

ANATOMIC PATHOLOGY REPORT

Laboratory Medical Director: Robert W. Ghiselli, M.D.

3301 C Street, Ste 200E Sacramento, CA 95816 (916) 446-0424 Fax: (916) 446-9330 www.dpmginc.com

Patient: **TEST, PATIENT** Age: 68 (01/01/47) Pathology #: **DPS-16-01234**

Acct#: Sex: **FEMALE** Epic:

Date Obtained: Doctor: **Test Doctor** 03/23/2016 1234 Test st

Date Received: 03/23/2016

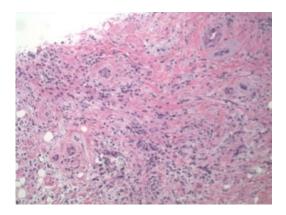
CC: 3161L

CLINICAL DATA: N63

RT BREAST BIOPSY US GUIDED 11:00 SPECIMEN:

DIAGNOSIS:

BREAST, RIGHT 11:00, ULTRASOUND-GUIDED NEEDLE BIOPSY: INVASIVE LOBULAR CARCINOMA.



NOTE: Dr. Kristen N. Vandewalker has reviewed this case and concurs. The results are given to Dr. Test on 3/24/16. ER, PR and HER-2/neu studies will be performed on the tissue and the results will be reported separately.

GROSS DESCRIPTION: PC:sas

Placed in formalin at 10:00 in a container labeled with the patient's name and "RT" are four tan to yellow to bright pink cores of fibrofatty tissue. The cores measure from 1.9 to 0.95 cm in length with an average diameter of 0.2 cm. The specimen is filtered and entirely submitted between sponges one cassette.

MICROSCOPIC DESCRIPTION:



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Sections show an invasive lobular carcinoma in a fibroelastotic background with focal LCIS. If the cores are representative of the tumor then it is grade I (estimated SBR score 5). The tumor measures at least 0.8 cm in greatest linear dimension.

JC:dl:ek; C50.919

This report <u>may</u> include a photomicrograph of the slide under examination. For a variety of reasons, including the limitations of some electronic interfaces, the photomicrograph may not appear on the version of this report that you view. The photomicrograph is not of diagnostic quality and should not be relied upon by any professional. Health care professionals should rely only upon the pathologist's written interpretation.

Final Diagnosis on 03/24/2016 by **Jamie Cassity, M.D.** Electronically signed at Sutter Davis Hospital, 2000 Sutter Place Davis, CA