

QUALITY CONTROL OF REGISTRY DATA

CASEFINDING EXERCISE

Assignment: Review the list of Memorial General Hospital's signed-out pathology reports for May 1, 2007. Identify those cases that should be reviewed for possible accessioning into MGH's registry by ID number (N-07-xxxxx), primary site, and histology (including ambiguous terms)

N-07-04522 05/01/07

Procedure: Clinical Information

Menorrhagia, prolapse, ovarian cyst

Procedure: Specimen Submitted

1 Uterus, cervix, bilateral tubes and ovaries

2 Vaginal mucosa

Procedure: Diagnosis

1) UTERUS, CERVIX, BILATERAL FALLOPIAN TUBES AND OVARIES:

Chronic cervicitis with squamous metaplasia and focal mild acute inflammation.

Simple and cystic endometrial hyperplasia.

Two leiomyomata.

Uterine serosal adhesions.

Right ovary: Hemorrhagic luteinized cyst and mesothelial inclusion cyst.

Right fallopian tube: Two hydatid cysts.

Left ovary: Follicular cyst, mesothelial inclusion cyst, collagenous walled cyst, and focal hemorrhage.

Left fallopian tube: Two hydatid cysts.

2) VAGINAL MUCOSA:

Fragments of vaginal mucosa consistent with prolapse, clinically, gross only.

N-07-04524 05/01/07

Procedure: Clinical Information

Increased LFTs

Operative findings: Normal liver sonogram

Procedure: Specimen Submitted

1 Left lobe liver cyst

Procedure: Diagnosis

LIVER, LEFT LOBE, NEEDLE BIOPSY:

Steatohepatitis, mild. No fibrosis. See comment.

Comment: Multiple sections of hepatic tissue reveal intact lobular architecture. Portal tracts and central veins are present. There is a mild to moderate degree of steatosis, primarily macrovesicular pattern with a zone 3 predominance noted. Approximately 50% of hepatocytes show steatosis. Within the lobules, there are rare foci of chronic inflammatory cells. Rare

hepatocytes exhibiting ballooning necrosis are identified. No portal tract inflammation is present. Bile ducts are present. Reticulin stain shows a normal distribution of reticulin fibers. Trichrome stain shows absent fibrosis. PAS with diastase is negative for intrahepatocyte inclusions. Perls' stain for iron is negative for storage iron.

N-07-04525 05/01/07

Procedure: Clinical Information
Symptomatic menorrhagia

Procedure: Specimen Submitted
1 Endometrial curettings

Procedure: Gross Description
The specimen consists of a 3.8 cm aggregate of tissue. The specimen is submitted in Cassettes 1A through 1C for microscopic examination.

Procedure: Microscopic Description
A microscopic examination was performed and the findings justify the diagnosis.

Procedure: Diagnosis
ENDOMETRIUM, CURETTINGS:
Extremely disordered proliferative endometrium suspicious for adenocarcinoma in situ.

N-07-04526 05/01/07

Procedure: Clinical Information
Left thyroid mass

Procedure: Specimen Submitted
1 Left lobe thyroid
2 Right lobe thyroid
3 Thyroid remnant left side

Procedure: Diagnosis
1) LEFT LOBE THYROID, LEFT HEMITHYROIDECTOMY:
Papillary thyroid carcinoma (3.5 cm).
Margins are uninvolved by carcinoma.
See CAP checklist.
2) RIGHT LOBE THYROID, RIGHT HEMITHYROIDECTOMY:
Adenomatoid goiter with no papillary thyroid carcinoma identified.
3) THYROID REMNANT, LEFT SIDE, EXCISION:
Benign thyroid tissue, negative for papillary carcinoma.

N-07-04527 05/01/07

Procedure: Clinical Information
Biliary colic

Procedure: Specimen Submitted
1 Gallbladder and contents

Procedure: Diagnosis
GALLBLADDER AND CONTENTS, CHOLECYSTECTOMY:
Chronic cholecystitis and cholelithiasis.

N-07-04528 05/01/07

Procedure: Clinical Information
Chronic tonsillitis

Procedure: Specimen Submitted

1 Tonsils

Procedure: Diagnosis

TONSILS, BILATERAL TONSILLECTOMY:

Consistent with chronic hypertrophic palatine tonsillitis. No sections.

N-07-04529 05/01/07

Procedure: Clinical Information

Left hip degenerative joint disease

Procedure: Specimen Submitted

1 Left hip femoral head and tissue

Procedure: Diagnosis

SUBMITTED AS LEFT HIP FEMORAL HEAD AND TISSUE: Osteoarthritis, gross only.

N-07-04530 05/01/07

Procedure: Clinical Information

Right temporal lobe frontal brain mass

Procedure: Specimen Submitted

1 Right frontal mass

2 Right frontal mass

3 Right frontal mass

Procedure: Diagnosis

1) RIGHT FRONTAL MASS:

Brain tissue with mild gliosis and mild chronic inflammation.

2) RIGHT FRONTAL MASS:

Glioblastoma multiforme.

3) RIGHT FRONTAL MASS:

Glioblastoma multiforme.

