|  |
| --- |
| **Radiology Report** |

|  |  |  |
| --- | --- | --- |
| |  | | --- | | **Created Date:**  28/10/2015 | |  | |
|  |
| |  | | --- | | **Study Done:**  **CT HEAD AND NECK - CONTRAST**    Soft tissue mass involving right inferior buccogingival sulcus extending to adjacent alveolus at the level of last molars and retromolar trigone. Lesion extends into the medullary cavity of mandible though the empty molar sockets. Subtle bony erosion also noted on the adjacent lingual aspect of bony cortex of mandible on right side.  Floor of mouth and tongue appear  free.  Nasopharynx and oropharynx appears normal.  Suparglottis ,glottis and subglottis appears normal.  Carotid and jugular vessels appears normal.  Multiple rounded lymphnodes seen in level Ia , right level Ib and II.  Both parotid and submandibular salivary glands appears normal,.  Cervical spine show severe osteoprosis  with minimal collapse of C7 and D1 vertebral body.  Neuroparenchyma within the scan region appears normal. | |  | |
|  |
| |  | | --- | | **Impression:**   * **Soft tissue mass involving right inferior buccogingival sulcus posteriorly extending to adjacent alveolus and  retromolar trigone with cortical erosion of the mandible.** * **Suspicious level Ia, right level II adenopathy.** * **Needs Biopsy correlation.** | |

|  |
| --- |
| **Radiology Report** |

|  |  |  |  |
| --- | --- | --- | --- |
| |  | | --- | | **Created Date:**  28/10/2015 | |  | | |
|  | |
| |  | | --- | | **Study Done:**  **CT CHEST - CONTRAST**    Nodular pleural thickening noted in posterior aspect of both upper lobes and right lower lobe.  No pleural effusion.  Lung fields appears clear.  No significant mediastinal adenopathy.  Great vessels appears normal.  Bony thorax show evidence of severe osteoporosis.  Liver show subtle surface nodularity and caudate hypertrophy .Gall bladder appears normal.  Both adrenal glands appears normal.  Tiny cortical cysts seen in right kidney. | |  | | |
|  | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Impression:**   * **Minimal nodular thickening of pleura bilaterally?Inflammatory** * **Liver show caudate hypertrophy with surface nodularity- to exclude chronic hepatic parenchymal disease.**  |  | | --- | | **SURGICAL PATHOLOGY REPORT** |  |  |  |  | | --- | --- | --- | | |  | | --- | |  | |  | | |  | | |  |  | | --- | --- | |  |  | | |  | | |  |  | | --- | --- | |  |  | | |  | | |  |  | | --- | --- | | **Date of sample collection :**  29/10/2015 |  | | |  | | |  | | --- | | **Received on :**  30/10/2015 | | |  | | |  |  | | --- | --- | |  | **Reported Date :**  31/10/2015 | |  |  |  |  | | --- | --- | --- | | |  | | --- | | **Clinical Impression :**  ?carcinoma | |  | | |  |  |  |  |  | | --- | --- | --- | | |  | | --- | | **Gross Description :**  Received in formalin is a specimen consists of punch biopsy measuring 1x0.5x0.5cm. Entire specimen submitted in one cassette. (Dr Anne/AS/gb) | |  | | |  |  |  |  |  | | --- | --- | --- | | |  | | --- | | **Microscopic Description :**  Sections show mucosa exhibiting moderate dysplasia to focal carcioma in-situ with an infiltrating tumor composed of nests, tongues and singly scattered malignant squamous cells. The cells exhibit moderate nuclear pleomorphism and moderate amount of eosinophilic cytoplasm. Few mitoses, stromal desmoplasia and secondary chronic inflammation are present. | |  | | |  |  |  |  | | --- | --- | | |  | | --- | | **Diagnosis :**  Biopsy from Right buccal mucosa- Moderately differentiated Squamous cell carcinoma. | | | | |
| **SURGICAL PATHOLOGY REPORT** |

