

EXHIBIT 3

STATE OF ILLINOIS)
) SS
COUNTY OF DUPAGE)

Affidavit of Patricia L. Cedzidlo

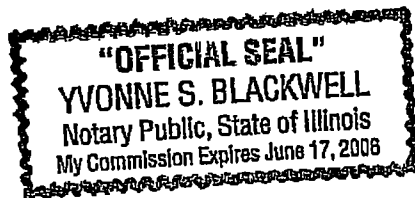
1. My name is Patricia L. Cedzidlo.
2. My date of birth is March 5, 1932.
3. I currently reside at 2652 Hobson Road, Downers Grove, Illinois 60516.
4. I have lived at my home on Hobson Road since January 1957.
5. I submit this affidavit in support of my Individual Review Claim for colon cancer.
6. Since April 2004, my home has been supplied with municipal water. Prior to that time, my drinking water was from a private well.
7. In May 2001, my private well was tested for contamination. On June 5, 2001, the Illinois Department of Public Health sent me a letter with the test results. A copy of that letter is attached as Exhibit A. The health department told me that the level of TCE in my drinking water would not cause me any adverse health effects. The health department also told me that I did not need to change any of my drinking water habits due to the level of TCE in my water. I relied upon this information and trusted that what the health department told me was truthful.
8. Shortly after receiving the letter from the health department, I was diagnosed with colon cancer. I was treated at Good Samaritan Hospital in Downers Grove. My doctor, Dr. Wienke, diagnosed me with colon cancer on August 1, 2001. A surgical pathology report (with a final pathologic diagnosis of adenocarcinoma) is attached as Exhibit B. I have no family history of colon cancer. Dr. Wienke was not able to tell me what caused my cancer. Because of this and the health department letter, I did not associate my colon cancer with exposure to TCE at that time.
9. In addition to the information in the affidavit I submitted in support of my husband - Edward's claim (he is deceased), I wanted to emphasize that although this claim does not really give me any peace of mind, the money should make it easier for me to find a new place to live.
10. The maintenance expenses for my home are too much. I want to move into a smaller and maintenance free home like a condominium or town home.

11. My cancer is gone now. Dr. Wienke told me it will probably not return. I hope he is right about that, but there is no way to know for sure.
12. The last few years have been real tough on me and my family. The money that I am seeking with this claim should help to reimburse some of the medical and maintenance expenses I have paid and, hopefully, allow me to afford a new place to live.

FURTHER AFFIANT SAYETH NOT.

Patricia L. Cedzidlo
Patricia L. Cedzidlo

SUBSCRIBED AND SWORN TO
before me this 9th day of
March, 2005



Yvonne S. Blackwell
Notary Public

244009 138 CD
345 JW

BOOK 866 PAGE 115

This Indenture, made this 24th day of October, A. D. 1956 between

BOKAY - HINSDALE BUILDERS, INC.

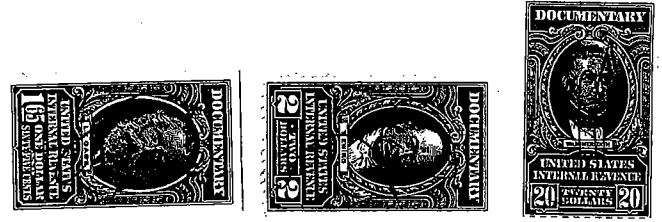
a corporation created and existing under and by virtue of the laws of the State of Illinois and duly authorized to transact business in the State of Illinois, party of the first part, and Edward J. Gedzidlo and Patricia L. Gedzidlo (his wife) of the City of Chicago in the County of Cook and State of Illinois, party of the second part.

