



LABORATORY REPORT

QC ACCOUNT (WARDE)
300 W. TEXTILE
ANN ARBOR MI 48108

EXAMPLE, REPORT W
WX0000003826 F 12/05/1988 36 Y

Referral Testing

Collected: 06/18/2025 07:08 Received: 06/18/2025 07:08

Test Name Result Flag Ref-Ranges Units Site

Renal Pathology Consultation, Wet Tissue

Interpretation SEE BELOW MMRL

FINAL DIAGNOSIS

Kidney, needle biopsy: 1) Diffuse sclerosing and membranous lupus nephritis, ISN/RPS class IV-G (C) and class V. 2) Amyloidosis, compatible with AA type, involving vessels and glomeruli. See comment.

Electron microscopy will be reported as an addendum.

COMMENT

The biopsy shows approximately 50% global glomerulosclerosis as well as segmental glomerular scars in additional glomeruli, compatible with diffuse sclerosing lupus nephritis. No lupus disease activity is identified in the sample. Immunofluorescence shows an immune complex glomerulonephritis, compatible with lupus nephritis. By light microscopy, glomerular basement membrane pinholes are seen on a silver stain, indicative of an additional component of membranous lupus nephritis. In addition, Congo red positive material is seen in the vessels and segmentally in the glomeruli; this material shows staining for serum amyloid A by immunohistochemistry, compatible with AA amyloidosis.

MICROSCOPIC DESCRIPTION

LIGHT MICROSCOPY: Tissue sections are cut and stained with HandE, PAS, Masson trichrome and Jones methenamine silver to aid in the morphological interpretation. Sections reveal renal cortex and contain approximately 20 glomeruli, 10 of which are globally sclerotic. The glomeruli show mild to moderate mesangial hypercellularity and mesangial matrix expansion. Approximately six glomeruli show segmental scars. Hyaline is present in segmental capillary loops. No endocapillary hypercellularity, karyorrhectic debris, necrotizing lesions or crescents, or wire loop lesions are identified. Numerous glomerular capillary loops show basement membrane pinholes on a silver stain. TUBULES AND INTERSTITIUM: Interstitial fibrosis with tubular atrophy affects approximately 40% of the sampled cortex. There is a focal sparse mononuclear inflammatory cell infiltrate in areas of interstitial fibrosis.

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL, . - NOT TESTED

H41800002 Ordered By: CLIENT CLIENT
WX0000003826 WX0000000002823
Printed D&T: 06/18/25 07:08

Kajal V. Sitwala, MD, PhD - Medical Director
Form: MM RL1
PAGE 1 OF 3



LABORATORY REPORT

QC ACCOUNT (WARDE)
300 W. TEXTILE
ANN ARBOR MI 48108

EXAMPLE, REPORT W
WX0000003826 F 12/05/1988 36 Y

Referral Testing

Collected: 06/18/2025 07:08 Received: 06/18/2025 07:08

Test Name Result Flag Ref-Ranges Units Site
VESSELS: Arterioles show moderate to severe intimal hyalinosis as well as medial thickening. Sampled small arteries show focal mild fibrous intimal thickening.

IMMUNOFLUORESCENT HISTOLOGY: Tissue submitted for immunofluorescence contains approximately seven glomeruli, four to five of which are globally sclerotic. The glomeruli show granular mesangial and capillary loop staining for IgG (2+), IgM (2+), C3 (3+), and kappa (2+) and lambda (2+) light chains. there is trace granular mesangial staining for Clq. The glomeruli are negative for IgA> tubular epithelial cell nuclei show staining for IgG (tissue ANA). There is focal granular interstitial and tubular basement membrane staining for IgG, IgG, C3, and kappa and lambda light chains. The glomeruli are negative for fibrinogen. Staining for albumin is unremarkable.

Participated in the Interpretation SEE BELOW MMRL

RESULT: Test, Interpretation Report electronically signed by SEE BELOW MMRL

MONIQUE GARZA

I verify that I have examined all relevant slides/materials for the specimen(s) and rendered or confirmed the diagnosis.

Addendum MMRL

Gross Description SEE BELOW MMRL

Light Microscopy: Received in formalin for light microscopy: 1 piece(s) of tissue measuring 0.5 x 0.5 cm. Submitted in total in block(s) A1. (GEJ)

Electron Microscopy: Received in glutaraldehyde/Trumps for electron microscopy: 1 piece(s) of tissue measuring 0.2 x 0.1 cm. (GEJ)

Immunofluorescence: Received in Zeus for immunofluorescence: 1 piece(s) of tissue measuring 0.5 x 0.7 cm. Submitted in total for immunofluorescence. (GEJ)

Material Received SEE BELOW MMRL

1 - Formalin 10% wet tissue

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL, . - NOT TESTED

H41800002 Ordered By: CLIENT CLIENT
WX0000003826 WX00000000002823
Printed D&T: 06/18/25 07:08

Kajal V. Sitwala, MD, PhD - Medical Director
Form: MM RL1
PAGE 2 OF 3



LABORATORY REPORT

QC ACCOUNT (WARDE)
300 W. TEXTILE
ANN ARBOR MI 48108

EXAMPLE, REPORT W
WX0000003826 F 12/05/1988 36 Y

Referral Testing

Collected: 06/18/2025 07:08 Received: 06/18/2025 07:08

Table with 6 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Rows include Zeus wet tissue and Gluta/Trumps wet tissue.

Disclaimer SEE BELOW MMRL

This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. This test has not been cleared or approved by the U.S. Food and Drug Administration.

Case Number KR-25-57 MMRL

Test Performed by:
Mayo Clinic Laboratories - Rochester Main Campus
200 First Street SW, Rochester, MN 55905
Lab Director: Nikola A. Baumann Ph.D.; CLIA# 24D0404292

Reported Date: 06/18/2025 07:08 RPCWT

Performing Site:

MMRL: MAYO MEDICAL REFERENCE LAB 3050 Superior Drive NW Rochester MN 55901

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL, . - NOT TESTED