|  |  |  |
| --- | --- | --- |
| |  |  | | --- | --- | | **Date of sample collection :**  11/11/2015 |  | |
|  |
| |  | | --- | | **Received on :**  11/11/2015 | |
|  |
| |  |  | | --- | --- | |  | **Reported Date :**  13/11/2015 | |

|  |  |  |
| --- | --- | --- |
| |  | | --- | | **Gross Description :**  Received in formalin are 3 specimens. Ist specimen labelled as "Segmental mandibulectomy specimen with tumour with level I B & massetor muscle" oriented with sutures double stich anterior & single long lateral", consists of mandible with tumour, mucosa, soft tissue, muscle whole measuring 10x9x4cm. Two tooth identified in the anterior side. soft tissue is inked. There is an ulcerated lesion in the alveolus measuring 3.5x2.5x1.3cm. The tumor is 1.2cm from posterior mucosal margin, 0.6cm from superior lateral mucosal margin, 2.5cm from anterior margin, 0.6cm from inferior mucosal margin. Soft tissue:- 0.9cm from lateral soft tissue margin, 4cm from medial soft margin, 3cm from anterior soft tissue margin, 4cm from posterior soft tissue margin, 3cm from superior soft tissue margin, 6cm from inferior soft tissue margin Bony margin:- 2.5cm from anterior bony margin, 5.5cm from posterior bony margin, 5.5cm from massetor muscle, 6 lymph nodes identified. Largest measuring 2.1cm in greatest dimension. Representative sections are submitted as follows:- A1-Posterior shaved soft tissue A2-Medial shaved soft tissue margin A3-Superior shaved soft tissue margin A4-A5-Lateral shaved soft tissue margin A6-Inferior shaved soft tissue margin A7-Anterior shaved soft tissue margin A8-A9-Lateral soft tissue with masseter muscle A10-Anterior mucosal margin A11-Superior medial radial margin with lesion A12-Posterior radial mucosal margin with lesion A12-Posterior radial mucosal margin with lesion A13-Inferio lateral radial mucosal margin with lesion A14-A15-Lymph nodes level IB A14-1 lymph node A15-1 lymph node A16-1 lymph node A17-salivary gland A18-A21-Lesion A22-2 lymph nodes A23-1 lymph node AFB1- anterior bony margin AFB2- posterior bony margin AFB3- 10- tumor with bone Specimen 2 labelled as "Right level Ia", consists of an fibrofatty tissue measuring 6x4x1cm. 6 Lymph nodes identified. largest measuring 0.6cm in greatest dimension. Representative sections are submitted B1 to B5 cassettes. B1-Largest lymph nodes B2-2 Lymph nodes B3-B5-1 lymph node each Specimen 3 labelled as "Right level II,III,IV, consists of fibrofatty tissue measuring 10x5x4cm. 12 lymph nodes identified largest measuring 1.5cm. Representative sections are submitted as follows:- C1-C2-Largest lymph node C3-1 Lymph node C4-1 lymph node C5-1 lymph node C6-1 lymph node C7-1 lymph node C9-2 lymph nodes C10-1 lymph node C11-2 lymph nodes | |  | |
|  |

|  |  |  |
| --- | --- | --- |
| |  | | --- | | **Microscopic Description :**  Type of specimen: WLE specimen with tumor+marginal mandibulectomy Histological type: Sections show mucosa with an infiltrating well to moderately differentiated Squamous cell carcinoma. Invasive front: Cohesive. Tumor size- 3.5x2.5x1.3cm. Maximum depth of invasion: 1.2cm. Vascular invasion- present Nerve invasion -present. Bone invasion - Present Margins: The tumor is 1cm from posterior mucosal, 0.5cm from superomedial mucosal, 2.5cm from anterior mucosal, 0.6cm from inferior mucosal margins; 0.9cm from lateral soft tissue, 4cm from medial, 3cm form anterior, 4cm from posterior, 3cm from superior, 6cm from inferior soft tissue margins. Bone margins - free of tumor. Lymph nodes: "Right level IA": Six lymph nodes, free of tumor. "Right level II, III, IV": Nine lymph nodes, free of tumor. | |  | |
|  |

