
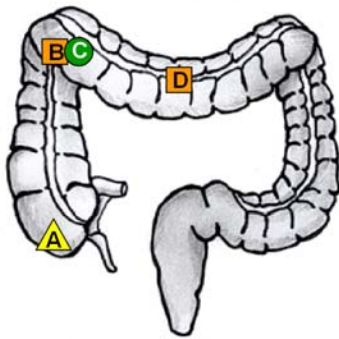


Patient Information		
Name: TEST, ADAM J DOB (AGE) Sex: 11/25/1935 (73) M MRN (Client MRN): 5234655		
Billing #: 5456411845 Order #:		
Client Information	Specimen Information	
Location: KC1A Copy To: TEST ADT Doctor Outside Client.:	Collected Date: 7/23/2009 Accession Date: 7/23/2009 Reported Date: 7/24/2009 Submitting: - Dr Testing	Accession #: S09-357 Client Case #: Report Type: Final Report

## SURGICAL PATHOLOGY DIAGNOSIS

Electronically Signed Out: Steven C. Meschter, M.D. - GMC Lab



- A. Cecum, polyp, polypectomy:  
- Hyperplastic polyp, no evidence of dysplasia.
- B. Colon at hepatic flexure, polyp, polypectomy:  
- Tubular adenoma, no evidence of high grade dysplasia
- C. Colon at hepatic flexure, stalk of polyp, biopsy:  
- Benign colonic mucosa, no evidence of dysplasia
- D. Transverse colon, polyp, biopsy:  
- Tubular adenoma, no evidence of high grade dysplasia

### Clinical History

Pre-op diagnosis: Family history of colon polyps.  
Post-op diagnosis: Polyps of cecum, hepatic flexure, transverse colon.

### Gross Description

Grossed:	Grossed By: Lonson Nash, PA	Gross Status:
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- A: The specimen is received in formalin labeled polyp of cecum consisting of a fragment of tan tissue measuring 0.2 cm in greatest dimension. The specimen is placed in a biopsy bag and entirely submitted in cassette A1.
- B: The specimen is received in formalin labeled polyp hepatic flexure consisting of a fragment of tan tissue measuring 0.4 cm in greatest dimension. The specimen is placed in a biopsy bag and entirely submitted in cassette B1.
- C: The specimen is received in formalin labeled biopsy stalk of polyp hepatic flexure consisting of three fragments of tan tissue that range from less than 0.1 cm to 0.5 cm in greatest dimension placed in a biopsy bag and entirely submitted in cassette C1.
- D: The specimen is received in formalin labeled polyp transverse colon consisting of a fragment of tan tissue measuring 0.6 cm in greatest dimension. The specimen is placed in a biopsy bag and entirely submitted in cassette D1. BS

CPT Code(s): A: 88305; B: 88305; C: 88305; D: 88305

Photographic images and diagrams represent key findings in this case; they are not intended to replace a complete review of the final diagnostic report.  
The following statement applies to Flow Cytometry, Immunohistochemistry, Molecular Genetics, Immunofluorescence, and In situ Hybridization Assays: This test was developed and its performance characteristics determined by Geisinger Medical Laboratories. It has 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. This test is used for clinical purposes. It should not be regarded as investigational or for research.