

Chief of Pathology

Phone

Fax

Specimen:

Received:

Spec Type: SURGICAL P

Status:

Subm Dr:

[REDACTED]
PRE-OPERATIVE DIAGNOSIS

LEFT BREAST CANCER INVASIVE

ICD - O - 3

Carcinoma, infiltrating lobular, nos 8520/3
Site: breast, nos C50.9 1/27/11

[REDACTED]
OPERATION PERFORMED

DATE:

DOCTOR(S):

PROCEDURE: SIMPLE MASTECTOMY/SENTINEL NODE BX

[REDACTED]
TISSUE REMOVED

- A. LT BREAST 7:00 SUPERFICIAL MARGIN
- ✓ B. LT BREAST MASTECTOMY
- C. LT SENTINEL NODE #1
- D. LT SENTINEL NODE #2
- E. LT BREAST ADDITIONAL TISSUE 12:00
- F. RT SENTINEL NODE #1
- G. RT SENTINEL NODE #2
- H. RT BREAST TISSUE

UUID:AB083371-A2AB-4F57-8FBF-0DB2C91CEDDE
TCGA-A2-A0YL-01A-PR

Redacted



[REDACTED]
HISTOLOGIC DESCRIPTION

PART A RECEIVED LABELED [REDACTED] LEFT BREAST 7 O'CLOCK SUPERFICIAL MARGIN INK MARKS NEW MARGIN, IS AN OVOID FLAT PORTION OF YELLOW FATTY TISSUE MEASURING 6 X 4 X 0.9 CM IN GREATEST DIMENSIONS. INK IS FOUND ON ONE SIDE OF THE SPECIMEN. THIS IS RE-INKED WITH BLUE INK WITH A PERIMETER OF BLACK INK. THIS IS SECTIONED AND SUBMITTED ENTIRELY LABELED A1 THROUGH 6.

PART B RECEIVED LABELED [REDACTED] LEFT BREAST STITCH AT 12 O'CLOCK, IS A SIMPLE MASTECTOMY SPECIMEN MEASURING 16 X 16 X 5.2 CM. THE NIPPLE IS UNREMARKABLE WITHIN A 9.5 X 4.8 CM SKIN ELLIPSE. BLUE DYE IS NOTED IN THE MID-SUPERIOR PORTION OF THE SPECIMEN. A SUTURE DENOTES 12 O'CLOCK. THE SUPERFICIAL ASPECT IS MARKED WITH BLUE INK, THE DEEP MARGIN WITH BLACK INK. SECTIONING REVEALS THE CENTRAL 80% OF THE SPECIMEN TO CONSIST OF FIRM PINK-TAN TISSUE WITH SOME CYSTIC AREAS. THERE IS ILL-DEFINED INDURATION WITHIN THIS FIBROUS TISSUE AS WELL AS FOCAL NODULARITY. THE MOST INDURATED TISSUE MEASURES 9.0 CM FROM SUPERIOR TO INFERIOR, 9.0 CM FROM MEDIAL TO LATERAL AND UP TO 3.8 CM FROM SUPERFICIAL TO DEEP. THIS IS IN THE CENTRAL PORTION OF THE BREAST. GROSSLY, THIS INVOLVES THE CENTRAL FOUR QUADRANTS OF THE SPECIMEN. THE CENTRAL LESIONAL AREA IS GREATER THAN 1 CM FROM THE SUPERIOR, INFERIOR, MEDIAL AND LATERAL MARGINS GROSSLY. SECTIONING THE CENTRAL FIBROUS TISSUE REVEALS A MOTTLED PINK TO GRAY-WHITE APPEARANCE. SECTIONS ARE SUBMITTED AS FOLLOWS: B1--NIPPLE, B2--UPPER OUTER QUADRANT, B3--UPPER INNER QUADRANT, B4--LOWER INNER QUADRANT, B5--LOWER OUTER QUADRANT. NOTE: B1 THROUGH B5 ARE MIRROR IMAGE TO PROTOCOL SECTIONS. B6--UPPER OUTER QUADRANT AND DEEP MARGIN, B7--EXTREME INFERIOR LESION WITH SUPERFICIAL MARGIN (7 O'CLOCK AREA), B8--EXTREME SUPERIOR LESION WITH 5 CM OF INTERVENING TISSUE BETWEEN THIS AND B7, B9--EXTREME MEDIAL ASPECT OF THE LESION, B10--EXTREME LATERAL

