



Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HIPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Ideal/Synchronous Primary Malignant		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials:	RW	
Date Reviewed:	4/25/11	

Final Diagnosis

Breast, left, total mastectomy: Infiltrating ductal carcinoma, Nottingham grade II (of III), [tubules 2/3, nuclei 2/3, mitoses 3/3; Nottingham score 7/9], forming a 4.2 x 4.0 x 3.0 cm mass located in the upper outer quadrant of the breast [AJCC pT2]. Focal ductal carcinoma in situ, intermediate nuclear grade, comprising approximately 5% of tumor volume. The non-neoplastic breast parenchyma shows nonproliferative fibrocystic changes. Biopsy site changes present. The tumor does not involve the nipple, overlying skin, or underlying chest wall. All surgical resection margins, including deep margin, are negative for tumor (minimum tumor free margin, 1.5 cm, anterior margin).

Lymph nodes, left axillary sentinel, excision: Multiple (8) left axillary sentinel lymph nodes are negative for tumor (AJCCpN0(i-)(sn)). Blue dye was identified in lymph node Nos. 2A, 2B, and 2C. No blue dye was identified in lymph node Nos. 1, 3, 4, 5, and 6. Immunohistochemical cytokeratin stain was performed on the paraffin embedded sentinel lymph node tissue and confirms the H&E impression.

Estrogen and progesterone receptor analysis and HER2/neu have been ordered on paraffin embedded tissues.

ICD-0-3

carcinoma, infiltrating duct, nos 8500/3

Site: breast, nos C50.9

rw

4/25/11