

5E4

532

CALIFORNIA TUMOR TISSUE REGISTRY

LOS ANGELES COUNTY - UNIVERSTIY OF SOUTHERN CALIFORNIA

PROTOCOL

FOR

MONTHLY STUDY SLIDES

JUNE 1981

TUMORS OF THE BREAST - I

CONTRIBUTOR: John Tsai, M. D.
Reno, Nevada

JUNE 1981 - CASE 1

TISSUE FROM: Left breast

ACCESSION NO. 22919

CLINICAL ABSTRACT:

History: A 46 year old Caucasian female noted fairly rapid enlargement of a left breast mass over 6 to 9 months.

Radiograph: A mammogram done a year previous had been negative.

SURGERY: (May 1978)

A left breast biopsy was performed.

GROSS PATHOLOGY:

The breast mass was 6 cm. in greatest dimension and cut surfaces showed bulging homogenous tan white tissue. No necrosis or hemorrhage was seen grossly.

FOLLOW UP:

Not available.

CONTRIBUTOR: Albert Olson, M. D.
Los Angeles, California

JUNE 1981 - CASE NO. 2

TISSUE FROM: Right breast

ACCESSION NO. 22554

CLINICAL ABSTRACT:

History: A 65 year old Mexican American female had noted a small discoloration on the right breast during a physical examination in 1967. The lesion enlarged slowly for the next 10 years. The patient sought medical attention in March 1977 when the lesion began to bleed.

Physical examination: A 12 x 10 x 5 cm. ulcerating cone-shaped mass was noted in the upper outer quadrant of the right breast. No axillary or supraclavicular nodes were palpable.

SURGERY:

A right total mastectomy was performed on May 31, 1977.

GROSS PATHOLOGY:

The right breast specimen measured 17 x 12 x 7 cm. and contained a 7 cm. well circumscribed mass in the upper inner quadrant. Cut surfaces were brownish to reddish tan. There was no evidence of invasion of underlying fascia, but the overlying skin was brown to black with ulceration.

FOLLOW-UP:

None available.

CONTRIBUTOR: John Blanchard, M. D.
Santa Barbara, California

JUNE 1981 - CASE 3

TISSUE FROM: Right Breast

ACCESSION NO. 22255

CLINICAL ABSTRACT:

History: A 37 year old female noticed a lump in the lower aspect of the right breast in July 1976 when she was 6 months pregnant. Eleven months later the mass was enlarging and tender. She was breast feeding the infant.

Physical examination: A 4 cm. cystic mass in the midportion of the lower right breast was felt clinically to be benign.

SURGERY: (February 8, 1977)

Following a needle biopsy, an excision of the entire mass was performed.

GROSS PATHOLOGY:

A firm to rubbery 4 x 3.2 x 2.5 cm. flattened oval mass was submitted. On sectioning it was fairly well circumscribed, homogeneous, and pale tan. Approximately 80% of the surface was hemorrhagic and characterized by large oval or rounded areas of bloody soft tissue.

FOLLOW-UP:

Not available.

CONTRIBUTOR: M. L. Bassis, M. D.
San Francisco, California

JUNE 1981 - CASE 4

TISSUE FROM: Left Breast

ACCESSION NO. 22143

CLINICAL ABSTRACT:

History: A 42 year old female from Bombay, India noted a rapidly growing painful mass in her left breast 3 weeks prior to seeking medical assistance.

SURGERY: (May 13, 1975)

A biopsy was done followed by a left modified radical mastectomy.

GROSS PATHOLOGY:

A sharply circumscribed tumor measuring 8 x 8 x 8 cm. was enucleated. It possessed a soft white stroma with multiple foci of necrosis.

The mastectomy specimen did not contain residual tumor. The axillary lymph nodes were found to be uninvolved by tumor.

FOLLOW-UP:

Not available.