Witnesseth, That the said party of the first part, for and in consideration of the sum of

Ten Dollars & no/100 Dollars in hand paid by the party of the second part, the receipt whereof is

hereby acknowledged, and pursuant to authority of the Board of Directors of said corporation has, and by these presents does REMISE, RELEASE, ALIEN AND CONVEY unto the said party of the second part, and to Their heirs and assigns, FOREVER, all the following described lot, piece or parcel, of land, situate in the County of Du Page and State of Illinois known and described as follows, to wit:

Lot # 4 in Suburban Estates, a Subdivision of the NE 1/4 of the NE 1/4 of Section 23, T-38-N, R-10-East of the Third Principal Meridian, and the NW 1/4 of the NW 1/4 of Section 24, T-38-N, R-10-East of the Third Principal Meridian, in Du Page County, Illinois.



Together with all and singular the hereditaments and appurtenances thereunto belonging, or in anywise appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof, and all the estate, right, title, interest, claim or demand whatsoever, of the said party of the first part, either in law or equity, of, in and to the above described premises, with the hereditaments and appurtenances: TO HAVE AND TO HOLD the said premises as above described, with the appurtenances, unto the said party of the second part, Their heirs and assigns forever.

And the said BOKAY - HINSDALE BUILDERS, INC.

party of the first part, for itself, and its successors, does covenant, promise and agree, to and with the said party of the second part, Their heirs and assigns, that it has not done or suffered to be done, anything whereby the said premises hereby granted are, or may be, in any manner incumbered or charged, except as herein recited; and that the said premises, against all persons lawfully claiming, or to claim the same, by, through or under it, it WILL WARRANT AND FOREVER DEFEND.

In joint tenancy and not as tenants in common.

In Witness Whereof, said party of the first part has caused its corporate seal to be hereto affixed, and has caused its name to be signed to these presents by its President, and attested by its Secretary, this day of A. D. 19

830087

BOKAY - HINSDALE BUILDERS, INC.

By Irwin Kay President

ATTEST Herman Rose Secretary

JAN 18 1957 AT -2 40 PM

Lawrence Battendorf
RECORDER

Warranty Deed
 Corporation to Individual

BOKAY - HINSDALE BUILDERS, INC.

an Illinois Corporation
 TO

Lot # 4 in Suburban Estates

Box 533

Mail This Instrument To:

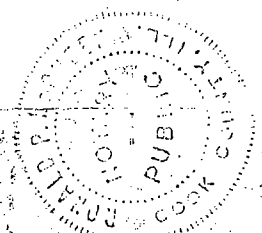
#1463

Name: _____
 Address: **C. C. FRASZ**
 City: **1624 W. 18th STREET**
CHICAGO 8, ILL.
 Date: _____ Initial: _____

830087

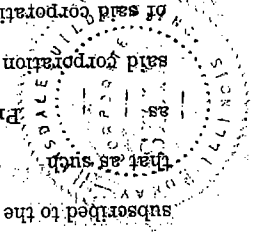
Form 104 50M 5-56 J.G.

GEORGE E. COLE & COMPANY, INC.



[Handwritten signatures and dates]
 1/31 day of _____
 1/31 day of _____

GIVEN under my hand and notary seal this _____ day of _____ 19____
 corporation, for the uses and purposes therein set forth.
 of said corporation as their free and voluntary act, and as the free and voluntary act and deed of said
 said corporation to be affixed thereto, pursuant to authority, given by the Board of Directors
 Secretary of said corporation, and caused the corporate seal of
 President and
 Secretary, they signed and delivered the said instrument
 that as such
 subscribed to the foregoing instrument, appeared before me this day in person and severally acknowledged
 Secretary of said corporation, and personally known to me to be the same persons whose names are
 corporation, and Herman Rose
 personally known to me to be the
 BOKAY - HINSDALE BUILDERS, INC.
 President of the
 and for said County, in the State aforesaid, DO HEREBY CERTIFY that I was in Kay



STATE OF Illinois
 COUNTY OF Cook

SS.

BOOK 866 PAGE 116

1.

