

show further increase in extent and degree of sclerosis since last scan done on 11.04.2024.

There has been further increase in number, size and degree of FDG avidity of the known sclerotic/lytic metastatic lesions in head, neck and intertrochanteric region of right femur since last scan done on 11.04.2024.

There has been further increase in size but, minimal decrease in degree of FDG avidity of the known metastatic lesions in L1 vertebra since last scan done on 11.04.2024.

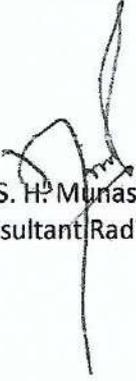
Multiple new FDG avid mixed lytic/sclerotic metastatic lesions are identified in the axial and appendicular skeleton.

Two hypermetabolic metastatic lesions in the liver which shows evidence of diffuse fatty infiltration.

There is no pulmonary metastases or hypermetabolic lymphnode metastases.

The overall appearances are in keeping with progression of the metastatic disease of known carcinoma of the left breast.

Incidentally noted multinodular goiter involving left lobe of the thyroid gland and thrombosed ovarian veins are again observed.


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HISTOPATHOLOGY

Block and slides of this specimen/s will be retained ONLY for six months after the date of this report. Specimen will be kept for one week

** OPD/AHH/ASH **

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REFERENCE No. : 01 0382 02/10/24
SAMPLE DATE & TIME : 02/10/2024 12:06 AGE : 38 Y/F
REPORT DATE & TIME : 08/10/2024 18:21 AHH2099920 / ASH2106888
PATIENT : MRS. W D B JAYAWANTHI
REFERRED BY : DR T SKANDARAJAH

Uninvolved liver tissue shows moderate steatosis and a mild periportal and parenchymal infiltrate of chronic inflammatory cells.

Conclusion : A. US guided Tru cut biopsy of upper outer quadrant lesion of the left breast.

Appearances are consistent with an invasive breast carcinoma - (NST).

Provisional tumour grade - Nottingham grade 1.

A low grade DCIS focus is evident.

Biopsy category - B5b.

Possibilities are :

1. A recurrence of known breast carcinoma.
2. A second primary.

B. US guided Tru-cut biopsy of segment VIII liver lesion.

Appearances are consistent with hepatic metastasis/ recurrence of a breast carcinoma.

Tissue blocks A3 + B3 are recommended for biomarker profile (ER, PR, HER2 and Ki-67) studies.

RGH - 004/005

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TEST : HISTOPATHOLOGY REPORT

Clinical history : H/O left breast carcinoma in 2022.
 Tru-cut biopsy histology - Invasive breast carcinoma (NST) = Nottingham grade 2.
 Now present with upper outer quadrant breast lesion and focal lesion in the segment VIII of liver.

Specimen : A. US guided Tru cut biopsy of upper outer quadrant lesion of the left breast.

B. US guided Tru cut biopsy of segment VIII liver lesion.

Macroscopy : A. 4 whitish and yellowish tissue cores measuring 17mm , 15mm, 15mm and 12mm in length.

B. 3 tan colour tissue cores measuring 18mm, 15mm and 13mm in length.

Microscopy : A. Sections reveal cores of breast tissue focally infiltrated by a carcinoma composed of tubules and cords of medium size polygonal cells (score 2/3) with moderately pleomorphic hyperchromatic nuclei (score 2/3) Mitotic activity is sparse (score 1/3). Background stroma is densely sclerotic with focal elastosis and calcifications. A single low grade DCIS focus is noted. Lympho-vascular tumour emboli are not seen.

B. Sections reveal cores of liver tissue with an invasive carcinoma composed of nests and cords of medium size polygonal cells with a moderate cytoplasm. The nuclei are enlarged, moderately pleomorphic and vesicular with prominent nuclei. A moderate mitotic activity is seen. Background shows a sclerotic stroma. Large areas of necrosis are evident.



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REFERENCE No. : 01 0385 02/10/24
SAMPLE DATE & TIME : 02/10/2024 12:06 AGE : 38 Y/F
REPORT DATE & TIME : 13/10/2024 19:26 AHH2099920 / ASH2106888
PATIENT : MRS. W D B JAYAWANTHI
REFERRED BY : DR T SKANDARAJAH

Specimen :- Guided Tru cut biopsy of liver lesion.

Diagnosis :- Metastatic deposits of a breast carcinoma.

	Percentage score	Intensity score	Total score
OESTROGEN RECEPTORS	5	3	8
PROGESTERONE RECEPTOR	5	3	8
HER2	0 (Negative)		

i-67 proliferation index - 19%

RG

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