CONTRIBUTOR: R. F. Folkes, M. D.
Orange, California

JUNE 1981 - CASE 5

TISSUE FROM: Right Breast

ACCESSION NO. 22923

CLINICAL ABSTRACT:

History: An 85 year old female was seen by her doctor for a mass in her right breast of unknown duration.

SURGERY: (April 25, 1978)

A simple mastectomy was done. Several lymph nodes were removed from the axilla.

GROSS PATHOLOGY:

A firm, unencapsulated, granular, mucinous pink grey tumor measuring 2.5 cm. in diameter was found in upper outer quadrant of the breast. The nipple and remaining breast parenchyma were otherwise unremarkable. ~~Micro-~~

FOLLOW UP:

Not available.

CONTRIBUTOR: M. L. Bassis, M. D.
San Francisco, California

JUNE 1981 - CASE 6

TISSUE FROM: Right Breast

ACCESSION NO. 22131

CLINICAL ABSTRACT:

History: A 66 year old male noted a hard area in his right breast of unknown duration.

SURGERY: (July 13, 1976)

An excisional biopsy was performed followed by a radical mastectomy.

GROSS PATHOLOGY:

The specimen included a well circumscribed, lobulated, tan-yellow tumor measuring 2 cm. in greatest dimension. The exact site of this mass in relation to the breast was not specified.

The radical mastectomy specimen and axillary lymph nodes proved to be free of tumor on microscopic examination.

FOLLOW UP:

Not available.

CONTRIBUTOR: J. Schaefer, M. D.
Baldwin Park, California

JUNE 1981 - CASE NO. 7

TISSUE FROM: Left breast

ACCESSION NO. 22366

CLINICAL ABSTRACT:

History: A 46 year old female noted a persistent lump in the left breast.

Physical examination: -A hard mass was palpated in the left upper outer quadrant. No axillary or supraclavicular nodes were palpable.

Radiographs showed a well demarcated breast mass.

SURGERY: (November 3, 1976)

After an excisional biopsy and frozen section, a left radical mastectomy was performed.

GROSS PATHOLOGY:

The specimen consisted of a 4.5 cm. in diameter mass of fibro-fatty tissue containing a 3 cm. in diameter hard, moderately circumscribed mass. The remaining breast specimen showed no residual tumor, but a 2.2 cm. axillary lymph node was filled with tumor.

FOLLOW-UP:

Not available.

CONTRIBUTOR: Weldon K. Bullock, M. D.
Pasadena, California

JUNE 1981 - CASE NO. 8

TISSUE FROM: Left breast

ACCESSION NO. 24202

CLINICAL ABSTRACT:

History: A 54 year old woman was seen initially on April 16, 1981 complaining of a two week history of a non-painful left breast mass.

Xerograms showed a 3 cm. lesion just above the areola at the 12:00 position and a 1 cm. secondary lesion at the 9:00 position just lateral to the areola and a solitary enlarged left axillary lymph node.

SURGERY:

On April 21, 1981 a modified radical mastectomy was performed after excisional biopsy of the breast mass and frozen section diagnosis.

GROSS PATHOLOGY:

The biopsy specimen consisted of lemon yellow-white breast tissue measuring 3.5 x 2.5 x 2.5 cm. On cut section it had a gray microcystic appearance. The mastectomy specimen showed minimal hemorrhage and fibrous tissue at the periphery of the biopsy site. The remaining breast parenchyma, nipple and axillary lymph nodes all appeared grossly uninvolved with tumor.

FOLLOW-UP:

The patient was feeling well and healing well as of May 8, 1981.

CONTRIBUTOR: R. E. Riechmann, M. D.
Covina, California

JUNE 1981 - CASE NO. 9

TISSUE FROM: Right breast

ACCESSION NO. 22706

CLINICAL ABSTRACT:

History: A 32 year old woman presented in August 1977 having noted a difference between the right and left breasts. Mammography was consistent with bilateral fibrocystic disease. In December 1977 she noted an enlargement of the lumps in the right breast. On January 9, 1978 a needle aspiration attempt was unsuccessful and she was admitted for breast biopsy.