PERMANENT CERTIFICATE
 TEMPORARY CERTIFICATE

REGISTRATION DISTRICT NO. **220.**
 REGISTERED NUMBER

STATE OF ILLINOIS
**MEDICAL EXAMINER'S - CORONER'S
 CERTIFICATE OF DEATH**

STATE FILE NUMBER

Type, or Print in PERMANENT INK See Coroner's or Funeral Directors Handbook for INSTRUCTIONS

DECEASED

CAUSE

PARENTS

CERTIFIER

DISPOSITION

DECEASED—NAME FIRST MIDDLE LAST Edward J. Cedzidlo		SEX Male	DATE OF DEATH (MONTH, DAY, YEAR) May 22, 2000
COUNTY OF DEATH DuPage		AGE—LAST BIRTHDAY (YRS) 73	DATE OF BIRTH (MONTH, DAY, YEAR) October 17, 1926
CITY, TOWN, TWP. OR ROAD DISTRICT NUMBER Downers Grove		HOSPITAL OR OTHER INSTITUTION—NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER) 2652 Hobson Road	IF HOSP. OR INST. INDICATE D.O.A., OP-EMER, RM, INPATIENT (SPECIFY) 6c.
BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY) Chicago, Il.		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY) 8a. Married	NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE) 8b. Patricia Wylie
SOCIAL SECURITY NUMBER 10. 350-14-8674		USUAL OCCUPATION 11a. Carpenter	KIND OF BUSINESS OR INDUSTRY 11b. Self Employed
RESIDENCE (STREET AND NUMBER) 13a. 2652 Hobson Road		CITY, TOWN, TWP. OR ROAD DISTRICT NO. 13b. Downers Grove	INSIDE CITY (YES/NO) 13c. es
STATE 13e. Illinois		ZIP CODE 13f. 60516	COUNTY 13d. DuPage
FATHER—NAME FIRST MIDDLE LAST 15. John Cedzidlo		MOTHER—NAME FIRST MIDDLE (MAIDEN) LAST 16. Mary Mikolajczyk	
INFORMANT'S NAME (TYPE OR PRINT) 17a. Patricia Cedzidlo		RELATIONSHIP 17b. Wife	MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP) 17c. 2652 Hobson Rd. Downers Grove, Ill.
18. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. Immediate Cause (Final disease or condition resulting in death) (a) Gastric Cancer		APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH 6 MONTHS	
CONDITIONS, IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE (a) STATING THE UNDERLYING CAUSE LAST. (b) (c)			
PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in PART I.		AUTOPSY (YES/NO) 19a. NO	
NATURAL ACCIDENT, HOMICIDE, SUICIDE, UNDETERMINED, (SPECIFY) 20a. Natural		DATE OF INJURY (MONTH, DAY, YEAR) 20b.	HOW INJURY OCCURRED (ENTER NATURE OF INJURY MENTIONED IN PART I OR PART II, ITEM 18) 20c. M. 20d.
INJURY AT WORK (YES/NO) 20e.		PLACE OF INJURY (AT HOME, FARM, STREET, FACTORY, OFFICE BUILDING, ETC.) (SPECIFY) 20f.	LOCATION (CITY, VIL. OR TOWN; OR TWP.; OR RD. DIST. NO., COUNTY, STATE) 20g.
I CERTIFY THAT IN MY OPINION BASED UPON MY INVESTIGATION AND/OR THE INQUIRY, THIS DEATH OCCURRED ON THE DATE, AT THE PLACE AND DUE TO THE CAUSE(S) STATED, AND THAT		THE DECEDENT WAS PRONOUNCED DEAD ON 21b. May 22, 2000	AT 21c. 4:20 A.M.
CORONER'S—MEDICAL EXAMINER'S SIGNATURE 22a. RICHARD R. BALLINGER Deputy		DATE SIGNED (MONTH, DAY, YEAR) 22b. May 22, 2000	
CORONER'S PHYSICIAN'S NAME (Type or Print) 23a.		DATE SIGNED (MONTH, DAY, YEAR) 23b.	
BURIAL CREMATION, REMOVAL (SPECIFY) 24a. Burial	CEMETERY OR CREMATORY—NAME 24b. S.S. Peter & Paul	LOCATION CITY OR TOWN STATE 24c. Naperville, Illinois	DATE (MONTH, DAY, YEAR) 24d. May 24, 2000
FUNERAL HOME NAME STREET AND NUMBER OR R.F.D. CITY OR TOWN STATE ZIP 25a. Adams-Winterfield & Sullivan F.H. 4343 Main St. Downers Grove, Illinois 60515		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 25c. 034-011111	
FUNERAL DIRECTOR'S SIGNATURE 25b.		DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) 26b. MAY 23 2000	
LOCAL REGISTRAR'S SIGNATURE 26a.		DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR) 26b.	

