

22 Rigel Street COORPAROO 4151

Phone:

Birthdate:

05/06/1972

Sex:

F

Lab Reference: E23-45303-1

Medicare Number: 2446465499

Your Reference: 230264690

Envoi Pathology

Laboratory: Addressee:

Dr CATHERINE O'NEILL Referred by: Envoi Pathology Histology Report

Dr. MARIKO HOWLETT

Name of test: Requested

17/07/2023

Collected:

17/07/2023 Reported:

18/07/2023 09:43:00

Envoi Pathology Histology Report

UR: 3969353 DIAGNOSTIC SUMMARY:

 Mid oesophagus: No specific abnormality 2. Lower oesophagus: No intestinal metaplasia

3. Gastric body: No specific abnormality

4. Gastric antrum: Chemical gastritis; no Helicobacter

5. Duodenum: No specific abnormality

6. Ascending colon polyp: Sessile serrated lesion

## CLINICAL NOTES:

Iron deficiency, odynophagia. Endoscopic report attached.

- 1. Mid oesophagus: Sections show normal squamous mucosa. Inflammatory cells are MICROSCOPIC: not increased and there is no eosinophil infiltration. No reactive changes are seen in the epithelium. There is no intestinal metaplasia, dysplasia or malignancy.
- Lower oesophagus: Sections show cardiac mucosa and squamous mucosa with mild chronic inflammation. No intestinal metaplasia is present. There is no dysplasia or malignancy.
- 3. Gastric body: Sections show gastric body mucosa with normal appearances. There is no significant inflammation or glandular atrophy. No Helicobacter are seen. There is no intestinal metaplasia, dysplasia or malignancy.
- 4. Gastric antrum: Sections show antral mucosa with foveolar hyperplasia, interstitial oedema and smooth muscle proliferation in the lamina propria. Inflammatory cells are sparse. No Helicobacter can be seen. Bile reflux and NSAIDs can give this pattern of gastritis. There is no intestinal metaplasia, dysplasia or malignancy.
- 5. Duodenum: Sections show duodenal mucosa with normal villous architecture. There is no significant inflammation. No granulomas or parasites are seen. There is no dysplasia or malignancy.
- 6. Ascending colon polyp: Sections show a sessile serrated lesion with asymmetrical dilatation of the crypt bases (see photograph). There is no dysplasia or malignancy.

- 1. Mid oesophagus: Two pieces of tan tissue each 2-3mm diam. (1A) MACROSCOPIC:
- 2. Lower oesophagus: Four pieces of tan tissue each 2-3mm diam. (2A)
- 3. Gastric body: Three pieces of tan tissue each 2-3mm diam. (3A)
- 4. Gastric antrum: Two pieces of tan tissue each 2-3mm diam. (4A)
- 5. Duodenum: Five pieces of tan tissue each 2-3mm diam. (5A)
- Ascending colon polyp: Fragments 20mm diam, the largest 7mm. (6A)

Reported by Dr Mark Bettington (Phone enquiries (07) 3552 6400)

# Please see additional patient information below

Click here for BP Lava version and above: Detached Image Click here for BP Summit version and below: Detached Image

Report Author: MARK BETTINGTON Service Provider: Envoi Pathology

From Envoi Pathology"ENVENV07180940523-6713" 18.07.2023