SURGERY:

On January 19, 1978 a modified radical mastectomy was performed. Fragments of pectoralis major and minor muscles were also removed.

GROSS PATHOLOGY:

The breast was involved with a widely infiltrating, firm, gray-yellow, poorly circumscribed tumor measuring approximately 15.5 x 12.5 x 5.2 cm. although the nipple appeared grossly uninvolved.

The estradiol receptor assay was reported as being positive (18 fm/mg).

FOLLOW-UP:

Following mastectomy the patient was started on combination chemotherapy including cytoxan, adriamycin and 5-FU. As of November 1980 she was receiving no additional treatment and had no evidence of recurrent or metastatic tumor.

CONTRIBUTOR: Weldon K. Bullock, M. D.
Pasadena, California

JUNE 1981 - CASE NO. 10

TISSUE FROM: Right breast

ACCESSION NO. 24201

CLINICAL ABSTRACT:

History: A 55 year old woman noted a grape-sized lesion on the medial aspect of her right breast 12 to 14 months prior to admission. She had sought medical attention but did not return for the evaluation. Over the next year the mass enlarged to involve most of the medial aspect of the breast and became red and slightly swollen. No puckering or ulceration was noted. The woman had lost 5 to 6 lbs. weight during this time period.

Physical examination revealed a "clinical carcinoma" right breast involving a substantial segment but mainly at the 3 o'clock position with a large palpable node in the axilla.

Laboratory data: Bone marrow was normal.

Radiographs: Chest x-ray was negative as was bone scan. Mammography showed a positive right breast and a negative left breast.

SURGERY: (April 20, 1981)

A right modified radical mastectomy was performed. The axilla was entered and several hard nodes were found. A large amount of the axilla was removed.

GROSS PATHOLOGY:

The breast showed a fairly well circumscribed 4 x 5 x 3 cm. solid tumor with extensive microcalcification and nipple was otherwise unremarkable. The axillary contents displayed one lymph node grossly involved with tumor.

FOLLOW-UP:

The patient is undergoing adjuvant chemotherapy and/or hormonal therapy. The ERA was 11 fm/mg; non responsive range 0-3. The PRA was 1 fm/mg; non responsive range 0-3.

CONTRIBUTOR: Roger Terry, M. D.
Los Angeles, California

JUNE 1981 - CASE NO. 11

TISSUE FROM: Right breast

ACCESSION NO. 19282

CLINICAL ABSTRACT:

History: A 49 year old black female had left hemiparesis due to neurofibromatosis involving the cervical spinal nerve roots. She became quadriplegic in 1965 following a second cervical laminectomy. In 1969 she developed a right breast mass which slowly enlarged over the next two years.

Physical examination: There were multiple neurofibromas over the entire body. The right breast was massively enlarged and completely replaced by multiple lobulated masses which made the breast four times the size of the left breast. No lymph nodes were palpable.

SURGERY: (June 10, 1971)

A right simple mastectomy was performed.

GROSS PATHOLOGY:

The right breast specimen was 36 x 20 x 11 cm. Serial sections revealed multiple masses measuring 2 to 10 cm. in diameter. Cut surfaces displayed a somewhat whorled fibrous pattern with many areas of reddish tan softening. Many clefts between the tumor nodules were lined by firm papillary pink, white excrescences. A large 7 cm. in diameter cyst contained red brown fluid and had a smooth lining except for a single 4 cm. in diameter area showing papillary excrescences. Many dilated tube-like structures, possible ducts, were present and partly lined by papillary excrescences.

FOLLOW-UP:

She was last seen in September 1971 and had no evidence of recurrent tumor. She has since been lost to follow-up.

CONTRIBUTOR: E. Jennings, M. D.
Long Beach, California

JUNE 1981 - CASE NO. 12

TISSUE FROM: Left Breast

ACCESSION NO. 18964

CLINICAL ABSTRACT:

History: A 68 year old female complained of a large, firm and painful mass in her left breast of a "few weeks" duration. She had been washing the lesion with lysol. On physical examination a 12 x 15 cm. ulcerated and fungating mass involved the entire left breast with fixation to the chest wall. No supraclavicular or axillary lymph nodes were palpable. A breast biopsy was performed followed by local pre-operative radiation therapy.

