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|-----------------|--------------------|
| <b>Patient:</b> |                    |
| <b>DOB:</b>     | <b>Age:</b> 59 yrs |
| <b>MRN:</b>     | <b>Sex:</b> Female |

**Surgical Pathology (Final result)**

|  |                                   |
|--|-----------------------------------|
| <b>Authorizing Provider:</b>                                     | <b>Ordering Provider:</b>         |
| <b>Ordering Location:</b> Jennie Sealy Hospital OR<br>Department | <b>Collected:</b> 04/19/2017 0947 |
| <b>Pathologist:</b> Allen, Timothy C, MD                         | <b>Received:</b> 04/19/2017 1023  |

**Specimens**

**A** LUNG, RIGHT LOWER LOBE, Right lower lobe wedge  
**B** LUNG, RIGHT MIDDLE LOBE, Right middle lobe wedge

**Final Diagnosis**

- A. LUNG, RIGHT LOWER LOBE, WEDGE RESECTION:**  
- END STAGE LUNG CHANGE  
- SEE COMMENT
- B. LUNG, RIGHT MIDDLE LOBE, WEDGE RESECTION:**  
- END STAGE LUNG CHANGE  
- SEE COMMENT

Electronically signed by Allen, Timothy C, MD on 4/20/2017 at 1703

**Final Diagnosis Comment**

Examination of multiple sections of specimens A and B, including multiple deeper sections of blocks B1 and B2, shows lung parenchyma and associated overlying pleura. The sections are made up predominantly of end stage lung change. There are focal areas of identifiable lung parenchyma. The alveoli are widened, predominantly by fibroblasts, with some alveolar septal walls containing a mixed chronic inflammatory cell infiltrate. A few small fibroblast foci are identified. One intrapulmonary lymph node is identified. No neutrophilic infiltrate, no granulomas, no foreign material, no polarizable material, no vasculitis, no organisms, and no malignancy are identified.

This wedge biopsy is limited due to the small amount of identifiable lung parenchyma present. The histologic features are those of an interstitial lung disease; however, there are no histologic features diagnostic of usual interstitial pneumonia, nonspecific interstitial pneumonia, or another specific entity. Possible etiologies include collagen vascular disease-associated interstitial lung disease, end-stage hypersensitivity pneumonitis, chronic aspiration pneumonia, and exposure to fumes and toxins, among other possible etiologies. Clinical correlation is suggested.

*End stage lung change is a pathologic pattern of lung disease that may result from a number of different lung diseases. If you would like to see your tissue slides under the microscope with me, or simply discuss your pathologic diagnosis, please call me at 409-722-0144.*

*Pathologists are medical doctors who specialize in diagnosing disease. This report contains the findings of your pathologist, a physician who examines your cells and tissue under a microscope to provide an accurate diagnosis to guide your health care decisions.*