

SURGICAL PATHOLOGY REPORT

Name: Wallace, Joey L. Path No: S94-7502
MRN: 000638 Age/Sex: 31/M
Date of Surgery: 8/16/94 Date of Report: 8/18/94
Doctor: Sutorius, D. and a copy to:
Baughman, R./222 Piedmont Ave, Cinti Ohio 45218
Preoperative Diagnosis:
diffuse lung disease
Postoperative Diagnosis:

Specimen:
bx left lower lobe lung

Gross Description:

- A. Specimen in formalin labelled "bx left lower lobe" consists of a wedge-shaped lung tissue with stapled margin along one side and smooth pink pleural surface. It is triangular shaped and measures 2.4 cm x 2. cm x 0.8 cm. The cut surface is pinkish and smooth and the lung itself is soft, pillowy and spongy. No distinct lesion is seen. The entire specimen is submitted in two cassettes.
- B. Specimen without fixative labelled "bx left lower lobe lung pathology acidfast" consists of a small elongated pinkish tissue measuring 1.4 cm x 0.3 cm. The entire specimen is submitted in one cassette. (RMA/jk)

Microscopic Description:

- A. Specimen consists of subpleural pulmonary tissue containing a small number of bronchioles but no bronchi. Some of the bronchioles appear normal. Others show a mild inflammatory reaction within the wall. Most of the cells are lymphocytes although occasional eosinophils are seen. A few bronchioles contain intraluminal material consisting of clefts, probably lipid, surrounded by a few histiocytes and occasional eosinophils. There is perhaps some slight dilatation of the more distal airway. A single small interstitial lesion composed of chronic inflammatory cells is also seen. Otherwise, the interstitium is unremarkable. No vascular lesions are identified. While there is evidence for a bronchiolitis with eosinophilia, there is no evidence of bronchiolitis obliterans or BOOP.
- B. The specimen consists of a much smaller sample of subpleural pulmonary tissue containing only a single unremarkable bronchiole. The surrounding lung is mostly atelectatic.

(Continued on next page)

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Stephen Whitlatch, M.D.

Form No. 1209 (4-94)

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BETHESDA HOSPITALS

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Name: Wallace, Joey L.

Path No: 594-7502

619 Oak Street
Bethesda, Md. 20814
519 West 111th St
DIAGNOSIS:

A. Left lower lobe of lung:

CHRONIC BRONCHIOLITIS, SEE NOTE.

B. Biopsy, left lower lobe of lung:

ATELECTATIC LUNG SHOWING NO SIGNIFICANT
HISTOPATHOLOGIC ABNORMALITY.

NOTE: This case will be referred to Joseph F. Tomaszewski,
M.D. for his expert opinion.

Joseph F. Tomaszewski, M.D., M.P.H.
Chief, Surgical Pathology
Department of Pathology
Holy Family Hospital Center
Assistant Professor of Pathology
Cincinnati University
School of Medicine

(27-4300)@
A: Blocks 2, Slides 2
B: Block 1, Slide 1

Pathology No: 594-7502

 M.D.
Stephen Whitlatch, M.D. /jk