VR202 (Rev. 5/89) Illinois Department of Public Health—Division of Vital Records (BASED ON 1989 U.S. STANDARD CERTIFICATE)



111 North County Farm Road
 Wheaton, Illinois 60187

This is to certify that this is a true and correct copy of the official record filed with the Illinois Department of Public Health.

Richard R. Ballinger
 Local Registrar

Not valid without the embossed seal of DuPage County Health Department

Route To: Gerard, David

GOOD SAMARITAN HOSPITAL
3815 Highland Avenue
Downers Grove, Illinois 60515

PATIENT NAME: CEDZIDLO, EDWARD MR#: 042059

ATTENDING PHYSICIAN: ROOM: X

DATE OF ADMISSION: DATE OF DISCHARGE:

DISCHARGE DIAGNOSES: Large adenocarcinoma of the stomach, hypertension, history of hernia repair, recent popliteal deep vein thrombosis.

PROCEDURE: Total gastrectomy. Central line placement.

HISTORY: Please see my admission note.

HOSPITAL COURSE: The patient underwent a total gastrectomy performed by Dr. Wienke. Postoperatively the patient did very well without any significant complications. He was started on Coumadin and initially had a vigorous response. On discharge he will be sent home on 2 mg/day of Coumadin. His PT today is still pending. Should his PT rise from and INR of 2.2 yesterday we may reduce his Coumadin to 1 mg/day. He will follow up with Dr. Harvey on Thursday to have a repeat PT drawn and follow up every Monday and Thursday until his PT stabilizes. His oncologist, Dr. Lewey has recommended lifetime anticoagulation. The pathology from the adenocarcinoma of his stomach showed a poorly-differentiated adenocarcinoma involving most of the stomach; 22 of 22 perigastric lymph nodes were positive. Dr. Wienke believes that all gross disease was resected. Unfortunately, the prognosis is quite poor with gastric cancer, especially in someone with 22 of 22 lymph nodes involved in disease. He will follow up with Dr. Lewey in the next week or two to discuss whether adjuvant chemotherapy would be indicated in this situation. Unfortunately, it is not likely to make a big difference in his long-term survival.

On discharge, the patient is eating many small meals. He gets full very easily and complains of some heartburn and, when he lies down reflux. It was recommended to him that he continue to eat large numbers of small meals during the day. In addition, he needs to remain upright as much as possible an attempt to elevate the head of his bed at home at least six inches to prevent nighttime reflux.

He will follow up with Dr. Wienke some time in the next week to have his staples removed; and, as directed, he will follow up with me as needed.

Thank you very much for helping us to take care of this very nice gentleman.

Continued...

DISCHARGE SUMMARY

David Gerard, MD

MLS: 95480

D: Tue Jan 25 08:57:25 2000 605617

T: Thu Jan 27 09:53:47 2000 569765

cc: David Gerard, MD, Gene Harvey, MD, c/o Hinsdale Hospital, Dr. Lewey, Oncol
Department, Henry Wienke, MD

Patient Name: CEDZIDLO, EDWARD

MR#: 042059

DISCHARGE SUMMARY

HINSDALE HOSPITAL

PT. NAME: CEDZIDLO, EDWARD J
LOCATION: I/P MED 5N 5112/04
DICT: David P. Gerard M.D.

