

Pt. Name:	نعمة احمد أحمد الجبلي		Lab Number:	3534-2026	
Pt. Age:	Adult.	Gender:	Female	Received date:	2026-05-19
Referred By:	د/ فارس		Reported date:	2026-05-31	

PATHOLOGY REPORT

Clinical Information.	Lt. modified radical mastectomy.
Nature of specimen.	Lt. modified radical mastectomy.

GROSS:

Received was a left modified radical mastectomy specimen measuring 26 x 12 x 5 cm, partly covered by an ellipse of skin measuring 18 x 8 cm, with an attached axillary tail measuring 7 x 5 x 3 cm. The nipple appeared grossly unremarkable. Serial sectioning revealed two grey masses. The largest mass measured 2.3 x 1.8 x 1.5 cm and was located 0.6 cm from the deep margin, 1.3 cm from the superior margin, 8.5 cm from the inferior margin, 6 cm from the medial margin, and 11 cm from the lateral margin. A second mass measured 1 x 0.8 cm. Additionally, rubbery whitish area measuring 7 x 5 cm, suggestive of a fibroadenoma, was identified. Dissection of the axillary tail revealed 8 lymph nodes, with the largest measuring 2.3 cm.

MICROSCOPIC:

Sections show a unifocal invasive carcinoma composed of mixed invasive micropapillary and invasive ductal carcinoma, Nottingham histologic grade 2. The invasive tumor measures 2.3 cm in greatest dimension and is characterized by infiltrating nests, cords, and focal micropapillary structures within a desmoplastic stroma. Lymphovascular permeation and perineural invasion are identified. An associated ductal carcinoma in situ (DCIS) component is present, comprising approximately 5% of the tumor volume. The DCIS is of intermediate nuclear grade and shows comedo-type necrosis. All surgical resection margins are free of invasive carcinoma and DCIS. The closest margin is the deep margin, located 0.6 cm from the invasive carcinoma. The grossly described rubbery whitish area reveals intermediate-grade DCIS. The smaller discrete mass measures 1 cm and is consistent with a pericanalicular fibroadenoma. The nipple is involved by lymph vascular emboli and intermediate grade DCIS, but no evidence of Paget disease is identified. Eight axillary lymph nodes are examined, seven of which show metastatic carcinoma. Focal extranodal extension is present.

PROCEDURE

Modified radical mastectomy

SPECIMEN LATERALITY

Left

INVASIVE CARCINOMA

- Histologic type: Invasive carcinoma of no special type (ductal carcinoma) with mixed invasive micropapillary features
- Tumor focality: Single focus
- Tumor size: 23 mm (2.3 cm)
- Histologic grade (Nottingham)

Grade 2 (total score 7)

Tubule formation: 3

Nuclear pleomorphism: 2

Mitotic rate: 2

DUCTAL CARCINOMA IN SITU (DCIS)

- DCIS present: Yes
- Estimated extent: Approximately 5%
- Nuclear grade: Intermediate
- Necrosis: Present, comedo type

ADDITIONAL PATHOLOGIC FEATURES

- Lymphovascular invasion: Present
- Perineural invasion: Present
- Nipple involvement: Not identified
- Paget disease: Not identified

MARGINS

- Margin status (invasive carcinoma): Negative
- Margin status (DCIS): Negative
- Closest margin: Deep (posterior)
- Distance to closest margin: 6 mm (0.6 cm)

REGIONAL LYMPH NODES

- Number examined: 8
- Number positive: 7
- Extranodal extension: Present, focal

ADDITIONAL FINDINGS

- Intermediate-grade ductal carcinoma in situ involving grossly rubbery whitish area (7 × 5 cm)
- Pericanalicular fibroadenoma corresponding to 1 cm lesion

PATHOLOGIC STAGE (AJCC 8th edition)

- pT2 pN2a

DIAGNOSIS:

Left breast, modified radical mastectomy:

- **Invasive carcinoma of no special type (ductal) with mixed invasive micropapillary features, grade 2.**
- **Associated intermediate-grade DCIS with comedo necrosis (~5%)**
- **Lymphovascular invasion present**
- **Perineural invasion present**
- **Margins negative (closest deep margin 6 mm)**
- **7/8 axillary lymph nodes positive for metastatic carcinoma with focal extranodal extension**
- **No Paget disease identified**
- **Associated fibroadenoma.**

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD

31-05-2026

Nereen Tahoun