|  |  |
| --- | --- |
| |  | | --- | | **Diagnosis :**  Type of specimen: WLE specimen with tumor+marginal mandibulectomy Histological type: Squamous cell carcinoma Differentiation : Well to moderate Invasive front: Cohesive Tumor size- 3.5x2.5x1.3cm Maximum depth of invasion: 1.2cm Vascular invasion- present Nerve invasion -present Bone invasion - Present Margins: The tumor is 1cm from posterior mucosal, 0.5cm from superomedial mucosal, 2.5cm from anterior mucosal, 0.6cm from inferior mucosal margins; 0.9cm from lateral soft tissue, 4cm from medial, 3cm form anterior, 4cm from posterior, 3cm from superior, 6cm from inferior soft tissue margins Bone margins - free of tumor. Lymph nodes: "Right level IA": Six lymph nodes, free of tumor. "Right level II, III, IV": Nine lymph nodes, free of tumor. pTNM stage pT4aN0 | |

|  |  |
| --- | --- |
| **Date of Admission :**08/11/2015 | **Date of Procedure :**09/11/2015 |

|  |
| --- |
| **Date of Discharge :**28/11/2015 |

|  |
| --- |
|  |

|  |
| --- |
| **Discharging Status :**FOLLOW UP DISCHARGE SUMMARY |

|  |
| --- |
| **DIAGNOSIS :** |
| Carcinoma buccal mucosa |

|  |
| --- |
| **PROCEDURE DONE :** |
| Wide Local Excision of Right Buccal Mucosa and GB sulcus (Via Lower Cheek Flap) + Segmental Mandibulectomy + Right Neck Dissection (Level I - IV) + Right PMMC flap + Tracheostomy under GA on 9/11/15 |

|  |
| --- |
| **HISTORY :** |
| h/o non-healing lesion over the right lower jaw since 3 months. no associated complaints. No difficulty opening the mouth or blood stained saliva. biopsy (outside)- moderate dysplasia. OPG done. habits: nil comorbidity: abdominal TB, osteoprosis, bronchial asthma, myopathy. |

|  |
| --- |
| **CLINICAL EXAMINATION :** |
| Mouth opening adequate proliferative lesion right lower alveolus, posterior to the last molar and 0.5 cm short of the RMT. Extending to the lingual aspect of alveolus. FOM free. abutting the GBS, BM free. mild induration+ neck: no nodes felt |

**INVESTIGATIONS :**

**Haemogram:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date:** | **Hb: g/dl** | **PCV: %** | **PLT: ku/ml** | **TC: ku/ml** | **DC: N %** | **L: %** | **E: %** | **ESR: mm/1st hr** |
| 08/11/2015 | 9.93 | 31.7 | 280 | 8.41 | 53.2 | 32.4 | 4.20 | - |
| 10/11/2015 | 9.3 | 28.4 | 298 | 18.1 | 83.0 | 10.6 | 0.1 | - |
| 11/11/2015 | 7.9 | 24.6 | 230 | 15.1 | 85.2 | 9.0 | 0.0 | - |
| 12/11/2015 | 8.7 | 26.5 | 183 | 13.5 | 82.0 | 11.4 | 0.2 | - |
| 13/11/2015 | 8.9 | 27.2 | 168 | 16.2 | 88.5 | 7.5 | 0.0 | - |
| 14/11/2015 | 9.8 | 30.5 | 227 | 17.4 | 84.6 | 8.6 | 0.0 | - |
| 15/11/2015 | 9.10 | 28.7 | 255 | 15.4 | 73.5 | 18.6 | .071 | - |
| 16/11/2015 | 9.9 | 30.6 | 327 | 13.6 | 70.1 | 21.8 | 0.8 | - |
| 17/11/2015 | 9.7 | 29.9 | 314 | 13.4 | 75.3 | 17.3 | 0.2 | - |
| 18/11/2015 | 9.5 | 28.8 | 341 | 11.4 | 70.0 | 23.5 | 0.6 | - |
| 19/11/2015 | 9.25 | 29.3 | 345 | 12.6 | 70.8 | 21.5 | .880 | - |
| 20/11/2015 | 9.87 | 29.7 | 251 | 8.65 | 82.8 | 10.4 | 1.41 | - |
| 21/11/2015 | 9.9 | 30.4 | 346 | 13.5 | 82.1 | 14.5 | 0.1 | - |