N-07-04531 05/01/07

Procedure: Clinical Information

Atrial myxoma and severe tricuspid regurgitation

Procedure: Specimen Submitted

1 Atrial myxoma

Procedure: Gross Description

The specimen consists of an irregular soft hemorrhagic fragment of tissue measuring 3.5 x 2.3 x 1.1 cm. The specimen is sectioned and submitted in Cassettes 1A and 1B for microscopic examination.

Procedure: Microscopic Description

A microscopic examination was performed and the findings justify the diagnosis.

Procedure: Diagnosis

ATRIAL MYXOMA:

Atrial myxoma.

N-07-04532 05/01/07

Procedure: Clinical Information

Family history of ovarian carcinoma, stress urinary incontinence and labial hypertrophy.

Procedure: Specimen Submitted

1 Uterus with cervix, bilateral fallopian tubes and ovaries, labia

Procedure: Diagnosis

UTERUS WITH CERVIX, BILATERAL FALLOPIAN TUBES AND OVARIES, LABIA, HYSTERECTOMY WITH BILATERAL SALPINGO-OOPHORECTOMY:

Right ovary: Serous cystadenoma.
Right fallopian tube: No histopathologic abnormality.
Left ovary: Hemorrhagic corpus luteum and follicular cyst.
Left fallopian tube: No histopathologic abnormality.
Endometrium: Mid secretory endometrium.
Myometrium: Two leiomyomas, focal adenomyosis.
Serosa: No histopathologic abnormality.
Cervix: No histopathologic abnormality.
Labial skin: No histopathologic abnormality.

N-07-04533 05/01/07

Procedure: Clinical Information
Large incisional hernia

Procedure: Specimen Submitted
1 Skin and hernia sac

Procedure: Diagnosis

SKIN AND HERNIA SAC, REPAIR:

Dense fibroconnective tissue, adipose tissue, and skin, compatible with hernia sac.

N-07-04534 05/01/07

Procedure: Clinical Information
Osteoarthritis

Procedure: Specimen Submitted
1 Humeral head - left

Procedure: Diagnosis

HUMERAL HEAD - LEFT:

Bone with changes consistent with osteodegenerative disease. Gross examination only, no sections are taken.

N-07-04535 05/01/07

Procedure: Clinical Information
Chronic cholecystitis with cholelithiasis

Procedure: Specimen Submitted
1 Gallbladder

Procedure: Diagnosis

GALLBLADDER, CHOLECYSTECTOMY:

Chronic cholecystitis and cholelithiasis.

N-07-04536 05/01/07

Procedure: Clinical Information
Aortic valve stenosis

Procedure: Specimen Submitted
1 Aortic valve leaflets

Procedure: Diagnosis
AORTIC VALVE LEAFLETS:
Atherosclerosis and mild myxoid change.

N-07-04537 05/01/07
Procedure: Clinical Information
Gastric bleed, ileocecal ulcer, check for H. pylori

Procedure: Specimen Submitted
1 Gastric ulcer biopsy

Procedure: Diagnosis
STOMACH, BIOPSY:
Fundic gastric mucosa with no histopathologic abnormalities. Immunohistochemical stain for Helicobacter pylori is negative.

N-07-04538 05/01/07
Procedure: Clinical Information
Lung nodule

Procedure: Specimen Submitted
1 4 core biopsies from right lower lobe nodule

Procedure: Diagnosis
LUNG, RIGHT LOWER LOBE, NEEDLE BIOPSIES:
Small cell carcinoma, combined type (small cell carcinoma and non-small cell component). See comment.

Comment: In addition to small cell carcinoma, a component of large cell neuroendocrine carcinoma is present as well.

N-07-04540 05/01/07
Procedure: Clinical Information
Obstipation, rule out Hirschsprung's

Procedure: Specimen Submitted
1 Rectal biopsy
Specimen Submitted
1 Rectal biopsy

Preliminary Diagnosis
RECTAL BIOPSY:
Superficial biopsy of colonic mucosa with no histopathologic abnormality.
Biopsy contains mostly surface epithelium and lamina propria with only a little muscularis mucosa, and thus is likely too superficial to assess for Hirschsprung's.
Deeper sections will be obtained and results reported in a final report.

Procedure: Diagnosis
RECTAL BIOPSY:
Benign colonic mucosa with mucosal ganglion cells identified. See comment.

Comment: The finding of ganglion cells rules out Hirschsprung's disease. Deeper sections are examined.

N-07-04541 05/01/07

Procedure: Clinical Information
Indigestion, pain, rule out Barrett's

Procedure: Specimen Submitted
1 Biopsy esophagus

Preliminary Diagnosis
BIOPSY ESOPHAGUS:

Esophageal mucosa with intestinal goblet cell metaplasia, Barrett esophagus is clinically supported.
Suspicious for dysplasia (deeper sections are being ordered and results will be reported in a final report.

Procedure: Diagnosis

BIOPSY ESOPHAGUS:

Esophageal mucosa with intestinal goblet cell metaplasia, Barrett esophagus is clinically supported.
Low-grade dysplasia present. See comment.

