

Mount Sinai Hospital Joseph & Walf Lebovic Hearth Complex Pathology

800 University Ave

E 415-585-4800 x4

TESTING LONGNAME, MARY LOUWCH

SEX: F DOB: 28 NOV 1981

123 COLLEGE ST

DEPT: WiCH Surgery

MRN: 500000005

TORONTO ON M5M 2P1 T: 416-888-1111

PROV: IMPATIENT, ATTENDING PHYSICIAN

HCN:

Clinic ID:

ENDO

Medical Record # 80662039

Clinic Name:

ENDOSCOPY

Last Name: First, Middle: TESTINGLONGNAME

Physician:

BOLLEGALA, DR. NATASHA

MARYLOUWCH

Procedure Date: 2024-05-31

DOB/Gender:

28 NOV 1981

Health Card #:

Accession Date: 2024-05-31

Report Date:

2024-07-12*

Visit#:

7218 202510

SUPPLEMENTAL SURGICAL PATHOLOGY REPORT

Copies to:

SUPPLEMENTAL INFORMATION:

ADDENDUM (June 6th, 2024):

Immunohistochemistry

Mismatch Repair (MMR): MLH1 deficient (abnormal MLH1 / PMS2 staining: dMMR)

Tumour considered MSI-H

PD-L1: Positive (CPS > 5 (40)

HER2: Negative (0)

ADDENDUM (July 12, 2024):

Molecular Analysis:

MLH1 Promoter Methylation: PRESENT

COMMENT

Given the molecular findings, the loss of MLH1 is most likely sporadic in nature. Unless there is a suggestion hereditary condition (i.e. compelling family history, diagnosis under age 50, polyposis), then a referral to genetics is not indicated at this time.

Molecular Testing - Technical Details

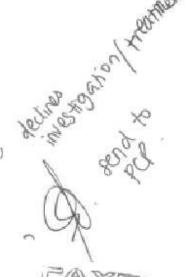
DNA extracted from microdissected tumour tissue was treated with sodium bisulfite, followed by amplification of a segment of the MLH1 [NM_000249.3] promoter region (c.-248_-178) using methylation specific real-time PCR on the Roche LightCycler 96. The methylation status of MLH1 is determined by calculating the percentage of methylated reference (PMR) by comparing the amplification of MLH1 to the amplification of the reference gene Alu. Methylation at locations other than those covered by the primers and probes will not be detected. Results of this test must always be interpreted within the clinical context and other relevant data, and should not be used alone for a diagnosis of malignancy. This test is not intended to detect minimal residual disease.

These tests were developed and their performance characteristics determined by Mount Sinai Hospital, Department of Pathology and Laboratory Medicine. This laboratory is accredited to ISO 15189 Plus by Accreditation Canada Diagnostics. These tests were validated according to accepted practice guidelines for clinical molecular genetic testing by the ACMG and CCMG.

PATHOLOGY DIAGNOSIS

- 1, 2. Duodenum (D2, cap), biopsies:
- Mild intraepithelial lymphocytosis (likely secondary to Helicobacter pylori gastritis)
- Stomach (antrum and body), biopsy:
- Active chronic gastritis; Helicobacter pylori identified with histochemical stains (H. pylori gastritis)
- Intestinal metaplasia; negative for dysplasia.
- Stomach (mass), biopsy.
- Moderately differentiated gastric adenocarcinoma (intestinal type)
- Immunohistochemical biomarkers pending.

Page 1 of 3 MRN 500000005 Lorest Maneras-TESTINGLONGNAME.



2 3 2024



Pathology & Laboratory Medicine

600 University Ave., Suite 6-500, Toronto, ON, Canada, M5G 1X5 t: 416-586-4800 x4457 f: 416-586-8628

Clinic ID: ENDO

Clinic Name: ENDOSCOPY

Physician: BOLLEGALA, DR. NATASHA

Procedure Date: 2024-05-31 Accession Date: 2024-05-31

Report Date: 2024-07-12*

Medical Record # 80862036

East Name: TESTINGLONGNAME,
First, Middle: MARYLOUWCH
DOB/Gender: 28 NOV 1981

Health Card #:

Visit#: 7218 202510

SUPPLEMENTAL SURGICAL PATHOLOGY REPORT

SPS-24-15414

COMMENT:

Biomarker results will be reported in a supplemental report.

Specimen: 1. DUODENUM BIOPSY

2. DUODENUM BIOPSY, CAP

GASTRIC ANTRUM BIOPSY, AND BODY

4. GASTRIC BIOPSY, MASS

Gross Description

- The specimen container is labelled with the patient's identification and contains 3 pieces of tan soft tissue measuring 0.2 to 0.4 cm in greatest dimension.
- 1 submitted in toto
- The specimen container is labelled with the patient's identification and contains 4 pieces of tan soft tissue measuring 0.6 to 0.7 cm in greatest dimension.
- 1 submitted in total
- The specimen container is labelled with the patient's identification and contains 4 pieces of tan soft tissue measuring 0.2 to 0.6 cm in greatest dimension.
- 1 submitted in toto
- The specimen container is labelled with the patient's identification and contains multiple fragments of tan soft tissue measuring 0.8 x 0.6 x 0.2 cm in aggregate dimension.
- 1 submitted in toto

Grossed by: N. Saito, Pathologists' Assistant

Microscopic Description

RESULTS

Mismatch Repair

Immunohistochemistry (IHC) Testing for Mismatch Repair (MMR) Proteins

MLH1 Result: Loss of nuclear expression MSH2 Result: Intact nuclear expression MSH6 Result: Intact nuclear expression PMS2 Result: Loss of nuclear expression

Background nonneoplastic tissue / internal control with intact nuclear expression

HER2 Test(s) Performed HER2 by IHC Results Negative (Score 0)

	A CONTRACTOR OF THE PROPERTY O		There Make 1
MIRIN 500000005	Lust Name:	TESTINGLONGNAME.	Page 2 of 3



Mount Sinai Hospital Joseph & Welf Lebovic Health Complex

Pathology & Laboratory Medicine

600 University Ave., Suite 6 500, Toronto, ON, Carada, M5G 1X5 E 416-585-4800 x4457 F 416-586-8628

Clinic ID:

ENDO

Medical Record # 80862039

Clinic Name:

ENDOSCOPY

Last Name: **TESTINGLONGNAME**

Physician:

BOLLEGALA, DR. NATASHA

First_Middle: MARYLOUWCH

7218 202510

Procedure Date: 2024-05-31

DOB/Gender:

Health Card #:

28 NOV 1981

Accession Date: 2024-05-31 Report Date: 2024-07-12*

Visit#:

SUPPLEMENTAL SURGICAL PATHOLOGY REPORT

SPS-24-15414

Aaron Pollett, MD, FRCPC