Name: Ellen Vivian Miles | DOB: 7/20/1978 | MRN: 07028854 | PCP: Nancy M Ronan, FNP

SURGICAL PATHOLOGY - Details

Component Results

Component	Your Value	Standard Range	Flag
Clinical History	Your Value 44-year-old female with stage 3 small bowel NET. Patient with suspected disease to the liver and peritoneum. Plan for cytoreduction of metastatic disease.		
Final Pathologic Diagnosis	Your Value A. Gallbladder, cholecystectomy: • Mild chronic cholecystitis B. Liver, segment 5 lesion, wedge resection: • Metastatic well-differentiated neuroendocrine tumor, grade 1 • Size (largest focus): 1.5 cm • Ki-67 proliferation index: 2% C. Liver, segment 3 lesion, wedge resection: • Metastatic well-differentiated neuroendocrine tumor • Size: 0.3 cm D. Liver, segment 8 lesion, wedge resection: • Metastatic well-differentiated neuroendocrine tumor • Size: 0.4 cm E. Omentum, lesser, omentectomy: • Metastatic well-differentiated neuroendocrine tumor • Size: 0.5 cm F. Liver, segment 2 lesion, wedge resection: • Metastatic well-differentiated neuroendocrine tumor • Size: 0.3 cm G. Omentum, greater, omentectomy: • Metastatic well-differentiated neuroendocrine tumor, multifocal • Size (largest focus): 1.1 cm H. Peritoneum, pouch of Morison, stripping: • Metastatic well-differentiated neuroendocrine tumor, multifocal • Size (largest focus): 1.5 cm I. Peritoneum, right colic gutter, stripping: • Metastatic well-differentiated neuroendocrine tumor, multifocal • Size (largest focus): 1.2 cm J. Peritoneum, right iliac fossa, stripping:		

Component	Your Value	Standard Range	Flag

- Metastatic well-differentiated neuroendocrine tumor, multifocal
- Size (largest focus): 0.5 cm

K. Peritoneum, left colic gutter, stripping:
- Metastatic well-differentiated neuroendocrine tumor
- Size: 0.4 cm

L. Peritoneum, left iliac fossa, stripping:
- Metastatic well-differentiated neuroendocrine tumor, multifocal
- Size (largest focus): 0.3 cm

M. Peritoneum, sigmoid colon implant, excision:
- Metastatic well-differentiated neuroendocrine tumor, grade 2
- Size: 2.7 cm
- Ki-67 proliferation index: 3.5%

N. Uterus, ovaries and fallopian tubes, supracervical hysterectomy with bilateral salpingo-oophorectomy:
- Metastatic well-differentiated neuroendocrine tumor involving uterine serosa and left ovary
  - Size (largest focus): 1.8 cm
- Endometrium: secretory-type
- Myometrium: leiomyoma
- Fallopian tubes: no diagnostic abnormality
- Ovaries: cystic follicles (right ovary); otherwise unremarkable

O. Peritoneum, pouch of Douglas, stripping:
- Metastatic well-differentiated neuroendocrine tumor, multifocal
- Size (largest focus): 1.0 cm

P. Peritoneum, bladder dome, stripping:
- Metastatic well-differentiated neuroendocrine tumor, multifocal
- Size (largest focus): 0.7 cm

Q. Soft tissue, mesenteric implants, excision:
- Metastatic well-differentiated neuroendocrine tumor, multifocal
- Size (largest focus): 0.4 cm

R. Peritoneum, Foramen of winslow, stripping:
- Metastatic well-differentiated neuroendocrine tumor
- Size: 0.7 cm

S. Peritoneum, right anterior abdominal wall, stripping:
- Metastatic well-differentiated neuroendocrine tumor
- Size: 1.8 cm

Comment: Part N was reviewed in the intradepartmental consultation by Ozlen Saglam, MD (gynecological pathology service) on 9/28/2022.

Case seen by:
Brian Brinkerhoff, MD – Pathologist
Pathology, Oregon Health & Science University

My electronic signature indicates that I have personally reviewed all diagnostic slides, the gross and/or microscopic portion of this report and formulated the final diagnosis.

Gross Description

Your Value

A. Gallbladder.

Received:	Fresh

Component	Your Value	Standard Range	Flag
Labeled:	Gallbladder–1		
Specimen Integrity:	Intact		
Overall size:	8.7 x 2.5 x 2.2 cm		
Attached liver:	Absent		
Cystic duct margin:	Received patent, measuring 1.0 L x 0.3 D cm, and inked black		
Cystic duct lymph node:	Absent		
Serosa appears:	Green-tan smooth and glistening		
Mucosa appears:	Green-tan and velvety		
Stones:	Absent		
Wall thickness:	0.3 cm in greatest thickness		
Submitted:	Representative sections		

Cassette Summary:
A1, cystic duct margin and representative sections of wall

B. Liver.
Received fresh labeled "segment 5 liver–2" are 2 tan-brown soft tissue fragments consistent with liver, 1.8 x 1.6 x 1.5 cm and 0.6 x 0.5 x 0.5 cm with an aggregate weight of 2.6 g. Sectioning through the largest fragment exhibits a 1.5 cm white-tan nodule. A representative section from each fragment is submitted in B1.