**Liver Function Test:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date:** | **T. Bilirubin: mg/dl** | **D. Bilirubin: mg/dl** | **SGOT: IU/L** | **SGPT: IU/L** | **ALP: IU/L** | **T. Protein: gms/dl** | **S. Alb: g/dl** | **S. Glob: g/dl** |
| 08/11/2015 | 0.39 | 0.11 | 32.0 | 17.9 | 84.4 | 7.12 | 3.59 | 3.5 |

**Renal Function Test and Serum Electrolytes:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date:** | **Urea: mg/dl** | **Creatinine: mg/dl** | **Na+: mEq/L** | **K+: mEq/L** |
| 08/11/2015 | 32.0 | 1.48 | 133.6 | 4.3 |
| 10/11/2015 | - | - | 132.8 | 4.5 |
| 11/11/2015 | 31.6 | 1.41 | 132.9 | 4.8 |
| 12/11/2015 | - | - | 135.6 | 4.2 |
| 20/11/2015 | - | - | 134.0 | 3.6 |

Date: 21/11/2015

|  |  |
| --- | --- |
| RBC-COUNT-Blood : 3.48 M/uL | MCV-Blood : 87.3 fL |

|  |  |
| --- | --- |
| MCH-Blood : 28.4 pg | MCHC-Blood : 32.6 g/dl |

|  |  |
| --- | --- |
| RDW-Blood : 16.3 % | MPV-Blood : 7.0 fL |

|  |  |
| --- | --- |
| MONO -Blood : 2.9 % | BASO-Blood : 0.4 % |

Date: 20/11/2015

|  |  |
| --- | --- |
| RBC-COUNT-Blood : 3.28 M/uL | MCV-Blood : 90.6 fL |

|  |  |
| --- | --- |
| MCH-Blood : 30.1 pg | MCHC-Blood : 33.2 g/dl |

|  |  |
| --- | --- |
| RDW-Blood : 11.1 % | MPV-Blood : 4.91 fL |

|  |  |
| --- | --- |
| MONO -Blood : 4.60 % | BASO-Blood : .748 % |

Date: 19/11/2015

|  |  |
| --- | --- |
| RBC-COUNT-Blood : 3.50 M/uL | MCV-Blood : 83.6 fL |

|  |  |
| --- | --- |
| MCH-Blood : 26.4 pg | MCHC-Blood : 31.6 g/dl |

|  |  |
| --- | --- |
| RDW-Blood : 14.0 % | MPV-Blood : 4.84 fL |

|  |  |
| --- | --- |
| MONO -Blood : 6.12 % | BASO-Blood : .779 % |

Date: 18/11/2015

|  |  |
| --- | --- |
| RBC-COUNT-Blood : 3.34 M/uL | MCV-Blood : 86.3 fL |

|  |  |
| --- | --- |
| MCH-Blood : 28.5 pg | MCHC-Blood : 33.0 g/dl |

|  |  |
| --- | --- |
| RDW-Blood : 15.8 % | MPV-Blood : 6.6 fL |

|  |  |
| --- | --- |
| MONO -Blood : 5.7 % | BASO-Blood : 0.2 % |

Date: 17/11/2015

|  |  |
| --- | --- |
| RBC-COUNT-Blood : 3.50 M/uL | MCV-Blood : 85.4 fL |

|  |  |
| --- | --- |
| MCH-Blood : 27.7 pg | MCHC-Blood : 32.4 g/dl |

|  |  |
| --- | --- |
| RDW-Blood : 16.2 % | MPV-Blood : 7.2 fL |

|  |  |
| --- | --- |
| MONO -Blood : 6.3 % | BASO-Blood : 0.9 % |

Date: 16/11/2015

|  |  |
| --- | --- |
| RBC-COUNT-Blood : 3.58 M/uL | MCV-Blood : 85.4 fL |

|  |  |
| --- | --- |
| MCH-Blood : 27.6 pg | MCHC-Blood : 32.3 g/dl |

|  |  |
| --- | --- |
| RDW-Blood : 15.9 % | MPV-Blood : 7.1 fL |

|  |  |
| --- | --- |
| MONO -Blood : 6.4 % | BASO-Blood : 0.9 % |

Date: 15/11/2015

|  |  |
| --- | --- |
