

SUMMIT PATHOLOGY

Office located at North Colorado Medical Center

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N. Johnston, DO

M. Riley, MD C. Salisbury, MD J. Stefka, MD M. Walts, MD H. Worcester, MD

06/19/2020

06/22/2020

C. Pizzi, MD

ABNORMAL

SURGICAL PATHOLOGY REPORT

Patient: MUSCARELLA, HELEN JULIA Med Rec#: 297846 PV: 00102676855

DOB: 03/10/1951 Age: **69** Physician(s):

BLATT DAVID MD

Sex: F

NORTH COLORADO MEDICAL CENTER

Attn: **DAVID BLATT, MD**

Test Requested: NCMC Surgical

Result ID: NS20-02248

Date Received:

Date Reported:

Accession #: 12117066

Date Collected: 06/19/2020

FINAL DIAGNOSIS:

BRAIN, MASS, BIOPSY:

HISTOLOGIC FEATURES AND IMMUNOHISTOCHEMICAL STAINING RESULTS CONSISTENT WITH METASTATIC SQUAMOUS CELL CARCINOMA, MODERATELY DIFFERENTIATED.

COMMENT:

The patient has a clinical history of lung squamous cell carcinoma (NS19-05149), and the brain lesion most likely represents a metastasis from the lung primary.

> H Wentzell Hamner, MD Pathologist, Electronic Signature

The case has been reviewed with the following pathologist(s) who concur with the interpretation: Meghan Riley, MD

Clinical History: Brain tumor. History of lung cancer.

GROSS DESCRIPTION:

Received fresh for frozen section, which has been verified to belong to patient: MUSCARELLA, HELEN JULIA and labeled "A brain mass versus abscess" is a 2.5 x 2.1 x 1.6 cm pink-tan, yellow, softened, nodular and partially disrupted tissue. No ink is applied due to previous disruption. The cut surfaces show scattered necrosis and firm, gritty areas. 1 H&E stained and 1 Diff-Quik stained scrape prep are made. A representative section is taken for frozen section. The entire specimen is submitted as follows:

Cassette Summary:

FSA1: Frozen section remnant A2-A3: Remainder of specimen

INTRAOPERATIVE CONSULT DIAGNOSIS:

Frozen: Brain mass, biopsies: Metastatic squamous cell carcinoma with extensive necrosis.

6/19/20, 1200 noon [performed by H Wentzell Hamner, MD]

MICROSCOPIC DESCRIPTION:

Sections of the brain mass biopsies show brain parenchyma diffusely infiltrated by irregular islands of highly pleomorphic epithelial cells with enlarged, hyperchromatic nuclei, nucleoli, and multiple mitoses. There are also intercellular bridges and focal



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apparent keratinization, most consistent with metastatic squamous cell carcinoma. Immunohistochemistry is performed on the tissue to confirm the diagnosis with the following results: squamous cell carcinoma markers CK 5/6 and p40 both strongly positive.

NOTE: The immunoperoxidase tests utilized in this examination were developed and their performance characteristics determined by the laboratory at Summit Pathology. It has not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. 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 of 1988 (CLIA) as qualified to perform high complexity clinical laboratory testing.

CPT Code(s): 88341, 88331, 88342, 88307

Specimen grossed and processed at: Summit Pathology 5802 Wright Dr., Loveland, CO, 80538 Specimen interpreted at: North Colorado MC 1801 16th St., Greeley, CO 80631