Comment: Deeper sections were obtained.

N-07-04542 05/01/07

Procedure: Clinical Information
History of polyps

Procedure: Specimen Submitted
1 Right colon polyp
2 Sigmoid colon polyps x 3

Procedure: Diagnosis

1) RIGHT COLON POLYP, BIOPSY:
Fragments of tubular adenoma.

2) SIGMOID COLON POLYPS X 3, BIOPSY:

Two hyperplastic polyps and one small fragment of colonic mucosa with no histopathologic abnormality.

N-07-04543 05/01/07

Procedure: Clinical Information
Pelvic pain

Procedure: Specimen Submitted
1 Uterus with cervix

Procedure: Diagnosis

UTERUS WITH CERVIX:

Chronic cervicitis with squamous metaplasia and focal mild acute inflammation.
Proliferative endometrium.
Myometrium: No significant pathologic changes.

N-07-04544 05/01/07

Procedure: Clinical Information
Rectal bleeding, rule out polyp

Procedure: Diagnosis

COLON, RIGHT, BIOPSY:

Polypoid portions of colonic mucosa with mucosal chronic inflammation and submucosal fibrosis.

N-07-04545 05/01/07
Procedure: Clinical Information
L4-5 HNP - left

Procedure: Diagnosis
DISC, LEFT L4-L5:
Degenerating fibrocartilage.

N-07-04546 05/01/07
Procedure: Clinical Information
Post MRSA thoracotomy wound for right lobectomy

Procedure: Diagnosis
SOFT TISSUE FROM RIGHT THORACOTOMY:
Fibrous tissue with foreign body giant cell reaction, granulation tissue, and fibrin.

N-07-04547 05/01/07
Procedure: Clinical Information
Left breast, infiltrating ductal carcinoma

Procedure: Diagnosis

- 1) LYMPH NODE, LEFT AXILLARY, SUPERFICIAL, BIOPSY:
One lymph node with no evidence of metastatic tumor. Pan cytokeratin stains on Blocks 1A and 1B are negative.
- 2) LYMPH NODE, PROXIMAL, BIOPSY:
One lymph node with no evidence of metastatic tumor. Pan cytokeratin stains on Blocks 2A and 2B are negative.
- 3) BREAST, LEFT, LUMPECTOMY:
Residual high grade ductal carcinoma in situ (solid and cribriform types with necrosis), two foci measuring 2 and 5 mm adjacent to previous biopsy site with involvement of sclerosing adenosis. Margins are free.
Previous biopsy site, fibrocystic disorder with extensive sclerosing adenosis and microcalcifications.
- 4) BREAST, LEFT, 12 O'CLOCK MARGIN, BIOPSY:
No tumor.
- 5) BREAST, LEFT, 9 O'CLOCK MARGIN, BIOPSY:
No tumor.
- 6) BREAST, LEFT, 6 O'CLOCK MARGIN, BIOPSY:
No tumor.
- 7) BREAST, LEFT, 3 O'CLOCK MARGIN, BIOPSY:
No tumor.

Comment: 3) Residual ductal carcinoma in situ is identified in Blocks 3I and 3J adjacent to previous biopsy sites. Both blocks show involvement of sclerosing adenosis by ductal carcinoma in situ. Margins are free by at least 3 mm. Dr. Antonio Zarra has reviewed selected slides and concurs in the above interpretation.

N-07-04548 05/01/07
Procedure: Clinical Information
Chronic pelvic pain

UTERUS, HYSTERECTOMY:
Cervix: No histopathologic abnormalities.
Endometrium: Proliferative endometrium.
Myometrium: Adenomyosis. Implantation site.

N-07-04549 05/01/07

Procedure: Clinical Information
Left upper lobe lung nodule

Procedure: Diagnosis

NODULE, UPPER LOBE, LEFT LUNG:

Necrotizing granuloma with mild chronic inflammation, see comment.

Comment: The silver stain is positive for budding yeast organisms consistent with Histoplasma species. The auramine stain is negative for acid fast organisms.

N-07-04550 05/01/07

Procedure: Clinical Information
Fetal demise

Procedure: Diagnosis

1) SUBMITTED AS PRODUCTS OF CONCEPTION:

Multiple fragments of immature chorionic villi, decidualized tissue with acute inflammation, endometrial tissue and blood clot.

2) SUBMITTED AS PRODUCTS OF CONCEPTION:

Multiple fragments of immature chorionic villi, decidualized tissue, smooth muscle and blood clot.

3) UTERUS AND CERVIX:

Acute and chronic cervicitis.

Lower uterine segment/endocervix: Immature chorionic villi with hemorrhage and acute and chronic inflammation.

Secretory endometrium with decidualized tissue and blood clot with immature chorionic villi.

Myometrium: No significant pathologic changes.

N-07-04551 05/01/07

Procedure: Clinical Information
Cholelithiasis

Procedure: Diagnosis

1) GALLBLADDER:

Chronic cholecystitis and cholelithiasis.

2) LIVER, CORE BIOPSIES:

Focal mild portal chronic inflammation.

