



Patient ID SA00092213	Patient Name TESTING, EMMY	Birth Date 1960-10-15	Gender F	Age 56
Order Number SA00092213	Client Order Number SA00092213	Ordering Physician CLIENT, CLIENT	Report Notes	
Account Information C7028846 DLMP Rochester		Collected 13 Jun 2017 00:00		

REVISED REPORT — ADDENDUM INCLUDED

Pathology Consult

Case Number CR-17-4417

Interpretation

MCR

FINAL DIAGNOSIS

Lung, left, needle biopsy (U17-987, 6/13/2017): Poorly differentiated adenocarcinoma (see Comment).

COMMENT

The patient is a 56-year-old woman with the provided clinical history of numerous PET-positive lung masses with dominant lesion in the left lobe. I had the pleasure of reviewing this case because of my interest in pulmonary pathology, and I agree with your observations.

Sections demonstrate an infiltrating malignant neoplasm characterized by columnar to polygonal cells with moderately pleomorphic nuclei and an ample amount of cytoplasm forming small nests and abortive glandular structures associated with marked desmoplastic stromal reaction. I believe the submitted immunostains demonstrate focal expression of TTF-1 and Napsin-A, while p40 is negative. The overall morphologic and immunophenotypic findings are consistent with a poorly differentiated adenocarcinoma.

If you have any questions, please do not hesitate to reach me at 507-555-5555.

ANCILLARY STUDIES

Per request, PD-L1 immunohistochemistry will be performed and reported in an addendum.

Material Received

MCR

Report electronically signed by

MCR

ANNETTE BJORHEIM

I verify that I have examined all relevant slides/materials for the specimen(s) and rendered or confirmed the diagnosis.

A. U17-987: Left lung
5 stained slides, 1 block

Received: 14 Jun 2017 11:20

Reported: 22 Jun 2017 17:13

Performing Site Legend

Code	Laboratory	Address	Lab Director	CLIA Certificate
MCR	Mayo Clinic Laboratories - Rochester Main Campus	200 First Street SW, Rochester, MN 55905	William G. Morice M.D. Ph.D	24D0404292



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Addendum Report

Case Number CR-17-4417

REVISED Addendum

MCR

Left lung, specimen for PD-L1 immunohistochemistry studies (clone SP263, Ventana Medical Systems Inc, Tucson, AZ) (U17-987-A1):

95% tumor cells are positive for PD-L1 (membranous positivity).

<5% immune cells are positive for PD-L1.

Interpretation: Pre-clinical studies suggest that positive PD-L1 immunohistochemistry in tumor cells may predict tumor response to therapy with immune checkpoint inhibitors. This result should not be used as the sole factor in determining treatment, as other factors (for example, tumor mutation burden, and microsatellite instability) have been also studied as predictive markers.

Fixation: This test has been validated for non-decalcified paraffin embedded tissue specimens fixed in 10% neutral buffered formalin. This assay has not been validated on tissues subjected to the decalcification process and/or use of alternative fixatives for bone/bone marrow specimens or cell blocks.

Signed by ANNETTE BJORHEIM 6/22/2017 5:13 PM

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