

PRINTED: 09/06/02  
0330 HRS

PATHOLOGY REPORT

Patient: SIEGEL, MARY JO 52/F Patient Loc: DOLAB ONLY Reg: 09/04/02  
Acct #: L020696035 M0808183 Home Phone: 310- [REDACTED] Adm:  
Attend MD: F [REDACTED] S J Status: REG REF Dis:

Accession #: OT-8803-02 Coll: 09/04/02 Submitted By: F [REDACTED] S J  
Recd: 09/04/02 Copies To: N [REDACTED] K  
ZZ SURGERY CTR OF SANTA MONICA

GROSS DESCRIPTION

1. Labeled "polyp mid-transverse": The specimen consists of a 0.3 cm soft pink gray mucosal tissue. Totally embedded 1A.
2. Labeled "polyp 40 cm descending": The specimen consists of a 0.3 cm soft pink gray mucosal tissue. Totally embedded 2A. TOR/YT/jbd

Microscopic sections are prepared and interpreted.

DIAGNOSIS

1. MID TRANSVERSE COLON (POLYP), BIOPSY:
  - TUBULAR ADENOMA.
  - NEGATIVE FOR HIGH GRADE DYSPLASIA AND MALIGNANCY.
2. DESCENDING COLON AT 40 CM (POLYP), BIOPSY:
  - TUBULAR ADENOMA.
  - NEGATIVE FOR HIGH GRADE DYSPLASIA AND MALIGNANCY.

*9/5/02 LH* } *Reviewed path - benign polyps report 3/03*  
*Q*

Signed signature on file [REDACTED] MD 09/05/02

\*\* END OF REPORT \*\*

REVIEWED  
*(Signature)*

*fax - Dr. Burzynski*

SAINT JOHN'S HOSPITAL AND HEALTH CENTER, SANTA MONICA, CA 90404  
DEPT. OF PATHOLOGY, A.R. ABRAMS, M.D., DIRECTOR

PRINTED: SEP 8, 1992  
13:06 HRS

PATHOLOGY CONSULTATION

SIEGEL, MARY JO  
L000221 7 47 (U:MO808183)  
LOC: ASU

ASU  
AGE: 42  
SEX: F

DR. [REDACTED]  
2001 SANTA MONICA BL., # 983  
SANTA MONICA CA 90404

SPECIMEN NO: S-6227-92

ACC. DATE: 9/4/92

PHYSICIAN(S): MANN, BARRY D

SURGICAL PROCEDURE(S): PLEASE REFER TO OPERATIVE SUMMARY

TISSUE(S): SURGICAL TISSUE, LYMPH NODE

GROSS DESCRIPTION:

DLK:RCD 9/5/92

1. Labeled "superficial cervical lymph node, right neck": The specimen consists of a 0.6 cm soft tan nodule which is entirely embedded as 1A.

2. Labeled "cervical lymph node, right neck (frozen section)": The specimen consists of a 1.2 cm soft pink tan lymph node which is bisected, the larger half frozen and embedded as 2FSA, the smaller half embedded with 2FSA with permanent sections (smaller half not frozen).

INTRAOPERATIVE CONSULTATION (FS): - Lymph node showing some suggestion of architectural effacement.  
- Diagnosis pending study of permanent sections.

3. Labeled "deep cervical lymph node, right neck": The specimen consists of a 2.5 cm firm fleshy tan node having smooth fleshy cut surfaces. Tissue sent for culture, tissue sent for flow cytometric immunophenotyping analysis, and remaining tissue is fixed in B5 for histologic study.

Microscopic sections are prepared and interpreted.

MICRO EXAMINATION:

DLK:RCD 9/8/92

Permanent sections reveal a low grade non Hodgkin's lymphoma similar to this patient's previous intestinal lymphoma (S-1277-91). Subtle differences from the previous intestinal lymphoma include mild sclerosis within the centers of several of the neoplastic follicles, and a mild but definite increase in the percentage of large cells. Small cleaved lymphoid cells still comprise the majority of the neoplastic cellular elements.

\*\* CONCLUSION \*\*

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1. LABELED "SUPERFICIAL CERVICAL LYMPH NODE, RIGHT NECK"

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PAGE 2

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2001 SANTA MONICA BL., # 983  
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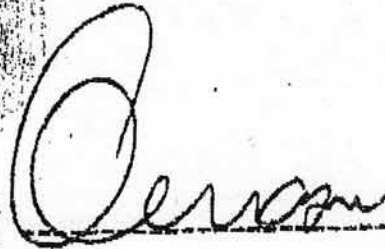
- LYMPH NODE SHOWING NO SIGNIFICANT PATHOLOGIC ABNORMALITY.
  - NO EVIDENCE OF INVOLVEMENT BY LYMPHOMA.
2. LABELED "CERVICAL LYMPH NODE, RIGHT NECK (FROZEN SECTION)"  
- NON HODGKIN'S MALIGNANT LYMPHOMA (AS BELOW, SPECIMEN NUMBER 3).
  3. LABELED "DEEP CERVICAL LYMPH NODE, RIGHT NECK"  
NON HODGKIN'S MALIGNANT LYMPHOMA, LOW GRADE, FOLLICULAR,  
MIXED SMALL CLEAVED AND LARGE CLEAVED CELL TYPE.  
- THE TUMOR SHOWS MILDLY INCREASED PERCENTAGE OF LARGE CLEAVED  
CELLS COMPARED WITH THE PREVIOUS INTESTINAL LYMPHOMA  
(S-1277-91, 2/23/91).

<DLK:RCD 9/8/92>

[ CONFIDENTIAL ]  
[ T08000 ]  
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Mary Jo Siegel's medical records are made available by written permission by Mary Jo Siegel for publication on [www.burzynskimovie.com](http://www.burzynskimovie.com)

=> SIGNED OUT BY: D. [REDACTED] M.D.



9/8/92