



Case ID	102240091589
Patient Name	B.A.K.M. WEERAKOON
Age/Sex	62 Year /Female
Hospital Location	Colombo, Colombo, Sri Lanka
Hospital Name	Aegle Omics (Private) Limited, Colombo
Physician Name	Dr. Mahendra Perera
Date & Time of Accessioning	06/06/2024 17:51 Hrs
Date & Time of Reporting	08/06/2024 18:31 Hrs

TEST NAME

HER2

SPECIMEN INFORMATION

Received 4 paraffin blocks Collected on 04/06/2024 at 00:00 Hrs labelled as Test performed on block no. RG-9723-A1

CLINICAL HISTORY

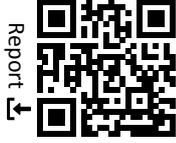
Carcinoma right breast.

METHODOLOGY

Immunohistochemistry

DIAGNOSIS

Markers(Clones)	Result		Interpretation	Image
Her-2/neu (BH228)	No staining observed	Score 0	NEGATIVE	



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COMMENTS

HER-2 Significance:

The HER2 gene is responsible for the formation of HER2 Protein, which is a Human growth Factor Receptor. A positive HER2 test result would mean overexpression of Her2 protein and is seen in about 20% of breast carcinomas.

Various studies have shown that these HER2 positive tumours have aggressive growth, metastasize faster and have less favourable prognosis than HER2 negative tumours.

However, they have shown to have good response to AntiHER2 therapy (either monoclonal antibodies or relevant tyrosine kinase inhibitors).

Table 4. Reporting results of HER2 Testing by Immunohistochemistry(IHC)

Result	Criteria
Negative (Score 0)	No staining observed or Membrane staining that is incomplete and is faint/barely perceptible and within $\leq 10\%$ of tumor cells
Negative(Score 1+)	Incomplete membrane staining that is faint/barely perceptible and within $>10\%$ of tumor cells*
Equivocal (Score 2+)	Weak to moderate complete membrane staining in $>10\%$ of tumor cells or Complete membrane staining that is intense but within $\leq 10\%$ of tumor cells*
Positive (Score 3+)	Complete membrane staining that is intense and $>10\%$ of tumor cells*

* Readily appreciated using a low-power objective and observed within a homogeneous and contiguous population of invasive tumor cells.

NOTE

- If the initial HER2 test result in a core needle biopsy specimen of a primary breast cancer is negative, a new HER2 test may be ordered on the excision specimen if one of the following is observed:-
 - Tumor is grade 3
 - Amount of invasive tumor in the core biopsy specimen is small
 - Resection specimen contains high-grade carcinoma that is morphologically distinct from that in the core
 - Core biopsy result is equivocal for HER2 after testing by both ISH and IHC
 - There is doubt about the handling of the core biopsy specimen (long ischemic time, short time in fixative, different fixative), or the test is suspected by the pathologist to be negative on the basis of testing error.
- Unusual staining patterns of HER2 IHC are considered HER2 equivocal. IHC staining moderate to intense but incomplete (basolateral or lateral) or circumferential IHC staining that is intense in $<10\%$ of tumor cell.
- All immunohistochemistry markers have been evaluated in the context of appropriate positive and negative controls. A result is considered uninterpretable as a result of the type of fixative used (non 10% neutral buffered formalin), time to



MC-2256



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fixation (> 1 hour), duration of fixation (> 6 hour or < 72 hour), strong decalcification, or inappropriate staining of normal internal or external assay controls. An alternative sample for retesting is then usually recommended.

4. Assay has been performed on formalin fixed paraffin embedded tissue, using the polymer based detection system for Immunohistochemistry studies.
5. Cold ischemia and fixation time: Not known

Disclaimer : These assays have not been validated on decalcified specimens.

REFERENCES

1. Wolff AC, Hammond MEH, Allison KH, et al. HER2 testing in breast cancer: American Society of Clinical Oncology/College of American Pathologists clinical practice guideline focused update. Arch Pathol Lab Med. 2018;142(11):1364-1382.



Scan to Connect

If you have any questions about this report or would like to have a conversation about the genetic implications of these test results, please feel free to reach out to us at **+91 8882899999 (Toll Free) or geneCORE@corediagnostics.in** to schedule a session with our resident genetic counselor

CONDITIONS OF REPORTING

1. The tests are carried out in the lab with the presumption that the specimen belongs to the patient named or identified in the bill/test request form.
2. The test results relate specifically to the sample received in the lab and are presumed to have been generated and transported per specific instructions given by the physicians/laboratory.
3. The reported results are for information and are subject to confirmation and interpretation by the referring doctor.
4. Some tests are referred to other laboratories to provide a wider test menu to the customer.
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The test was processed in Lab 102.