N-07-04552 05/01/07

Procedure: Clinical Information
Symptomatic menorrhagia

Procedure: Diagnosis

ENDOMETRIUM, CURETTINGS:

Multiple fragments of secretory endometrium, endocervical tissue and blood clot.

N-07-04553 05/01/07

Procedure: Clinical Information
Mediastinal mass

Procedure: Diagnosis

ANTERIOR MEDIASTINAL MASS, EXCISION:

Hodgkin's lymphoma, nodular sclerosing type, see comment.

Addendum Diagnosis

All glass slides have been reviewed to evaluate margins. All of the slides show a thick band of fibrous and fibroadipose tissue containing residual thymic tissue surrounding the Hodgkin's lymphoma. Thus, it appears the Hodgkin's lymphoma has been completely excised.

N-07-04554 05/01/07

Procedure: Clinical Information
Left carotid stenosis

Procedure: Diagnosis
LEFT CAROTID PLAQUE:
Atherosclerotic plaque with calcification.

N-07-04555 05/01/07

Procedure: Clinical Information
Acute appendicitis

Procedure: Diagnosis
APPENDIX:
Acute appendicitis.

N-07-04556 05/01/07

Procedure: Clinical Information
Menometrorrhagia

Procedure: Diagnosis
ENDOMETRIAL CURETTINGS:
Fragments of ectocervix, endocervix, myometrium, and inactive endometrium; no atypia is identified.

N-07-04557 05/01/07

Procedure: Clinical Information
Bilateral carotid artery stenosis "70 to 8%" (per requisition) left greater than right

Procedure: Diagnosis
PLAQUE FROM LEFT CAROTID ARTERY:
Atherosclerotic plaque without focal calcification.

N-07-04558 05/01/07

Procedure: Clinical Information
Abnormal thickening of lining of uterus, hyperplasia

Procedure: Diagnosis
ENDOMETRIAL CURETTINGS:
Marked complex endometrial hyperplasia without atypia with secretory changes, see comment.

Comment: No cytologic atypia is identified.

N-07-04559 05/01/07

Procedure: Clinical Information
Diarrhea, bloody stool, rule out microscopic colitis

Procedure: Diagnosis
1) SMALL BOWEL, BIOPSY:
Small bowel mucosa with no histopathologic abnormalities. Villous architecture is within normal limits.
2) COLON, SIGMOID, BIOPSY:
Multiple portions of colonic mucosa with no histopathologic abnormalities.

N-07-04560 05/01/07

Procedure: Clinical Information

Dysphagia, rule out infectious fungal, viral esophagitis.

Procedure: Diagnosis

ESOPHAGEAL BIOPSY:

Acute esophagitis with ulcer.

No fungal elements are identified on GMS stain, no viral cytopathic effect is seen.

See comment.

Comment: The biopsy shows predominant sloughed superficial esophageal mucosa with parakeratosis and bullae formation and pustule-like neutrophil collections. Because the features are not typical of a classic bullous disease, it is likely that these bullae do not represent a primary bullous condition. If there is suspicion for a primary bullous disease, indirect immunofluorescence could be performed. Thermal injury to the esophageal mucosa can also cause superficial sloughing, but is unlikely that it would produce such neutrophilic collections; clinical history would be essential in such case. Also, the differential diagnosis includes severe pill esophagitis, particularly iron supplementation. An iron stain will be ordered and reported in an addendum.

Procedure: Addendum Pathology

Addendum Diagnosis

The iron stain is negative.

This finding does not support the possibility of iron pill esophagitis.

N-07-04561 05/01/07

Procedure: Clinical Information

Check up, history of colon cancer, rule out proctitis

Procedure: Diagnosis

RECTUM, BIOPSY:

Colonic mucosa with mild nonspecific chronic inflammation. No crypt distortion or adenomatous changes are noted.

N-07-04562 05/01/07

Procedure: Clinical Information

Stomach cramps, rule out Barrett's

Procedure: Diagnosis

ESOPHAGUS, BIOPSY:

Squamous and glandular mucosa with reflux esophagitis and chronic carditis; no evidence for goblet cells or dysplasia is present.

N-07-04563 05/01/07

Procedure: Clinical Information

Chronic diarrhea, check for microscopic colitis

Procedure: Diagnosis

1) COLON, SIGMOID, BIOPSY:

Colonic mucosa with no histopathologic abnormalities.

2) COLON, 10 CM, BIOPSY:

Hyperplastic polyp.

N-07-04564 05/01/07

Procedure: Clinical Information

Dysphagia

Procedure: Diagnosis
ESOPHAGUS, BIOPSY:
Acute esophagitis with ulceration and granulation tissue.

N-07-04565 05/01/07
Procedure: Clinical Information
Term pregnancy, maternal temperature during labor

Procedure: Diagnosis
PLACENTA:
Mature placenta with focal hyalinization.

N-07-04566 05/01/07
Procedure: Clinical Information
Recurrent transitional cell carcinoma of the bladder

Procedure: Diagnosis
BLADDER, BIOPSY:
Noninvasive low-grade papillary carcinoma, see CAP checklist.

