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Name		MRN	DOB	Sex	
Lab Collection Inform	nation				
Component Results					
Component Pathology Surg	ical (Corrected)				

ADDENDUM

Addendum #1

This addendum is issued to report the result of genetic test.

The quality for DNA isolated from this tumor specimen was poor. This sub-optimal DNA sample will not be submitted for genome wide SNP array study. Submitting another tumor sample for appropriate tests is recommended.

Sanger sequencing analysis was performed on the DNA extracted from this tumor sample. There was no evidence for V600E mutation in the exon 15 of the BRAF gene. However, the overall sequencing quality was poor so the mutations at the remaining coding regions of this gene and low mosaic changes cannot be ruled out.

Molecular profiling with newly launched NGS panel for solid tumor is highly recommended to help with differential diagnosis, risk stratification and treatment selection.

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Complete r	eport	by	is	available	on	Meditech	or	Epic	

Addendum Signed _____(signature on file)_____

FINAL DIAGNOSIS

A, B and C Brain, suprasellar/optic pathway region, craniotomy: -Pilocytic astrocytoma (WHO Grade I)

SYNOPTIC REPORT

History of Previous Tumor/Familial Syndrome: None

Specimen Type/Procedure:

Resection

Specimen Handling: Frozen section Routine permanent paraffin sections Tissue submitted to CBTTC

Specimen Size: See gross description

Laterality: Left/midline

Tumor Site: Cerebrum, suprasellar

Histologic Type and Grade: Pilocytic astrocytoma (Grade I)

Histologic Grade: WHO Grade I

Ancillary Studies: Immuno Molecular tests

MEDICAL HISTORY

BRAIN TUMOR PRE-OP DX:

POST-OP DX: PENDING
PROCEDURE: LEFT SUPRATENTORIAL CRANI, BRAIN TUMOR EXCISION
HISTORY: FOUR YEAR OLD MALE WITH BRAIN TUMOR

TISSUES

A. BRAIN, NOS - TUMOR, B. BRAIN, NOS - BRAIN TUMOR, C. BRAIN, NOS - BRAIN TUMOR

GROSS DESCRIPTION

- A. The specimen is received fresh for frozen section in a container labeled with the patient's name, medical record number and designated "brain tumor". It consists of a piece of pink-tan tissue measuring 2 cm in greatest dimension. Representative tissue is submitted for frozen evaluation and squash preps are performed. The frozen tissue is kept frozen and sent to cytogenetics for BRAF and genome wide array. The remainder of the specimen is submitted in cassette A.
- B. The specimen is received fresh in a container labeled with the patient's name, medical record number and designated "brain tumor". It consists of a small fragment of pink-tan tissue measuring 0.5 cm in greatest dimension. The specimen is entirely submitted for research according to the CBTTC protocol. No cassettes are submitted.
- C. The specimen is received in formalin in a container labeled with the patient's name, medical record number and designated "brain tumor". It consists of multiple irregular fragments of gelatinous red-tan tissue measuring $1 \times 1 \times 0.4$ cm in aggregate. The specimen is entirely submitted in cassette C.

FROZEN SECTION DIAGNOSIS

Low grade glioma consistent with pilocytic astrocytoma.

MICROSCOPIC DESCRIPTION

Microscopic examination was performed on H&E stained sections and additional sections stained with immunoperoxidase methods for Ki-67 and GFAP.

Microscopic sections demonstrate an astrocytic tumor predominantly composed of compact bipolar cells with Rosenthal fibers; a loose component is present as well with microcysts. There are no mitoses or necrosis. The proliferative activity is very low. The tumor cells are reactive for GFAP.

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