

ICD-0-3

Carcinoma, infiltrating duct, NOS 8500/3
12/10/11

m

PATIENT HISTORY:

* DATE of LMP: *
 DATE OF LAST DELIVERY: *
 PRE-OP DIAGNOSIS: RIGHT BREAST CA
 POST-OP DIAGNOSIS: SAME
 OPERATIVE PROCEDURE: RIGHT MODIFIED RADICAL MASTECTOMY
 CLINICAL HISTORY: *
 MATERIAL SUBMITTED: RIGHT (MOD) RADICAL MASTECTOMY, PROCUREMENT BY SURGICAL PROCEDURE

Site code: breast, NOS C50.9

FINAL DIAGNOSIS:**FINAL DIAGNOSIS:**

RIGHT MODIFIED RADICAL MASTECTOMY:
INFILTRATING DUCTAL CARCINOMA, NOTTINGHAM SCORE 9/9 (TUBULES 3, NUCLEI 3, MITOSIS 3), 8.0 BY 3.0 BY 1.5 CM
(CROSS REFER [REDACTED])
 - DUCTAL CARCINOMA IN-SITU, NON-COMEDO AND SOLID TYPE, POOR NUCLEAR GRADE, REPRESENTING 5% OF THE TUMOR VOLUME
 - LYMPHOVASCULAR PERMEATION IS SEEN
 - MARGINS FREE OF TUMOR
 - NIPPLE NEGATIVE FOR PAGET'S DISEASE
 - TEN OF FIFTEEN (10/15) LYMPH NODES, POSITIVE FOR METASTATIC CARCINOMA WITH EXTRACAPSULAR EXTENSION (3)
 NOTE: ER/PR immunoperoxidase assay and Her-2/NEU testing will be performed on block "A4".

ESTROGEN/PROGESTERONE RECEPTORS AND HER-2/NEU PERFORMED ON RIGHT BREAST TISSUE

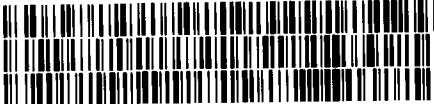
ESTROGEN RECEPTOR (0-85%; 1-10%; 2-5%; 3-0%) HSCORE OF 20. ESTROGEN RECEPTOR IS INTERPRETED AS BORDERLINE
 PROGESTERONE RECEPTOR (0-100%) HSCORE OF 0. PROGESTERONE RECEPTOR IS INTERPRETED AS NEGATIVE
 HSCORE: <= 15 NEGATIVE
 > 15 <= 30 BORDERLINE
 > 30 POSITIVE

HER-2/NEU - DAKO HERCEPTEST: A STRONG COMPLETE MEMBRANE STAINING IS OBSERVED IN MORE THAN 10% OF THE TUMOR CELLS. HER-2/NEU IS INTERPRETED AS POSITIVE (SCORE 3+).

UUID:46DE21ED-1E08-4095-9B68-88D10AC74673

TCGA-BH-A18R-01A-PR

Redacted



Criteria	Yes	No
Diagnosis Discrepancy		X
Primary Tumor Site Discrepancy		X
HIPAA Discrepancy		X
Prior Malignancy History		X
Ductal/Synchronous Primary Noted		X
Case is [circle]: <input checked="" type="checkbox"/> QUALIFIED / <input type="checkbox"/> DISQUALIFIED		
Reviewer Initials: <i>[Signature]</i>	Date Reviewed: <i>[Signature]</i>	