SPECIMEN TYPE: Biopsy
HISTOLOGIC TYPE: Papillary carcinoma
HISTOLOGIC GRADE: Low-grade
TUMOR CONFIGURATION: Papillary
PATHOLOGIC STAGING PRIMARY TUMOR: pTa, noninvasive papillary carcinoma

N-07-04567 05/01/07
Procedure: Clinical Information
Postmenopausal bleeding

Procedure: Diagnosis
1) ENDOCERVIX:
Fragments of endocervix, mucus, and blood admixed with ectocervix; no atypia is identified.
2) ENDOMETRIUM:
Fragments of ectocervix, endocervix, myometrium, and inactive endometrium; no atypia is identified.

N-07-04568 05/01/07
Procedure: Clinical Information
Blood in stools

Procedure: Diagnosis
1) COLON, LEFT, BIOPSY:
Hyperplastic polyp.
2) RECTUM, BIOPSY:
Hyperplastic polyp.

N-07-04569 05/01/07
Procedure: Clinical Information
Blighted ovum

Procedure: Diagnosis
PRODUCTS OF CONCEPTION:
Multiple fragments of decidua and chorionic villi.

N-07-04570 05/01/07
Procedure: Clinical Information
Symptomatic biliary tract disease

Procedure: Diagnosis
GALLBLADDER:
Chronic cholecystitis and cholelithiasis.

N-07-04571 05/01/07
Procedure: Clinical Information
Missed AB

Procedure: Diagnosis
PRODUCTS OF CONCEPTION:
Secretory and hypersecretory endometrium. No chorionic villi or decidua are identified.

N-07-04572 05/01/07
Procedure: Clinical Information
Biliary dysfunction

Procedure: Diagnosis
GALLBLADDER, CHOLECYSTECTOMY:
Chronic cholecystitis.

N-07-04573 05/01/07
Procedure: Clinical Information
Explosive diarrhea

Procedure: Diagnosis
1) COLON, RANDOM BIOPSY:
Multiple portions of colonic mucosa with no histopathologic abnormalities.
2) COLON, 15 CM, BIOPSY:
Tubulovillous adenoma.

N-07-04574 05/01/07
Procedure: Clinical Information
Adenotonsillar hypertrophy with obstruction apnea

Procedure: Diagnosis
TONSILS AND ADENOIDS, BILATERAL TONSILLECTOMY AND ADENOIDECTOMY:
Follicular lymphoid hyperplasia and chronic inflammation. Hypertrophic adenoidal tissue.

N-07-04575 05/01/07
Procedure: Clinical Information
Left nasal septal mass

Preliminary Diagnosis
CONTENTS, LEFT MIDDLE TURBINATE, BIOPSY:
Initial evaluation reveals atypical squamous proliferation. Final diagnosis pending evaluation of levels.

Procedure: Diagnosis
LEFT SEPTAL/MIDDLE TURBINATE, BIOPSY (INITIAL SECTIONS AND LEVELS):
In situ squamous cell carcinoma arising within sinonasal papilloma.

N-07-04576 05/01/07

Procedure: Clinical Information

Chronic otitis media with conductive hearing loss, obstructive tonsils and adenoids

Procedure: Diagnosis

TONSILS AND ADENOIDS, BILATERAL TONSILLECTOMY AND ADENOIDAL TISSUE:

Consistent with chronic hypertrophic palatine tonsillitis and adenoidal tissue. No sections.

N-07-04577 05/01/07

Procedure: Clinical Information

Hemorrhoids

Procedure: Diagnosis

ANORECTAL TISSUE:

Hemorrhoids.

N-07-04578 05/01/07

Procedure: Clinical Information

Adenotonsillar hypertrophy with obstruction

Procedure: Diagnosis

TONSILS AND ADENOIDS, BILATERAL TONSILLECTOMY AND ADENOIDECTOMY:

Follicular lymphoid hyperplasia and chronic inflammation.

N-07-04579 05/01/07

Procedure: Clinical Information

Right carotid stenosis

Procedure: Diagnosis

CONTENTS, RIGHT CAROTID ARTERY:

Atherosclerotic plaque.

N-07-04580 05/01/07

Procedure: Clinical Information

25 year history of ulcerative colitis

Current Pre-Op Diagnosis: Adenocarcinoma of the colon

Procedure: Diagnosis

1) ABDOMINAL COLON:

Adenocarcinoma, invasive (two separate carcinomas), see CAP checklist.

2) SMALL BOWEL:

Heterotopic pancreatic tissue.

SPECIMEN TYPE: Subtotal colectomy

SPECIMEN LENGTH: 114 cm

TUMOR SITE: Colon, not otherwise specified

TUMOR SIZE: Tumor A measures 2.5 cm in greatest dimension. Tumor B measures 4.5 cm in greatest dimension.

HISTOLOGIC: Adenocarcinoma (both tumors)

HISTOLOGIC GRADE: Low grade (both tumors)

PATHOLOGIC STAGING:

Primary tumor: pT3 (both tumors)

Regional lymph nodes: To be determined after additional fixation. Addendum to follow.