DOB: 10/17/1926
UNIT#: 001457191
ATT: KAREN LOUIE MD

DIS DATE: 04/25/2000
ACCT#: 201300211

cc: Dr. Wienke c/o Good Samaritan Hospital
Dr. Gene Harvey

DATE OF CONSULTATION: April 24, 2000

COPY

CONSULTING PHYSICIAN: David P. Gerard, M.D.

REASON FOR CONSULTATION: The patient is a 73-year-old white man who is admitted for fever status post chemotherapy for adenocarcinoma of the stomach. We were asked to evaluate his nausea and vomiting.

HISTORY OF THE PRESENT ILLNESS: The patient is well known to me. He came to see us in December complaining of nausea and weight loss. He was subsequently diagnosed with a large adenocarcinoma involving much of his stomach. A CT scan showed evidence of soft tissue densities around the stomach suggestive of either tumor spread or adenopathy.

In early January, Edward underwent a total gastrectomy performed by Dr. Wienke at Good Samaritan Hospital. His pathology showed locally advanced disease with 22 of 22 nodes positive for poorly differentiated adenocarcinoma. There was no clear evidence of metastatic disease and Dr. Wienke believes that he resected all gross disease.

Postoperatively, Edward did well. He has remained on Coumadin due to his recent DVT. He was eating well and his weight was reasonably stable. He had to consume a number of small meals; however he was able to tolerate most foods. He had his first cycle of chemotherapy in mid February, a second cycle about two or three weeks later, and his third cycle about 2 ½ weeks ago. After his first cycle of chemotherapy he developed a fever to 101°. He was admitted for IV antibiotics. No clear source was found and he felt better by the next day. His second course of Taxotere chemotherapy resulted in a low grade fever. He was seen in the emergency room. His tests were negative and he was sent home on oral antibiotic. His third course of chemotherapy was well tolerated. He has had Neupogen shots. He did well for about 2 ½ weeks and then again developed fever. Because of this he was admitted.

He was eating well until approximately four weeks ago when he began to have heartburn. Pepcid seemed to help a bit. He began to regurgitate food after coughing. The last week he has had significant nausea and vomiting after eating; it occurs soon after eating. There does not appear to be much pain or discomfort. He also complains of some upper abdominal discomfort which responds to Advil. The pain is not typical for peptic ulcer disease. The pain comes and goes randomly and doesn't seem to be related to eating. He believes he may have lost 10 lbs. over the last six weeks. His bowel movements have been normal. He has seen no blood. He also occasionally has pills that get stuck while he swallows. Because of these symptoms he has not eaten much over the last few days.

8676 d: 04/24/2000 17:35 dam t: 04/25/2000 18:36

PT.NAME: CEDZIDLO, EDWARD

UNIT#: 001457191

ACCT#: 201300211

PAST HISTORY: Allergies: Includes no known allergies. Medical: He has hypertension. Surgical: He had a hernia repair in 1956. Medications: Current medications are colchicine, Coumadin, Dyazide, K-Dur, Prilvacid and Reglan 10 mg a half an hour before meals. In the hospital he is receiving ceftriaxone, Reglan, iron, and Pepcid p.o. He is also receiving ibuprofen. His Coumadin is on hold.

SOCIAL HISTORY: He is married. He is a retired painter and carpenter. He doesn't smoke or drink. He lives with his wife.

FAMILY HISTORY: His mother died of breast cancer at age 49. Father died of a stroke at 74. He has two brothers; one has had CABG and has had Parkinson's disease, the other is alive and well. He has two sisters; both are well. He has daughters who are 37 and 42 and are well.

