

SURGICAL PATHOLOGY REPORT

STEVE, SCUBA Accession No: SP11-19

828-324-1234 Physician: Dr Joseph Petrozza 8/4/2011 Phone: Collected: 123-45-6783 1/1/1963 (Age: 48) 8/4/2011 DOB: SSN: Received: 1234567 9/8/2011 MRN: Gender. М Reported:

Adm No: SP2011-19 Race: W

Address: 123 HAPPY MADISON LANE Add'l Phy: Dr Merritt John Seshul

HICKORY, NC 28601

DIAGNOSIS

A. SIGMOID COLON POLYP:

FRAGMENTS OF TRADITIONALLY DEFINED SERRATED ADENOMA.

B. RANDOM COLON BIOPSY: LYMPHOCYTIC COLITIS.

Electronically Signed Out By Ryan Little

Dr Kerry D Payne

PERTINENT CLINICAL INFORMATION

ROUTINE BIOPSIES.

CHRONIC DIARRHEA, RULE OUT CANCER.

TISSUE SUBMITTED AND GROSS DESCRIPTION

A. SIGMOID COLON POLYP: Four small fragments of light tan tissue each approximately 0.2 to 0.3 cm. TS-1.

B. RANDOM COLON BIOPSY: Multiple small pieces of light tan tissue each approximately 0.3 cm. TS-1. LLJ/pw

MICROSCOPIC DESCRIPTION

A: Sections show colonic mucosa with dilated glands with a sawtooth architecture associated with adenomatous change. There is no evidence of malignancy.

B: Sections show colonic mucosa with no significant chronic architectural change. There are increased numbers of lymphocytes within the surface glandular epithelium. The subepithelial collagen layer appears to be of normal thickness and quality. There are patchy areas of increased plasma cells within the lamina propria. Rare acute inflammatory cells are present within the lamina propria. No granulomas are identified. There is no evidence of dysplasia or malignancy.

KDP/rl