Distant metastasis: pMX

MARGINS: Proximal margin: Uninvolved by invasive carcinoma

Distal margin: Uninvolved by invasive carcinoma

Circumferential margin: Uninvolved by invasive carcinoma
Distance of invasive carcinoma to closest margin: 0.2 cm to the radial margin.
LYMPHATIC INVASION: Absent
VENOUS VESSEL INVASION: Absent

Addendum Diagnosis

Following examination of Dissect Aid fixed material, the final lymph node tally is as follows:

LYMPH NODES, 63:

One of 63 nodes involved by metastatic adenocarcinoma, consistent with colon primary.

Regional lymph node status is thus: pN1

Number examined: 63

Number involved: 1

N-07-04581 05/01/07

Procedure: Clinical Information
DJD right knee

Procedure: Diagnosis

BONE, RIGHT KNEE:

Degenerating articular cartilage consistent with degenerative joint disease. No sections.

N-07-04582 05/01/07

Procedure: Clinical Information
Right adnexal mass

Procedure: Diagnosis

FALLOPIAN TUBE AND OVARY AND OMENTUM, RIGHT, SALPINGO-OOPHORECTOMY:

Ovary: Endometriosis with cyst formation. Luteinized follicle cysts.

Fallopian tube: Endometriosis and fibrovascular adhesions.

Omental tissue with mesothelial hyperplasia, fibrosis, and rare glandular inclusions consistent with endometriosis.

N-07-04583 05/01/07

Procedure: Clinical Information
Advanced DJD

Procedure: Diagnosis

BONE, RIGHT KNEE:

Degenerating articular cartilage consistent with degenerative joint disease. No sections.

N-07-04584 05/01/07

Procedure: Clinical Information
Mitral valve regurgitation

Procedure: Diagnosis

MITRAL VALVE POSTERIOR LEAFLET:

Myxoid degeneration and fibrosis.

N-07-04585 05/01/07

Procedure: Clinical Information
Right ovarian cyst, pelvic adhesions

Procedure: Diagnosis

RIGHT FALLOPIAN TUBE AND OVARY:

Ovary with corpus luteum and multiple corpora albicantia.

Unremarkable fallopian tube.

N-07-04586 05/01/07

Procedure: Clinical Information
History of anemia, rule possible leiomyoma

Procedure: Diagnosis

- 1) MUCOSA, HEPATIC FLEXURE, BIOPSY:
Polypoid portions of colonic-type mucosa with changes suggestive of hyperplastic polyp.
- 2) MUCOSA, COLONIC STRICTURE AT 15 CM, BIOPSY:
Colonic-type mucosa with ulcer and granulation-like tissue, consistent with origin in ulcer, see comment.

Comment: 2) Diagnostic evidence of malignancy is not identified. Additional biopsies are suggested if neoplasm is suspected. Dr. Michael Jagger has also reviewed slides from these two specimens and concurs in the above diagnoses.

N-07-04587 05/01/07

Procedure: Clinical Information
Adenocarcinoma of the prostate

Procedure: Diagnosis

PROSTATE:
Prostatic adenocarcinoma, see CAP checklist.

HISTOLOGIC TYPE: Adenocarcinoma
HISTOLOGIC GRADE (GLEASON PATTERN):
PRIMARY PATTERN: Grade 3
SECONDARY PATTERN: Grade 3
TOTAL GLEASON SCORE: 6
TUMOR SIZE: 1.6 cm dominant nodule in the left lobe
EXTRAPROSTATIC EXTENSION: Absent
SEMINAL VESICLE INVASION: Absent
PATHOLOGIC STAGING PRIMARY TUMOR: pT2c
REGIONAL LYMPH NODES: pNX
DISTANT METASTASIS: pMX
MARGINS: Tumor present at the proximal prostatic urethral margin

N-07-04588 05/01/07

Procedure: Clinical Information
Screening

Procedure: Diagnosis

- 1) COLON, RIGHT, BIOPSY:
Hyperplastic polyp.
- 2) COLON, ILEOCECAL VALVE, BIOPSY:
Colonic mucosa with no histopathologic abnormalities.

N-07-04589 05/01/07

Procedure: Clinical Information
New lung lesion and liver lesion - suspicious for lung cancer with liver mets

Procedure: Diagnosis

LIVER, NEEDLE BIOPSIES:
Poorly differentiated adenocarcinoma.

Procedure: Revised Diagnostic Information

This report is generated to reflect a change in the site of origin of the biopsy. The tissue consists entirely of tumor with no normal tissue present. The tumor is consistent with lung

primary.

1 18 gauge core specimens x 3 from mass in left lobe liver

Addendum Diagnosis

At the request of Dr. X, estrogen and progesterone receptors were ordered.

Immunohistochemical stains for ER and PR show the following results:

Estrogen receptor: Negative.

Progesterone receptor: Negative.