SURGERY: (December 17, 1970)

A left radical mastectomy with internal mammary dissection and removal of a portion of the sternum and left anterior ribs, 2 thru 6, was done. Tumor involvement of the intercostal muscles was noted.

GROSS PATHOLOGY:

The breast showed involvement with a poorly circumscribed tumor approximately 15 cm. in diameter which on cross section exhibited a large central cavity filled with red-tan gelatinous material. Otherwise, the tumor was firm and variegated gray-tan-red. The nipple was uninvolved.

FOLLOW UP:

Not available.

STUDY GROUP
FOR
JUNE 1981

CASE NO. 1 - ACC. NO. 22919

LOS ANGELES: Malignant lymphoma, T cell, not lymphoblastic - 13

BAKERSFIELD: Malignant lymphoma, lymphocytic type, poorly differentiated
- 5

CENTRAL VALLEY: Poorly differentiated lymphoma - 3; infiltrating lobular
carcinoma - 2

INDIANA: Malignant lymphoma - 4

LONG BEACH: Malignant lymphoma - 3

MARTINEZ: Lymphocytic lymphoma, well differentiated - 11; infiltrating
Tubular carcinoma - 4

OAKLAND: Malignant lymphoma - 12

RENO: Lymphocytic lymphoma - 8; undifferentiated - 11; infiltrating
Tubular carcinoma - 5

SACRAMENTO: Poorly differentiated carcinoma - 5; lymphoma - 1

SAN BERNARDINO: Lymphoma - 9

SAN FRANCISCO: Malignant lymphoma - 8; infiltrating lobular carcinoma - 4

SEATTLE: Malignant lymphoma - 7

FILE DIAGNOSIS:

Malignant lymphoma, breast

1749-9593

CASE NO. 2 - ACC. NO. 22554

JUNE 1981

LOS ANGELES: Malignant fibrous histiocyoma, low grade - dermato-
fibrosarcoma protuberans - 2; no vote - 2

BAKERSFIELD: Malignant fibrous histiocyoma, fibroblastic type - 5

CENTRAL VALLEY: Dermatofibrosarcoma protuberans - 3; malignant fibrous
histiocyoma - 2

INDIANA: Dermatofibrosarcoma protuberans - 2; fibrosarcoma - 2

LONG BEACH: Hemangiopericytoma - 1; malignant fibrous histiocyoma - 2

MARTINEZ: Fibrous histiocyoma - 13; dermatofibrosarcoma protuberans - 2

OAKLAND: Dermatofibrosarcoma protuberans - 12

RENO: Fibrous histiocyoma - 2; dermatofibrosarcoma protuberans - 6;
fibrosarcoma - 5

SACRAMENTO: Fibrous histiocyoma - 4; dermatofibrosarcoma - 1; neuro-
fibroma - 1

SAN BERNARDINO: Fibrosarcoma - 5; stromal sarcoma - 3; dermatofibro-
sarcoma protuberans - 1

SAN FRANCISCO: Low grade malignant fibrous histiocyoma - 12; hemangio-
pericytoma - 1

SEATTLE: Spindle cell tumor of breast stroma, NOS - 4; schwannoma - 3

FILE DIAGNOSIS:

Malignant fibrous histiocyoma, breast. 1749-8833

X-File:

Dermatofibrosarcoma protuberans, breast, 1736-8833
skin.

