Muhammad Haseeb)

Micro: Sections show an infiltrative tumor showing almost 50% duct formation. There is moderate pleomorphism. The mitotic rate is within 6-10 mitoses/10 HPFs.

Screened By: Nida Babar Dr.

## IMMUNO/HISTOCHEMICAL/IN SITU HYBRIDIZATION (ISH) STAIN(S):

Estrogen receptors: Positive, strong staining in 80% tumor cells

Progesterone receptor: Positive, strong staining in 60% tumor cells

Her-2: Negative -0

Ki67: 25% proliferation index

Cold Ischemia and Fixation Times

Cannot be determined

COMMENT: Estrogen and progesterone receptors according to ASCO/CAP guidelines are considered +ve if  $\geq 1\%$  of tumor cell nuclei are immunoreactive.

Mudassar Hussain Dr.

Consultant Pathologist

**Electronically verified by, no signature(s) required.**

Dr. Asif Loya  
MBBS, DABP (AP and  
Cytopathology), FIAC

Dr. Asad Hayat Ahmad  
MBBS, DABP (AP, CP and  
Hematopathology)

Dr. Mudassar Hussain  
MBBS, FCPS (Histopathology),  
Fellowship in Renal Pathology  
(Canada)

Dr. Maryam Hameed  
MBBS, FRCPath

Dr. Sajid Mushtaq  
MBBS, FCPS, FRCPath

Dr. Usman Hassan  
MBBS, FCPS, FRCPath

Dr. Umer Nisar Sheikh  
MBBS, DABP (AP, CP,  
Cytopathology)

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Interpretation of Her-2 according to ASCO and CAP recommendation is:

Her-2: 0- Negative

Her-2: score 1+(Negative)

Her-2: Equivocal; score 2+ (COMMENT: Equivocal HER-2 immunohistochemical staining needs FISH testing for HER-2 gene amplification)

Her-2: score 3+( Positive)

Assays used:

Estrogen receptors: Conformite Europeene (CE)/IVD approved, Primary antibody used; 6F11, Bond Polymer detection system

Progesterone receptors: Conformite Europeene (CE)/IVD approved, Primary antibody used; 16, Bond Polymer detection system

HER2: CE approved, Primary antibody used; Polyclonal, EnVision FLEX visualization system

Ki67 : Conformite Europeene (CE)/IVD approved, Primary antibody used; K2, Bond Polymer detection system

DISCLAIMER: Optimal fixation (6-72 Hours) in 10% buffered formalin and minimum cold ischemia time (less than 1 hour) is essential for proper evaluation of immunohistochemical stain. Results may vary (false negative/ positive) if any of the above pre- analytical parameters are not met.

Ref: Patrick L. Fitzgibbons, MD\*; Angela N. Bartley, MD, PhD\*; James L. Connolly. Template for Reporting Results of Biomarker Testing of Specimens from Patients with Carcinoma of the Breast.

Version: Breast Biomarkers 1.5.0.1 Template Posting Date: March 2025.

Diagnosis: SPECIMEN # 1:

Invasive breast carcinoma of no special type (ductal), grade-2.

SPECIMEN # 2:

Metastatic carcinoma.

For any query regarding diagnosis, treating physician can contact at 03000453078 between 8:00 AM to 5:00 PM (working days only).

SNOMED: T-04000

M-85003

Mudassar Hussain Dr.  
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