

<b>Patient Name</b> TESTING,HER2FIXATION	<b>Patient ID</b> C7028846-002020	<b>Age</b> 34	<b>Gender</b> F	<b>Order #</b> R1058800
<b>Ordering Phys</b> TEST,DOCTOR				<b>DOB</b> 09/15/1979
<b>Client Order #</b> R1058800	<b>Account Information</b>			<b>Report Notes</b>
<b>Collected</b> 01/17/2014 13:45	C7028846-DLMP Rochester SDSC 2 - Client Support Rochester, MN 55901			
<b>Printed</b> 01/21/2014 08:51				

Test	Flag	Results	Unit	Reference Value	Perform Site*
<b>HER2, Breast IHC, Automated</b>					
<b>RECEIVED:</b> 01/20/2014 14:16 <b>REPORTED:</b> 01/21/2014 08:47					
Accession Number		HR14-28			MCR
Referring Pathologist/Physician		Doctor Test Jr., M.D.			MCR
Ref Path/Phys Address		Methodist Hospital 200 1st Street SW Rochester, MN 55905 507-266-0740			MCR
Material:		A. Special Procedure; right breast, mastectomy, block SS14-00000 C0			MCR
Tissue:		A:Special Procedure; right breast, mastectomy - block SS14-00000 C0			MCR
Interpretation:		HER2, Immunostain: Source: Breast, right, mastectomy, block SS14-00000 C0 Sample is adequate for evaluation HER2 protein overexpression is positive, score of 3+. Percentage of invasive tumor cells exhibiting complete membrane staining: 35% Uniformity of staining: absent Homogeneous, dark circumferential pattern: present Fixation: HER2 protein immunohistochemical (IHC) test results are only valid for non-decalcified paraffin embedded specimens fixed in 10% neutral buffered formalin within 1 hour of acquisition and fixed between 6 and 72 hours. Delay to fixation, under fixation or over fixation fall outside of CAP/ASCO guidelines and may affect these results. Fixation conditions for this specimen were indicated to be within the CAP/ASCO guidelines. 1. Wolff AC, Hammond ME, Hicks DG, et al. American Society of Clinical Oncology/College of American Pathologists guideline update recommendations for human epidermal growth factor receptor 2 testing in breast cancer. J Clin Oncol. 2013 Nov 1;31(31):3997-4013. HER2 Method: Testing is performed using FDA approved Ventana Pathway HER2 (4B5) rabbit monoclonal primary antibody and a proprietary detection system. No expression (HER2 score of 0), low expression (HER2 score of 1+) and high expression (HER2 score of 3+) controls are used. All controls show appropriate reactivity. Immunohistochemical stained slides are scanned using the Aperio ScanScope instrument. A technologist views the captured digital image and traces around areas of cancer to include at least 75% of the total invasive cancer within the image. The traced areas are analyzed using Aperio software, an FDA 510(k) cleared application			MCR

\*\*\*Performing Site Legend on Last Page of Report\*\*\*

<b>Patient Name</b> TESTING,HER2FIXATION	<b>Collection Date and Time</b> 01/17/2014 13:45	<b>Report Status</b> Final
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\* Report times for Mayo performed tests are CST/CDT

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<p>for precise measurement of the level of HER2 protein on cell membranes of breast tumor cells. Membrane staining for HER2 protein in breast carcinoma is scored on a 0 to 3+ scale in accordance with CAP/ASCO guidelines. The Aperio data and corresponding slide are reviewed by a pathologist for final interpretation.</p> <p>SP Signing Pathologist: See Below</p> <p>Result:1/21/2014 08:43 Interpreted by: Pathologist X. Test, M.D. Report electronically signed by Angie S. Beckel Transcribed by: asa05 1/21/2014 08:43:02</p>					
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\* Performing Site:

MCR	Mayo Clinic Laboratories - Rochester Main Campus 200 First St SW Rochester, MN 55905	Lab Director: Franklin R. Cockerill, III, M.D.
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Page 2 of 2		** End of Report **

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