



Case#: S14-124567

Patient: Doe, Jane
DOB: 10/13/1948

Facility: Community Hospital
MR#: 8897786
Age/Sex: 70 yo F

Collected: 01/22/2019
Received: 01/22/2019
Reported: 01/26/2019

Surgical Pathology Report

DIAGNOSIS

1. Infiltrating Ductal Carcinoma, Moderately Differentiated (SBR score 6), Right Breast Core Biopsies.
2. Ductal Carcinoma in situ, high grade.

NOTE: breast marker analysis is pending (IHC and FISH) and an addendum report will be issued. The results were reviewed by the pathologist.



Core Biopsies, Low Power



Infiltrating Ductal Carcinoma



Focal Gland Formation

CLINICAL HISTORY: palpable right breast mass; calcifications on mammogram

SITES: right breast core biopsies

GROSS: Received in formalin are 4 cores of white and yellow tissue, each measuring 2.0 X .03 cm in diameter. Totally embedded in one cassette. MS/ad

MICROSCOPIC: Sections reveal infiltrating ductal carcinoma. The tumor is composed of irregular, nests and cords of cells with focal gland formation. Individual cells have irregular nuclei and nucleoli. Well formed glands make up less than 20% of the tumor. Mitoses are occasionally encountered and these number 4 per 10 hpf. The tumor elicits a desmoplastic stromal reaction. Calcifications are seen within a few neoplastic ducts as well as the stroma. There is a focus of ductal carcinoma in situ involving one core. Nuclei are large and have prominent nucleoli. The duct lumen is filled with necrotic debris. All four core biopsies contain infiltrating carcinoma; the longest tumor segment is 1.7 cm in a 2 cm core.

Breast Marker analysis is pending and an addendum report will be issued.

PREVIOUS BX/PAP HISTORY: FNA, cyst left breast, benign (5/5/2005)



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