CASE NO. 3 - ACC. NO. 22255

JUNE 1981

LOS ANGELES: Angiosarcoma - 13

BAKERSFIELD: Angiosarcoma - 5

CENTRAL VALLEY: Angiosarcoma - 4; fat necrosis - 1

INDIANA: Angiosarcoma - 4

LONG BEACH: Angiosarcoma - 3

MARTINEZ: Angiosarcoma - 15

OAKLAND: Angiosarcoma - 12

RENO: Angiosarcoma - 13

SACRAMENTO: Angiosarcoma - 6

SAN BERNARDINO: Angiosarcoma - 9

SAN FRANCISCO: Angiosarcoma - 13

SEATTLE: Angiosarcoma - 7

FILE DIAGNOSIS:

Angiosarcoma, breast

1749-9123

CASE NO. 4 - ACC. NO. 22143

JUNE 1981

LOS ANGELES: Malignant cystosarcoma phylloides with chondrosarcoma - 9

BAKERSFIELD: Malignant cystosarcoma phylloides - 5

CENTRAL VALLEY: Mixed mesenchymal malignant tumor arising from cystosarcoma phylloides - 1; malignant mixed tumor - 1; cystosarcoma phylloides - 1; stromal sarcoma - 1; apocrine carcinoma - 1

INDIANA: Cystosarcoma phylloides, malignant - 4

LONG BEACH: Malignant cystosarcoma phylloides - 3

MARTINEZ: Cystosarcoma phylloides, malignant - 13; carcinosarcoma - 2

OAKLAND: Cystosarcoma phylloides, malignant, with metaplastic cartilage - 12

RENO: Malignant cystosarcoma phylloides - 9; metaplastic carcinoma - 4

SACRAMENTO: Malignant cystosarcoma phylloides - 3; chondrosarcoma - 1; mesenchymoma, malignant - 2

SAN BERNARDINO: Malignant cystosarcoma phylloides - 9

SAN FRANCISCO: Cystosarcoma phylloides with chondrosarcoma and osteosarcoma - 11; metaplastic carcinoma of breast - 2

SEATTLE: Phylloides tumor, malignant - 7

FILE DIAGNOSIS:

Malignant cystosarcoma phylloides, with areas of chondrosarcoma, breast. 1749-9023

CASE NO. 5 - ACC. NO. 22923

JUNE 1981

LOS ANGELES: Mucinous or colloid carcinoma - 13

BAKERSFIELD: Colloid (mucinous) carcinoma - 5

CENTRAL VALLEY: Mucinous adenocarcinoma - 5

INDIANA: Colloid (mucinous) carcinoma - 4

LONG BEACH: Mucinous carcinoma - 3

MARTINEZ: Colloid carcinoma - 15

OAKLAND: Colloid carcinoma - 12

RENO: Colloid carcinoma - 13

SACRAMENTO: Mucinous carcinoma - 6

• SAN BERNARDINO: Mucinous (colloid) carcinoma - 9

SAN FRANCISCO: Muroid carcinoma - 13

SEATTLE: Colloid carcinoma - 7

FILE DIAGNOSIS:

Colloid (or mucinous) carcinoma, breast. 1749-8483

CASE NO. 6 - ACC. NO. 22131

JUNE 1981

LOS ANGELES: Unusual duct papillary infiltrating carcinoma in male breast - 13

BAKERSFIELD: Papillary adenocarcinoma - 3; papillary and sweat gland carcinoma - 2

CENTRAL VALLEY: Infiltrating ductal carcinoma - 3; intraductal papilloma - 1; intraductal papilloma with focal infiltrating ductal carcinoma - 1

INDIANA: Papillary carcinoma - 4

LONG BEACH: Papillary carcinoma, male breast - 3

MARTINEZ: Apocrine carcinoma - 12; papillary carcinoma - 3

OAKLAND: Infiltrating ductal carcinoma, papillary - 12

RENO: Infiltrating papillary carcinoma - 13

SACRAMENTO: Papillary carcinoma - 5; infiltrating ductal carcinoma - 1

SAN BERNARDINO: Infiltrating duct carcinoma, papillary type - 9

SAN FRANCISCO: Infiltrating carcinoma of ductal and papillary pattern - 13

SEATTLE: Papillary adenocarcinoma, NOS - 7

FILE DIAGNOSIS:

Infiltrating ductal and papillary carcinoma, breast.