PHYSICAL EXAMINATION: I found an alert, white man who seemed somewhat thinner than the last time I saw him, but was in no obvious distress. His vital signs were stable. He is currently afebrile. His head and neck exam was benign. No nodes. No thyromegaly. Cardiac exam is normal. His abdominal exam showed some midline scar but no obvious tenderness or masses. He has normoactive bowel sounds. A rectal exam was guaiac negative with brown stool. No masses. His prostate is somewhat large. His legs show no tenderness. No evidence of DVT. Adequate distal pulses. He is hard of hearing but his neurologic exam was otherwise non-local. His back is non-tender.

DIAGNOSTIC DATA: His laboratory studies obtained thus far include a white count which has fallen from 24,000 to 11,000. His hemoglobin is 10.6 with a low MCV and a high RDW consistent with an iron deficiency anemia. His PT/INR was 3.3. Electrolytes initially included a potassium of 3.0 which has since been corrected. No liver function tests are available. Blood cultures are negative.

ASSESSMENT/PLAN: From a GI standpoint, Edward does not clearly have recurrent disease; although it is highly likely that his disease may have recurred. We have no proof currently that he has any residual disease in his body.

His current symptoms are somewhat atypical. Differential diagnoses is broad but it could include peptic ulcer disease from his Advil. He could have esophagitis from reflux. A stricture or an outlet obstruction is possible, although the history is somewhat atypical for that. He may simply have advancing cancer in his upper abdomen which is making it more difficult for him to tolerate food. Symptoms don't suggest a small bowel obstruction. It is unlikely that these symptoms are a side effect of his chemotherapy since he had this 2½ weeks ago, and I am told by Dr. Schneiderman that this chemotherapy rarely causes nausea and vomiting.

8676 d: 04/24/2000 17:35 dam t: 04/25/2000 18:36

PT.NAME: CEDZIDLO, EDWARD

UNIT#: 001457191

ACCT#: 201300211

At this time, I would recommend checking his liver function tests to look for evidence of metastatic disease. I have explained the risks and benefits of an upper endoscopy and possible dilatation to Edward and his wife. We will perform this procedure around noon tomorrow.

If his symptoms persists and the above evaluation is negative, I would consider a small bowel x-ray or a CT scan of his abdomen.

At this time it is not clear to me how or why Reglan would work. I would consider discontinuing this.

His Prevacid may be useful if he is able to continue to make acid. I would continue this for the time being.

Thank you very much for allowing us to see this interesting gentleman.

dam PRINTED:G:\MEDWORD\MEDDB\MASTREPT\0131\04252000\0244748.WPD 04/25/00
19:48

"Document not considered final until review/verification or at 72 hours."

Electronic Signature

David P. Gerard, M.D.

8676 d: 04/24/2000 17:35 dam t: 04/25/2000 18:36

**Good Samaritan Hospital
Department of Pathology**

Surgical Pathology Report

Location: GI LAB
Med. Rec. #: 000042059
Billing #: 101589711
Birth Date/Age/Sex: 10/17/1926 (Age: 73) M

Specimen #: AS99-10570
Patient: CEDZIDLO, EDWARD
Physician: David Gerard, M.D.
Henry Wienke, M.D.

Date Specimen Collected: 12/29/99
Date Specimen Received: 12/29/99
Date & Time Reported: 12/30/99 12:52

Clinical Information:

Specimen(s) Submitted:
Biopsy gastric (mid) ulcer mass

Final Pathologic Diagnosis:

Biopsy, gastric ulcer:
Moderate to poorly differentiated adenocarcinoma (see Comment).

TC-1

Comment: The specimen underwent RUSH processing, and the results telephonically communicated to Dr. David Gerard at 1525 on 12/29/1999. The specimen has undergone intradepartmental peer review.

jmw

William E. Wilkens, M.D.
** Electronic Signature (WEW) **

Pre-Operative Diagnosis:
Weight loss, nausea.

Post-Operative Diagnosis:
Ulcer, gastric mass.

