

Attachment 21 –  
42 CFR 37.203 Pathologist Report of Autopsy – Sample

08/008

# UNITED HOSPITAL CENTER

Department of Pathology and Laboratory Medicine  
P.O. Box 1680, Clarksburg, West Virginia 26301  
Phone (304)624-2288 Fax (304)624-2916

Chinmay K. Datta, MD, PhD  
Chief Pathologist

Gerald T. Wedemeyer, MD  
Associate Pathologist

## AUTOPSY REPORT

Specimen(s) Submitted: Autopsy

### FINAL DIAGNOSIS:

**POORLY DIFFERENTIATED SMALL CELL CARCINOMA AT THE HILUM OF THE LUNG; INFARCTIONS OF THE LUNGS WITH MILD TO MODERATE ANTHRACOSIS.  
MYOCARDIUM – SHOWING NO SIGNIFICANT HISTOPATHOLOGICAL CHANGE.**

**CAUSE OF DEATH: THE AUTOPSY IS LIMITED TO THE CHEST ONLY FOR BLACK LUNG. IN MY OPINION, THE CAUSE OF DEATH OF THIS INDIVIDUAL IS PROBABLY DUE TO SMALL CELL CARCINOMA OF THE LUNG.**

### CLINICAL HISTORY:

This 58-year-old white male was sent from Hospital for autopsy. The consent was signed by his son. Autopsy was performed by Doctor Chinmay Datta at United Hospital Center on July 21, 2008 at 2:15 p.m. Patient had stage IV primary lung carcinoma. In the past patient had myocardial injury with stent insertion.

### EXTERNAL EXAMINATION:

The body is that of a well developed, well nourished white man measuring about 6 feet and weighing 315 pounds. No scar or any abnormalities are found on the skin surfaces. The autopsy is limited to chest only.

A Y-shaped incision was made on the chest revealing yellowish panniculus of 2 cm in thickness.

Heart – The heart weighs 700 grams and shows arteriosclerotic changes in the coronary vessels. No apparent scar is identified on gross examination. Atrial appendages are within normal limits. The tricuspid valve measures 14 cm, mitral valve 8 cm, pulmonary valve 7 cm and

**AUTOPSY REPORT**

# UNITED HOSPITAL CENTER

## AUTOPSY REPORT

aortic valve 8 cm. The left ventricular wall measures 1.5 cm in thickness and the right ventricular wall is 0.8 cm in thickness. About 500 cc of straw colored fluid is identified in the pericardial cavity.

Lungs – Right lung weighs 400 grams and the left lung 550 grams. Both lungs show hilar mass measuring 10 cm in greatest dimension. Both lungs are congested. Cut section shows fluid in both lungs. Left pleural cavity shows about 300 cc of straw colored fluid. There is no definite evidence of pulmonary embolism.

Block 1 and 2 – heart.

Block 3 and 4 – upper lobe of right lung.

Block 5 and 6 – lower lobe of right lung.

Block 7 and 11 – middle lobe of right lung.

Block 8 and 9 – upper lobe of left lung.

Block 10 and 12 – lower lobe of left lung.

Block 13, 14 and 15 – hilar mass.

### **MICROSCOPIC:**

Heart – The myocardium shows no significant histopathological change. The coronary vessel shows minimal arteriosclerotic change.

Lungs – Both lungs show infarctions and mild to moderate anthracosis. Sections taken from hilar mass reveals poorly differentiated small cell carcinoma of the lung.

**UHC UNITED HOSPITAL CENTER**

**Department of Pathology and Laboratory Medicine  
P.O. Box 1680, Clarksburg, West Virginia 26301  
Phone (304)624-2288 Fax (304)624-2916**

Chinmay K. Datta, MD, PhD  
Chief Pathologist

Gerald T. Wedemeyer, MD  
Associate Pathologist

**AUTOPSY REPORT**

---

---

**AUTOPSY REPORT**