

Surgical Pathology Report

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, left side, CT touch prep:
- No tumor seen in one lymph node (0/1).
- Immunohistochemistry for Keratin to follow.
- B. Left breast 1 stitch superior, 2 stitches lateral:
- Invasive, moderately differentiated ductal carcinoma, intermediate nuclear grade, 0.5 cm.
- Specimen margins are negative (see tumor summary).
- Fibroadenoma, 0.5 cm.
- C. Sentinel node #1, right side CT
- No tumor seen in two lymph nodes (0/2).
- Immunohistochemistry for Keratin to follow.
- D. Non-sentinel lymph node right side:
- No tumor seen in one lymph node (0/1).
- E. Sentinel lymph node #2, right side, CT # touch prep:
- No tumor seen in one lymph node (0/1).
- Immunohistochemistry for Keratin to follow.
- F. Right breast additional superior flap:
- No tumor seen in adipose tissue.
- G. Right breast 1 stitch superior, 2 stitches lateral:
- Invasive, moderately differentiated ductal carcinoma, intermediate nuclear grade, 2.5 cm, extending within 0.1 cm of the anterior specimen margin (see tumor summary).

ICD-O-3

Carcinoma, infiltrating duct, nos 8500/3
Site: breast, nos C50.9 3/12" LHR

UUID:042304AE-706A-4033-A97F-3765A6AEC649
TCGA-EW-A1P3-01A-PR



Redacted

TUMOR SUMMARY "B":

Specimen Type: Mastectomy

Lymph Node Sampling: Sentinel lymph node(s) only

Laterality: Left

Tumor Site: Upper inner quadrant

Size of Invasive Component: Greatest dimension: 0.5 cm

Histologic Type: Invasive ductal carcinoma

Histologic Grade: Tubule Formation: Moderate 10% to 75% (score =2)

Nuclear Pleomorphism: Moderate increase in size, etc (score =2)

Mitotic Count: 10 to 20 mitoses per 10 HPF (score = 2)

Total Nottingham Score: Grade II: 6-7 points

Pathologic Staging (pTNM)

Primary Tumor: pT1a

Regional Lymph Nodes: pN0

Number examined: 1

Number involved: 0

Distant Metastasis: pMX

Margins: Margins uninvolved by invasive carcinoma

Venous/Lymphatic Invasion: Absent

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TUMOR SUMMARY "G":

Specimen Type: Mastectomy

Lymph Node Sampling: Sentinel lymph node with axillary dissection

Laterality: Right

Tumor Site: Lower outer quadrant

SURGICAL PATHOL Report

Size of Invasive Component: Greatest dimension: 2.5 cm

Histologic Type: Invasive ductal carcinoma

Histologic Grade: Tubule Formation: Minimal less than 10% (score =3)

Nuclear Pleomorphism: Moderate increase in size, etc (score = 2)

Mitotic Count: Less than 10 mitoses per 10 HPF (score =1)

Total Nottingham Score: Grade II: 6-7 points

Pathologic Staging (pTNM)

Primary Tumor: pT2

Regional Lymph Nodes: pN0

Number examined: 4

Number Involved: 0

Distant Metastasis: pMX

Margins: Margins uninvolved by invasive carcinoma

Distance from closest margin: 1.0 mm

Specify which margin: Anterior

Venous/Lymphatic Invasion: Absent

*****Electronically Signed Out By*****

NOTE: Some immunohistochemical antibodies are analyte specific reagents (ASRs) validated by our laboratory (Her 2, Penvo, H. pylori, HBscore). These ASRs are clinically useful indicators that do not require FDA approval. These clones are used: ID5=ER, PgR 636=PR, A485=HER2, H-11=EGFR, CCH2/DDG9=CMV, F39.4.1=AR and HPV by ISH. All immunohistochemical stains are used with formalin or molecular fixed, paraffin embedded tissue. Detection is by LSAB. The results are read by a pathologist as positive or negative.

, MD

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

Procedures/Addenda

Addendum

Date Ordered:

Status: Signed Out

Date Complete:

Date Reported:

Addendum Diagnosis

- A. Immunohistochemistry for Keratin is negative for tumor.
- C. Immunohistochemistry for Keratin is negative for tumor.
- E. Immunohistochemistry for Keratin is negative for tumor.

MD

Intraoperative Consultation

A (FS): No malignancy seen in one lymph node (0/1)

C (FS): No malignancy seen in two lymph nodes examined (0/2).

E (FS): No malignancy seen in one lymph node examined (0/1).

MD

Clinical History:

SURGICAL PATHOL Report

Patient is a female with right infiltrate ductal carcinoma.

