



Pathology Reports

Underwriting Dialogue

Characteristics

We often encounter pathology reports in the medical records of insurance applicants. Basic components of a pathology report include identifying data on the patient, relevant medical history, the type of tissue submitted for examination, the gross description of the tissue (how it appears to the unaided eye), the microscopic description (how it appears under the microscope), and the diagnosis.

Diagnosis

The amount of tissue submitted for pathologic evaluation can range from isolated cells to a complete organ with surrounding structures. It is important to know whether an entire area of concern has been removed or whether only a part of it has been biopsied for pathologic evaluation.

Fine needle aspiration, which for example might be used to investigate a thyroid nodule, uses a thin needle to obtain cells for examination. A core biopsy, which for instance might be used to evaluate a breast abnormality, uses a larger needle to obtain a small amount of tissue. An excisional biopsy removes an entire tumor or abnormal area, while an incisional biopsy detaches a small piece for examination.

Frozen section is a technique that allows a rapid preliminary pathologic diagnosis while the patient is still in the operating room. This can be especially useful if the extent of surgery necessary depends upon the diagnosis. When a frozen section has been performed there should also be a follow up pathology report with the final diagnosis.

Staging

If cancer is present, the pathology report might contain such useful information as size, thickness, grade (how closely the cancer cells resemble normal cells), involvement of vascular, lymphatic, or adjacent structures, and if the tumor has been completely removed. The specific information presented will depend upon the type of tumor. If performed, the results of special studies may also be noted.

Pathology reports can be useful in the evaluation of other conditions besides malignancy. For example, biopsies can help to diagnose liver disease, kidney disease, neurologic conditions, inflammatory bowel disease, muscle disease, skin conditions, and other entities.

Underwriting Pathology Reports: Case Studies

Applicant 1 is a 35 year old applicant whose records contain a pathology report from an excisional biopsy of a breast mass from two years ago with a diagnosis of fibroadenoma and no evidence of malignancy. Follow up to the present has been favorable.

This applicant could qualify for Preferred Plus.

Applicant 2 is a 50 year old applicant whose records contain a pathology report from a skin lesion removed from a lower extremity six months ago with a diagnosis of superficial squamous cell carcinoma that was completely removed.

This applicant could qualify for Preferred Plus.

Applicant 3 is a 65 year old applicant whose records contain a pathology report from a fine needle aspiration of an enlarged lymph node in the neck performed one month ago that was noted to be nondiagnostic (no specific diagnosis could be made). The pathologist stated that lymphoma could not be ruled out. The surgeon plans to observe for one more month and will then consider excising the lymph node if it remains enlarged.

This applicant would be postponed.



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