**IMMUNOHISTOCHEMISTRY, HODGKINS VS NON HODGKINS LYMPHOMA PANEL**

<table>
<thead>
<tr>
<th>IHC MARKER(S)</th>
<th>RESULT</th>
</tr>
</thead>
<tbody>
<tr>
<td>CD3</td>
<td></td>
</tr>
<tr>
<td>CD15</td>
<td></td>
</tr>
<tr>
<td>CD20</td>
<td></td>
</tr>
<tr>
<td>CD30</td>
<td></td>
</tr>
<tr>
<td>EPITHELIAL MEMBRANE ANTIGEN (EMA)</td>
<td></td>
</tr>
</tbody>
</table>

**SLIDE NO:**

**SPECIMEN:**

**CLINICAL HISTORY:**

**GROSS:**

**IMPRESSION:**

**ADvised:**

**INTERPRETATION**

<table>
<thead>
<tr>
<th>RESULT</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non immunoreactive</td>
<td>0</td>
</tr>
<tr>
<td>Immunoreactive in 1-25% cells</td>
<td>1+</td>
</tr>
</tbody>
</table>
Immunoreactive in 26-50% cells  
2+  
Immunoreactive in 51-75% cells  
3+  
Immunoreactive in 76-100% cells  
4+

**Clinical Use**
The panel is useful in the differential diagnosis & typing of Hodgkin’s & Non-Hodgkin’s lymphoma.

**Comments**

**CD3:** It stains all T cells from the stage of late thymocytes. It is positive in all T cell neoplasms and some Natural killer cell neoplasms.

**CD15:** Positivity is associated with Hodgkin’s lymphoma. It stains cell membranes and / or Golgi bodies of Reed Sternberg cells in most cases of Hodgkin’s lymphomas, large cells in some B & T cell lymphomas and some Myeloid leukemias. Some Adenocarcinomas are also CD15 positive and this can be utilized for distinction from Mesotheliomas.

**CD20:** Predominantly stains cell membranes of B cells. Positivity is seen in most B cell Lymphomas, L & H cells in Nodular Lymphocyte Predominance Hodgkin’s Lymphoma, some Reed Sternberg cells in classic Hodgkin’s lymphoma and rarely in T cell lymphomas. Plasma cell neoplasms are usually non-reactive. Some Thymomas may also show positive staining.

**CD30:** It is a marker for activated T & B cells which stains cell membranes and / or Golgi bodies. It is characteristically positive in Classical Hodgkin’s lymphoma, Anaplastic large cell lymphomas and occasional cases of Peripheral T cell and Large B cell lymphomas. Embryonal carcinoma is frequently CD30 positive. Activated mesothelium and some Mesotheliomas may also stain positive.

**Epithelial Membrane Antigen (EMA):** It is an excellent marker for most normal and neoplastic epithelia but is not restricted to them. It is also expressed by Mesotheliomas, Meningiomas and Mesenchymal neoplasms. It also shows positivity, in normal and neoplastic perineurial cells.
NOTE:

1. Detection system used is Polymer HRP
2. Clone for CD20 - L26 - Mouse Monoclonal
3. The impression is based on the material submitted and is not a complete surgical pathology report.
4. False negative IHC results due to inadequate fixation of the material sent for evaluation cannot be excluded.

FIXATION REQUIREMENTS

A. The volume of formalin fixative should be at least 10 times the volume of the specimen.
B. Decalcification solutions with strong acids should not be used. Specimens should be immersed in fixative within 1 hour of the biopsy / resection procedure (time of removal & time of immersion to be mentioned)
D. In all resection (large) specimens, the tumour must be bisected prior to immersion in fixative.