Specimen(s) Received:

- A: Sentinel node #1, left side, ct : touch prep (FS)
- B: Left Breast 1 stitch superior, 2 stitches lateral, fresh
- C: Sentinel node #1, right side ct : (FS)
- D: Non-sentinel lymph node right side
- E: Sentinel lymph node #2, Right side, ct # touch prep (FS)
- F: Right breast additional superior flap - perm
- G: Right breast 1 stitch superior, 2 stitches lateral , fresh

Gross Description:

- A. Received fresh and labeled "sentinel node #1, left side, ct touch prep (FS)" is a segment of tan-yellow, fibroadipose tissue measuring 2.5 x 1.1 x 0.5 cm. Cassettes are submitted as follows:
 - 1 One lymph node bisected submitted in toto for frozen section
 - 2 Remainder adipose tissue submitted in toto in one cassette
- B. Received fresh and labeled "left breast 1 stitch superior, 2 stitches lateral" is a mastectomy specimen, which measures 22.0 x 19.0 x 4.0 cm and weighs 790.0 grams. The specimen has an attached ellipse of pale-tan skin with areola and nipple measuring 9.0 x 4.5 cm. The skin and nipple are unremarkable. The specimen is oriented by one stitch superior and two stitches lateral. Surgical margins are inked as follows: superior anterior margin inked in green and the remaining margins are inked in black. Serial section through the specimen revealed one suspicious area of pale-pink induration consistent with previous biopsy site. The indurated area measures approximately 1.1 cm in greatest dimension and is located in the upper inner quadrant at 11 to 12 o'clock, 0.8 cm from the superficial margin, 0.9 cm from the deep margin, 3.0 cm from the superior margin, 16.0 cm from the inferior margin, 3.5 cm from the medial margin and 12.0 cm from the lateral margin. An area of interparenchyma hemorrhage is also identified in the inner upper quadrant, approximately 5.0 cm from the nipple. An additional suspicious area of pale-pink induration with a granular, cut surface is identified in the lower outer quadrant at approximately 4 o'clock. The second suspicious area is located 2.6 cm away from the deep margin, 1.8 cm away from the superficial margin, 10.5 cm away from the superior margin, 8.5 cm away from the inferior margin, 4.5 cm away from the lateral margin and 13.5 cm away from the medial margin. Cassettes are submitted as follows:
 - 1 Superficial margin
 - 2 Deep margin
 - 3 Superior margin
 - 4 Inferior margin
 - 5 Medial margin
 - 6 Lateral margin
 - 7-13 Suspicious area and surrounding parenchyma submitted in toto
 - 14 Section of the hemorrhagic area
 - 15 Sections of the second suspicious area
 - 16 Section of the nipple
 - 17 Representative section of uninvolvolved breast parenchyma in the upper outer quadrant
 - 18 Representative section of uninvolvolved parenchyma in the upper inner quadrant
 - 19 Representative section of uninvolvolved parenchyma in the lower inner quadrant
 - 20 Representative section of uninvolvolved parenchyma in the lower outer quadrant
- C. Received fresh and labeled "sentinel node #1, right side " is a segment of tan-yellow, fibroadipose tissue measuring 2.0 x 1.3 x 1.0 cm. Examinations of the specimen revealed two possible lymph nodes. Cassettes are submitted as follows:
 - 1 One lymph node bisected and submitted for frozen section
 - 2 One lymph node bisected submitted for frozen section
 - 3 Remainder of the adipose tissue submitted for frozen section in one cassette
- D. Received in formalin and labeled "non-sentinel lymph node right side" is a segment of tan-white, soft tissue measuring 1.8 x 0.7 x 0.4 cm. The specimen is bisected and submitted in toto in one cassette.

SURGICAL PATHOL Report

- E. Received fresh and labeled "sentinel lymph node #2, right side, c' such prep (FS)" is a segment of tan-yellow, fibroadipose tissue measuring 2.1 x 1.1 x 0.6 cm. Examinations of the segment revealed one lymph node. Cassettes are submitted as follows:
- 1 One lymph node bisected and submitted for frozen section
 2
- F. Received in formalin and labeled "right breast additional superior flap" is a segment of tan-yellow, fibroadipose tissue measuring 6.0 x 3.7 x 1.6 cm. The specimen is received unoriented. One of the surface is rough, irregular and appears to face the previous resection site. The surface was inked in orange. The opposite surface was inked in black. Serial sections through the specimen revealed no suspicious areas. Representative sections submitted in six cassettes.
- G. Received fresh and labeled "right breast 1 stitch superior, 2 stitches lateral" is a mastectomy specimen, which measures 23.0 x 22.0 x 4.0 cm and weighs 670.0 grams. There is an ellipse of skin with areola and nipple, which measures 9.0 x 3.5 x 0.2 cm. The nipple measures 1.2 x 1.1 cm. The skin is unremarkable. The section margins are inked as follows: superior, green and all other margins are inked in black. Serial section through the specimen revealed an area of pale-pink induration measuring 2.5 x 1.4 x 1.2 cm and is located in the lower outer quadrant. A firm area is present at the superficial margin and is located 3.0 cm from the inferior margin, 2.5 cm from the deep margin and 7.0 cm from the superior margin. The remainder of the parenchyma consists of unremarkable fibroadipose tissue with approximately 70% adipose tissue and 30% stroma. No other suspicious areas were identified. Cassettes are submitted as follows:
- 1 Anterior margin
 2 Inferior margin
 3 Deep margin
 4 Lateral margin
 5 Superior margin
 6 Medial margin
 7-13 Area of induration submitted
 14 Representative section of uninvolved parenchyma in the upper outer quadrant
 15 Representative section of uninvolved parenchyma in the upper inner quadrant
 16 Representative section of uninvolved parenchyma in the lower inner quadrant
 17 Representative section of uninvolved parenchyma in the lower outer quadrant near the lesion

ICD-9(s): 174.2 174.5

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