

WEST VIRGINIA UNIVERSITY MEDICAL CENTER
DEPARTMENT OF PATHOLOGY

FINAL ANATOMIC DIAGNOSIS

AUTOPSY NO.: 124-434

NAME: STEVENS, Ernest L. AGE: 61 SEX: Male RACE: White
HOSPITAL NUMBER: ----- DATE OF ADMISSION: -----
ATTENDING PHYSICIAN: (Dr. Al-Hajj)* DEATH DATE: 2/11/84 TIME: 5:10 PM
REFERRING PHYSICIAN: ----- AUTOPSY DATE: 2/12/84 TIME: 10:55 AM
SERVICE: Outside Case

*(Dr. Al-Hajj, Herbert J. Thomas Memorial Hospital, MacCorkle Avenue,
South Charleston, West Virginia)

1. Hepatocellular carcinoma of right lobe of liver 56-8173
 - A. Carcinoma invasion of inferior vena cava
 - B. Peritoneal effusion, sanguinous, 1000 ml
 - C. Cachexia
2. Advanced arteriosclerotic two-vessel coronary arterial disease 43-5210
 - A. 95% narrowing of right coronary artery with foci of recent intramural hemorrhage
 - B. 90% narrowing of circumflex branch of left coronary artery
 - C. Remote posteroseptal myocardial infarction
3. Cardiomegaly (heart weight 430 grams) with marked biatrial and biventricular dilatation (congestive heart failure)
4. Advanced atherosclerosis of aorta and its branches 42-5210
5. Pleural effusion, serous, right 200 ml and left 100 ml 29-3831
6. Hyalinized plaques of parietal pleura and pleural surface of diaphragm, bilateral 29-5110
7. Pulmonary edema and congestion, bilateral 28-3840
8. Pulmonary emphysema, panacinar and paraseptal, both upper lobes 28-3430
9. Focal early bronchopneumonia, both lower lobes 28-4001
10. Localized organized pneumonia, lower portion of right upper lobe
11. Mild chronic bronchitis
12. Anomalous renal pelvis and anomalous origin of renal artery of right kidney, and anomalous location of left kidney 71-2100
13. Mild hydronephrosis and hydroureter of upper portion of left ureter 71-3520,
14. Edema of lower legs and feet 73-3520
15. Hypoalbuminemia (by history)
16. Anemia (by history)

NOTE: The autopsy is limited to the examination of chest and abdomen.

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JUL 26 1981

UCC 099064

G. J. TRIPLETT

William F. L. Chung, M.D.
STAFF PATHOLOGIST

PROSECTOR

WEST VIRGINIA UNIVERSITY MEDICAL CENTER
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FINAL ANATOMIC DIAGNOSIS

PAGE TWO

AUTOPSY NO.: 184-133

NAME: STEVENS, Ernest L. AGE: SEX: RACE:
HOSPITAL NUMBER: DATE OF ADMISSION:
ATTENDING PHYSICIAN: DEATH DATE: TIME:
REFERRING PHYSICIAN: AUTOPSY DATE: TIME:
SERVICE:

CONCLUSION:

This 61 year old white male died apparently of progressive cachexia due to hepatocellular carcinoma of the liver and congestive heart failure secondary to advanced arteriosclerotic coronary arterial disease, anemia and hypoalbuminemia. Although the hepatocellular carcinoma was huge with extensive necrosis and hemorrhage, had replaced the right lobe of the liver and invaded the inferior vena cava, there was no tumor metastasis at autopsy. The tumor was associated with extensive capsular hyalinizing fibrosis and/or subcapsular fibrosis in some areas, but there was no evidence of cirrhosis in the remaining liver tissue. Of further interest was the presence of hyalinized plaques in the parietal pleura and the pleural surface of the diaphragm. Advanced coronary atherosclerosis, pulmonary emphysema and chronic bronchitis might have accounted for some of his clinical symptoms. Anomalies of the kidneys demonstrated at autopsy were of no clinical significance.

UCC 099065

W. W. L. Chang, M.D.

WALC/JP

PROSECTOR

STAFF PATHOLOGIST