Chief of Pathology

Phone ()
Fax

Patient: [REDACTED]

(Continued)

Specimen:

Received:

Status:

Spec Type: SURGICAL P

Subm Dr:

GROSS DESCRIPTION

(Continued)

ASPECT OF THE LESION 9 CM FROM B9, B11--SUBAREOLAR AREA, B12--UPPER OUTER QUADRANT, B13--UPPER INNER QUADRANT, B14--LOWER INNER QUADRANT, B15--LOWER OUTER QUADRANT, B16--QUESTION BIOPSY SITE CENTRAL BREAST, B17--QUESTION FIBROCYSTIC DISEASE UPPER INNER QUADRANT.

PART C RECEIVED LABELED [REDACTED] LEFT SENTINEL NODE #1 HOT AND BLUE, IS YELLOW-RED FATTY TISSUE MEASURING 2.7 X 2.1 X 1.2 CM. FOCAL BLUE DYE IS NOTED. SECTIONING REVEALS THIS TO BE A LARGELY FAT-REPLACED LYMPH NODE WITH FOCAL BLUE DISCOLORATION. IN THE ADJACENT TISSUE, THREE ADDITIONAL LYMPH NODES ARE IDENTIFIED MEASURING 0.5 TO 0.7 CM IN GREATEST DIMENSION. THE LARGEST GROSSLY FAT-REPLACED NODE IS SUBMITTED AS C1. THE REMAINING THREE NODES ARE SUBMITTED AS C2.

PART D RECEIVED LABELED [REDACTED] LEFT SENTINEL NODE #2 HOT AND BLUE, IS YELLOW FATTY TISSUE MEASURING 3 X 2.7 X 1.0 CM. SECTIONING REVEALS A 1.4 CM IN GREATEST DIAMETER GROSSLY UNREMARKABLE LYMPH NODE, SUBMITTED LABELED D.

PART E RECEIVED LABELED [REDACTED] LEFT BREAST ADDITIONAL 12 O'CLOCK MARGIN INK AT NEW MARGIN, IS AN IRREGULAR PORTION OF YELLOW-RED FATTY TISSUE MEASURING 11.5 X 5.3 X 1.0 CM. INK IS FOUND ON ONE SIDE OF THE SPECIMEN. THIS IS FURTHER MARKED WITH BLUE INK WITH A PERIMETER OF BLACK INK. REPRESENTATIVE TISSUE IS SUBMITTED LABELED E1 THROUGH 10. APPROXIMATELY 70% OF THE SPECIMEN IS SUBMITTED.

PART F RECEIVED LABELED [REDACTED] RIGHT SENTINEL NODE #1 HOT AND BLUE, IS AN OVOID PORTION OF YELLOW-BLUE TISSUE MEASURING 1.1 X 0.5 X 0.5 CM. SECTIONING REVEALS THIS TO BE UNREMARKABLE NODAL TISSUE, SUBMITTED LABELED F.

PART G RECEIVED LABELED [REDACTED] RIGHT SENTINEL NODE 2 BLUE AND HOT, IS YELLOW-RED FATTY TISSUE WITH BLUE DYE MEASURING 0.8 X 0.5 X 0.4 CM. THIS IS BISECTED REVEALING UNREMARKABLE NODAL TISSUE. THIS IS SUBMITTED LABELED G.

PART H RECEIVED LABELED [REDACTED] IS A SIMPLE MASTECTOMY SPECIMEN MEASURING 20.5 X 18 X 4.5 CM. THE NIPPLE IS UNREMARKABLE WITHIN A 9.3 X 6.2 CM SKIN ELLIPSE. FOCAL BLUE DISCOLORATION IS NOTED IN THE 12 O'CLOCK AREA WHERE THERE IS AN ORIENTING SUTURE. THE SUPERFICIAL ASPECT IS MARKED WITH BLUE INK, THE DEEP WITH BLACK INK. SECTIONING REVEALS THE CENTRAL 85% OF THE SPECIMEN TO CONSIST OF PINK-TAN, FIRM FIBROUS TISSUE WITH MULTIPLE CYSTIC SPACES CONTAINING CLOUDY BROWN FLUID. NO DISTINCT MASSES ARE IDENTIFIED. REPRESENTATIVE SECTIONS ARE SUBMITTED AS FOLLOWS: H1--NIPPLE, H2--CENTRAL DEEP MARGIN, H3 AND 4--UPPER INNER QUADRANT, H5 AND 6--UPPER OUTER QUADRANT, H7 AND 8--LOWER OUTER QUADRANT, H9 AND 10--LOWER INNER QUADRANT. NOTE THAT H4 IS THE EXTREME MEDIAL MARGIN.

