Name: Yvonne Kalley Franklin | DOB: 6/17/1979 | MRN: U4772842 | PCP: Leilani D Paras, MD | Legal Name: Yvonne Kalley Franklin

PATHOLOGY, SURGICAL

Collected on Jul 24, 2026 12:26 PM

Results

Addendum 2

ADDENDUM REASON:
This addendum is issued to report the results of HER2 FISH testing performed. See Biomarker Summary template below.

Addendum 1

ADDENDUM REASON:
This addendum is issued to report ER, PR, and HER2 testing. See Biomarker Summary template below.

HER2 FISH studies have also been ordered and will be reported in a subsequent addendum.

Biomarkers Disclaimer

All controls show appropriate reactivity.

ER/PR and HER2 immunohistochemical analyses are performed in accordance with the ASCO/CAP guidelines [1,2]. Department of Pathology protocols dictate that breast cancer containing tissue will be fixed in 10% neutral buffered formalin for a minimum of 6 hours to a maximum of 72 hours at room temperature for ER/PR and HER2, unless otherwise noted in this report. All breast core biopsy specimens are rapidly immersed in formalin (Cold ischemia time is within required one hour). The detection system used is Roche Ultraview Universal DAB Detection Kit.

The Criteria used to determine a positive vs. negative result, and scoring system (eg, percent of stained cells, staining pattern) are those recommended by ASCO/CAP [1,2]. The interpretation is reported according to the CAP Reporting Template for Reporting Results of Biomarker Testing of Specimens from Patients with Carcinoma of the Breast. Cases with 2+ (equivocal) HER2 staining will be tested for gene amplification using validated fluorescent in-situ hybridization (FISH) technique.

These assays have not been validated on decalcified tissues. Results using decalcified tissues should be interpreted with caution, given the likelihood of false negativity in this testing environment. When the above stain result indicates 'Quantitative Evaluation', a manual morphometric scoring of the stain was performed.

REFERENCES:
1. Allison KH, Hammond EH, Dowsett M, et al. Estrogen and Progesterone Receptor Testing in Breast Cancer: American Society of Clinical Oncology/College of American Pathologists Guideline Update Arch Pathol Lab Med. 2020; 144(5):545-63.
2. Wolff AC, Somerfield MR, Dowsett M, et al. Human Epidermal Growth Factor Receptor 2 Testing in Breast Cancer: American Society of Clinical Oncology/College of American Pathologist Guideline Update. Arch Pathol Lab Med. Published online June 7, 2023. doi:10.5858/arpa.2023-0905-SA

Final Diagnosis

A) Right iliac crest, biopsy:
- Metastatic carcinoma.

Synoptic Checklist

Value

Breast Biomarker Reporting Template

(Added in Addendum) BREAST BIOMARKER REPORTING TEMPLATE - All Specimens

Protocol posted: 6/18/2025

Testing Performed on Specimen / Block Number(s): A1

Test(s) Performed:

Estrogen Receptor (ER) Status: Positive (greater than 10% of cells demonstrate nuclear positivity)

Percentage of Cells with Nuclear Positivity: 91-100%

Average Intensity of Staining: Strong (3+)

Test(s) Performed:

Progesterone Receptor (PgR) Status: Positive

Percentage of Cells with Nuclear Positivity: 91-100%

Average Intensity of Staining: Strong (3+)

Test(s) Performed:

HER2 by Immunohistochemistry (IHC) Status: Equivocal (Score 2+)

: Weak to moderate complete membrane staining observed in greater than 10% of tumor cells

METHODS

Cold Ischemia and Fixation Times: Cannot be determined: Cold ischemia and formalin fixation times not documented.

Fixative: Formalin

ER Testing Methodology:

ER Test Type: Food and Drug Administration (FDA) cleared (test / vendor): Roche

ER Primary Antibody: SP1

PgR Testing Methodology:

PgR Test Type: Food and Drug Administration (FDA) cleared (test / vendor): Roche

PgR Primary Antibody: 1E2

HER2 IHC Testing Methodology:

HER2 IHC Test Type: Food and Drug Administration (FDA) cleared (test / vendor): Roche

HER2 IHC Primary Antibody: 4B5

Breast Biomarker Reporting Template

(Added in Addendum) BREAST BIOMARKER REPORTING TEMPLATE - All Specimens

Protocol posted: 6/18/2025

Testing Performed on Specimen / Block Number(s): A1

Test(s) Performed:

HER2 by In Situ Hybridization (ISH) Status: Negative, based on IHC and ISH results

: Group 4 ISH result (with IHC 0-2+)

HER2 ISH Testing Signal Counts and Ratio:

Average Number of HER2 Signals per Cell: 4.35

Average Number of CEP17 Signals per Cell: 3.39

HER2 / CEP17 Ratio: 1.28

Comment(s) on HER2 ISH Results: This sample has a Group 4 result (ratio less than 2.0; greater than or equal to 4.0 and less than 6.0 HER2 signals / cell). It is uncertain whether patients with greater than or equal to 4.0 and less than 6.0 average HER2 signals / cell and HER2 / CEP17 ratio less than 2.0 benefit from HER2 targeted therapy in the absence of protein overexpression (IHC 3+). If the specimen test result is close to the ISH ratio threshold for positive, there is a high likelihood that repeat testing will result in different results by chance alone. Therefore, when IHC results are not 3+ positive, it is recommended that the sample be considered HER2 negative without additional testing on the same specimen.

METHODS

Cold Ischemia and Fixation Times: Cannot be determined: Cold ischemia and formalin fixation times not documented.

Fixative: Formalin

HER2 ISH Testing Methodology:

HER2 ISH Test Type: Food and Drug Administration (FDA) cleared (test / vendor): Path Vysion Her-2 DNA probe kit/Abbott Molecular

Gross Description

A. Iliac crest, Right.
Received in formalin labeled "Franklin, Yvonne; " is a 1.1 x 0.7 x 0.2 cm aggregate of tan to red-brown soft tissue and no bone grossly identified. The specimen is filtered in a mesh bag and entirely submitted in A1. (AG)

Case Report

Value

Surgical Pathology Report Case: SU26-28598
Authorizing Provider: Thurlow, Peter Christian, Collected: 07/24/2026 12:26 PM
MD
Ordering Location: HMC ANGIO SUITE Received: 07/24/2026 01:32 PM
Pathologist: Dintzis, Suzanne Martha,
MD
Specimen: Iliac crest, Right

Case Testing Locations Disclaimer

The technical and/or professional components of this case may have been performed at any of the following laboratories. These records are maintained internally and more information is available upon request.

- **UW Medical Center:** 1959 NE Pacific St., Seattle, WA 98195-0001
- **Harborview Medical Center:** 325 9th Ave, Seattle, WA, 98104-2420
- **UW Medical Center Northwest:** 1550 N 115th St, Seattle, WA 98133-8401

LAB AP EMBEDDED IMAGES

Value
No value

Scan 1

Ordering provider: Peter Christian Thurlow
Collection date: Jul 24, 2026 12:26 PM
Specimens: Bone (Iliac crest, Right)
Result date: Aug 13, 2026 1:52 PM
Result status: Final (Edited)
Resulting lab:
UNIVERSITY OF WASHINGTON MEDICAL CENTER PATHOLOGY
1959 NE Pacific St.
Room BB220
Seattle WA 98195
206-598-6400
Paul Swanson, MD (Lab director)
50D0661462 (CLIA #)

MyChart® licensed from Epic Systems Corporation© 1999 - 2026