

# BREAST HISTOPATHOLOGY SYNOPTIC REPORT

Name ..... Histology number .....

## Part 1: Macroscopy

Date received Side  Left  Right

Specimen type

- |  |   |
|--|---|
| <input type="checkbox"/> Diagnostic marker   | <input type="checkbox"/> Subcutaneous/skin-sparing mastectomy |
| <input type="checkbox"/> Therapeutic marker  | <input type="checkbox"/> Radical mastectomy                   |
| <input type="checkbox"/> Wide local excision | <input type="checkbox"/> Re-excision                          |
| <input type="checkbox"/> Simple mastectomy   | <input type="checkbox"/> Other                                |

Specimen radiograph provided  Yes  No

Radiological abnormality seen  Yes  No  Unsure

R grade  1  2  3  4  5

Radiological lesion  Stellate lesion  Calcification  Other  
 Circumscribed mass  Parenchymal deformity

Histological calcification present  Benign  Malignant  Benign and malignant  Absent

Specimen weight ..... g

Ellipse of skin ..... × ..... mm

Nipple  Normal  Indrawn  Not assessable

Fibrofatty tissue ..... × ..... × ..... mm

Lesion measures ..... × ..... × ..... mm

Site  OUQ  OLQ  IUQ  ILQ  Retroareolar  Not known

Macroscopic distance to nearest (.....) margin

Comments

**Part 2: Invasive carcinoma**

Invasive tumour size ..... mm

Whole tumour (DCIS + invasive) size ..... mm

Grade  1  2  3  N/A

T  1  2  3  N/A

P  1  2  3  N/A

M  1  2  3  N/A

Tumour extent  Localised  Multiple, evasive foci

Type  No special type (ductal NST)  
 Pure special type (90% purity, specify components present below)  
 Mixed tumour type (50–90% special type component, specify components present below)  
 Other malignant tumour (please specify) .....

Specify type component(s) present for pure special type and mixed tumour types:

Tubular/cribriform  Lobular  Mucinous  Medullary like  Ductal/no special type  
 Other (please specify) .....

Vascular invasion  Not seen  Present  Possible

Associated DCIS  None  Minimal (< 1 mm beyond)  Extensive

DCIS grade  Low  Intermediate  High

In situ lobular neoplasia present  Yes  No

Paget's disease present  Yes  No

*Excision*

Invasive tumour reaches margin  Yes  No  Not assessable

Closest relevant margin(s) to invasive tumour .....; ..... mm distant

Excision comments

Stage  1  2  3  Not assessable Lymph nodes sampled  Yes  No

Axillary nodes present:  No  Yes Total number ..... Number positive .....

For single node positivity, specify  Metastasis (> 2 mm)  
 Micrometastasis (≤2mm to > 0.2mm)  
 Isolated tumour cells (≤0.2mm)

Other nodes present  No  Yes Total number ..... Number positive .....

Site of other nodes .....

Stage comments

Nottingham prognostic index .....

Oestrogen receptor status  Positive  Negative

% cells positive ..... Quickscore/H Score .....

Additional comments

SNOMED Breast T04 M.....; T04 M.....  
Lymph node T08  Node negative M00100  Node positive M81406

Pathologist's signature and date .....

**Part 3: Final pathology DCIS**

- High Grade DCIS
- Intermediate grade DCIS
- Low Grade DCIS

Pure DCIS size ..... mm in maximum extent

- DCIS grade             Low             Intermediate     High
- DCIS architecture     Solid             Cribriform       Micropapillary     Papillary
- Other (specify) .....
- DCIS necrosis         Yes             No
- LCIS present          Yes             No
- Microinvasion (< 1 mm)  Yes             No
- Paget's disease       Yes             No                 Not assessable
- Radiological lesion    Stellate         Calcification     Other

*Excision*

DCIS reaches margin     Yes                             No

Closest relevant margin(s) to DCIS ..... mm distant

Excision comments

Lymph nodes sampled     Yes                             No

Number of axillary nodes sampled                            .....

Number of axillary nodes containing tumour                            .....

Details of other nodes

Additional comments

SNOMED            T04 – M85002    T04 ..... T08000 – M 001

Pathologist's signature and date .....

**Part 4: Final diagnosis benign lesion**

- Normal breast tissue
- Radial scar/complex sclerosing lesion
- Periduct mastitis/duct ectasia
- Fibroadenoma
- Fibrocystic change
- Multiple papillomata
- Solitary papillomata
- Surgical biopsy cavity
- Columnar cell change
- Other benign lesion

Benign lesion size (mm) .....

- Epithelial hyperplasia
- Not present
  - Present without atypia
  - Atypical ductal hyperplasia
  - Atypical lobular hyperplasia
  - Present with atypia, both ductal and lobular

Comments

SNOMED      T04 M.....;      T04 M.....

Consultant pathologist's signature and date .....

Trainee's signature .....

**Part 5: Separate axillary staging procedure (clearance, sampling or sentinel node)**

Stage  1  2  3 TNM (if used) .....

Axillary nodes present:  No  Yes Total number ..... Number positive .....

For single node positivity, specify  Metastasis (> 2mm)  
 Micrometastasis ( $\leq 2$ mm to  $> 0.2$ mm)  
 Isolated tumour cells ( $\leq 0.2$ mm)

Other nodes present  No  Yes Total number ..... Number positive .....

Site of other nodes .....

Comments

SNOMED T08  Node negative M00100  Node positive M81406

Pathologist's signature and date .....