

Carcinoma, infiltrating duct, NOS

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11/22/10

Site: breast, nos

450.9

Redacted



Department of Cancer Pathology

copy No.

Date:

Internal invoice No.

Value of diagnostic procedure

Examination No.: _____

Patient:

PESEL:

Age:

Gender: F

Material: Multiple organ resection – right breast

Unit in charge:

Physician in charge:

Material collected on:

Material received on:

Expected time of examination: up to 8 working days

Clinical diagnosis: Cancer of the right breast.

Examination performed on:

Results of immunohistochemical examination:

Estrogen receptors found in 10-75% of neoplastic cell nuclei. Progesterone receptors found in 10-75% of neoplastic cell nuclei. HER2 protein stained with HercepTest™ by DAKO. Negative reaction in invasive cancerous cells (Score = 1+)

Compliance validated by

Examination performed on:

Macroscopic description:

- ✓ Right breast, sized 16.6 x 12.4 x 4.8 cm, removed along with axillary tissues sized 8 x 6 x 2 cm and a skin flap of 10,7 x 8,4 cm. Weight 513 g.

Tumour sized 1,5 x 1,9 x 1,0 cm in the upper outer quadrant, placed 3.3 cm from the upper edge, 0.1 cm from the base and 0.8 cm from the skin.

Microscopic description:

- ✓ Carcinoma ductale invasivum - NHG3 (3 + 3 +3: 52 mitoses/ 10 HPF, visual area diameter: 0.55 m). Tumour of "basal - like carcinoma" morphology ? Ma mi 11 a sine laesionibus.

Glandular tissue showing lesions of the type mastopathia fibrosa et cystica.

Additional parenchyma atrophy.

AXILLARY LYMPH NODES

Lymphonodulitis chronica et sinus histiocytosis lymphonodorum (No VI).

Examination result:

**Carcinoma ductale invasivum mammae dextrae.
(NHG3, pT1c, pNO).**

Tumour of "basal - like carcinoma" morphology.

DUCTAL INVASIVE CARCINOMA OF THE RIGHT BREAST.

Compliance validated by:

criteria	Yes	No
agnosis Discrepancy		X
imary Tumor Site Discrepancy		X
IPVA Discrepancy		X
rior Malignancy History		X
ial/Synchronous Primary ^{Noted}		
ate Is ^{Noted} QUALIFIED		
view ^{Noted} DISQUALIFIED		

Date Reviewed: 11/11/11