

Doctor	Patient	Age	DOS	Diagnosis
GALE AARON	YORK, ETHEL MARDELL	77	08/12/2020	<p>Revision (08/18/2020) ADDED</p> <p>AMENDMENT: Additional information is received from nurse practitioner, Jessica Skomp. The original requisition was filled out incorrectly. According to nurse practitioner Skomp, this specimen is not pleural fluid but instead is peritoneal fluid, as the collection procedure was a paracentesis. The site and procedure are corrected as follows:</p> <p>PERITONEAL FLUID, CYTOLOGY: The diagnosis is unchanged. See below.</p> <p>_____</p> <p>Carrie Pizzi, MD</p> <p>PLEURAL FLUID, SIDE NOT SPECIFIED, CYTOLOGY: MILDLY ATYPICAL EPITHELIOID CELLS PRESENT; PLEASE SEE COMMENT.</p>
HAJEK MICHAEL MD	ADAMS, LYNDA JO	60	07/23/2020	<p>SOFT TISSUE, RIGHT THIGH, BIOPSY: 1. FIBROADIPOSE TISSUE WITH ABUNDANT ACUTE SUPPURATIVE INFLAMMATION, NECROSIS, AND NUMEROUS BACTERIAL COLONIES (CONFIRMED WITH A GRAM STAIN). 2. SEE COMMENT.</p>
HARTMAN ZACHARY	RIDENOUR, RONALD RICHARD	69	07/13/2020	<p>A) COLON, SIGMOID POLYP AT 20 CM, POLYPECTOMY: TUBULAR ADENOMA.</p> <p>B) COLON, SIGMOID POLYP AT 18 CM, POLYPECTOMY: TUBULAR ADENOMA.</p>
HARTMAN ZACHARY	BRANDT, BRIAN J	29	07/13/2020	<p>SOFT TISSUE, ABDOMEN, HERNIORRHAPHY: HISTOLOGIC FEATURES CONSISTENT WITH A BENIGN HERNIA SAC.</p>
HARTMAN ZACHARY	TIMM, JUDY LAVONNE	72	07/13/2020	<p>A) STOMACH, POLYP, BIOPSY: SMALL BENIGN FUNDIC GLAND POLYP.</p> <p>B) STOMACH, HIATAL HERNIA POLYP, BIOPSY: FUNDIC GLAND POLYP.</p> <p>C) ESOPHAGUS, MID, BIOPSY: 1. BENIGN ESSENTIALLY NORMAL SQUAMOUS MUCOSA. 2. NO ACTIVE ESOPHAGITIS, EOSINOPHILIC ESOPHAGITIS, DYSPLASIA, OR MALIGNANT FEATURES IDENTIFIED.</p>
HARTMAN ZACHARY	YOUNG, BEVERLY J	64	07/21/2020	<p>STOMACH, ANTRUM, BIOPSY: 1. BENIGN GASTRIC MUCOSA WITH HISTOLOGIC FEATURES COMPATIBLE WITH CHEMICAL (REACTIVE) GASTROPATHY. 2. NO HELICOBACTER PYLORI IDENTIFIED. 3. NEGATIVE FOR INTESTINAL METAPLASIA, DYSPLASIA AND CARCINOMA.</p>
HARTMAN ZACHARY	POWELL, AARON ROY	42	07/21/2020	<p>GALLBLADDER, CHOLECYSTECTOMY: MILD CHRONIC CHOLECYSTITIS. NO STONES ARE IDENTIFIED. NO EVIDENCE OF MALIGNANCY.</p>
HARTMAN ZACHARY	CONKLIN, ARDIS MARIE	92	07/21/2020	<p>STOMACH, ANTRUM, BIOPSY: 1. BENIGN GASTRIC MUCOSA WITH HISTOLOGIC FEATURES COMPATIBLE WITH CHEMICAL (REACTIVE) GASTROPATHY. 2. NO HELICOBACTER PYLORI IDENTIFIED. 3. NEGATIVE FOR INTESTINAL METAPLASIA, DYSPLASIA AND CARCINOMA.</p>
HARTMAN ZACHARY	BROWN, BARBARA GWEN	71	07/21/2020	<p>A) COLON, SIGMOID POLYP AT 15 CM, BIOPSY: HYPERPLASTIC POLYP, FRAGMENTS OF.</p> <p>B) COLON, RECTUM POLYP AT 5 CM, BIOPSY: TUBULAR ADENOMA.</p> <p>C) COLON, RECTUM POLYP AT 8 CM, BIOPSY: HYPERPLASTIC POLYP, FRAGMENTS OF.</p>
