

Pathology Report and Specimens for Procedure PROC-34545



ID, Proc, Patient, Barcode	Type	Donor Type	A/S/R	Weight	Prep	Primary	Metastaic	Stage	Grade	Percentages	Procurement Year
WD-105534 PROC-34545 PAT-34299 C106587	MALIGNANT COLON CARCINOMA \ MUCINOUS ADENOCARCINOMA		82/F/W	0.63 grams	Frozen, LN2 - vapor phase	COLON	LYMPH NODE	Stage IIIC	G3 Poorly differentiated	0% Necrosis, 30% Lesion, 20% Stroma, 100% Tumor By Area, 30% Cellularity, 50% Acellular Mucin	2013
PET: 1.0 PPET: GPET:	In Surg Path: Organ Removal: Complete Prep:					Cold Ischemia: Warm Ischemia: Trans on Ice: Unknown			Fix Time: PMI Time: Clamp Time:		
Comments:											
Consent Status: Collected from consented donor.											

Pathology report entered by Jessica Rix

82/F/W
c/r=n/n

KRAS c.34G>A (G12S): Not Detected
KRAS c.34G>C (G12R): Not Detected
KRAS c.34G>T (G12C): Not Detected
KRAS c.35G>A (G12D): Not Detected
KRAS c.35G>C (G12A): Not Detected
KRAS c.35G>T (G12V): Not Detected
KRAS c.37G>T (G13C): Not Detected
KRAS c.37G>A(G13S): Not Detected
KRAS c.37G>C(G13R): Not Detected
KRAS c.38G>A (G13D): Not Detected
KRAS c.38G>C(G13A): Not Detected
KRAS c.38G>T(G13V): Not Detected
KRAS c.181C>A(Q61K): Not Detected
KRAS c.182A>G(Q61R): Not Detected
KRAS c.182A>T(Q61L): Not Detected
KRAS c.183A>T(Q61H): Not Detected
KRAS c.183A>C(Q61H): Not Detected
KRAS c.436G>A(A146T): Not Detected
KRAS c.436G>C(A146P): Not Detected
KRAS c.437C>T(A146V): Not Detected
KRAS c.351A>C(K117N): Not Detected
KRAS c.351A>T(K117N): Not Detected
BRAF c.1397G>T(G466V): Not Detected
BRAF c.1406G>A(G469E): Not Detected
BRAF c.1406G>C(G469A): Not Detected
BRAF c.1406G>T(G469V): Not Detected
BRAF c.1781A>G(D594G): Not Detected
BRAF c.1781A>T(D594V): Not Detected
BRAF c.1786G>C(G596R): Not Detected
BRAFc.1799T>A(V600E): Detected

MSI Microsatellite stable phenotype observed.

DIAGNOSIS:

1) COLON, TRANSVERSE, PARTIAL COLECTOMY: SIGNET RING CELL ADENOCARCINOMA, POORLY DIFFERENTIATED; TUBULAR ADENOMA INVOLVING PROXIMAL MARGIN (SEE SUMMARY FINDINGS).

Carcinoma of the Colon or Rectum:
Summary Findings

Procedure: partial colectomy
Tumor site: transverse colon
Tumor size: 4.5 cm

Macroscopic intactness of mesorectum: n/a
Histologic type: signet ring cell carcinoma with mucinous features
Histologic grade: poorly differentiated
Microscopic tumor extension: involves serosal surface
Surgical resection margins: negative for adenocarcinoma
Proximal margin: involved by tubular adenoma
Distal margin: negative
Treatment effect: No prior treatment
Lymph-vascular invasion: positive
Perineural invasion: negative
Tumor deposits (discontinuous extramural extension): negative
Pathologic staging (pTNM) [AJCC 7th edition TNM Staging System]:
Stage IIIC
Primary tumor (pT): pT4a
Regional lymph nodes (pN): pN2a
Number examined: 9
Number involved: 4
Distant metastases (pM): N/A

*Ancillary Studies:

Microsatellite instability (MSI) testing ordered: pending
KRAS mutational analysis ordered: pending

CLINICAL DATA

Clinical Features: Clinical Diagnosis: Unspecified
Operator: Dr. ----
Operation: Partial bowel resection
Operative Findings: Unspecified
Operative Diagnosis: Malignant neoplasm of colon
Tissue Submitted: 1) transverse colon

GROSS DESCRIPTION:

1) SOURCE: Transverse Colon

Received fresh labeled "----, transverse colon" is a segment of colon with attached pericolonic fat and omentum. The specimen measures 14 cm in length. It has been partially opened. The serosal surface is pink-red. One margin measures 5 cm and the opposite margin measures 5.5 cm. There is a central circumferential tan tumor mass, which measures 4.5 x 3.0 x 2.5 cm. The lumen in the area of the mass measures 1 cm in circumferential diameter. The mass is located 3.5 cm from one margin and 5.5 cm from the opposite margin. The lesion is located 1.3 cm away from the resected pericolonic fat margin. On sectioning, the mass has tan, homogeneous cut surfaces, grossly appears to involve the muscularis and extends into the surrounding pericolonic fat. The remainder of the mucosa of the colon is tan with prominent transverse folds. Fresh tumor and normal tissue is given for research studies. Representative sections are submitted in:

1A, proximal margin, 2/1;
1B, distal margin, 2/1;
1C-1G, tumor, 1/1 each;
1H, tumor with inked pericolonic fat margin, 1/1;
1I-1K, 4 possible lymph nodes in each, 4/1;
1L, 3 possible lymph nodes, 3/1.
Chemo history: No
Radiation history: No