| RBC-COUNT-Blood : 3.45 M/uL | MCV-Blood : 83.3 fL |

|  |  |
| --- | --- |
| MCH-Blood : 26.4 pg | MCHC-Blood : 31.7 g/dl |

|  |  |
| --- | --- |
| RDW-Blood : 13.3 % | MPV-Blood : 5.08 fL |

|  |  |
| --- | --- |
| MONO -Blood : 7.05 % | BASO-Blood : .737 % |

Date: 14/11/2015

|  |  |
| --- | --- |
| CRP (C-reactive protein) : 161.2 mg/L | RBC-COUNT-Blood : 3.60 M/uL |

|  |  |
| --- | --- |
| MCV-Blood : 84.9 fL | MCH-Blood : 27.1 pg |

|  |  |
| --- | --- |
| MCHC-Blood : 32.0 g/dl | RDW-Blood : 16.0 % |

|  |  |
| --- | --- |
| MPV-Blood : 7.3 fL | MONO -Blood : 5.0 % |

|  |  |
| --- | --- |
| BASO-Blood : 1.8 % |  |

Date: 13/11/2015

|  |  |
| --- | --- |
| RBC-COUNT-Blood : 3.20 M/uL | MCV-Blood : 84.8 fL |

|  |  |
| --- | --- |
| MCH-Blood : 27.7 pg | MCHC-Blood : 32.7 g/dl |

|  |  |
| --- | --- |
| RDW-Blood : 15.6 % | MPV-Blood : 7.0 fL |

|  |  |
| --- | --- |
| MONO -Blood : 4.0 % | BASO-Blood : 0.0 % |

Date: 12/11/2015

|  |  |
| --- | --- |
| Troponin I : 0.010 ng/ml | CRP (C-reactive protein) : 211.7 mg/L |

|  |  |
| --- | --- |
| RBC-COUNT-Blood : 3.14 M/uL | MCV-Blood : 84.6 fL |

|  |  |
| --- | --- |
| MCH-Blood : 27.7 pg | MCHC-Blood : 32.7 g/dl |

|  |  |
| --- | --- |
| RDW-Blood : 14.5 % | MPV-Blood : 6.8 fL |

|  |  |
| --- | --- |
| MONO -Blood : 6.3 % | BASO-Blood : 0.1 % |

Date: 11/11/2015

|  |  |
| --- | --- |
| Troponin I : 0.015 ng/ml | Compatibility test; cross match complete (3 tests) : Compatible |

|  |  |
| --- | --- |
| RBC-COUNT-Blood : 2.90 M/uL | MCV-Blood : 84.8 fL |

|  |  |
| --- | --- |
| MCH-Blood : 27.2 pg | MCHC-Blood : 32.1 g/dl |

|  |  |
| --- | --- |
| RDW-Blood : 15.1 % | MPV-Blood : 6.6 fL |

|  |  |
| --- | --- |
| MONO -Blood : 5.7 % | BASO-Blood : 0.1 % |

|  |  |
| --- | --- |
| Troponin I : 0.033 ng/ml |  |

Date: 10/11/2015

|  |  |
| --- | --- |
| RBC-COUNT-Blood : 3.44 M/uL | MCV-Blood : 82.7 fL |

|  |  |
| --- | --- |
| MCH-Blood : 27.0 pg | MCHC-Blood : 32.7 g/dl |

|  |  |
| --- | --- |
| RDW-Blood : 15.6 % | MPV-Blood : 7.1 fL |

|  |  |
| --- | --- |
| MONO -Blood : 5.9 % | BASO-Blood : 0.4 % |

Date: 09/11/2015

|  |  |
| --- | --- |
| Compatibility test; cross match complete (3 tests) : Compatible | Creatine kinase (CK), Total-Serum : 398.5 U/L |

|  |  |
| --- | --- |
| Blood typing; ABO and RhD : O Rh D Positive | Glucose [R]-Plasma : 136.9 mg/dl |

|  |  |
| --- | --- |
| Magnesium : 1.7 mg/dl | TSH [Thyroid Stimulating Hormo-Serum : 6.5894 uIU/ml |

|  |  |
| --- | --- |
| T4 [Thyroxine] free-Serum : 0.72 ng/dl | Free T3-Serum : 1.64 pg/ml |

