**Radiology Report**

**Created Date:** 21/04/2020

**Study Done:**

**CT CHEST-CONTRASTClinical information:62 year old male with carcinoma tongue;To rule out**

**metastasis.**

No discrete nodules seen in the lungs.

No significant lymph nodes.

The hila are normal.

The tracheobronchial tree is normal.

Normal lung parenchyma.

No pleural pathology.

Chest wall is normal.

Visualized vertebrae shows degenerative changes.

**Impression:**

• N**o discrete lung nodules.**

**RADIOLOGY REPORT**

**Created Date:** 21/04/2020

**Study Done:**

**MRI HEAD AND NECK(PLAIN AND CONTRAST)**

**Clinical information** : Case of ca.tongue(T4aN1Mx).

An enhancing lesion (measuring 3.92x2.36x3.7cm) seen along right lateral border of anterior and mid third of

the oral tongue and is involving the tip of tongue and is seen just crossing midline. Lesion is seen extending into

undersurface of tongue and sublingual space. Mylohyoid is free.

Enalrged lymph nodes are noted in level I a and right level II(largest measuring12x10mm).

Pharynx and larynx appear normal.

Bilateral submandibular and parotid salivary glands are normal.

Neck vessels are normal.

Cervical spine appear normal.

Polypoidal mucosal thickening noted in right maxillary sinus.

**Impression:**

• Enhancing lesion along right lateral border of anterior and mid third of the oral tongue and is

involving the tip of tongue and seen just crossing midline. Lesion is seen extending into

undersurface of tongue and sublingual space. Mylohyoid is free.

• Enalrged level I a and right level II lymph nodes.

**SURGICAL PATHOLOGY REPORT**

**Date of sample collection :** 23/04/2020

**Received on :** 23/04/2020

**Reported Date :** 28/04/2020

**Clinical Impression :**

Carcinoma Right tongue

**Gross Description :**

Received in fresh is a specimen labelled as "Anterior soft tissue ", consist of 3 haemorrhagic grey white tissue

largest measuring 0.5x0.3x0.2cm, Smallest measuring 0.3x0.2x0.2cm. Entire specimen submitted.

Frozen read as "No malignancy seen"

One section

Subsequently received formalin are 13 specimens. Ist specimen labelled as "WLE Double tie anterior , single

short - Left side, single long- Right side", consists of portion of tongue whole measuring 5cm (Anterior to

posterior)x4cm (Medial to lateral)x3.2cm (Superior to inferior). Raw surface is inked and serially slicing from

anterior to posterior. On the Right lateral anterior aspect of the tongue shows a grey white ulceroproliferative

lesion measuring 3.5cm (Anterior to posterior)x2cm (Superior to inferior)x2cm (Medial to lateral) and a

leucoplakic patch seen on the Right postero lateral aspect of the tongue adjacent to the lesion measuring

1.5x.6cm. Seen abutting the posterior inked margin. The lesion is seen grossly abutting the mid line but not

crossing. Depth of the lesion is 1.8cm. Right lateral aspect shows salivary gland tissue. The lesion is at a

distance of

1.5cm anterior mucosal and soft tissue margin

1.6cm from Right lateral mucosal and soft tissue margin

1cm from left lateral soft tissue margin

1.5cm from posterior mucosal and soft tissue margin

0.3cm from the inferior deep inked margin

Representative sections are submitted as follows:-

A1-Anterior mucosal and soft tissue margin Radial

A2-Right lateral and soft tissue margin (Radial)

A3-Left lateral soft tissue margin

A4-Posterior mucosal and soft tissue with leucoplakic path

A5-Inferior deep inked margin (Radial)

A6-Lesion with maximum depth

A7-A10-Lesion proper

Specimen 2 labelled as "Level Ia'". consists of nodular fibrofatty tissue measuring 3.5x3x1cm. Entire specimen

submitted in B1 to B3 cassettes.

Specimen 3 labelled as "Right level Ib", consists of nodular fibrofatty tissue in aggregate measuring 4x3.5x1cm.

2 Lymph node identified largest measuring 1.5x1x1cm. Salivary gland tissue identified. Representative sections

are submitted C1 to C3 cassettes.