1749-8053

LOS ANGELES: Medullary carcinoma - 5; medullary carcinoma, atypical - 5; carcinoma of breast, NOS - 3

BAKERSFIELD: Medullary carcinoma - 4; so-called sweat gland carcinoma - 1

CENTRAL VALLEY: Sweat gland carcinoma - 1; apocrine carcinoma - 1; carcinoma simplex (anaplastic) - 1; malignant melanoma - 1; medullary carcinoma - 1

INDIANA: Medullary carcinoma - 2; apocrine carcinoma - 1; undifferentiated carcinoma - 1

LONG BEACH: Medullary carcinoma - 3

MARTINEZ: Pagetoid carcinoma - 2; medullary carcinoma - 11; carcinoma, unclassified - 2

OAKLAND: Medullary carcinoma - 12

RENO: Duct carcinoma, apocrine type - 3; metaplastic carcinoma - 5; medullary carcinoma - 5

SACRAMENTO: Sweat gland carcinoma - 2; medullary carcinoma - 3; clear cell carcinoma - 1

SAN BERNARDINO: Medullary carcinoma - 9

SAN FRANCISCO: Medullary carcinoma of breast - 6; granular cell variant of medullary carcinoma - 1; atypical medullary carcinoma - 6

SEATTLE: Secretory carcinoma - 7

FILE DIAGNOSIS:

LOS ANGELES: Intraductal papillary carcinoma, atypical, with invasion
- 10

BAKERSFIELD: Invasive and intraductal carcinoma - 5

CENTRAL VALLEY: Infiltrating ductal carcinoma - 3; infiltrating ductal carcinoma with papillary intraductal papilloma - 1; intraductal papilloma - 1

INDIANA: Spindle cell papillomatosis, atypical - 1; papillary carcinoma - 3

LONG BEACH: No vote

MARTINEZ: Papillary intraductal carcinoma with infiltrating ductal carcinoma - 5; eccrine spiradenoma with intraductal carcinoma - 2; carcinoid like tumor with intraductal carcinoma - 4; ductal carcinoma with sweat gland like carcinoma - 1; minimal invasive duct carcinoma - 2

OAKLAND: Adenocarcinoma, carcinoid type - 12

RENO: Ductal carcinoma, with focal invasion - 13

SACRAMENTO: Carcinoid - 2; lobular carcinoma - 2; papillary carcinoma - 1; intraductal carcinoma - 1

SAN BERNARDINO: Papillary carcinoma - 2; infiltrating duct carcinoma with carcinoid pattern - 3; infiltrating duct carcinoma with myoepithelial or sweat gland differentiation - 3

SAN FRANCISCO: Carcinoid tumor of breast - 2; benign pseudoinfiltrative epitheliosis - 1; intraductal carcinoma with invasion, well differentiated - 10

SEATTLE: Infiltrating duct carcinoma - 5; carcinoid tumor - 2

FILE DIAGNOSIS:

Intraductal papillary carcinoma, with
areas of invasion, breast

1749-8262

CASE NO. 9 - ACC. NO. 22706

JUNE 1981

LOS ANGELES: Infiltrating lobular carcinoma - 13

BAKERSFIELD: Infiltrating lobular carcinoma - 5

CENTRAL VALLEY: Infiltrating lobular carcinoma - 5

INDIANA: Infiltrating lobular carcinoma - 4

LONG BEACH: Infiltrating lobular carcinoma - 3

MARTINEZ: Infiltrating lobular carcinoma - 15

OAKLAND: Infiltrating lobular carcinoma - 12

RENO: Infiltrating lobular carcinoma - 13

SACRAMENTO: Infiltrating intralobular carcinoma - 6

SAN BERNARDINO: Infiltrating lobular carcinoma - 9

SAN FRANCISCO: Infiltrating lobular carcinoma - 13

SEATTLE: Infiltrating lobular carcinoma - 7

FILE DIAGNOSIS:

Infiltrating lobular carcinoma, breast.