Date: 08/11/2015

|  |  |
| --- | --- |
| Corrected Calcium : 9.1 mg/dl | RBC-COUNT-Blood : 3.83 M/uL |

|  |  |
| --- | --- |
| MCV-Blood : 82.9 fL | MCH-Blood : 25.9 pg |

|  |  |
| --- | --- |
| MCHC-Blood : 31.3 g/dl | RDW-Blood : 13.5 % |

|  |  |
| --- | --- |
| MPV-Blood : 5.05 fL | MONO -Blood : 8.73 % |

|  |  |
| --- | --- |
| BASO-Blood : 1.38 % | HBs Ag Test - Emergency Screen : 0.24 : Non reactive |

|  |  |
| --- | --- |
| Anti HCV - Emergency Screen : 0.12 : Non reactive | HIV - Emergency Screen(P24 Ag and HIV 1 and 2 Ab) : 0.11 : Non reactive |

|  |
| --- |
|  |
| CT HEAD AND NECK - CONTRAST Soft tissue mass involving right inferior buccogingival sulcus extending to adjacent alveolus at the level of last molars and retromolar trigone. Lesion extends into the medullary cavity of mandible though the empty molar sockets. Subtle bony erosion also noted on the adjacent lingual aspect of bony cortex of mandible on right side. Floor of mouth and tongue appear free. Nasopharynx and oropharynx appears normal. Supraglottis ,glottis and subglottis appears normal. Carotid and jugular vessels appears normal. Multiple rounded lymphnodes seen in level Ia , right level Ib and II. Both parotid and submandibular salivary glands appears normal,. Cervical spine show severe osteoporosis with minimal collapse of C7 and D1 vertebral body. Neuroparenchyma within the scan region appears normal. Impression: \* Soft tissue mass involving right inferior buccogingival sulcus posteriorly extending to adjacent alveolus and retromolar trigone with cortical erosion of the mandible. \* Suspicious level Ia, right level II adenopathy. \* Needs Biopsy correlation. CT chest: normal |

|  |
| --- |
| **COURSE IN THE HOSPITAL AND DISCUSSION :** |
| Patient was admitted for surgery after preoperative evaluation and fitness. Patient withstood the procedure well. He was initially kept in the ICU for monitoring. He was kept on anticoagulants and supportive medications. He was started on Ryle's tube feeds gradually and increased. He was also evaluated by Pulmonology post-operatively and given chest physiotherapy. He was extubated. Superficial necrosis of the flap was noted for which debridement was done, however the bulk of the flap was healthy. Right neck drain volume was persistently high and he was noted to have a fistula in the lower part of the suture line. The drain was removed and the Ryle's tube was reinserted for feeding. The wound is now healthy with minimal discharge from the fistula site. All sutures have been removed and he is fit for discharge. |

|  |
| --- |
| **OPERATIVE FINDINGS :** |
| Findings: Tumour extent a the right buccal mucosa involved the buccinator and posteriorly the Lower ITF. Procedure: Under ET intubation, Patient in supine position. Painted and draped, Incision marked and infiltrated with lignocaine, Midline lip split made and right lower cheek flap raised. Wide excision Right sided tumour performed with the buccinator included as the lateral margin, the masseter was also included in the resection. Segmental Mandibulectomy performed between the level of sigmoid notch and medial to right canine tooth. A part of the Lingual nerve was included with the tumour specimen. Right selective neck dissection performed - horizontal Right Neck incision given and sub platysmal skin flaps raised and fixed with stay sutures. Clearance of level 1A done. Right Marginal mandibular nerve identified and dissected. Submandibular triangle clearance done after identifying facial vessels. Facial vessels dissected out from submandibular gland and preserved. Medial end of SCM identified and muscle separated exposing internal jugular vein. In level II spinal accessory nerve identified and separated. Level II B cleared. Next level IIA, III and IV cleared of lymph nodes and fibro fatty tissue. Hemostasis secured after Valsalva maneuver. Defect reconstructed with Right PMMC flap. skin paddle of 14x8 cms harvested and transferred into the defect and insetting doneinto the oral cavity. Chest wound closed in layers with drain in situ. Procedure uneventful. Neck closed in layers after placing drains |