N-07-04590 05/01/07

Procedure: Clinical Information

Invasive ductal carcinoma right breast

Procedure: Diagnosis

- 1) SENTINEL LYMPH NODE #1, RIGHT AXILLA, HOT, BLUE, COUNT 73233:
Negative for malignancy.
- 2) PALPABLE LYMPH NODE FROM RIGHT AXILLA, NOT HOT, NOT BLUE:
Negative for malignancy.
- 3) SENTINEL LYMPH NODE #2, RIGHT AXILLA, HOT, BLUE, COUNT 20855:
Negative for malignancy.
- 4) MEDIAL MARGIN FROM RIGHT BREAST:
Two microscopic foci of low grade ductal carcinoma in situ, each measuring approximately 0.1 cm and focus closest to margin located 0.3 cm away from the medial margin.
- 5) INFERIOR MARGIN OF RIGHT BREAST:
0.3 cm focus of low grade ductal carcinoma in situ, located within 0.1 cm of inked surface.
- 6) SUPERIOR MARGIN OF RIGHT BREAST:
Negative for malignancy.
- 7) LATERAL MARGIN OF RIGHT BREAST:
Negative for malignancy.

N-07-04591 05/01/07

Procedure: Clinical Information

Infected left preauricular cyst - sinus tract, left ear

Procedure: Diagnosis

SKIN AND SUBCUTANEOUS TISSUE, LEFT FACIAL CYST, BIOPSY:

Benign squamous epithelial-lined cyst with hair shaft fragments suggestive of trichofolliculoma.

N-07-04592 05/01/07

Procedure: Clinical Information

Cervical lymphadenopathy, ? lymph node or salivary gland tissue

Procedure: Diagnosis

LEFT CERVICAL LYMPH NODE:

Salivary gland tissue showing chronic sialoadenitis

N-07-04593 05/01/07

Procedure: Clinical Information

Weight loss, anemia, history of colon cancer

Procedure: Diagnosis

COLON, 40 CM, BIOPSY:

Tubular adenoma.

N-07-04594 05/01/07

Procedure: Clinical Information
Suspicious lesion right cheek

Procedure: Diagnosis
LESION RIGHT CHEEK:
Ruptured calcified epidermal cyst with foreign body reaction.

N-07-04595 05/01/07

Procedure: Clinical Information
Pleural effusion

Procedure: Diagnosis
1) PLEURAL BIOPSY:
Pleural tissue with fibrin deposition and mild acute and chronic inflammation.
2) PLEURAL PEEL:
Pleural tissue with fibrin deposition and mild acute and chronic inflammation.

N-07-04596 05/01/07

Procedure: Clinical Information
Adenocarcinoma of the uterus diagnosed at XYZ Hospital

Procedure: Diagnosis
1) FALLOPIAN TUBE AND OVARY, RIGHT SALPINGO-OOPHORECTOMY:
Ovary: Simple cysts.
Fallopian tube: Hydatid cyst.
2) FALLOPIAN TUBE AND OVARY, LEFT, SALPINGO-OOPHORECTOMY:
Ovary: Simple cysts.
Fallopian tube: Hydatid cyst.
3) LYMPH NODES, LEFT EXTERNAL ILIAC, BIOPSY:
Two lymph nodes with no evidence of metastatic tumor.
4) LYMPH NODE, LEFT OBTURATOR, BIOPSY:
One lymph node with no evidence of metastatic tumor.
5) LYMPH NODE, RIGHT COMMON PERIAORTIC, BIOPSY:
One lymph node with no evidence of metastatic tumor.
6) UTERUS, HYSTERECTOMY:
Previous curettage changes (necrosis and fibrinoid change) with focal residual stratum
basalis and no evidence for residual adenosarcoma.
Myometrium with no histopathologic abnormalities.
Cervix with tunnel clusters and focal tubal metaplasia. See CAP checklist.
7) LYMPH NODES, RIGHT EXTERNAL ILIAC BIOPSY:
Six lymph nodes with no evidence of metastatic tumor.
8) LYMPH NODES, RIGHT OBTURATOR:
One lymph node with no evidence of metastatic tumor.
9) LYMPH NODE, RIGHT COMMON, BIOPSY:
One lymph node with no evidence of metastatic tumor.

N-07-04597 05/01/07

Procedure: Clinical Information
Possible nasopharynx mass

NASOPHARYNX, BIOPSIES:
Initial evaluation reveals respiratory mucosa with lymphoplasmacytic inflammation. Final
diagnosis pending immunohistochemical stains.

Procedure: Diagnosis

NASOPHARYNX, BIOPSY (INITIAL SECTIONS AND IMMUNOHISTOCHEMICAL STAINS):

Respiratory mucosa with chronic inflammation and follicular lymphoid hyperplasia. See comment.

Comment: Immunohistochemical stains show staining of germinal centers with CD20 and interfollicular lymphocytes staining for T cell marker CD3 and CD5.

N-07-04598 05/01/07

Procedure: Clinical Information

Atypical uterine bleeding, rule out hyperplasia, neoplasia

Procedure: Diagnosis

1) ENDOCERVIX, CURETTINGS:

Endocervical tissue with no histopathologic abnormalities.