C1-Largest lymph node bisected

C2-1 Lymph node bisected

C3-Salivary gland tissue bit

Specimen 4 labelled as "Left IB", consists of multiple nodular fibrofatty tissue measuring 5x2x2cm.1 Lymph

node identified. largest measuring 1.2x0.7x0.7cm. Representative sections are submitted D1 to D3 cassettes.

D1-1 Lymph node bisected

D2-D3-Salicarty gland

Specimen 5 labelled as "Right level IIa", consists of multiple fibrofatty tissue measuring 4x2.5x1cm. Grossly 3

lymph nodes identified largest measuring 1cm in greatest dimension. Smallest measuring 0.6cm in greatest

dimension. Entire specimen submitted in E1 to E5 cassettes.

E1-E2 Largest lymph node bisected

E3- 1 Lymph node bisected

E4-1 Lymph node bisected

E5-Fibrofatty tissue

Specimen 6 labelled as "Left level IIa", consists of nodular fibrofatty tissue measuring 3.5x2x1cm. 3 Lymph

nodes identified largest measuring 2.7x0.5x1cm. Smallest measuring 0.5cm. Entire specimen submitted in F1 to

F4 cassettes.

F1-Largest lymph node bisected

F2-1 Lymph node

F3-1 Lymph node

F4-Fibrofatty tissue

Specimen 7 labelled as "Right level IIB", consists of nodular fibrofatty tissue measuring 3.5x1x1cm.3 lymph

nodes identified largest measuring 2.7x0.5x1cm. Smallest measuring 0.5cm in greatest dimension. Smallest

measuring 0.5cm in greatest dimension. Entire specimen submitted in G1 & G2 cassettes.

Specimen 8 labelled as "Left Level IIB", consists of single nodular fibrofatty tissue measuring 2x1.5x0.5cm. No

lymph node identified. Entire specimen submitted in cassette H.

Specimen 9 labelled as "Right level III", consists of nodular fibrofatty tissue measuring 5.5x3x1.5cm.5 Lymph

nodes identified largest lymph node measuring 1.5x1x0.5cm. Smallest measuring 0.5cm. Representative sections

are submitted in J1 to J3 cassettes.

J1-Largest lymph node bisected

J2-2 Lymph nodes

J3-2 Lymph nodes

Specimen 10 labelled as "Left level III", consists of nodular fibrofatty tissue measuring 2.5x2x1cm. Grossly 2

lymph node identified. Largest measuring 1.8x1x0.6cm. Entire specimen submitted in K1 to K3 cassettes.

K1-Largest lymph node bisected

K2-1 node bisected

K3-Fibrofatty tissue

Specimen 11 labelled as "Right level IV", consists of nodular fibrofatty tissue 2 lymph node identified. Largest

measuring 1.5x1x0.7cm. Smallest measuring 0.5cm in greatest dimension. Entire specimen submitted in L1 to

L4 cassettes.

L1-Largest nodule bisected

L2-1 node bisected

L3-L4-Fibrofatty tissue

Specimen 12 labelled as "Left level IV", consists of nodular fibrofatty tissue measuring 3.5x1.5x1cm. 3 Lymph

nodes identified largest measuring 0.7cm , Smallest measuring 0.5cm in greatest dimension. Entire specimen

submitted in M1 to M3 cassettes.

M1-3 Lymph nodes

M2-M3-Fibro fatty tissue

Specimen 13 labelled as "Right sublingual gland", consists of nodular fibrofatty tissue whole measuring

2.5x2x0.6cm. Mo lymph node identified . Salivary gland identified. Entire specimen submitted in N1 & N2

cassettes.

**Microscopic Description :**

Frozen permanent confirms the frozen report.

A) Wide Local excision:

Section studied from tongue shows an infiltrating neoplasm arising from the mucosa composed of tumour cells

arranged in nests, lobules cords and trabeculae. Individual cells have moderate eosinophilic cytoplasm with

round to oval vesicular nucleoli and prominent nucleoli, exhibiting mild pleomorphism. Extensive keratin

production and keratin pearls seen. Dense peritumoral lymphoid infiltrate is seen at the interface.

