

Breast Cancer: Understanding Your Pathology Report

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Surgical pathology by its very nature depends heavily on the input of clinicians and surgeons who are fully aware on the potentials and limitations of the specialty. The microscopic diagnosis is a subjective evaluation that acquires full meaning only when the pathologist is fully cognizant of the essential clinical data, surgical findings and type of surgery. The surgical pathology report is an important medical document that should describe, as thoroughly and concisely as possible, all the relevant gross and microscopic features and also interpret their significance for the clinicians. The usual surgical pathology report composed of five major fields. The first, designated as "History" contains relevant clinical data which includes patient demographic, surgical findings and type of surgery. The second, designated as "Gross" contains the gross descriptions of the specimen: this should be precise and thorough, because once the gross specimen is discarded, this description remains the only document by which the gross features of the case can be evaluated. The third field "Microscopic" should be short and concise. The fourth and most important is the "Diagnosis/ Interpretation". Each specimen received should have a separated diagnosis or diagnoses. The fifth field "Note" or "Comment" is applicable when pathologists may mention differential diagnosis; make some prognostic and therapeutic considerations. It is medically and legally important that the diagnosis and comments made by the pathologist on a given case be documented and as clearly as possible in a written form in the clinical chart via the pathology report. It is important that the timing of surgical pathology report to keep time at a minimum. It is also important for the surgical pathologists to know the limitations of his specialty and aware of its strength and potential contributions.

"Understanding Your Pathology Report" pertaining to Breast Cancer is essential for the management of breast cancer patients and will be discussed in details especially on diagnostic, therapeutic and prognostic indicators.