

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 histopathologically 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-2833/24

**Site:** Rectum biopsy

**Pathology ID:** MOLQ/IHC-2833/24

**Disease:** Rectum

## Interpretation

**Positive:** Strong, brown, granular intranuclear inclusion bodies staining.

**Negative:** Absence of strong staining.

## Methodology

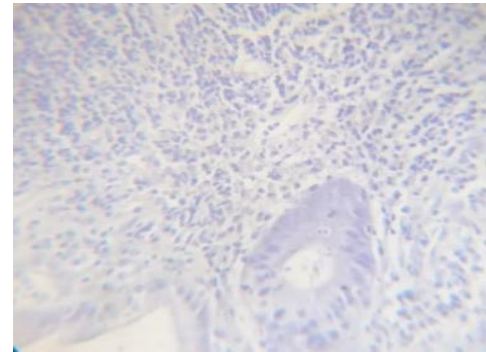
Immunostaining for CMV stain.

## Note

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

1. Rosai and Ackerman's Surgical Pathology.



## Microscopy Evaluation

CMV staining: **NEGATIVE**

## Reviewed By



Dr. Gulshan Yadav, MD  
Head, Pathology



**CMV-IHC**

PATIENT	REPORT DATE	BOOKING ID
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