

Att: KUMARNITSKY, DIRK
Bdate: 05/28/98
DR: King, Robert A

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Stathos, Theodore H
GI LAB--PSLMC

FINAL DIAGNOSIS

- A. DUODENUM, MUCOSAL BIOPSY:
- DUODENAL MUCOSA WITH MODERATE ACUTE DUODENITIS.
- MILD ALTERATION OF VILLOUS ARCHITECTURE WITH INCREASED
 INTRAEPITHELIAL LYMPHOCYTES.
 NO INFECTIOUS ORGANISMS IDENTIFIED.
- SEPARATE FRAGMENT OF GASTRIC ANTRAL TYPE MUCOSA SHOWING MILD
 NON-SPECIFIC INFLAMMATION.
- B. STOMACH, ANTRUM, MUCOSAL BIOPSY:
- SUPERFICIAL FRAGMENTS OF GASTRIC ANTRAL TYPE TISSUE WITH
 MINIMAL NON-SPECIFIC INFLAMMATION. *OK*
- SPECIMEN SIZE PRECLUDES COMPLETE EVALUATION.
- C. ESOPHAGUS, DISTAL, MUCOSAL BIOPSY:
- NO SIGNIFICANT HISTOPATHOLOGY. *OK*
- D. COLON, RECTUM, MUCOSAL BIOPSY:
- COLONIC MUCOSA WITH INTACT SURFACE AND GLANDULAR ARCHITECTURE. *OK*
- NO SURFACE ULCERATION OR INFECTIOUS ORGANISMS IDENTIFIED.
- NO SIGNIFICANT INFLAMMATION PRESENT.

COMMENT: The duodenal biopsy shows an acute duodenitis with villous architectural abnormalities. Possibilities of infection, nearby ulcer, or less likely, celiac disease should be considered. Correlation with serologic studies and endoscopic findings may be of help. No infectious organisms are identified.

Dictated by: Tyson, R Weslie
Entered: 12/15/00 - 1451 DR.TYSRO

CLINICAL HISTORY

Clinical History: NASAL LACRIMAL DUCT OBSTRUCTION, GE REFLUX, FAILURE TO THRIVE
Surgery Performed: PROBING OF RIGHT LACRIMAL DUCT W/STENT, EGD WITH BIOPSY

Wesley Tyson
OK