C. Liver.
Received fresh labeled "segment 3 liver–3" is a 0.5 cm punch of tan-brown soft tissue consistent with liver, excised to a maximum depth of 0.8 cm. Specimen is bisected to reveal a 0.3 cm white-tan nodule. Entirely submitted in C1.

D. Liver.
Received fresh labeled "segment 8 liver–4" is a 0.5 cm punch of tan-brown soft tissue consistent with liver excised to a maximum depth of 0.8 cm. Specimen is bisected to reveal a 0.4 cm white-tan nodule. Entirely submitted in D1.

E. Liver.
Received fresh labeled "lesser omentum peritoneal stripping–5" is a 0.5 x 0.3 x 0.2 cm gray-tan soft tissue fragment. Entirely submitted intact in E1.

F. Liver.
Received fresh labeled "segment 2 liver–6" is a 0.5 cm punch of tan-brown soft tissue consistent with liver excised to a maximum depth of 0.9 cm. Specimen is bisected to reveal a 0.3 cm white-tan nodule. Entirely submitted in F1.

G. Liver.
Received fresh labeled "greater omentum–7" is a 25 x 11.2 x 1.5 cm elongated portion of yellow lobulated soft tissue. Sectioning reveals multiple white-tan nodules measuring up to 1.1 cm. Representative sections are submitted in G1.

H. Liver.
Received fresh labeled "pouch of Morrison peritoneal stripping–8" is a 2.8 x 2.5 x 1.5 cm red-tan ragged soft tissue fragment. Sectioning reveals 2 white-tan

Component	Your Value	Standard Range	Flag

nodules, 1.0 and 1.5 cm. Representative sections are submitted in H1.

I. Abdominal.
Received fresh labeled "right colic gutter–9" is a 3.3 x 2.5 x 1.8 cm pink-purple soft tissue fragment. Sectioning reveals 2 white-tan nodules, 0.9 and 1.2 cm. Representative sections are submitted in I1.

J. Abdominal.
Received fresh labeled "right iliac fossa peritoneal stripping–10" is a 3.2 x 2 x 1.0 cm pink-purple fibromembranous soft tissue fragment. Sectioning reveals 3 white-tan nodules ranging from 0.2 to 0.5 cm. Representative sections are submitted in J1.

K. Abdominal.
Received fresh labeled "left colic gutter peritoneal stripping–11" is a 5.2 x 5 x 0.4 cm pink-purple fibromembranous soft tissue fragment. Sectioning reveals a single 0.4 cm white-tan nodule. Representative sections are submitted in K1.

L. Abdominal.
Received fresh labeled "left iliac fossa peritoneal stripping–12" is a 4.5 x 3.5 x 0.5 cm pink-purple fibromembranous soft tissue fragment. Sectioning reveals 2 possible nodules, 0.2 and 0.3 cm. Representative sections are submitted in A L1.

M. Abdominal.
Received fresh labeled "sigmoid colon implant–13" is a 3.2 x 2.5 x 2.2 cm pink-purple moderately firm tissue fragment. Sectioning reveals a 2.7 cm white-tan nodule. A representative section is submitted in M1.

N. Pelvis.
Received fresh labeled, “supracervical hysterectomy and bilateral salpingo-oophorectomy–14” is a 170 g supracervical unopened bicornate uterus (5.5 SI x 7.7 RL x 4.7 AP cm) and attached bilateral adnexa. The lumens are connected at the lower uterine segment. The serosa is red-tan with multiple white-tan indurated nodules measuring up to 2.0 cm. The endometrial cavities left (1.5 RL x 3.8 SI cm) & right (1.8 RL x 4.3 SI cm) are lined by pink tan endometrium averaging 0.3 cm in thickness. The myometrium measures 1.6 cm in maximum thickness and is unremarkable. 2 pale-tan intramural well-circumscribed nodules are noted in the right endometrial cavity measuring up to 1.1 cm. No hemorrhage or necrosis is identified.

Multiple white-tan indurated nodules are noted in the attached peritoneum and soft tissue, up to 1.8 cm.

The attached right fallopian tube with fimbria (7 L x 1.0 D cm) exhibits an unremarkable pinpoint lumen. The attached ovary (4.0 x 3.5 x 2.8 cm) is sectioned to reveal pink-tan parenchyma with a 2.5 cm chocolate cyst and multiple thin-walled serous cysts..