2) ENDOMETRIUM, CURETTINGS:

Proliferative endometrium. Endometrial polyp.

N-07-04599 05/01/07

Procedure: Clinical Information

Near obstructing rectal mass

Procedure: Diagnosis

1) LEFT LOBE OF LIVER, WEDGE BIOPSY:

Metastatic adenocarcinoma, with features compatible with metastatic adenocarcinoma of colorectal origin.

2) SMALL BOWEL AND ADHERENT TUMOR, SEGMENT OF RESECTION:

a. Serosal fibrinous granulation tissue; no malignant tumor identified.

b. Four lymph nodes identified, all negative for malignancy.

Comment: Sections from the left lobe of the liver reveal metastatic adenocarcinoma with histopathologic features compatible with a metastatic adenocarcinoma of the colorectal origin. On gross examination of the segment of small bowel, there is an ill-defined area of nodularity and hemorrhage along the serosal surface. On H&E sections, this area consists of congested and organizing fibrinous granulation tissue. Malignant tumor cells are not identified in this focus. Selected slides from this case are reviewed by a second pathologist within the group, who concurs with this interpretation (ELH).

N-07-04600 05/01/07

Procedure: Clinical Information

Right breast microcalcifications on mammography

Procedure: Diagnosis

UPPER OUTER RIGHT BREAST MICROCALCIFICATIONS, CORE BIOPSIES:

Invasive ductal carcinoma, moderately differentiated.

Ductal carcinoma in situ, high-grade, cribriform with comedo necrosis.

Microcalcifications present.

Comment: ER, PR will be determined by immunohistochemistry (Block 1D). The ER/PR results will be reported in an addendum. The Her-2 stain is not being ordered because of the limited amount of invasive carcinoma present in the biopsy cores.

N-07-04601 05/01/07

Procedure: Clinical Information

Suspect right renal cancer, right renal mass right lower pole 4 cm

Procedure: Diagnosis

Four 18 GAUGE SAMPLES LOWER POLE RIGHT KIDNEY:

Oncocytoma.

N-07-04602 05/01/07

Procedure: Clinical Information

Cancer right upper lobe, left lower lobe, carcinoma of vocal cords, right upper lobe adenocarcinoma, left lower lobe nodule nodule with squamous carcinoma

Procedure: Diagnosis

1) LYMPH NODE, PARAHILAR, BIOPSY:

Two lymph nodes with no evidence of metastatic tumor.

2) LYMPH NODE, PARABRONCHIAL, BIOPSY:

One lymph node with no evidence of metastatic tumor.

3) LUNG, LEFT UPPER LOBE, LOBECTOMY:

Moderately differentiated adenosquamous carcinoma, 1.6 cm in maximum dimension. Margins free, see CAP checklist.

4) LYMPH NODE, ANTERIOR PULMONARY, BIOPSY:

Three lymph nodes with no evidence of metastatic tumor.

5) LYMPH NODE, PARAHILAR, BIOPSY:

Two lymph nodes with no evidence of metastatic tumor.

6) LYMPH NODES, AORTOPULMONARY WINDOW, BIOPSY:

Three lymph nodes with no evidence of metastatic tumor.

N-07-04603 05/01/07

Procedure: Clinical Information

Small bowel obstruction

Procedure: Diagnosis

SMALL BOWEL, BIOPSY:

Adenocarcinoma in situ involving fragments of small bowel mucosa.

N-07-04604 05/01/07

Procedure: Clinical Information

History of rectal carcinoma, one year checkup

Procedure: Diagnosis

1) COLON, ASCENDING, BIOPSY:

Multiple portions of colonic mucosa with no histopathologic abnormalities.

2) COLON, DESCENDING, BIOPSY:

Hyperplastic polyp.

N-07-04605 05/01/07

Procedure: Clinical Information

Nausea and vomiting, rule out Barrett's

Procedure: Diagnosis

ESOPHAGUS, BIOPSY:

Squamous and gastric mucosa with chronic carditis. No evidence for goblet cells or dysplasia is present.

N-07-B9310 05/01/07

Procedure: Clinical Information Lymphocytosis, rule out CLL

Procedure: Diagnosis

Bone marrow aspirate and biopsy: peripheral absolute lymphocytosis with normal-appearing marrow

Comment: Result of examination of Perls' stain will be reported as an addendum. Flow cytometric analysis and

cytogenetic studies are in progress and results will be reported separately.

Addendum Diagnosis: Perls' stain, performed on the bone marrow aspirate, clot section, and decalcified biopsy reveals adequate iron stores. No ringed sideroblasts are seen.

N-07-B9311 05/01/07

Procedure: Clinical Information Increased WBC count

Procedure: Diagnosis

Bone marrow aspirate and biopsy: normocellular marrow with peripheral neutrophilia, monocytosis and lymphocytosis.

Comment: The differential diagnosis includes reactive leukocytosis and a myelodysplastic process such as chronic myelomonocytic leukemia. The cellularity of the marrow is not increased and we do not find morphologic evidence of myelodysplasia. Cytogenetic analysis is in progress and may provide useful information.