

To diagnose diseases such as cancer, a sample of tissue called a biopsy, or an abnormal growth of tissue completely removed called a polypectomy is taken from a patient and examined by a pathologist to determine if cancer is present.

A pathologist is a medical doctor who specializes in the diagnosis and classification of diseases by looking at tissue, specifically cells, under a microscope and by interpreting laboratory tests.

The pathologist is the doctor who examines specimens removed during surgery for conditions such as cancer, to determine if a tumor is benign or cancerous. If cancerous, they will determine the exact cell type, grade and stage of the tumor. In some cases, the pathologist also requests more specialized tests that may guide targeted therapy for a specific cancer. Once the pathologist completes their specimen evaluation, they provide a comprehensive pathology report, or consultation, to your physician.

Capital Digestive Care Laboratory has developed the following information to help you understand your pathology report.

Surgical pathology reports vary regarding the information they contain. However, each report will document the significant details that affect the management of your diagnosis or disease process.

1

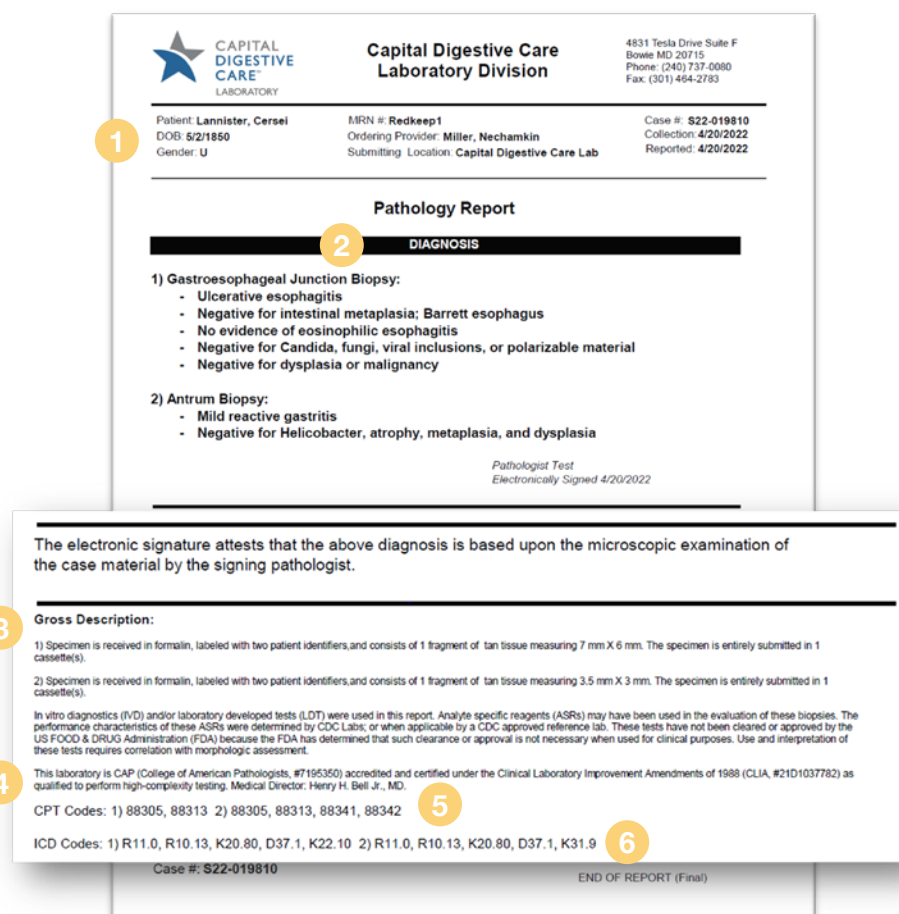
PATIENT IDENTIFIERS

To ensure that the report is about you and your specimen, each pathology report contains your patient identifiers—specific information that relates directly to you and includes your name, birth date, surgical center and medical record number. In addition, your pathologist's name and signature and our laboratory's name and address will appear on the report.

The container in which your specimen is sent to the laboratory also is labeled with your patient identifiers and matched to your medical record to ensure that the specimen is from you. After the specimen arrives in the laboratory, these identifiers are checked repeatedly to ensure the correct information is provided to your medical team.

