

DALLAS DIGESTIVE ENDOSCOPY CENTER

Department of Gastroenterology

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ENDOSCOPY PROCEDURE REPORT

Patient:	RODRIGUEZ, MARIA	DOB:	1988-05-22	MRN:	MARIA_R
Procedure Date:	2024-09-28	Procedure Time:	09:30 - 10:15 AM	Accession:	ENDO260256586
Endoscopist:	Dr. James Wilson, MD, FACP - Gastroenterology	Referring MD:	Dr. James Wilson	ASA Class:	II

PROCEDURE

Colonoscopy with Ileoscopy and Biopsy

INDICATION

Crohn's disease - assessment of disease activity and extent

SEDATION

Propofol sedation

FINDINGS

Terminal Ileum: Severe inflammation with deep linear and serpiginous ulcerations, cobblestoning of mucosa, luminal narrowing without obstruction. Estimated 70% mucosal involvement.

Cecum: Moderate inflammation with scattered aphthous ulcers and erythema

Ascending Colon: Moderate to severe inflammation with skip lesions, multiple deep ulcerations, friable mucosa with contact bleeding

Transverse Colon: Mild patchy inflammation, edematous mucosa

Descending Colon: Normal appearing mucosa - skip pattern confirmed

Sigmoid Colon: Normal

Rectum: Mild inflammation near dentate line, perianal fistula opening visualized

Disease Severity: SES-CD Score: 18 (moderate-to-severe endoscopic activity)

SPECIMENS OBTAINED

Location	Type	# Specimens	Container
Terminal ileum	Biopsy	4	#1
Ascending colon	Biopsy	4	#2
Transverse colon	Biopsy	2	#3

PATHOLOGY

Pathologist Dr. Karen Lee, MD

Report Date 2024-10-02

Microscopic Active chronic colitis with crypt architectural distortion, cryptitis, and crypt abscesses. Non-caseating granulomas identified in terminal ileum.

Diagnosis Active Crohn's disease involving terminal ileum and colon

IMPRESSION

Escalation to biologic therapy recommended given disease severity and conventional therapy failure

Electronically signed by:

Dr. James Wilson, MD, FACP - Gastroenterology

Board Certified - Gastroenterology

Signed: 2024-09-28 11:30 AM | Report ID: ENDO260256586