

## **Sofia Mendez, MD**

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Gastrointestinal Pathology Fellowship Selection Committee  
Department of Pathology & Immunology  
Washington University School of Medicine in St. Louis  
St. Louis, MO

### **Re: Recommendation for Peter Neon, MD**

Dear Members of the Fellowship Selection Committee:

I am writing to offer my strongest recommendation for Peter Neon, MD for the Gastrointestinal Pathology Fellowship at Washington University in St. Louis. I am a Professor of Pathology and Laboratory Medicine at Stanford University Medical Center and serve as the Medical Director of our Molecular Diagnostics Laboratory. I worked with Dr. Neon throughout his Clinical Pathology residency at Stanford and supervised him directly during his two-month molecular pathology rotation. After that rotation, I continued to mentor him through a year-long laboratory utilization and report-clarity quality improvement project that he led as a senior resident. These experiences gave me a sustained, close view of his clinical judgment, technical maturity, and professional character.

Dr. Neon's most distinctive strength is his ability to translate complex laboratory and genomic data into concise, clinically actionable conclusions. On service, he independently triaged cases for appropriate testing, reviewed pre-analytic variables, and drafted preliminary interpretations for our next-generation sequencing assays used in gastrointestinal and pancreatobiliary malignancies. He was consistently careful about tumor fraction, specimen adequacy, and assay limitations, and he avoided over-interpretation when evidence was incomplete. For example, in a pancreatic ductal adenocarcinoma case with a low-allele-frequency KRAS variant near the assay's reportable threshold, he correctly flagged the finding as potentially artifactual in the setting of borderline tumor content, recommended orthogonal confirmation, and communicated the issue to the treating oncologist in a way that preserved clinical momentum without overstating certainty. His written interpretations were clear, appropriately cautious, and aligned with current therapeutic implications.

Equally impressive is Dr. Neon's effectiveness in multidisciplinary settings. He participated regularly in our GI tumor boards and fielded questions from oncology, gastroenterology, and surgery with poise and precision. In one memorable case, a patient with metastatic colorectal carcinoma arrived with discordant mismatch repair testing reported across institutions. Dr. Neon reconstructed the full testing history, reviewed fixation and tumor-content variables, and recommended targeted repeat testing with a matched normal control and a validated IHC panel. He then presented the rationale succinctly at tumor board, helping the team resolve the discrepancy and select an appropriate treatment plan. That blend of technical rigor and practical communication is exactly what fellowship programs need and what patients ultimately benefit from.

Dr. Neon also has a strong systems mindset—he is not satisfied with simply completing tasks; he improves the process around them. During his senior year, he led a resident-driven initiative to standardize the minimum data elements included in our molecular pathology reports for GI specimens: explicit tumor percent statements, coverage and sensitivity notes, reflex testing recommendations, and brief clinical relevance language linked to guideline-supported therapy or trial eligibility. He convened a small working group of faculty and fellows, incorporated feedback from our oncology partners, and piloted a revised report template that measurably reduced clarification calls to the laboratory while improving clinician satisfaction. The project was practical, well-executed, and demonstrated leadership and accountability—qualities that will serve him well in a high-volume GI pathology fellowship.

Although Dr. Neon is currently completing a hematopathology fellowship at MD Anderson Cancer Center, his trajectory remains highly aligned with gastrointestinal pathology and with the skill set demanded by modern GI practice. At Stanford he proactively arranged electives focused on GI mucosal biopsies, dysplasia assessment, and clinicopathologic correlation, and he routinely prepared “unknown” cases for group review, pushing himself to justify each diagnosis with objective criteria rather than pattern recognition alone. His hematopathology training has further strengthened his comfort with complex differential diagnoses, ancillary testing strategies, and high-stakes consultative practice—transferable strengths that will complement advanced GI sign-out and the increasingly integrated molecular landscape of GI disease.

In summary, Peter Neon, MD is among the most capable, dependable, and thoughtful trainees I have worked with in recent years. He is intellectually curious, meticulous in his reasoning, and consistently collegial. I recommend him without reservation for the Gastrointestinal Pathology Fellowship at Washington University in St. Louis, and I am confident he will contribute immediately to your clinical service, teaching mission, and scholarly environment. Please feel free to contact me at [Sofia.Mendez@example.com](mailto:Sofia.Mendez@example.com) if I can provide any additional information.

Sincerely,  
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