Adjacent salivary gland tissue is free of tumour

- Tumour is not infiltrating the skeletal muscle

- No LVE /PNI noted

- The lesion is away from all the mucosal and soft tissue margins except inferior deep inked margin which

appears close

B) Level I a - 0/1 Lymph nodes - free of tumour

C) Right level Ib - 0/2 lymph node - free of tumour

Salivary gland - Free of tumour

D) Left Ib - 0/2 Lymph nodes - free of tumour

Salivary gland- free of tumour

E) Right level II A - 0/3 lymph node - free of tumour

F) Left level II A - 0/5 lymph nodes - free of tumour

G) Right level II B - 0/5 lymph nodes - Free of tumour

H) Left level II b - 0/2 lymphnodes - free of tumour

J) Right level II - 0/6 lymphnodes - Free of tumour

K) Left level III - 0/4 lymph nodes - Free of tumour

L) Right level IV - 0/7 lymph nodes - Free of tumour

M) Left Level IV - 0/3 lymph nodes - Free of tumour

N) Right Sub lingual gland - salivary gland tissue - Free of tumour

Total lymph nodes - 0/40 lymph nodes - Free of tumour

**Impression :**

WLE tongue + Bilateral lymphnode dissection

- Well differentiated squamous cell carcinoma, tongue

- Tumour size - 3.5x2x2cm

- Depth of invasion - 1.8cm

- No LVE /PNI seen

- LHR - score 0 (dense respose)

- WPOI - Pattern 3, Score 0

- Risk group (0) - (low risk)

- Margins - All margins are free of tumour, except inferior deep inked margin which is close <3mm

- Lymph nodes - 0/40 reactive nodes - free of tumour

pT3N0 (AJCC- 8th edition)

|  |
| --- |
| **HEAD AND NECK - TUMOUR BOARD** |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **TB Date:**  22/04/2020 | | |
|  | **Tumour Type:** Primary | | |
| |  | | --- | | **Presenting Complaints: Ulcer** | |  | | **Descriptive History and Examination:**  62 year old gentleman, resident of ANGAMALY, engineer by profession h/o altered speech since 7 months difficulty swallowing since 3-4 months occasional pain no oral bleed/neck swelling S+ o/e: KPS 90 mouth opening adequate ulcerative lesion over the right tongue 5x3cm, involving the tip, induration crossing midline, FOM involved. Neck: palpable IIA node. | |  | | | | | |
|  | | | | |
| |  | | --- | | **Co-Morbidities: Diabetes Mellitus, Hypertension** | |  | | **Comments:**  DM on insulin HTN on medications demyelinating motor ulnar neuropathy with sensory motor axonal neuropathy. | | | | | |
| **Descriptive Plan:**  Carcinoma Tongue cT4aN2cMx Imaging: SMG duct orifice involved, sublingual gland free, B/L nodes + Plan: WLE + B/L (Levels I-IV) + STF v/s FAMM Flap 29.04.2020: WLE + B/L SND(I-IV) + FAMM flap under ga on 23-04-2020. final HPER awaited | |  |
|  | |  |

**Progress Notes**

**Date : 20/04/2020**

**ProgressNotes :**

K/C/O DM, HTN

Ca tongue was planned for WLE under GA, - postponed in v/o lockdown, now come here for Sx

Completed 14 days of quarantine

Presently no c/o cough, fever, sore throat

BP-160/100, temp-N

CVS/RS-n

Adv- Throat swab for covid- after report only clearance for Sx can be given.

Service:

16/04/2020

Swab and Viral Transport Medium for respiratory sample collections

The result informed to us over the phone by the Govt Authorities and tole to be negative.

Plan: In view of the semi emergent nature of the disease,

completion of the 14 day quarantine period

and the negative swab culture

advised to proceed with the surgery under standard precautions.

**Operative Notes**

**Date : 23/04/2020**

**ProgressNotes :**

Diagnosis:

Carcinoma Right Tongue(Tip) cT3N2cM0

Surgery:

WLE + B/L SND(I-IV) + FAMM flap under ga on 23-04-2020.

Findings:

4x3cm Ulcerative growth involving the Right tip of the tongue reaching the Floor of the mouth, crossing

midline.

B/L Significant nodes seen at level-IB, II & III.

Procedure:

Nasotracheal intubation done and patient was taken under ga with sterile and aseptic precautions.

Patient positioned, cleaned and draped.

WLE:

Bite block inserted on left side.

Betadine f/b Normal saline wash given.