HARTMAN ZACHARY	BRUNKER, PAUL CHARLES	43	07/21/2020	<p>A) STOMACH, ANTRUM, BIOPSY: 1. BENIGN GASTRIC MUCOSA WITH FEATURES OF MILD REACTIVE GASTROPATHY. 2. NO HELICOBACTER-LIKE ORGANISMS IDENTIFIED. 3. NEGATIVE FOR ACTIVE GASTRITIS, DYSPLASIA AND MALIGNANCY.</p> <p>B) STOMACH, LESSER CURVED ULCER, BIOPSY: 1. REACTIVE GASTROPATHY WITH FRAGMENT SHOWING COMPLETE INTESTINAL METAPLASIA. 2. NO DEFINITIVE ULCER IDENTIFIED. 3. NEGATIVE FOR HELICOBACTER BY SPECIAL STAIN. 4. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.</p> <p>C) GASTROESOPHAGEAL JUNCTION, BIOPSY: 1. FEATURES CONSISTENT WITH BARRETT'S ESOPHAGUS IN THE CORRECT CLINICAL SETTING (POSITIVE FOR INTESTINAL METAPLASIA/GOBLET CELLS). 2. BACKGROUND FEATURES OF MILD REFLUX ESOPHAGITIS (GERD). 3. NEGATIVE FOR EOSINOPHILIC ESOPHAGITIS, VIRAL CYTOPATHIC EFFECT, DYSPLASIA AND MALIGNANCY.</p> <p>D) ESOPHAGUS, PROXIMAL, BIOPSY: 1. SQUAMOUS MUCOSA WITH NO SPECIFIC HISTOPATHOLOGIC ABNORMALITY. 2. NEGATIVE FOR SQUAMOUS HYPERPLASIA AND INFLAMMATION. 3. NEGATIVE FOR BARRETT S ESOPHAGUS (GLANDULAR MUCOSA NOT IDENTIFIED), EOSINOPHILIC ESOPHAGITIS, DYSPLASIA AND MALIGNANCY.</p>

HARTMAN ZACHARY	KRUEGER, KRISTOPHER UNK	40	07/21/2020	STOMACH, ANTRUM, BIOPSY: 1. BENIGN GASTRIC MUCOSA WITH FEATURES OF MILD REACTIVE GASTROPATHY. 2. NO HELICOBACTER-LIKE ORGANISMS IDENTIFIED. 3. NEGATIVE FOR ACTIVE GASTRITIS, DYSPLASIA AND MALIGNANCY.
HARTMAN ZACHARY	TRIPLETTE, GWEN ELLEN	79	07/21/2020	A) COLON, 70 CM, BIOPSY: 1. BENIGN MUCOSA WITH LYMPHOID AGGREGATE AND MILD HYPERPLASTIC CHANGES. 2. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.  B) COLON, 40 CM, BIOPSY: 1. HYPERPLASTIC POLYP. 2. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.
HARTMAN ZACHARY	GARCIA, ABRAHAM	27	08/18/2020	A) STOMACH, PRE-PYLORIC ANTRUM, BIOPSY: 1. FOCALLY ACTIVE CHRONIC GASTRITIS. 2. POSITIVE FOR HELICOBACTER BY SPECIAL STAIN. 3. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.  B) ESOPHAGUS, Z-LINE, BIOPSY: 1. SQUAMOUS HYPERPLASIA WITH CHRONIC INFLAMMATION AND INFLAMED GASTRIC CARDIA CONSISTENT WITH REFLUX ESOPHAGITIS (GERD). 2. NEGATIVE FOR BARRETT S ESOPHAGUS (NO GOBLET CELLS IDENTIFIED), EOSINOPHILIC ESOPHAGITIS, VIRAL CYTOPATHIC EFFECT, DYSPLASIA AND MALIGNANCY.
HARTMAN ZACHARY	LINDSEY, WILMA MAE	77	09/03/2020	A) STOMACH, ANTRUM, BIOPSY: 1. MILD CHRONIC INFLAMMATION WITH FOVEOLAR HYPERPLASIA; CONSISTENT WITH REACTIVE GASTROPATHY. 2. NEGATIVE FOR HELICOBACTER BY SPECIAL STAIN. 3. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.  B) STOMACH, LESSER CURVATURE POLYP, BIOPSY: 1. BENIGN FUNDIC GLAND POLYP. 2. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.
HARTMAN ZACHARY	GREGORY, DORA	66	09/03/2020	SKIN, LEFT DORSUM HAND, EXCISIONAL BIOPSY: HYPERTROPHIC ACTINIC KERATOSIS, TRANSECTED AT THE PERIPHERAL SECTION EDGES.
HARTMAN ZACHARY	BROWN, RICHARD CURTIS	64	09/17/2020	A) HERNIA SAC, RIGHT INGUINAL, HERNIORRHAPHY: FIBROADIPOSE TISSUE WITH MESOTHELIAL LINING, FIBROSIS AND FOCAL CHRONIC INFLAMMATION, CONSISTENT WITH HERNIA SAC  B) SOFT TISSUE, RIGHT SPERMATIC CORD LIPOMA, EXCISION: MATURE ADIPOSE TISSUE CONSISTENT WITH LIPOMA
HARTMAN ZACHARY	TROELSTRUP, LENORA	81	09/17/2020	A) COLON, ASCENDING, 40 CM, BIOPSY: 1. FOCAL FEATURES SUGGESTIVE OF SESSILE SERRATED ADENOMA. 2. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.  B) COLON, COLON/RECTUM BORDER, BIOPSY: 1. TRADITIONAL SERRATED ADENOMA. 2. NEGATIVE FOR MALIGNANCY.
