

Procedure Date:
Procedure Physician:
Attending Physician/Copies To:

ICD-0-3
Carcinoma, infiltrating duct, NOS 8500/3
Site: Breast, NOS C50.9 1/26/11 J.W.

UUID:81698E67-03C8-4F4D-9A68-2007058795AE
TCGA-BH-A1FJ-01A-PR

Redacted

PATIENT HISTORY:

- * DATE OF LMP: AGE
- * DATE OF LAST DELIVERY: *
- PRE-OP DIAGNOSIS: RIGHT BREAST CA
- POST-OP DIAGNOSIS: SAME
- OPERATIVE PROCEDURE: RIGHT MODIFIED RADICAL MASTECTOMY
- CLINICAL HISTORY: *

MATERIAL SUBMITTED: RIGHT (MOD) RADICAL MASTECTOMY, PROCUREMENT BY SURGICAL PROCEDURE
and axillary contents

FINAL DIAGNOSIS:

RIGHT MODIFIED RADICAL MASTECTOMY:

- INFILTRATING AND INTRADUCTAL CARCINOMA WITH PROMINENT VASCULAR SPACE INVOLVEMENT AND INTERMEDIATE NUCLEAR GRADE, 6.0 CM
- INTRADUCTAL CARCINOMA IS COMEDO TYPE AND COMPRISES APPROXIMATELY 20% OF TUMOR VOLUME
- MICROSCOPIC FOCI OF TUMOR IN VASCULAR SPACES INVOLVE RANDOM SECTIONS OF UPPER OUTER, LOWER INNER AND UPPER INNER QUADRANTS
- METASTATIC CARCINOMA INVOLVES SIX OF THIRTY-FIVE (6/35) AXILLARY LYMPH NODES
- NIPPLE, NEGATIVE FOR PGMENT'S DISEASE
- SURGICAL MARGINS FREE OF TUMOR IN PLANES OF SECTION
- RANDOM SECTIONS OF LOWER OUTER QUADRANT SHOWING FIBROCYSTIC CHANGES WITH FOCAL SEVERELY ATYPICAL DUCTAL EPITHELIAL HYPERPLASIA

NOTE: ER/PR immunoperoxidase assay will be performed on block A14.

S U P P L E M E N T A L R E P O R T
IMMUNOPEROXIDASE IDENTIFICATION OF ESTROGEN AND PROGESTERONE RECEPTORS IS CARRIED OUT ON SLIDE A14. DISTINCT INTRANUCLEAR STAINING IS IDENTIFIED FOR PROGESTERONE RECEPTOR (80%) BUT ONLY RARELY FOR ESTROGEN RECEPTOR (10%). THEREFORE, PROGESTERONE RECEPTOR IS INTERPRETED AS POSITIVE AND ESTROGEN AS NEGATIVE.
My signature below is attestation that I have reviewed all slides and agree with the findings as noted

Criteria	Yes	No
Diagnosis Discrepancy	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Primary Tumor Site Discrepancy	<input checked="" type="checkbox"/>	<input type="checkbox"/>
HIPAA Discrepancy	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Prior Malignancy History	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dual/Concurrent Primary Tumor	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Case is (circle): <input checked="" type="checkbox"/> VALID / <input type="checkbox"/> DISQUALIFIED		
Reviewer Initials: J.W.	Date Reviewed: 1/26/11	