Michigan Medicine Laboratories
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ANATOMIC PATHOLOGY CONSULTATION REPORT

Order Number:	**OC-20-7902**		**Referred by:**
First Name:	JOHNNY		DR. BAKER
Last Name:	SMITH		GENERAL HOSPITAL
MRN:	123456789		123 MAIN ST.
Gender:	Male	**Age:** 87 Y **DOB:** 11/1/1932	ANYWHERE, MI 48001
Date Received:	04/01/2020		
Date Completed:	04/01/2020		

DIAGNOSIS:

Pleura, right parietal, biopsies (S20-3026, 1A-1G; 03/19/2020): Malignant mesothelioma, epithelioid type.

Immunohistochemical stains performed elsewhere and reviewed here were positive for cytokeratins, calretinin, WT1, EMA, and GLUT-1, with loss of nuclear staining for BAP-1, and negative staining for desmin. These results, combined with the histologic findings, strongly support the diagnosis of mesothelioma.

Additional immunostains performed elsewhere and reviewed here showed a mixed infiltrate of CD20-positive B cell nodules that normally coexpressed PAX5, lacked coexpression of CD5 and CD43, and showed focal intact CD21-positive follicular dendritic cell meshworks. BCL10 and BCL6 highlighted rare germinal centers that lacked staining for BCL-2. CD3-positive T cells were distributed in a largely follicular pattern with normal coexpression of CD5 and CD43. These results demonstrated no specific support for a lymphoproliferative disorder.

Lung, right lower lobe, wedge biopsy (S20-3026, 2A-2E; 03/19/2020): Malignant mesothelioma, epithelioid type.

Dear Dr. Baker,

This report confirms our telephone conversation concerning findings in pleural and lung biopsies from Johnny Smith, an 87-year-old man being evaluated for recurrent pleural effusions. As I indicated over the telephone, I reviewed this material and completely agree with your assessment and conclusion.

Sections of both the parietal pleural and lung biopsies are similar in showing a proliferation of cytologically bland cuboidal mesothelial cells. While much of the proliferation is limited to the pleural surface, throughout both biopsies there are zones showing a more expansile tumefactive growth pattern in which neoplastic mesothelial cells extend into chest wall adipose tissue and subpleural lung parenchyma. This invasive growth pattern strongly suggests a malignant mesothelial proliferation, a diagnosis supported by the results of your immunohistochemical stains which show a mesothelial phenotype and loss of nuclear staining for BAP-1. Loss of BAP-1 expression is a highly specific finding helpful in distinguishing benign from malignant mesothelial proliferations. The associated

lymphoid-rich inflammatory infiltrate is interesting. As summarized in your report, your immunohistochemical stains were helpful in showing a phenotype consistent with a reactive inflammatory process.

I really appreciate the opportunity to participate in review of this case. Please don't hesitate to contact me directly if I can be of any further assistance.

Sincerely,

Jeffrey L. Myers, M.D.

Materials Received:

A **Outside Case Number:** **S20-3026**

Materials Received:

Number of prepared slides: 28
Number of unstained slides: 0
Number of blocks: 0

CPT Codes:

Specimen	CPT Code	Number of Charges
A	88321	1

Laboratory Accrediting Agency Compliance Statement:
If immunostain testing was performed on this case, the testing was developed and the performance characteristics were determined by the University of Michigan Clinical Immunoperoxidase Laboratory. It has not been cleared or approved by the U.S. Food and Drug Administration. (The FDA has determined that such clearance is not necessary. This test is used for clinical purposes. It should not be regarded as investigational or for research.) Appropriate negative and positive controls were run and demonstrated expected results. Most antibodies (including ER, PR, and HER2/neu) were not validated on decalcified tissues; negative staining on decalcified specimens should therefore be viewed with discretion, as a falsely negative result cannot be excluded. The Coreo ACIS instrument (if used for any test on this case) is FDA approved.

Performing site:

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CLIA Director: Riccardo Valdez, MD
CLIA Number: 23D0366712