HARTMAN ZACHARY	KRUEGER, BRIAN	67	09/17/2020	A) DUODENUM, ULCER, BIOPSY: 1. PEPTIC DUODENITIS WITH FEATURES OF HEALING EROSION/ULCERATION, COMPATIBLE WITH PEPTIC ULCER. 2. FEATURES OF CELIAC SPRUE ARE NOT IDENTIFIED. 3. NEGATIVE FOR PARASITES, GRANULOMAS, DYSPLASIA AND MALIGNANCY.  B) STOMACH, ANTRUM, BIOPSY: 1. MILD CHRONIC INFLAMMATION WITH FOVEOLAR HYPERPLASIA; CONSISTENT WITH REACTIVE GASTROPATHY. 2. NEGATIVE FOR HELICOBACTER BY SPECIAL STAIN. 3. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.
HARTMAN ZACHARY	KENNICUTT, SCOTT	42	09/17/2020	A) STOMACH, BODY, BIOPSY: 1. ACTIVE CHRONIC GASTRITIS. 2. POSITIVE FOR HELICOBACTER BY SPECIAL STAIN. 3. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.  B) SKIN, LEFT CHEST WALL CYST, EXCISION: 1. EPIDERMAL CYST. 2. NO MALIGNANCY IDENTIFIED.
HARTMAN ZACHARY	WAILES, JANEL F	60	09/17/2020	A) STOMACH, ANTRUM, BIOPSY: 1. MILD CHRONIC INFLAMMATION WITH FOVEOLAR HYPERPLASIA; CONSISTENT WITH REACTIVE GASTROPATHY. 2. NEGATIVE FOR HELICOBACTER BY SPECIAL STAIN. 3. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.  B) GASTROESOPHAGEAL JUNCTION, BIOPSY: 1. SQUAMOUS HYPERPLASIA WITH MILD CHRONIC INFLAMMATION CONSISTENT WITH REFLUX ESOPHAGITIS. 2. NEGATIVE FOR BARRETT S ESOPHAGUS (GLANDULAR MUCOSA NOT IDENTIFIED), EOSINOPHILIC ESOPHAGITIS, VIRAL CYTOPATHIC EFFECT, DYSPLASIA AND MALIGNANCY.
HARTMAN ZACHARY	STAPLETON, VICKY JANEEN	67	09/18/2020	A) SKIN, LEFT BREAST LESION, BIOPSY: 1. EPIDERMAL INCLUSION CYST. 2. NO DYSPLASIA OR MALIGNANCY IDENTIFIED.  B) SKIN, RIGHT BREAST LESION, BIOPSY: 1. EPIDERMAL INCLUSION CYST. 2. NO DYSPLASIA OR MALIGNANCY IDENTIFIED.
HARTMAN ZACHARY	PENA, SOCORRO I	60	09/29/2020	COLON, DESCENDING POLYP AT 80 CM, BIOPSY: 1. SERRATED EPITHELIAL POLYP, FOCALLY SUGGESTIVE OF SESSILE SERRATED ADENOMA. 2. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.

HARTMAN ZACHARY	MCBRIDE, LISA	47	09/29/2020	<p>A) STOMACH, PREPYLORIC ANTRUM, BIOPSY: 1. MILD CHRONIC INFLAMMATION WITH FOVEOLAR HYPERPLASIA; CONSISTENT WITH REACTIVE GASTROPATHY. 2. NEGATIVE FOR HELICOBACTER BY SPECIAL STAIN. 3. NEGATIVE FOR DYSPLASIA AND MALIGNANCY.</p> <p>B) COLON, DESCENDING, RANDOM BIOPSY: 1. COLONIC MUCOSA WITH NO SPECIFIC HISTOPATHOLOGIC ABNORMALITY. 2. NEGATIVE FOR EPITHELIAL INFLAMMATION, CRYPT DISORDER, COLLAGEN THICKENING, GRANULOMAS, PARASITES, DYSPLASIA AND MALIGNANCY.</p> <p>C) COLON, RECTUM, RANDOM BIOPSY: 1. SCANT RECTAL/COLONIC MUCOSA WITH EDEMATOUS SUBMUCOSA, OTHERWISE NO SPECIFIC HISTOPATHOLOGIC ABNORMALITY. 2. NEGATIVE FOR EPITHELIAL INFLAMMATION, CRYPT DISORDER, COLLAGEN THICKENING, GRANULOMAS, PARASITES, DYSPLASIA AND MALIGNANCY.</p>
HARTMAN ZACHARY	HIELSCHER, RICHARD A	65	09/29/2020	<p>COLON, DISTAL SIGMOID POLYP, BIOPSY: 1. TUBULAR/TUBULOVILLOUS ADENOMA. 2. CAUTERIZED STALK MARGIN IS NEGATIVE FOR DYSPLASIA. 3. NEGATIVE FOR MALIGNANCY.</p>