EXTREMELY WELL DIFFERENTIATED CARCINOMA

Supplementary Table S4. Retrospecitve comparative analysis of misdiagnosed pretreatment biopsies

Case No.	Original diagnosis	Revised diagnosis	Reasons fo diagnoses	r missed
2	Hyperplastic foveolar epithelium showing dysplasia	Gastric-type EWDA	Mistaken as foveolar epithel	* * *
3	A few atypical hyperplasite gland clusters, favor reactive Markedly hyperplastic atypical gastric foveolar glands with mild nuclear atypia, favor Menetrier's disease	A few atypical hyperplasite gland clusters, suggestive of adenocarcinoma well differentiated Markedly hyperplastic atypical gastric foveolar glands with mild nuclear atypia, suggestive of adenocarcioma, well differentiated		hyperplastic ium hyperplastic
6	Atypical glandular proliferation	Gastric-type EWDA	Mistaken as	foveolar
7	Chronic active gastritic, marked, with intestinal metaplasia, regenerating atypia and scar	Atypical fundic type glandular proliferation with structural atypia, suggestive of adenocarcinoma, well differentiated	epithelium Mistaken as atypia	regeneration
11	Atypically dilated glands in erosive background	Adenocarcinoma, very well differentiated	Mistaken as dil glands	ated foveolar
12	Atypical metaplastic glands in erosion, favor reactive	Gastric-type EWDA	Mistaken as glands	metaplastic
	Dilated benign-looking glands in thick disorganized muscularis mucosa, suggestive of gastritis cystica profunda	Gastric-type EWDA	Mistaken as gas profunda	stritis cystica
13	Chronic gastritis, mild with atrophy and foveolar epithelial hyperplasia	Gastric-type EWDA	Mistaken as foveolar epithel	hyperplastic ium

EWDA, extremely well-differentiated adenocarcinoma.