

ICD-O-3

Melanoma, NOS 8720/3

Site: lymph node, NOS C77.9

3/12/11 *LR*

**DIAGNOSIS:** LEFT AXILLA  
**MALIGNANT TUMOR, CONSISTENT WITH MALIGNANT MELANOMA**

Note: Strong labeling of this tumor for S-100 protein and absence of labeling for cytokeratin 116 support the diagnosis of malignant melanoma, consistent with metastasis based on the presence in soft tissue with features residual lymph node. Additional clinical evaluation will be helpful in further confirming this diagnostic possibility.

**CLINICAL IMPRESSION:**

Met mel; Cytology Report [REDACTED]

**GROSS DESCRIPTION:**

25x17x15 mm representative section submitted in cassette # 1  
18x13x7 mm trisectioned in cassette # 2  
18x8x6 mm bisected in cassette # 3

**MICROSCOPIC DESCRIPTION:**

In the subcutis there are islands of epithelioid cells showing atypia with numerous mitoses surrounded partially by a rim of lymphocytes. The cells label strongly for S100 protein, and fail to label for cytokeratin 116.

Final Diagnosis performed by

UUID:7F6F7F9F-CDE1-4129-8161-B87F78029488  
TCGA-DA-A1I2-06A-PR

Redacted



Criteria	Yes	No
Diagnosis Discrepancy		X
Primary Tumor/Site Discrepancy		X
H&P/AA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Merged		
Case is (circle):	QUALIFIED /	DISQUALIFIED
Reviewed by:	Date Reviewed:	

*KHM 3/12/11 LR*

**SURGICAL PATHOLOGY REPORT**

2) Received fresh, labeled with the patient's name, MR# only, are multiple fragments of tan tissue that are soft. They are entirely submitted in three cassettes.

**Frozen/Intraoperative Diagnosis:** ( \* M.D. : \_\_\_\_\_, M.D.)

1) "Brain, left frontal lobe mass, biopsy: Brain with reactive changes, necrosis, small foci with atypical cells and reactive lymphocytes; cannot exclude presence of viable tumor." (Per Drs. [redacted])

**Summary of Stains Performed and Reviewed**

	<u>Count</u>
CD117 (c-kit) *	1
HMB-45 *	2
Ki-67-Qualitative *	1
Melan-A *	2
S-100 Protein *	1

\*The immunohistochemical profile may include the use of Analyte Specific Reagents, or Research Agents, whose performance characteristics have not been established by the manufacturer. These tests were developed and their performance characteristics were determined by the [redacted] Laboratory. It has not been cleared or approved by the U.S. Food and Drug Administration (FDA). The FDA has determined that such clearance or approval is not necessary for this test. These tests are used for clinical purposes and should not be referred as investigational or for research. This laboratory is regulated under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) as qualified to perform high complexity clinical testing. External and internal controls stained appropriately.

**Summary of Tissue Submitted for Microscopic Examination**

	<u># Blocks</u>	<u>Block Detail</u>
Part 1] LEFT FRONTAL MASS-FROZEN	1	BRAIN (1) (No Description)
Part 2] LEFT FRONTAL MASS	3	BRAIN (3) (No Description)
Total:	4	

[redacted]  
[redacted] END OF REPORT [redacted]