All pathology departments have a numbering system that is used to specifically and uniquely label each patient specimen. These numbers are called case numbers, and they help identify your specimen as it is processed by the pathology laboratory. All the microscope slides made from your specimen also have a specimen number on them, which encompasses the case number and correlates with your patient identifiers.

Your treating doctor may supply additional clinical information, such as your symptoms, medical conditions, or details about your specimen to your pathologist at the time he or she examines the specimen. The source of the specimen sample is also given, such as “esophagus” or “stomach”.



Capital Digestive Care Laboratory Division
4831 Tesla Drive Suite F
Bowie MD 20715
Phone: (240) 737-0060
Fax: (301) 464-2783

Patient: Lannister, Cersel MRN #: Redkeep1 Case #: S22-019810
DOB: 5/2/1950 Ordering Provider: Miller, Nechamkin Collection: 4/20/2022
Gender: U Submitting Location: Capital Digestive Care Lab Reported: 4/20/2022

Pathology Report

DIAGNOSIS

1) Gastroesophageal Junction Biopsy:

- Ulcerative esophagitis
- Negative for intestinal metaplasia: Barrett esophagus
- No evidence of eosinophilic esophagitis
- Negative for Candida, fungi, viral inclusions, or polarizable material
- Negative for dysplasia or malignancy

2) Antrum Biopsy:

- Mild reactive gastritis
- Negative for Helicobacter, atrophy, metaplasia, and dysplasia

Pathologist Test
Electronically Signed 4/20/2022

The electronic signature attests that the above diagnosis is based upon the microscopic examination of the case material by the signing pathologist.

Gross Description:

1) Specimen is received in formalin, labeled with two patient identifiers, and consists of 1 fragment of tan tissue measuring 7 mm X 6 mm. The specimen is entirely submitted in 1 cassette(s).

2) Specimen is received in formalin, labeled with two patient identifiers, and consists of 1 fragment of tan tissue measuring 3.5 mm X 3 mm. The specimen is entirely submitted in 1 cassette(s).

In vitro diagnostics (IVD) and/or laboratory developed tests (LDT) were used in this report. Analyte specific reagents (ASRs) may have been used in the evaluation of these biopsies. The performance characteristics of these ASRs were determined by CDC Labs; or when applicable by a CDC approved reference lab. These tests have not been cleared or approved by the US FOOD & DRUG Administration (FDA) because the FDA has determined that such clearance or approval is not necessary when used for clinical purposes. Use and interpretation of these tests requires correlation with morphologic assessment.

This laboratory is CAP (College of American Pathologists, #7195350) accredited and certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA, #21D1037782) as qualified to perform high-complexity testing. Medical Director: Henry H. Bell Jr., MD.

CPT Codes: 1) 88305, 88313 2) 88305, 88313, 88341, 88342

ICD Codes: 1) R11.0, R10.13, K20.80, D37.1, K22.10 2) R11.0, R10.13, K20.80, D37.1, K31.9

Case #: S22-019810 END OF REPORT (Final)

2

DIAGNOSIS

The diagnosis section provides the final pathology diagnosis that is established after thorough examination of the specimen. The pathologist is the medical doctor who makes this diagnosis. Some diagnoses are very short, such as “ulcerative esophagitis”. Cancer diagnoses may be lengthy as they need to describe many aspects that will affect the patient's treatment and outcome. For most cancers, the diagnosis will include the grade of the tumor. The grade is determined by applying specific criteria to the microscopic features of the tumor. The grade may also provide prognostic information and may guide treatment.

3

GROSS DESCRIPTION

The gross description describes how a specimen looks to the “naked eye” and details what portions of the specimen are examined under the microscope. It includes the size, color, and number of tissue samples. A gross description of a small biopsy specimen is typically short. Usually, if there are multiple tissues or organs in the specimen, each is described and sampled. Each of these samples is used to make a microscope slide and will be listed in your pathology report.

4

ACCREDITATION

The accreditation and certification statement provides information on who the laboratory is accredited with and ID numbers.

5

CPT CODES

CPT stands for current procedural terminology codes that offer doctors and health care professionals a uniform language for coding medical services and procedures to streamline reporting, increase accuracy and efficiency.

6

ICD CODES

ICD stands for the international statistical classification of diseases and related health problems. Clinical terms coded with ICD are the main bases for health recording and statistics on disease. These codes support payment systems, service planning, administration of quality and safety, and health services research.