4x3cm Ulcerative growth involving the Right tip of the tongue reaching the Floor of the mouth, crossing

midline. BOT free from growth .

Taking adequate margins wide local excision done.

Defect size was 6x4cm

Hemostasis acheived.

Defect was repaired with FAMM flap.

FAMM Flap:

Right side Facial artery course marked with doppler on the buccal mucosa.

5x3cm size flap was marked preserving the parotid duct opening.

Incision was made in the marked area.

Distal branches of the facial artery identified and clipped.

Flap elevated till the lower part near alveolus.

Neck incision made, facial artery and Facial vein preserved.

Marginal mandibular nerve preserved.

Pedicle was freed with soft tissue attachments.

Flap was brought into the oral cavity medial to the mandible and Insetted to the defect.

Donor side was repaired with buccal fat pad.

B/L Selective neck dissection:

Skin crease incision made.

Subplatysmal flaps elevated superiorly till angle of mandible, inferiorly till clavicle.

Ipsilateral and contralateral anterior belly of digastric muscle defined.

Fibrofatty tissue from the level-Ia taken and sent for hpe.

Left Facial artery and common facial vein identified and ligated.

Left side Significant 1x1cm peri-facial lymph nodes and level-Ib fibrofatty tissue along with submandibular

gland removed in toto and sent for hpe.

External jugular vein identified and preserved.

Left Sternomastoid retracted laterally- ijv, carotids and spinal accessory nerves preserved.

Left Level-IIa, IIB, III and IV lymphnodes and fibrofatty tissue removed and sent for hpe seperately.

Hemostasis acheived.

Same steps repeated on right side.

Right facial artery and Facial vein preserved.

Valsalva given to check bleeding- no active bleeding seen.

14# romovac drain secured.

Wound closed in layers.

Patient shifted to 41 ICU for immediate post op care.

**Progress Notes**

**Date : 01/10/2020**

**ProgressNotes :**

DIAGNOSIS : Carcinoma Right Tongue(Tip) cT3N2cM0

PROCEDURE DONE : WLE + B/L SND(I-IV) + FAMM flap under GA on 23-04-2020.

HPR : pT3N0

Agreed Plan of management : Adj.RT

patient has taken RT at GH

o/e

NED

Adv

r/a 3 months

radiation onco

**Progress Notes**

**Date : 14/05/2020**

**ProgressNotes :**

HTN sive and Diabetic on Medications.

No previous surgeries

S Reformed 2 years, Reformed drinking 10 years ago.

Presented with non healing ulcer on the right side if tongue, following dental trauma since September 2019.

Came here fo further evaluation and management.

MRI done here-An enhancing lesion (measuring 3.92x2.36x3.7cm) seen along right lateral border of anterior

and mid third of the oral tongue and is involving the tip of tongue and is seen just crossing midline. Lesion is

seen extending into undersurface of tongue and sublingual space. Mylohyoid is free.

Enalrged lymph nodes are noted in level I a and right level II(largest measuring12x10mm)

CT Chest-Normal.

O/E-Ulcerative lesion over the right tongue 5x3cm, involving the tip, induration crossing midline, FOM

involved. Neck: palpable IIA node.

Underwent-WLE + B/L SND(I-IV) + FAMM flap under GA on 23-04-2020.

Per Op

Findings: 4x3cm Ulcerative growth involving the Right tip of the tongue reaching the Floor of the mouth,

crossing midline. B/L Significant nodes seen at level-IB, II & III.

HPE-- Well differentiated squamous cell carcinoma, tongue

- Tumour size - 3.5x2x2cm

- Depth of invasion - 1.8cm

- No LVE /PNI seen

- LHR - score 0 (dense respose)

- WPOI - Pattern 3, Score 0

- Risk group (0) - (low risk)

- Margins - All margins are free of tumour, except inferior deep inked margin which is close <3mm

- Lymph nodes - 0/40 reactive nodes - free of tumour

pT3N0 (AJCC- 8th edition)

Referred for RT here.

o/E-ECOG-1

Afebrile.

Mouth opening adequate

Oral cavity-Flap healthy.

Dental clearance-Done.

IMp-Ca Right Lat Border of Tongue pT3N0.

CT Sim-21.05.2020.

RT Start-01.06.2020.

FIC for Tomo with IV contrast.

Bloods on 21.05.2020