

CONFIDENTIAL LABORATORY REPORT
Member of Clinical and Laboratory Standards Institute, U.S.A.



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HISTOPATHOLOGY

Block and slides of this specimens
will be retained ONLY for six months
after the date of this report. Specimen
will be kept for one week.

UHID : 150000255
REFERENCE No. : 05 4085 28/09/22
SAMPLE DATE & TIME : 28/09/2022 22:31
REPORT DATE & TIME : 08/10/2022 12:13 AKH2099946 / AKH2430953
PATIENT : MR. M.G.C.R . JAYASOORIYA [ROOM NO.1CUA]
REFERRED BY : DR CHATHURANGA KEPPETIYAGAMA

IP No. : AKH0029111
AGE : 51 Y/M

TEST : HISTOPATHOLOGY REPORT

Specimen/ Site: Sigmoid colonic lesion - resection

Microscopy :

- a. Sigmoidectomy: A segment of colon - 180 mm in length with attached mesocolon- There is an area of thickened mucosa measuring 24 mm in length, in the posterior wall of the colon, which is 80mm from the closest distal and 120 from the proximal resection margin respectively The lesion involves nearly 30% of the entire circumference.
The serosa appears thickened in the colon.
The rest of the colon appears normal.
Separately sent paracolic fat 110x85 mm
- b. Distal doughnut: A ring of intestine - 20x20x5mm
- c. Proximal doughnut: A ring of soft tissue - 20x20x10 mm
- d. Peritoneal nodule: Multiple fragments of soft tissue altogether 55x30x20 mm

Microscopy: The sections of the colon reveal an invasive moderately differentiated adenocarcinoma arising infiltrating the entire colonic wall with serosal nodules.
The tumour is composed of irregular dysplastic glands with extensive desmoplastic reaction.
Multiple serosal nodules containing tumour are noted even away from the main tumour.
The proximal and distal resection margins (including the distal and proximal doughnuts sent) are free of infiltrating malignancy or dysplasia.
All fourteen lymph nodes dissected from the paracolic soft tissue reveal extensive tumour metastasia (14/14).
Separately sent biopsies from peritoneal nodules show extensive tumour deposits.

14/14