The attached left fallopian tube with fimbria (6.8 L x 1.0 D cm) exhibits an unremarkable pinpoint lumen. The attached ovary (4.0 x 3.5 x 2.5 cm) is sectioned to reveal a 2.0 cm chocolate cyst and multiple thin-walled serous cysts.

Representative sections are submitted.

Component	Your Value	Standard Range	Flag

Cassette Summary:
N1, right anterior endomyometrium
N2, left anterior endomyometrium
N3, right posterior endomyometrium
N4, left posterior endomyometrium
N5, peritoneal nodule and nodule adjacent to uterus
N6–N7, right ovary and fallopian tube
N8–N9, left ovary and fallopian tube
N10, endocervical margin en face
N11, nodules

O. Abdominal.
Received fresh labeled "pouch of Douglas peritoneal stripping–15" are 2 red-purple ragged soft tissue fragments, 4.2 x 3.5 x 1.3 cm in aggregate. Sectioning reveals multiple white-tan nodules measuring up to 1.0 cm. Representative sections are submitted in O1.

P. Abdominal.
Received fresh labeled "bladder peritoneal stripping–16" is a 3.5 x 1.0 x 0.4 cm pink-purple fibromembranous soft tissue fragment. Sectioning reveals 2 white-tan nodules, 0.6 and 0.7 cm. Representative sections are submitted in P1.

Q. Abdominal.
Received fresh labeled "mesenteric implants–17" are 2 yellow-tan nodules each 0.4 cm. The specimen is wrapped in paper and entirely submitted in Q1.

R. Abdominal.
Received fresh labeled "Foreman of Winslow–18" is a 0.7 x 0.5 x 0.4 cm pink-purple nodule. The specimen is entirely submitted intact in R1.

S. Abdominal.
Received fresh labeled "right anterior abdominal wall peritoneal stripping–19" are 3 pink-purple moderately firm tissue fragments, 1.8 x 1.5 x 0.4 cm in aggregate. The specimen is entirely submitted intact in S1.

RML,PA(ASCP)

All specimens in this case are received labeled with the patient's name (initials EVM) and medical record number (07028854), and are verified by barcode scanning.

Component	Your Value	Standard Range	Flag

Ancillary Information	Your Value
	Analyte specific reagents are used in many laboratory tests necessary for standard medical care. This test was developed and its performance characteristics determined by OHSU laboratories. It has not been cleared or approved by the US Food and Drug Administration (FDA). FDA does not require this test to go through premarket FDA review. This test is used for clinical purposes. It should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments (CLIA) as qualified to perform high complexity clinical laboratory testing. If immunohistochemical analysis (IHC) was performed concurrently with flow cytometry, the IHC was done to allow assessment of immunoarchitecture, which is not supplied by flow cytometry. Flow cytometry enables better assessment of clonality and antigen aberrancy than IHC. Appropriate positive controls and/or negative controls were used for all stains, including immunohistochemical stains, special stains, and in situ hybridization, and these reacted appropriately.

General Information

Ordered by Rodney Pommier

Collected on 09/21/2022 9:00 AM from Gallbladder (Tissue)
Collected on 09/21/2022 9:21 AM from Liver (Tissue)
Collected on 09/21/2022 9:23 AM from Liver (Tissue)
Collected on 09/21/2022 9:23 AM from Liver (Tissue)
Collected on 09/21/2022 9:26 AM from Liver (Tissue)
Collected on 09/21/2022 9:27 AM from Liver (Tissue)
Collected on 09/21/2022 9:31 AM from Liver (Tissue)
Collected on 09/21/2022 9:56 AM from Liver (Tissue)
Collected on 09/21/2022 10:02 AM from Abdominal (Tissue)
Collected on 09/21/2022 10:06 AM from Abdominal (Tissue)
Collected on 09/21/2022 10:09 AM from Abdominal (Tissue)
Collected on 09/21/2022 10:21 AM from Abdominal (Tissue)
Collected on 09/21/2022 10:22 AM from Abdominal (Tissue)
Collected on 09/21/2022 11:03 AM from Pelvis (Tissue)
Collected on 09/21/2022 11:17 AM from Abdominal (Tissue)
Collected on 09/21/2022 11:28 AM from Abdominal (Tissue)
Collected on 09/21/2022 11:37 AM from Abdominal (Tissue)
Collected on 09/21/2022 11:40 AM from Abdominal (Tissue)
Collected on 09/21/2022 11:42 AM from Abdominal (Tissue)

Resulted on 09/29/2022 12:41 PM

Result Status: Final result

This test result has been released by an automatic process.