PATIENT Mr. DAYANAND

29/06/2024

REPORT DATE BOOKING ID 012406190048

Cytomegalovirus (CMV) Immunohistochemistry

Cytomegalovirus: Negative

Test Description

Cytomegalovirus (CMV), a member of the Herpesviridae family, is a double-stranded DNA virus that replicates in the host's nucleus and manifests histopathologic ally as large intranuclear and smaller cytoplasmic inclusion bodies.

It is estimated that CMV colitis occurs in 2-16% of patients who have received solid organ transplants, 3-5% of patients with HIV infection or acquired immunodeficiency syndrome (AIDS), and 4-16% in patients with inflammatory bowel disease (IBD) Diagnosis of CMV infection/reactivation in biopsied tissues is classically based on histopathological identification of virus- infected cells (viral cytopathic effect) on hematoxylin-eosin (H&E) stained slides, and/or detection of CMV intranuclear inclusions by immunohistochemistry (IHC) studies.

Specimen

Sample Type: FFPE block MOLQ B-2515/24

Site: Rectal biopsy

Pathology ID: MOLQ/IHC-2515 /24 Disease: Bleeding per rectum

Interpretation

Positive: Strong, brown, granular intranuclear inclusion

bodies staining.

Negative: Absence of strong staining.

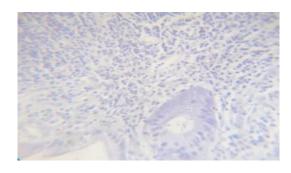
Methodology

Immunostaining for CMV stain.

All immunohistochemistry markers have been evaluated in the context of appropriate positive and negative controls. A result is considered uninterpretable as a result of the type of fixative used (non 10% neutral buffered formalin), time to fixation (> 1 hour), duration of fixation (> 6 hr or < 72 hour), strong decalcification, or inappropriate staining of normal internal or external assay controls. An alternative sample for retesting is then usually recommended. These assays have not been validated on decalcified specimens.

References

Rosai and Ackerman's Surgical Pathology.



Microscopy Evaluation CMV staining: NEGATIVE

Reviewed By

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