

Patient Name: **DOE, JANE**

 Specimen Number: **C24-000533**

Patient Rec. #:

Alliance ID:

Date of Birth: 05/19/1958

Age: 66

Ordering Client: THE BEST PHYSICIAN

Sex: Female

Ordering Physician: THE BEST PHYSICIAN

Date Collected: 05/23/24

Client Address: 7200 W Camino Real

Date Received: 05/23/24

BOCA RATON, FL 33433

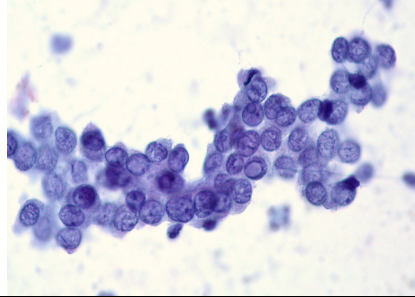
Date Reported: 05/29/24

Telephone: (561) 453-1234

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CC Physician:

CYTOLOGY REPORT

DOE, JANE Specimen #: C24-000533 Date: 05/23/24	INTERPRETATION POSITIVE FOR MALIGNANT CELLS PAPILLARY THYROID CARCINOMA (Bethesda category VI)	
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MICROSCOPIC DESCRIPTION The specimen demonstrates a cellular sample composed of neoplastic cells with nuclear pleomorphism including irregular nuclear membranes, fine and powdery chromatin with nuclear grooves and intranuclear cytoplasm invaginations (INCI). Colloid is virtually absent.

SOURCE OF SPECIMEN Thyroid, left nodule, fine needle aspiration

SPECIMEN ADEQUACY Satisfactory for evaluation

GROSS DESCRIPTION FNA, 8 ml of pale pinkish clear fluid is received in CytoLyt fixative with the patient second identifiers. 2 CellSolutions F50 slides prepared. Residual cell pellet is prepared for cell block. (CellSolutions F50: PAPx1 & H&Ex1 ; Cell block: 2levels, H&Ex2)

CLINICAL HISTORY Thyroid, left nodule, 3 cm

CELL BLOCK The cell block sections exhibit papillary patterns consistent with papillary thyroid carcinoma

NOTES

Category	Risk of malignancy	Usual management
I. Non-DX	5-10%	Repeat FNA with ultrasound guidance
II. Benign	0-3%	Clinical and sonographic follow-up
III. AUS/FLUS	~10-30%	Repeat FNA, molecular testing, or lobectomy
IV. FN/SFN	25-40%	Molecular testing, lobectomy
V. Suspicious	50-75%	Near-total thyroidectomy or lobectomy
VI. Malignant	97-99%	Near-total thyroidectomy or lobectomy

SCREENED BY: Woosung J Park, CT(ASCP)

REVIEWED BY: Electronically REVIEWED BY: Ali Tamsen, M.D. Board Certified in Anatomic Pathology
 Date: 05/29/2024 Time: 12:06:04

CPT CODES 88173

END OF REPORT