

Diagnostic Pathology Services, Inc

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Patient Name: **Hahn, Michael S**
 DOB: **05/24/1981** (Age: 40 yrs) Gender: **M**
 Patient ID: **116807**
 Specimen ID:

Physician: **Nicholas Kuntz, MD**
 Clinic: **Surgery Center of Idaho**

Accession #: **S2022.12**
 Collected: **12/30/2021**
 Received: **01/03/2022**
 Reported: **01/06/2022**

Clinical History

Mass of testis, right.

Final Diagnosis

Testicle (Radical Orchiectomy), Right:

EMBRYONAL CARCINOMA (AT LEAST 2.3 CM).

TUMOR INVADES INTO SPERMATIC CORD.

EXTENSIVE ANGIOLYMPHATIC INVASION IS PRESENT.

ASSOCIATED INTRATUBULAR GERM CELL NEOPLASIA.

SPERMATIC CORD MARGIN AND ALL OTHER MARGINS, NEGATIVE FOR TUMOR.

Pathologic Stage (AJCC, 8th ed): pT3, pN not assigned, pM not applicable.

Comment:

Dr. Holst has seen this case and concurs.

Joseph Kronz, M.D.

** Electronically Signed: 01/06/2022 10:43 **

Gross Description

Testicle (Radical Orchiectomy), Right: The specimen is received in formalin, labeled with the patient's name and designated "right testis and spermatic cord." It consists of the aforementioned measuring 11.6 x 3.7 x 3.3 cm. The spermatic cord measures 8.1 cm. There is a possible spermatic cord lipoma near the margin measuring up to 2.4 cm. It weighs 44.5 grams. It is inked and bisected. There is a mass present near the head of the testis where the spermatic cord joins the testis and measures 1.8 x 0.8 cm in cross-section. That measurement includes the area that appears to be in the spermatic cord. The specimen is serially sectioned revealing an additional mass that measures up to 2.3 x 1.2 cm. Representative sections are submitted. lrb/sf

Summary of Sections:

1. Spermatic cord margin.
2. Random sections of spermatic cord.
3. Cross-section of spermatic cord at head of epididymis.
- 4 and 5. Contiguous, junction of the spermatic cord and testis.
- 6-9. The mass is approximately 70% submitted.
10. Representative sections.
11. Representative sections of grossly normal testis.

Microscopic Description

Testicle (Radical Orchiectomy), Right: Sections of the spermatic cord margin are negative for tumor. Random sections of spermatic cord demonstrate tumor thrombi in vascular spaces. Sections of the spermatic cord at the cross-section at the head of the epididymis demonstrates tumor largely in vascular spaces. Sections of the junction of the testis to the spermatic cord demonstrate moderately extensive tumor in the distal most spermatic cord. Tumor is present within the rete testis. Sections of the testis demonstrate a tumor comprised of sheets of markedly atypical cells that have indistinct cellular borders and vesicular chromatin with markedly enlarged nuclei. Intratubular germ cell neoplasia is present as well as angiolymphatic invasion. The tumor appears to be largely embryonal carcinoma. Immunostain for cytokeratin AE1/AE3 is positive in the tumor. Immunostain for CD30 is positive in the tumor. Immunostain for OCT3/4 is positive in the tumor and intratubular germ cell neoplasia. Immunostain for betaHCG is present only in very focal cells. Immunostain for AFP highlights very rare cells. Positive and internal negative controls worked as expected. This test was developed and its performance characteristics determined by Diagnostic Pathology Services Inc. It has not been cleared or approved by the U.S. Food and Drug Administration (FDA). The FDA has determined that such clearance or approval is not necessary. This test is used for clinical purposes, and should not be regarded as investigational or research. This laboratory is certified under the Clinical Laboratory Improvement Act of 1988 (CLIA) as qualified to perform high complexity clinical laboratory testing.

Nicholas Kuntz, MD

Hahn, Michael S (S2022.12)

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CANCER CASE SUMMARY FOR RADICAL ORCHIECTOMY (AJCC TNM, 8th Edition):

Specimen Laterality: Right.

Tumor Focality: Multifocal.

Tumor Size: 2.3 x 1.2 cm.

Additional Tumor Nodules: 1.8 x 0.8 cm.

Histologic Type: Embryonal carcinoma.

Tumor Extent: Invades rete testis, invades hilar soft tissues, invades spermatic cord.

Lymphovascular Invasion: Present, extensive.

Margins: All margins negative for tumor.

Regional Lymph Nodes: Not applicable.

Pathologic Stage Classification (pTNM, AJCC 8th Ed):

-pT Category: pT3.

-pN Category: Not assigned.

-pM Category: Not applicable.

Additional Findings: Germ cell neoplasia in situ (GCNIS).