CŌRE DIAGNOSTICS™

Your Test Result

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 18:32 Hrs

MC-2256

Report

TEST NAME

Progesterone Receptor (PR)

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

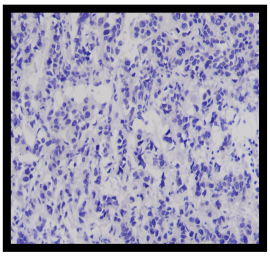
CLINICAL HISTORY

Carcinoma right breast.

METHODOLOGY

Immunohistochemistry

DIAGNOSIS

Markers	Result		Interpretation	Image
PgR(BH357)	% of cells with nuclear staining in the invasive component of the tumor	0	Negative	

CAP ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS
AU-ID-2010258

Dr. Shivani Sharma, DCP, DNB, DipRCPath.
Reg. No. 1906

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Clinical rationale of ER/PR testing

PgR Significance:

Hormone receptor status is determined primarily to identify patients who may benefit from hormonal therapy. About 75% to 80% of invasive breast cancers are positive for ER and PgR, including almost all well-differentiated cancers and most moderately differentiated cancers, and studies have shown a substantial survival benefit from endocrine therapy among patients with ER-positive tumors. True ER-negative, PgR-positive carcinomas are extremely rare, but patients with such tumors are also considered eligible for hormonal therapy. Receptor status is only a weak prognostic factor.

Reporting Results of Estrogen Receptor (ER) and Progesterone Receptor (PgR) Testing:

Result	Criteria	Comments
Positive	Immunoreactive tumor cells present (≥1%)	Invasive carcinomas with 1 to 10% of cells staining for ER(not PgR) are reported as "Low Positive" and the following report comment is recommended: "The cancer in this sample has a low level(1-10%) of ER expression by IHC.There are limited data on the overall benefit of endocrine therapies for patients with low lewel (1-10%) ER expression but they currently suggest possible benefit, so patients are considered eligible for endocrine treatment. There are data that suggest invasive cancers with these result are heterogenoneous in both behavior and biology and often have gene expresion profiles more similar to ER negative cancers." The Low Positive designation applies only to invasive carcinoma, and is not used for Progesterone receptor or DCIS.
Negative	< 1% immunoreactive tumor cells present	

Allred Score* for Estrogen and Progesterone Receptor Evaluation:

Proportion Score	Positive Cells, %	Intensity	Intensity Score
0	0	None	0
1	< 1	Weak	1
2	1 to 10	Intermediate	2
3	11 to 33	Strong	3
4	34 to 66		
5	>= 67		

* The Allred score combines the percentage of positive cells and the intensity of the reaction product in most of the carcinoma[9].The 2 Scores are added together for a final score with 8 possible values.Scores of 0 and 2 are considered negative.Scores of 3 to 8 considered positive.

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NOTE

1. All immunohistochemistry markers have been evaluated in the context of appropriate positive and negative controls. A result isconsidered uninterpretable as a result of the type of fixative used (non 10% neutral buffered formalin), time to fixation (> 1 hour),duration of fixation(>6 hr or <72 hour),strong decalcification, or inappropriate staining of normal internal or external assay controls. An alternative sample for retesting is then usually recommended.
2. Assay has been performed on formalin fixed paraffin embedded tissue, using the polymer based detection system for Immunohistochemistry studies.
3. Cold ischemia and fixation time: Not known
4. Internal control: Present and stain as expected

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

REFERENCES

1. Allison KH, Hammond MEH, Dowsett M, et al. Estrogen and progesterone receptor testing in breast cancer: ASCO/CAP guideline update. Arch Pathol Lab Med doi: 10.5858/arpa.2019-0904-SA.

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Scan to Connect

Question?

Contact us at **+91 124 4615 615**

Toll Free Helpline **+91 8882899999**

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.