



## The Pathology of Breast Cancer

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### Letter to Editor

When reporting on a breast carcinoma specimen, it is required that reporting be done giving information about several different aspects [1]. It is easy to be overwhelmed with the histopathology data. The mnemonic “STINGER.COM” is meant as an aide memoire regarding the key things to be reported on.

Type/Total size

Type i.e. Ductal, Lobular etc

Total size of tumour i.e. Invasive + DCIS

Invasion (Lymphovascular) i.e. Absent/Present

Nodes (involvement) e.g. 0/2, 2/5 etc

Grade i.e. 1, 2 or 3

Extent i.e. Localised, Multifocal, Multicentric etc

Receptors

ER e.g. 0/8, 8/8 etc

PR e.g. 0/8, 8/8 etc

HER 2 status

FISH status

Carcinoma in situ

Absent/present

Size in mm

Type i.e. DCIS, LCIS etc

Other pathology

Absent/Present

Type i.e. Paget’s, Atypical Ductal Hyperplasia etc

Margins/Microinvasion

Margins i.e. distance of disease from closest relevant margin

Microinvasion Absent/Present

### OPEN ACCESS

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### Reference

1. Ellis I, Al-Sam S, Anderson N, Carder P, Deb R, Girling A, et al. Pathology reporting of breast disease in surgical excision specimens incorporating the dataset for histological reporting of breast cancer. 2016.