1749-8523

CASE NO. 10 - ACC. NO. 24201

JUNE 1981

LOS ANGELES: Infiltrating ductal carcinoma, comedo type - 13

BAKERSFIELD: Infiltrating and intraductal (comedo) carcinoma - 5

CENTRAL VALLEY: Infiltrating ductal carcinoma - 5

INDIANA: Infiltrating ductal carcinoma, comedo type - 4

LONG BEACH: Infiltrating ductal carcinoma with prominent "comedo" pattern
- 3

MARTINEZ: Infiltrating ductal carcinoma with comedo pattern - 15

OAKLAND: Infiltrating lobular carcinoma, (comedo pattern) - 12

RENO: Infiltrating comedo carcinoma - 13

SACRAMENTO: Comedo carcinoma - 6

SAN BERNARDINO: Infiltrating duct carcinoma, comedo type - 9

SAN FRANCISCO: Infiltrating carcinoma of ductal and comedo pattern - 13

SEATTLE: Infiltrating duct carcinoma, comedo type - 7

FILE DIAGNOSIS:

Infiltrating ductal carcinoma, comedo
type, breast.

1749-8503

CASE NO. 11 - ACC. NO. 19282

JUNE 1981

LOS ANGELES: Cystosarcoma phylloides - 13

BAKERSFIELD: Neurofibrosarcoma - 5

CENTRAL VALLEY: Cystosarcoma phylloides with malignant fibrous histiocytosis - 1; cystosarcoma phylloides - 1; neurofibroma - 2; neurofibrosarcoma - 1

INDIANA: Cystosarcoma phylloides - 1; plexiform neurofibroma - 3

LONG BEACH: Neurofibrosarcoma - 1; malignant cystosarcoma phylloides - 2

MARTINEZ: Neurofibroma - 13; neurofibrosarcoma - 2

OAKLAND: Giant fibroadenoma - 9; neurofibroma - 3

RENO: Neurofibroma - 7; spindle cell carcinoma - 6

SACRAMENTO: Neurofibromatosis - 5; cystosarcoma phylloides - 1

SAN BERNARDINO: Neurofibromatosis (neurofibromas) - 9

SAN FRANCISCO: Neurofibroma - 13; neurosarcoma - 1

SEATTLE: Neurofibroma - 7

FILE DIAGNOSIS:

LOS ANGELES: Angiosarcoma - 13

BAKERSFIELD: Malignant fibrous histiocytoma - 4; stromal sarcoma - 1

CENTRAL VALLEY: Angiosarcoma - 1; rhabdomyosarcoma - 2; carcinosarcoma - 1; inflammatory carcinoma - 1

INDIANA: Malignant fibrous histiocytoma - 2; granular cell myoblastoma - 1; metaplastic carcinoma - 1

LONG BEACH: Rhabdomyosarcoma - 2; metaplastic carcinoma of breast - 1

MARTINEZ: Myosarcoma - 7; stromal sarcoma - 4; sarcoma, unclassified - 3

OAKLAND: Malignant fibrous histiocytoma - 6; stromal sarcoma - 4; rhabdomyosarcoma - 2

RENO: Stromal sarcoma - 6; spindle cell carcinoma - 5; malignant fibrous histiocytoma - 2

SACRAMENTO: Angiosarcoma - 3; rhabdomyosarcoma - 3

SAN BERNARDINO: Stromal sarcoma - 5; rhabdomyosarcoma - 3; malignant fibrous histiocytoma - 1

SAN FRANCISCO: Sarcoma, NOS - 2; metaplastic carcinoma of the breast - 2; stromal sarcoma, NOS - 9

SEATTLE: Sarcoma, NOS - 4; spindle cell carcinoma (metaplastic carcinoma) - 2; rhabdomyosarcoma - 1

FILE DIAGNOSIS:

Angiosarcoma, breast.

1749-9123