Single Lab Result for Printing

Results

ANATOMIC PATHOLOGY (Order 1027281443)

Result Information

Status: Edited Result - FINAL

Provider Status: Ordered

(Collected: 9/22/2020 13:15)

ANATOMIC PATHOLOGY

Order: 1027281443

Status: Edited Result - FINAL Visible to patient: No (not released) Next appt: None Dx: Thrombocytopenia, unspecified (HCC); ...

Narrative

Performed by: CoPath

Texas Health Harris Methodist Hospital Southwest 6100 Harris Parkway Fort Worth, TX 76132 (817) 433-6700 W. Frederick Bierbaum, M.D., Laboratory Medical Director HSW HISTOLOGY REPORT Patient Name: DEL-VECCHIO, DUANE Accession #: SS20-4511 Med. Rec. #: 2000074024 Collected: 9/22/2020 DOB: 6/3/1958 (Age: 62) Received: 9/22/2020 Reported: 9/28/2020 Gender: M Physician(s): C Daniel Jordan DO Jessica Hals, DO Specimen(s) Received A:perisplenic fat and spleen - fresh B:liver biopsy - permanent Clinical History Pre-op diagnosis: Splenomegaly, not elsewhere classified [R16.1] Thrombocytopenia, unspecified (HCC) [D69.6]

Final Diagnosis

- A) Spleen, splenectomy:
 - Splenic marginal zone lymphoma.
- B) Liver, core needle biopsy:
- Mild portal nonspecific chronic inflammation with no interface or lobular activity
- Minimal steatosis (<5%)
- No pathologic fibrosis (stage 0)
- No bile duct injury or loss

No increased iron

Comment

Please see the attached consultation report from ProPath Services, LLC, for the splenectomy (CE20-2017) and the liver biopsy (CE20-2016).

Billing Fee Code(s): A; 88305, 99001, 99001, 88342, s/o 341(6) B; 88307, 88313(4)

Electronically Signed Out
Rosemary E. Detweiler, MD

Gross Description

Part A is received fresh, labeled with the patient's name and "perisplenic fat and spleen." It consists of a $30.0 \times 15.0 \times 2.0 \times 2$

Remaining representative sections are submitted as follows:

A1: Hilar vessels to include perisplenic fat received separate in

the container

A2: Accessory spleen

A3-A8: Representative spleen.

Part B is received in formalin on a Telfa pad, labeled with the patient's name and "liver biopsy permanent." It consists of three tan-brown soft tissue cores ranging in length from 0.4 to 1.3 cm with an average diameter of 0.1 cm which are entirely submitted in B1. AV/kg

Microscopic Description

Microscopic examination performed, detailed in final diagnosis. Both the splenectomy specimen (A) and the liver biopsy specimen (B) have been submitted to ProPath Services, LLC. 1355 Riverbend Drive, Dallas, Texas 75247 for consultation. The ProPath accession number for the splenectomy is CE20-2017. ProPath accession number for the liver biopsy is CE20-2016.

In addition to the H&E specimen of the liver biopsy, special stains for iron, reticulin, trichrome, and PAS with diastase are examined.

Procedures/Addenda Addendum HMSW Addendum Diagnosis {Not Entered}

Addendum Comment

See attached report.

Technical and professional services performed by ProPath Services. LLC at 1355 River Bend Drive, Dallas, TX 75247.

Electronically Signed Out By Rosemary E. Detweiler, MD

Specimen Collected: 09/22/20 13:15

Last Resulted: 09/28/20

11:28

Order Details View Encounter Lab and Collection Details Routing Result History - Result Edited

Linked Documents

View Image

Status of Other Orders

Completed		
INCENTIVE SPIROMETRY [RST4590186 Custom]	***************************************	09/25/20
Oxygen Guidelines [RST4590020 Custom]		09/25/20
INCENTIVE SPIROMETRY [RST4590186 Custom]		09/25/20
GLUCOSE, BEDSIDE [LAB7000154 Custom]	Abnormal ?	09/25/20
Oxygen Guidelines [RST4590020 Custom]		09/25/20
Discharge Patient [ADT100120 Custom]		09/25/20
PHYSICIAN DISCHARGE INSTRUCTIONS [NUR0015385		09/25/20
Custom]		
INCENTIVE SPIROMETRY [RST4590186 Custom]		09/25/20
GLUCOSE, BEDSIDE [LAB7000154 Custom]	Abnormal ?	09/25/20
Oxygen Guidelines [RST4590020 Custom]		09/25/20
AUTOMATED DIFFERENTIAL [LAB7000806 Custom]	Abnormal ?	09/25/20
BiPAP / CPAP [RST4593040 Custom]		09/25/20
Oxygen Guidelines [RST4590020 Custom]		09/25/20
BiPAP / CPAP [RST4593040 Custom]		09/25/20
CBC WITH DIFFERENTIAL [LAB7000915 Custom]	Abnormal !	09/25/20
Admit Inpatient [ADT100100 Custom]		09/25/20
Admit Inpatient [ADT100100 Custom]		09/25/20
Oxygen Guidelines [RST4590020 Custom]		09/24/20
GLUCOSE, BEDSIDE [LAB7000154 Custom]	Abnormal ?	09/24/20
BiPAP / CPAP [RST4593040 Custom]		09/24/20
INCENTIVE SPIROMETRY [RST4590186 Custom]		09/24/20
Oxygen Guidelines [RST4590020 Custom]		09/24/20
GLUCOSE, BEDSIDE [LAB7000154 Custom]	Abnormal ?	09/24/20
INCENTIVE SPIROMETRY [RST4590186 Custom]		09/24/20
Oxygen Guidelines [RST4590020 Custom]		09/24/20