

SURGICAL PATHOLOGY REPORT

\* Addendum \*



Clinical Diagnosis & History:

Colonoscopy found nearly obstructing hepatic flexure colon cancer and sigmoid cancer CT a scan shown mass at hepatic flexure colon previously polypectomy at sigmoid colon. Hepatic flexure cancer and malignant polyp at sigmoid.

Specimens Submitted:

- 1: Total abdominal colectomy
- 2: Proximal anastomotic ring
- 3: Distal anastomotic ring

## DIAGNOSIS:

1. Total abdominal colectomy:

Tumor Type:

Adenocarcinoma with mucinous features (<50% mucinous component)

Histologic Grade:

Moderately differentiated

Tumor Location:

Hepatic flexure

Tumor Size:

Length is 4 cm

Width is 5.5 cm

Maximal thickness is 0.4 cm

Tumor Budding:

Absent

Increased Tumor Infiltrating Lymphocytes:

Present

Precursor Lesions:

Tubulovillous adenoma

Deepest Tumor Invasion:

Subserosal adipose tissue and/or mesenteric fat

Gross Tumor Perforation:

Not identified

Lymphovascular Invasion:

Not identified

Large Venous Invasion:

Not Identified

Perineural Invasion:

----- Page 2 of 5 Not identified Surgical Margins: Free of tumor Polyps/Mucosa Dysplasia (away from the carcinoma): Not Identified Non-Neoplastic Bowel: Unremarkable Tattoo pigment is present consistent with the site of prior procedure Appendix: Unremarkable Lymph Nodes: Number with metastasis: 0 Total number examined: 43 Tumor deposits in pericolorectal soft tissue: Not Identified Tumor Staging (AJCC 7th Edition): pT3 (Tumor invades through the muscularis propria into pericolorectal tissues) Lymph Node Stage (AJCC 7th Edition):

Note: The results of immunohistochemical stains for mismatch repair proteins will be reported in an addendum.

Ileum, proximal margin; resection:
 -Segment of small intestine with no pathologic diagnosis.

NO (No regional lymph node metastasis)

Colon, distal margin; resection:-Segment of colon with no pathologic diagnosis.

I ATTEST THAT THE ABOVE DIAGNOSIS IS BASED UPON MY PERSONAL EXAMINATION OF THE SLIDES (AND/OR OTHER MATERIAL), AND THAT I HAVE REVIEWED AND APPROVED THIS REPORT.

Special Studies:

Result

Special Stain RECUT Comment

Gross Description:

1.) The specimen is received fresh, labeled "Total abdominal colectomy" and consists of a segment of terminal ileum, cecum with attached appendix and colon. The terminal ileum measures 7 cm in length and 3 cm in circumference

----- Page 3 of 5 at the proximal resected margin. The remaining colon measures 70 cm in length with a circumference of 3.5 cm at the distal resected margin. The attached appendix measures 5 cm in length and averages 0.5 cm in diameter. The appendiceal and intestinal serosa is pink tan and smooth. Focally hemorrhagic lobulated yellow tan adipose tissue spans the length of the specimen measuring up to 3 cm in thickness. The specimen is opened to reveal a mass lesion measuring 4 cm in length and 5.5 cm in width. The mass is located in the ascending colon, 18 cm from the proximal margin and 50 cm from the distal margin. Sectioning shows that the tumor invades the muscularis. The depth of invasion is 0.4 cm grossly. The remaining mucosa shows numerous diverticula. NO gross lesion is identified in the sigmoid colon. Two possible tattoo sites are present. One is 26 cm from the proximal margin and the other is 30 cm from the distal margin. The attached adipose tissue is thoroughly examined and all identified lymph nodes are submitted. Representative sections of the specimen are submitted.

Summary of sections:

P - proximal margin shave

D - distal margin shave

T - tumor

A - appendix representative sections

RS -representative sections

LN - lymph nodes

BLN - bisected lymph nodes

ADD-tattoo sites

2). The specimen is received in formalin wrapped around anastomotic tan labeled "Proximal anastomotic ring." It consists of a ring of brown-tan mucosa with attached soft tissue, sutures, and staples measuring 1.7 x 1.5 x 1.0 cm. The mucosa is trimmed off and submitted entirely.

Summary of sections: U - undesignated

3). The specimen is received in formalin, labeled "Distal anastomotic ring" and consists of a ring of pink tan soft tissue measuring  $3.0 \times 1.8 \times 1.7$  cm. Multiple sutures and staples are attached. The mucosal surface is pink tan and focally hemorrhagic. The sutures and staples are removed and the soft tissue is entirely submitted.

Summary of sections: U - undesignated

Summary of Sections:
Part 1: Total abdominal colectomy

Block	Sect.	Site	PCs		
1		A		1	
3		ADD			3
6		BLN			12
1		D		1	
10		LN			30
1		P		1	
2		RS		2	2
6		T		6	

Part 2: Proximal anastomotic ring

Part 3: Distal anastomotic ring

Procedures/Addenda:

Addendum



Addendum Diagnosis

Results of immunohistochemical staining for DNA mismatch repair proteins are as follows:

MLH1:Staining absent in tumor

MSH2:Staining present in tumor

MSH6:Staining present in tumor

PMS2: Staining absent in tumor

## Conclusion:

Immunohistochemical stains for mismatch repair proteins demonstrate loss of expression on MLH1 and PMS2. MSH2 and MSH6 expression are preserved. These results imply an underlying deficiency in DNA mismatch repair function. Clinical correlation is suggested

Addendum Comment

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