

## Pathology Report: AUTOSEG009^BREAST\_PRONE

**Patient Name:** AUTOSEG009^BREAST\_PRONE

**Date of Birth:** 01/09/1970

**Medical Record Number:** MRN10000009

**Date of Surgery:** 03/23/2025

**Date of Report:** 03/28/2025

## Clinical History

Screen-detected left breast lesion on prone imaging. The patient is asymptomatic and was referred following abnormal screening findings.

## Specimen

Left breast lumpectomy with sentinel lymph node biopsy (prone technique).

## Gross Description

The lumpectomy specimen measures 5.0 x 4.0 x 3.0 cm. Sectioning reveals a firm, tan mass measuring 1.5 cm in greatest dimension, located 0.6 cm from the nearest margin. Two sentinel lymph nodes are submitted.

## Microscopic Description

1. **Lumpectomy:** Sections show invasive ductal carcinoma, well-differentiated (Nottingham Grade 1) accompanied by low-grade, cribriform-type ductal carcinoma in situ (DCIS). Surgical margins are negative for both invasive and in situ components.
2. **Sentinel Lymph Nodes:** No evidence of metastatic carcinoma in either node.

## Immunohistochemistry

- Estrogen Receptor (ER): Positive (92% of tumor cells, strong intensity)
- Progesterone Receptor (PR): Positive (85% of tumor cells, moderate intensity)
- HER2/neu: Negative (score 1+)

- Ki-67: 12%

## Diagnosis

Left breast, lumpectomy with sentinel lymph node biopsy:

- Invasive ductal carcinoma, well-differentiated (Nottingham Grade 1)
- Tumor size: 1.5 cm
- Margins: Negative
- Pathologic stage: pT1bN0M0

## Comments

The patient qualifies for breast conserving therapy. The case was reviewed at the tumor board, and radiation oncology consultation is recommended for adjuvant treatment planning.

**Pathologist:** Dr. Michael Chen, MD

**Electronic Signature:** Michael Chen, MD

**Date Signed:** 03/28/2025