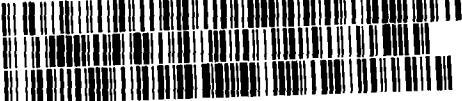


Criteria	Yes	No
Diagnostic Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HIPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary noted		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials:	LB	Date Reviewed: 4/20/11 JW 4/25/11

UUID:B481795F-C52C-4FCE-827A-07991C7A7C2E
TCGA-AR-A24U-01A-PR Redacted



Final Diagnosis

Breast, left, simple mastectomy: Infiltrating ductal carcinoma, with micropapillary differentiation, Nottingham grade III (of III) [tubules 3/3, nuclei 3/3, mitoses 2/3; Nottingham score 8/9], forming multiple (2) masses located in the lower outer quadrant adjacent to prior core biopsy site (3 o' clock--1.1 x 1.0 x 1.0 cm; 4 o' clock--1.6 x 1.5 x 1.5 cm) [AJCC pT1c]. Angiolymphatic invasion is present. The non-neoplastic breast parenchyma shows nonproliferative fibrocystic changes. Biopsy site changes in the upper outer quadrant (status post lumpectomy), negative for residual tumor. Nipple and skin without diagnostic abnormality. Skeletal muscle is present and not involved by tumor. All surgical resection margins, including the deep margin, are negative for tumor (minimum tumor free margin, 0.6 cm, superior anterior margin).

Lymph nodes, left axillary, excision: A single (of 5) left axillary lymph node is positive for metastatic carcinoma. Extranodal extension is present.

ICD-0-3

carcinoma, infiltrating duct, nos 8500/3

Site: breast, nos C50.9

JW

4/25/11