Gross Description:
The specimen is received in formalin labeled "biopsy, gastric (mid ulcer mass)." The specimen consists of six pieces of pink-tan tissue measuring from 0.4 to 0.2 cm in greatest dimension. The entire specimen is submitted in one cassette for microscopic examination. (ak)

jmw/WDD

Microscopic Description:

The attending pathologist whose signature appears on this report has reviewed the diagnostic slides and has edited the gross and/or microscopic portion of the report in rendering the final microscopic diagnosis.

**Good Samaritan Hospital
Department of Pathology**

Surgical Pathology Report

Location: UNIT 53
Med. Rec. #: 000042059
Billing #: 101655744
Birth Date/Age/Sex: 10/17/1926 (Age: 73) M

Specimen #: AS00-388
Patient: CEDZIDLO, EDWARD
Physician: Henry Wienke, M.D.
David Gerard, M.D.

Date Specimen Collected: 1/14/00
Date Specimen Received: 1/14/00
Date & Time Reported: 1/18/00 08:10

Clinical Information:

Specimen(s) Submitted:

A: Stomach
B: Additional margins of stomach

Final Pathologic Diagnosis:

Stomach (partial gastrectomy):

Poorly differentiated adenocarcinoma (measuring 9.0 x 5.5 cm) on the mucosal surface, but also extending widely into the muscularis propria and extending directly into the attached omentum; direct extension to the visceral peritoneum; focal microscopic extension to the duodenum (lamina propria); proximal and distal surgical resection margins free of tumor.

Macrometastasis present in 22 of 22 perigastric lymph nodes.

Separately submitted additional resection margin of stomach; mild architectural atypia of glands at the gastroesophageal junction; no frank malignancy.

TC-1

AJCC Pathologic Staging: T3, N3, MX; Clinical Stage Grouping: Stage IV.

Comment: This tumor is quite large and appears to arise slightly distal to the mid portion of the stomach. Although there is a large mucosal ulcer, the tumor is seen to also extend within the muscle wall of the stomach both proximally and distally for quite some distance. The gastric wall in this area is very rigid and thickened. Histologically, the tumor is poorly differentiated but continues to form small glands and small sheets in most areas. Although there is some single cell infiltration, this is not the dominant pattern of growth and signet ring cells are quite rare.

There is widespread lymphatic and vascular invasion in the wall of the stomach and in the attached omentum. There are numerous metastatic nodules in the greater and lesser omentum, which by convention are considered lymph node metastasis. Multiple lymphatic and vascular implants are noted in the fat.

The tumor extends deeply into the gastric muscle wall and penetrates to the subserosal tissue plane in many areas. There are focal areas with tumor breaching the gastric serosa (visceral peritoneum).

jmw

William D. Dwyer, M.D.
** Electronic Signature (WDD) **

Pre-Operative Diagnosis:

Cancer of stomach.

Post-Operative Diagnosis:

Cancer of stomach.

Intraoperative Consultation Diagnosis:

PORTION OF STOMACH: PROXIMAL & DISTAL MARGINS FREE OF TUMOR.

Gross Description:

The specimen is received in the fresh state labeled "stomach, please check margins." The specimen consists of a subtotal gastrectomy consisting of approximately the distal half or two thirds of the stomach and includes a short segment of small bowel just distal to the pyloric valve. The specimen measures approximately 27.0 cm along the greater curvature and 12.0 cm along the lesser curvature. There is omental fat adherent to the greater curvature, and there is nodularity consistent with tumor within the omental fat in multiple locations. Also noted on the external surface of the stomach in the mid portion of the specimen is small punctate nodularity somewhat suggestive of serosal tumor. The mucosa at the proximal and distal surgical resection margins appears normal. There is no exudate on the external surface. There is no gross evidence of perforation. The segment of omental fat adherent to the greater curvature measures 18.0 x 5.0 x 3.5 cm.

