
SAMPLE, GASTRO 2

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Adm No: SP2011-23

Address: 1234 SMALL INTESTINE
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Physician: Dr Robert W Reindollar

DOB: 1/1/1945 (Age: 66)

Gender: F

Race: W

Add'l Phy: Dr. Vimal Amin

Accession No: **SP11-23**

Collected: 9/7/2011

Received: 9/7/2011

Reported: 9/8/2011

DIAGNOSIS

CECAL POLYP:

**SESSILE SERRATED POLYP (SESSILE SERRATED ADENOMA) ASSOCIATED
WITH FOCAL LOW-GRADE GLANDULAR DYSPLASIA.
SEE COMMENT.**

DIAGNOSIS COMMENT

Microsatellite Instability (MSI) testing via immunohistochemistry can be performed on the tissue specimen, if clinically indicated.

*****Electronically Signed Out By Ryan Little*****

Dr Kerry D Payne

PERTINENT CLINICAL INFORMATION

V12.72; HISTORY OF POLYPS; CONSTIPATION.

TISSUE SUBMITTED AND GROSS DESCRIPTION

CECAL POLYP: A 0.8 cm polyp. 3TSTS-1.
LLJ/pw

MICROSCOPIC DESCRIPTION

Sections show colonic mucosa with dilated glands displaying saw-tooth architecture that focally become broader toward the base. Focal low-grade surface adenomatous change is present. There is no evidence of high-grade glandular dysplasia or malignancy.

KDP/rl