Endoscopy-STH M

12-Dec-12 14:07 Surgical Pathology 1st Addendum Report SP-12-024521 1 or more Final Results Received

Surgical Pathology 1st Addendum Report

Final

AP NON-GYNAE FIRST ADDENDUM REPORT

A report on this case has been received from Dr , Consultant Histopathologist at the Institute of Liver Studies, King's College Hospital and it reads:

Diagnosis : Liver, core needle biopsy specimen (St Thomas' Hospital SP-12-024521, slides for review; date of biopsy 12/12/2012): Features of cholangiopathy, with slight cholangiocyte disarray, occasional juxtaportal hepatocytes containing copper-binding protein deposits, and scattered ceroid-laden macrophages in portal tracts. Patchy mild portal-tract fibrosis with perisinusoidal extension and early spurring. Macrovesicular steatosis of hepatocytes (5% of parenchyma). Slight centrilobular sinusoidal ectasia noted. Crohn's disease with splenic vein block (clinical diagnosis), see comment.

An early stage of primary sclerosing cholangitis is a possibility. Correlation with imaging-study findings appears in order. I can not suggest an aetiology for the slight sinusoidal ectasia observed.

Clinical Information: Splenomegaly with splenic vein block, low platelets. Fibroscan 7.2. Varices. Crohn's disease.

Macroscopy: Received through Dr from , Histopathology, 2nd Floor, North Wing, St Thomas' Hospital, Westminster Bridge Road, London, SE1 7EH (0207 188 2910 telephone, -2948 telefacsimile, with an identifying preliminary histopathology report, are eight glass slides bearing stained tissue sections designated "ST THOMAS / SP-12-024521 / and subdesignated "H & E", "H&E 2", "3", "DIAS PAS", "MASSON'S", "ORCEIN SHI", "PERLS", and "RETIC". Histochemical controls are not supplied. The slides are to be returned to the referring institution.

Microscopy: See Diagnosis, above. Concentric periductal lamellar fibrosis, granulomata, and cholesterol clefts are not seen. Viral inclusions, stainable iron, and evidence of storage disorder are not identified.

Dr
Consultant Histopathologist
14/12/2012

DIAGNOSIS

Liver, core biopsy: - Pathology report received from King's College Hospital, see text.

Reported by - 14/12/12
T56000

Report **US Guided biopsy liver 12/12/2012 US**

========== REPORT - GSTT ==========

Requesting Physician :

Patient Name :
Patient Id :
Birth Date :
Sex : M
Date of Exam :12/12/2012 02:19 PM
Exam Id : RJ108448803

Radiological Report

Clinical History :
Entered by:
Requested by:
Clinical Details: splenomegaly with splenicvein block and low platelets, but raised AlT and fibroscan 7.2, varices, Crohn's previous surgery
Question/s: ? nature and stage of any liver damage
Infection risk 2: None known
Bleep Number: 82499

Conscious consent. Sterile procedure.

Left lobe was punctured under local anaesthetic with US guidance using 16G coaxial needle.
One sample obtained. The track was filled with Hunter sealing to prevent from bleeding.
The specimen was sent for pathology exam.

No immediate complications.

(IR Fellow)

PG:
Temno coaxial biopsy used.
Two Hunter gelfoam plugs, 16G, inserted through the 15G coaxial stylet.

Report Transcriber :
Report Author :-
Approved By :-
Approval Date :12/12/2012 07:40 PM