Chief of Pathology

Phone

Fax

Patient: [REDACTED]

(Continued)

Specimen:

Received:

Status:

Spec Type: SURGICAL P

Subm Dr: [REDACTED]

[REDACTED]
PATH PROC NUMBER

PROCEDURES:

88307/8, IMMUNOPEROXIDAS/4, A BLK/6, B BLK/17, CBX X6/2, DBX X6, E BLK/10,
FBX X6, GBX X6, H BLK/10

[REDACTED]
FINAL DIAGNOSIS

PART A LEFT BREAST, REEXCISION OF SUPERFICIAL 7 O'CLOCK MARGIN: FATTY
BREAST TISSUE WITH NO EVIDENCE OF TUMOR AND CLEAR MARGIN.

PART B LEFT BREAST, SIMPLE MASTECTOMY:

1. DIFFUSELY MULTIFOCAL AND MULTICENTRIC INTRALOBULAR AND INFILTRATING LOBULAR CARCINOMA, NUCLEAR GRADE II, LOW MITOTIC INDEX AND TUBULE FORMATION 3, WITH TOTAL NOTTINGHAM SCORE OF 6.
2. THE INVASIVE TUMOR IS SEEN IN SECTIONS FROM EACH OF THE FOUR QUADRANTS ON 14 OF 17 BLOCKS EXAMINED, HAVING A MAXIMUM GROSS DIMENSION OF 9 CM.
3. THE TUMOR IS GREATER THAN 1 CM FROM THE MARGINS OF EXCISION.
4. LYMPHOVASCULAR INVASION IS IDENTIFIED.

PART C LEFT AXILLA, SENTINEL LYMPH NODE: METASTATIC BREAST CARCINOMA IS IDENTIFIED ON H&E STEP SECTIONS AND CYTOKERATIN STAIN IN 3 LYMPH NODES, THE LARGEST FOCUS OF WHICH MEASURES 5 MM.

PART D LEFT AXILLA, SENTINEL LYMPH NODE BIOPSY #2: METASTATIC CARCINOMA CONSISTENT WITH BREAST PRIMARY IS MULTIFOCALLY IDENTIFIED IN THE LYMPHOID SINUSES ON H&E STEP SECTIONS AND CYTOKERATIN STAIN IN 1 LYMPH NODE.

PART E LEFT BREAST, REEXCISION OF 12 O'CLOCK MARGIN: FATTY BREAST TISSUE WITH NO EVIDENCE OF TUMOR AND CLEAR MARGIN.

PARTS F AND G RIGHT AXILLA, SENTINEL LYMPH NODE BIOPSIES 1 AND 2: NO EVIDENCE OF METASTATIC TUMOR ON H&E STEP SECTIONS OR CYTOKERATIN STAIN IN 2 LYMPH NODES EXAMINED.

PART H RIGHT BREAST, SIMPLE MASTECTOMY: FIBROCYSTIC CHANGES INCLUDING COLUMNAR CELL HYPERPLASIA WITH FOCAL AREA OF MILD EPITHELIAL ATYPIA, APOCRINE METAPLASIA, MILD TO MODERATE USUAL DUCT HYPERPLASIA, DENSE FIBROUS STROMA AND MICROCYST FORMATION.

Chief of Pathology

Phone

Fax

Patient: [REDACTED]

(Continued)

Specimen:

Received:

Status:

Spec Type: SURGICAL P

Subm Dr: [REDACTED]

CODE [REDACTED]

1

Signed _____

) (prelim.)

_____(signature on file) _____

Criteria	Yes	No
Diagnos Discrepancy		✓
Primary Tumor Site Discrepancy		✓
HIPAA Discrepancy		✓
Prior Malignancy history		✓
Dual/Synchronous Primary Noted		✓
Case is (circle): <input checked="" type="checkbox"/> QUALIFIED <input type="checkbox"/> DISQUALIFIED		
Reviewer Initials: <i>JL</i>	<i>JL</i>	<i>JL</i>
	Reviewed	