Upon opening the stomach there is a large mucosal ulcer which appears nearly circumferential measuring approximately 9.0 cm x 5.5 cm. This is located approximately in the mid portion of the stomach 6.0 cm from the distal resection margin. It is approximately 8.0 cm from the proximal resection margin. The wall of the stomach is rigid beneath the ulcer and the wall's rigidity extends some distance away from the ulcer. There appears to be direct extension through the muscle into the adhered omental fat along the greater curvature. The muscle wall at the proximal and distal resection margins is without nodularity or gross evidence of malignancy. Samples of the proximal and distal surgical resection margin are submitted for frozen section analysis labeled FS1 through FS5. Sections 1, 2 and 5 are from the distal resection margin, and sections 3 and 4 are from the proximal resection margin.

Representative samples of the specimen are submitted for microscopic examination as follows: Cassettes A6 through A10, tumor from the mucosal ulcer; cassettes A11 through A13, thickened and rigid gastric wall from areas of stomach proximal to the ulcer; cassettes A14 through A16, grossly normal appearing gastric mucosa and wall from proximal portion of stomach; cassette A17 and A18, additional sections from the proximal resection margin; cassettes A19 and A20, additional sections from the distal resection margin; cassettes A21 through A24, tumor deposits from adhered omentum greater curvature; cassettes A25 through A29, perigastric lymph nodes from the lesser curvature; cassette A30, serosal surface, posterior; cassette A31, serosal surface, anterior.

Specimen B is labeled "additional margin of stomach." The specimen consists of a donut measuring 2.0 cm in external diameter and 0.8 cm in inner diameter. Through the specimen is a line of metallic sutures. The surface is pink-purple and hemorrhagic. The specimen is sectioned and representative parts are submitted in cassette B1 (ak)

jmw/WDD

Microscopic Description:

The attending pathologist whose signature appears on this report has reviewed the diagnostic slides and has edited the gross and/or microscopic portion of the report in rendering the final microscopic diagnosis.

PHONE 312/739-5461-62

20 W 740 N. FRONTAGE ROAD

R.R. #3

LEMONT, ILLINOIS 60439

NAME M^r. OedzidLo

DATE 6/16/70

19

ADDRESS 2652 Hobson

CITY Downers Grove, Ill

PHONE 968-5960

WELL SIZE 4 1/2

WELL DEPTH 150'

CASED TO

WATER LEVEL 76'

SIDE PULL

PUMP SETTING 100'

QUANTITY	DESCRIPTION	PRICE PER UNIT	COST
1	1/2 HP 230 volt Reda pump		200.00
	allowance		45.00
	balance		,155.00
1	4 1/2 x 1" well seal		6.00
1	1 1/4 x 1" check valve		6.50
1	Brass adapter with clamp		1.80
	Labor		60.00
	Back hoe	v	25.00
	5% tax on materials		8.46
	Total		262.76
	less second allowance		55.00
	Balance due		\$207.76

#781
Jul 7, 1970

PHONE 312/739-5461-64

20 W 740 N. FRONTAGE ROAD

R.R. #3

LEMONT, ILLINOIS 60439

NAME M. Oedzidlo DATE 6/16/70 19

ADDRESS 2652 Hobson

CITY Downers Grove, Ill PHONE 968-5960

WELL SIZE 4 1/2

WELL DEPTH 150'

CASED TO

WATER LEVEL 76'

SIDE PULL

PUMP SETTING 100'

QUANTITY	DESCRIPTION	PRICE PER UNIT	COST
1	1/2 HP 230 volt Reda pump		200.00
	allowance		45.00
	balance		,155.00
1	4 1/2 x 1" well seal		6.00
1	1 1/4 x 1" check valve		6.50
1	Brass adapter with clamp		1.80
	Labor		60.00
	Back hoe	v	25.00
	5% tax on materials		8.46
	Total		262.76
	less second allowance		55.00
	Balance due		\$207.76

#781
 Jul 7, 1970