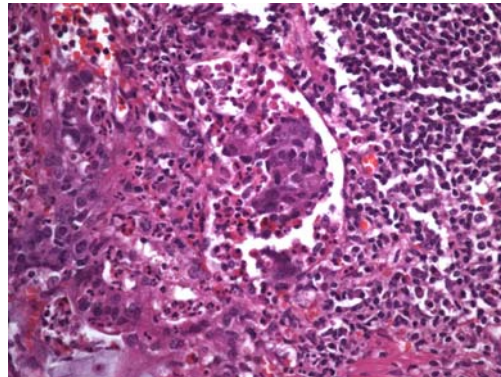


Test, Patient -- PL2009-005941Date of Birth:
05/19/1934Age:
74Gender:
MalePhysician:
**Test Physician MD
2702 Low Court 1st Floor
Town, CA 94534
707-432-2600 voice
707-432-2666 fax**Facility:
**33752
Town Surgery Center
2700 Low Court
Town, CA 94533
707-432-2700 voice
707-432-2701 fax**

Copies:

Finalized**02/18/2009****Received****02/13/2009****Collected****02/13/2009****DIAGNOSIS SUMMARY****Anatomic Pathology****A. Colon Biopsy, Transverse:****Tubular Adenoma****B. Colon Biopsy, Splenic Flexure:****Moderately Differentiated Adenocarcinoma Arising in a Serrated Adenoma with Invasion of the Submucosa.****Positive for Vascular/Lymphatic Space Invasion.****Anatomic Pathology****Comments**

- A. There is no high grade dysplasia or carcinoma. -- S. Bauer MD
- B. There is extensive adenocarcinoma in situ. The invasive component is only about 1 mm in diameter. However, lymphatic invasion is present (photo) and colectomy is warranted. -- S. Bauer MD

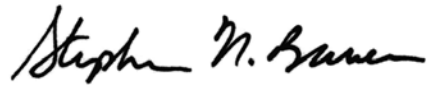
Clinical Information

- A. Hot snare. Polyp. Anemia. -- H. Wong
- B. Same. -- H. Wong

Gross Description

- A. Received in formalin labeled with the patient's name and "Transverse Colon Polyp" are four 0.2 to 0.5 x 0.4 x 0.3 cm fragments and polypoid fragments of tan tissue which are all submitted in one cassette. -- H. Wong
- B. Received in formalin labeled with the patient's name and "Splenic Flexure Polyp" are five 0.3 to 0.8 x 0.8 x 0.6 cm fragments and polypoid fragments of tan tissue, the two largest of which are inked black and blue, respectively, bisected and all are submitted in one cassette. -- H. Wong

Signature



Steve . Bauer, MD

Patient
Test, Patient
PL2009-005941

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