

148-0-3
Infiltrating Duct Carcinoma, nd.
8500/3 Lw
Site: breast, nos 11/22/10
C50.9

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Department of Cancer Pathology

copy No.

Date:

Examination: Histopathological examination

Examination No.:

Patient: PESEL: Age: Gender: F

Material: Multiple organ resection – left breast with axillary tissues

Unit in charge:

Physician in charge:

Material collected on: Material received on

Expected time of examination: up to

Clinical diagnosis: Cancer of the left breast. ✓

Examination performed on: ✓

Results of immunohistochemical examination:

Estrogen receptors found in 75% of neoplastic cell nuclei. Progesterone receptors found in 10% of neoplastic cell nuclei. HER2 protein stained with HercepTest™ by DAKO.

Positive reaction in invasive cancerous cells (Score = 3+)

Compliance validated by:

Examination performed on

Macroscopic description:

Left breast, sized 22 x 17 x 5cm, removed along with axillary tissues sized 9 x 6 x 2 cm and a skin flap of 23 x 11 cm. Tumour sized 3.1 x 1.5 x 1.7 cm in the upper outer quadrant, placed 6 cm from the upper edge, 0.7 cm from the base and 1.2 cm from the skin.

Microscopic description:

Carcinoma ductale invasivum - NHG3 (2+3+3/21 mitoses/10 HPF - visual area: 0.55mm).

Glandular tissue outside the tumour showing lesions of the type mastopathia fibrosa et cystica, hyperplasia

ductalis simplex (UDH).

Axillary lymph nodes:

Metastases carcinomatose in lymphonodo (No I/XV).

Infiltratio capsulae lymphonodi.

Histopathological diagnosis:

Carcinoma ductale invasivum mammae sinistre.

Metastases carcinomatose in lymphonodo axillae (No I/XV). (NHG3; pT2; pN1a).

DUCTAL INVASIVE CARCINOMA

NERVIOSITATIS AXILLARY LYMPH NODE (V/XV)

Criteria	Yes	No
Diagnosis Discrepancy		
Actual/Tumor Site Discrepancy		
IPAS Discrepancy		
Tumor Malignancy History		
Non-Synchronous Primary Tumor		
Synchronous Primary Tumor	QUALIFIED	DISQUALIFIED
Specimen Received Date Received:	5/16/11	

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