

Clinical Diagnosis & History:  
IDC on core biopsy of left breast.

Specimens Submitted:

- 1: SP: Sentinel node #1 level 1 left axilla (fs)
- 2: SP: Sentinel node #2 level 1 left axilla (fs)
- 3: SP: Sentinel node #3 level 1 left axilla (fs)
- 4: SP: Left breast mass
- 5: SP: Superior margin left breast
- 6: SP: Medial margin left breast
- 7: SP: Inferior margin left breast
- 8: SP: Lateral margin left breast
- 9: SP: Deep margin left breast
- 10: SP: Additional suspicious lymph node left axilla

DIAGNOSIS:

- 1) SENTINEL LYMPH NODE #1, LEVEL I, LEFT AXILLA; EXCISION:
  - ONE LYMPH NODE SHOWING MICROSCOPIC CLUSTER OF TUMOR CELLS (APPROXIMATELY 8 CELLS; < 0.2 MM) WITHIN CAPSULAR LYMPHATIC VESSEL.
  - THE TUMOR IS IDENTIFIED ON CYTOKERATIN STAINS AND CORRESPONDING DEEPER LEVEL H&E AND NEGATIVE CONTROL SLIDE.
- 2) SENTINEL LYMPH NODE #2, LEVEL I, LEFT AXILLA; EXCISION:
  - BENIGN LYMPH NODE (0/1).
  - ADDITIONAL H&E-STAINED SECTIONS AND IMMUNOHISTOCHEMICAL STAINS FOR CYTOKERATINS (AE1:AE3) SHOW NO EVIDENCE OF METASTATIC TUMOR.
- 3) SENTINEL LYMPH NODE #3, LEVEL I, LEFT AXILLA; EXCISION:
  - BENIGN LYMPH NODE (0/1).
  - ADDITIONAL H&E-STAINED SECTIONS AND IMMUNOHISTOCHEMICAL STAINS FOR CYTOKERATINS (AE1:AE3) SHOW NO EVIDENCE OF METASTATIC TUMOR.
- 4) BREAST, LEFT MASS; EXCISION:
  - INVASIVE DUCTAL CARCINOMA, POORLY DIFFERENTIATED, HISTOLOGIC GRADE III/III, NUCLEAR GRADE III/III, MEASURING 1.9 CM MICROSCOPICALLY.
  - FOCAL DUCTAL CARCINOMA IN SITU (DCIS), SOLID AND CRIBRIFORM TYPE WITH INTERMEDIATE TO HIGH NUCLEAR GRADE AND NECROSIS. THE DCIS CONSTITUTES < 25% OF THE TOTAL TUMOR MASS, AND IS PRESENT ADMIXED WITH AND ADJACENT TO THE INVASIVE

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UUID:D9432167-0F2E-4377-9DB4-EA4E59A6C989  
TCGA-AO-A1KT-01A-PR

Redacted



1CB-0-3  
Carcinoma, infiltrating ductal, NOS  
8500/3

Site: breast, NOS C50.9 per  
2/16/11

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HIPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case is (circle): QUALIFIED / DISQUALIFIED		
Reviewer Initials	Date Reviewed: 2/16/11	

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I ATTEST THAT THE ABOVE DIAGNOSIS IS BASED UPON MY PERSONAL EXAMINATION OF  
THE SLIDES (AND/OR OTHER MATERIAL), AND THAT I HAVE REVIEWED AND APPROVED  
THIS REPORT.

\*\*\* Report Electronically Signed Out \*\*\*

Special Studies:

Result	Special Stain	Comment
	RECUT	

Gross Description:

1. The specimen is received fresh for frozen section consultation, labeled, "Sentinel node #1, level 1, left axilla", and consists of one lymph node measuring 1.0 x 2.6 x 0.5 Cm, which is bisected and entirely submitted.

Summary of sections:

FSC -- frozen section control (one node)

2. The specimen is received fresh for frozen section consultation, labeled, "Sentinel node #2, level 1, left axilla", and consists of one lymph node measuring 1.1x 0.4 x 0.3 Cm, which is entirely submitted.

Summary of sections:

FSC -- frozen section control (one node)

3. The specimen is received fresh for frozen section consultation, labeled, "Sentinel node #3, level 1, left axilla", and consists of two possible lymph nodes measuring 0.3 x 0.3 x 0.2 cm in aggregate. Entirely submitted.

Summary of sections:

FSC -- frozen section control (two possible nodes)

4). The specimen is received unoriented, labeled "Left breast mass " and consists of a piece of fibrofatty tissue measuring 6 x 3.8 x 2.5 cm. The specimen is entirely inked black. Serial sectioning reveals a 1.5 x 1 x 1 cm tan-white firm mass with central hemorrhage. Sectioning through the remaining tissue reveals fatty breast parenchyma. The tumor is entirely submitted and the remaining tissue is representatively submitted.

Summary of sections:

NT - tumor and closest tissue edge

SS - serial sections of remaining tissue

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dimension. All identified lymph nodes are submitted.

Summary of sections:  
BLN - bisected lymph nodes

Summary of Sections:

Part 1: SP: Sentinel node #1 level 1 left axilla (fs)

Block	Sect.	Site	PCs
1		FSC	1

Part 2: SP: Sentinel node #2 level 1 left axilla (fs)

Block	Sect.	Site	PCs
1		FSC	1

Part 3: SP: Sentinel node #3 level 1 left axilla (fs)

Block	Sect.	Site	PCs
1		FSC	1

Part 4: SP: Left breast mass

Block	Sect.	Site	PCs
3		mt	3
4		ss	4

Part 5: SP: Superior margin left breast

Block	Sect.	Site	PCs
4		ss	4

Part 6: SP: Medial margin left breast

Block	Sect.	Site	PCs
4		ss	4

Part 7: SP: Inferior margin left breast

Block	Sect.	Site	PCs
2		ss	2

Part 8: SP: Lateral margin left breast

Block	Sect.	Site	PCs
2		ss	2

Part 9: SP: Deep margin left breast

Block	Sect.	Site	PCs
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Specimens Submitted:  
1: LEFT BREAST (

Test Performed:  
FISH for detection of gene amplification

PROBE(S):  
LSI HER2 SO/ CEP 17 SG DNA probes

DIAGNOSTIC INTERPRETATION:  
HER2/ CEP 17: 1.4/ NOT AMPLIFIED  
Her-2/neu gene amplification is NOT detected.  
(cut off ratio: > 2.2 HER2 gene amplified; < 1.8 HER2 gene not amplified;  
1.8 2.2 equivocal)

LAB NOTES:  
Block #4(MT3)  
Specimen fixative type: Formalin  
Adequate number of invasive tumor cells present: Yes  
Number of invasive tumor cells counted: 20 + 20  
Average number of HER2 probe signals per nucleus: 2.4  
Average number of CEP17 chromosome probe signals per nucleus: 1.7  
Average HER2/CEP 17 ratio: 1.4

The PathVysion HER2 DNA probe kit (Vysis) is an FDA-approved method for assessment of HER2 gene amplification in breast cancer specimens. The HER2 test results are reported in accordance with the ASCO/CAP guideline recommendations for HER2 testing in breast cancer (J Clin Oncol 2007; 25 (1):118-145).

I ATTEST THAT THE ABOVE DIAGNOSIS IS BASED UPON MY PERSONAL EXAMINATION OF THE SLIDES (AND/OR OTHER MATERIAL), AND THAT I HAVE REVIEWED AND APPROVED THIS REPORT.

--- Report Electronically signed vuc ---

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