



SUMMIT PATHOLOGY

5802 Wright Drive
Loveland, CO 80538
TEL: (970) 212-0530
FAX: (970) 212-0553

R. Barner, MD	N. Johnston, DO	C. Pizzi, MD
C. Bee, MD	C. McLaughlin, MD	M. Riley, MD
J. Andersen, MD	A. Libby, MD	C. Salisbury, MD
S. Alam, MD	D. Long, MD	J. Stefka, MD
P. Haberman, MD	C. Murphy, MD	M. Walts, MD
W. Hamner, MD	C. Nerby, MD	H. Worcester, MD

ABNORMAL

SURGICAL PATHOLOGY REPORT

Patient: **JOHNK, JAMES F**

Med Rec#: **370300**

PV: **174234550**

DOB: **12/31/1949**

Age: **70**

Sex: **M**

Physician(s):

BARLAND ALYCIA MD

UCHEALTH DERMATOLOGY CLINIC - LONGMON

Accession #: **12110673**

Date Collected: **06/08/2020**

Date Received: **06/08/2020**

Date Reported: **06/10/2020**

Test Requested: **Surgical**

Result ID: OS20-10035

FINAL DIAGNOSIS:

SKIN, LEFT SHOULDER, SHAVE BIOPSY:

POORLY-DIFFERENTIATED CARCINOMA WITH NEUROENDOCRINE AND SARCOMATOID FEATURES, MOST COMPATIBLE WITH A COMBINED MERKEL CELL CARCINOMA, TRANSECTED AT THE DEEP SECTION EDGE

COMMENT:

The tumor encompasses nearly the entire biopsy and has a maximum diameter of 3.9 cm, involves only the sampled dermis, shows combined epithelioid neuroendocrine and spindled sarcomatoid features, and is transected at the base of the biopsy. Merkel cell carcinomas rarely show divergent differentiation, most commonly squamous and rarely spindle cell sarcomatoid areas. The spindled cell areas only stain positively with vimentin similar to an atypical fibroxanthoma, and a desmin stain is negative in these spindled areas. While the immunophenotype is compatible with a Merkel cell carcinoma, correlation with past history of systemic malignancies and other current clinical and radiologic studies, as indicated.

Heath D Worcester, MD
Pathologist, Electronic Signature

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

Clinical History:

Melanoma > SCC.

Neoplasm of skin.

Submitted Clinical ICD10 Codes: D49.2

GROSS DESCRIPTION:

Received in a formalin filled bottle/container, which has been verified to belong to patient: JOHNK, JAMES F and labeled "A) L shoulder" is a 12.8 g, 3.9 x 3.0 x 2.3 cm unoriented pink-tan, yellow rubbery, nodular mass. The resection margin is 0.7 x 0.6 cm and puckered. The resection margin is inked green. The mass is overhanging the edges of the puckered margin. Sectioning reveals pink-purple, red rubbery and hemorrhagic cut surfaces with extension to the margin. The entire specimen is submitted sequentially in blocks A1-A8.

MICROSCOPIC DESCRIPTION:

Section show a high-grade malignancy with marked cytologic atypia, scant cytoplasm and neuroendocrine features extending into the subjacent dermis. In a portion of the sections, the tumor exhibits spindled cell sarcomatoid features. The epidermis is nearly completely eroded.

Also examined are immunoperoxidase-stained sections for CK7, CK20, CK5/6, SOX-10, MelanA, p40, synaptophysin, BerEp4, desmin and vimentin which show CK7 cytoplasmic and dot positivity, CK20 cytoplasmic and dot positivity, focal CK5/6



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ABNORMAL

SURGICAL PATHOLOGY REPORT

Patient: JOHNK, JAMES F

Med Rec#: 370300

PV: 174234550

DOB: 12/31/1949

Age: 70

Sex: M

Physician(s):

BARLAND ALCIA MD

UCHEALTH DERMATOLOGY CLINIC - LONGMON

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cytoplasmic and dot positivity, synaptophysin positivity in the epithelioid neuroendocrine cells, and only vimentin positivity in the sarcomatoid areas (Positive and negative controls appropriate).

(Note: The immunoperoxidase tests utilized in this examination were developed and their performance characteristics determined by the laboratory at Summit Pathology. They have 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. These tests are 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 x9, 88305, 88342

Specimen grossed and processed at: Summit Pathology 5802 Wright Dr., Loveland, CO, 80538

Specimen interpreted at: Summit Pathology 5802 Wright Drive, Loveland, CO 80538