|  |
| --- |
| **DIET RECOMMENDATIONS :** |
| High protein Ryle's tube feeds |

|  |
| --- |
| **PHYSICAL ACTIVITY :** |
| Normal |

|  |
| --- |
| **DISCHARGE MEDICATION :** |
| SALBUTAMOL Neb 1-0-1 BUDECORT Neb 1-0-0 Tab MINIPRESS-XL 2.5 mg 1-0-1 Tab EPILEX 200 mg 0-1-0 HEXIDINE mouthwash thrice a day To continue all previous medications |

|  |
| --- |
| **Tumour Board Discussion** |

|  |  |
| --- | --- |
| |  | | --- | | **Date of tumor board discussion :**  11/11/2015 | |
|  |

|  |  |  |
| --- | --- | --- |
| |  | | --- | | **Relevant clinical details :**  h/o non-healing lesion over the right lower jaw since 3 mths. no associated complaints. biopsy (outside)- moderate dysplasia. OPG done. habits: nil comorbidity: abdOminal TB, osteoprosis, bronchial asthma, myopathy, HTN o/e: mouth opening adequate proliferative lesion right lower alveolus, posterior to the last molar and 0.5 cm short of the RMT. Extending to the lingual aspect of alveolus. FOM free. abutting the GBS, BM free. mild induration+ neck: no nodes felt | |  | |
|  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Agreed Plan of management :**  WLE + segmental mandibulectomy + SND + PMMC + adjuvant therapy   |  | | --- | | **HPE Discussion** |  |  |  | | --- | --- | | |  | | --- | | **Date of tumor board discussion :**  30/12/2015 | | |  |  |  | | --- | |  |  |  |  |  | | --- | --- | --- | | |  | | --- | | **Histology (include histology done / reviewed elsewhere) :**  Diagnosis : Type of specimen: WLE specimen with tumor+marginal mandibulectomy Histological type: Squamous cell carcinoma Differentiation : Well to moderate Invasive front: Cohesive Tumor size- 3.5x2.5x1.3cm Maximum depth of invasion: 1.2cm Vascular invasion- present Nerve invasion -present Bone invasion - Present Margins: The tumor is 1cm from posterior mucosal, 0.5cm from superomedial mucosal, 2.5cm from anterior mucosal, 0.6cm from inferior mucosal margins; 0.9cm from lateral soft tissue, 4cm from medial, 3cm form anterior, 4cm from posterior, 3cm from superior, 6cm from inferior soft tissue margins Bone margins - free of tumor. Lymph nodes: "Right level IA": Six lymph nodes, free of tumor. "Right level II, III, IV": Nine lymph nodes, free of tumor. pTNM stage pT4aN0 | |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Agreed Plan of management :**  Adjuvant RT   |  | | --- | | **Progress Notes** |      |  | | --- | |  |      |  | | --- | | **Date of birth:**28/10/1932 |      |  | | --- | | **Date :**28/10/2015 |  |  | | --- | | **ProgressNotes :** | | Background issues noted From a lung perspective has minimal small airway obstruction & allergic rhinitis Adv: Avamys nasal spray Seroflo 250 1 puff BD can be continued His obesity will be a cause of increased post op respiratory risk, however this will be of mild to moderate severity only. Note the plan for MDCT HEAD & NECK & CHEST. can proceed with this as planned.   |  | | --- | | **Progress Notes** |      |  | | --- | |  |      |  | | --- | | **Date of birth:**28/10/1932 |      |  | | --- | | **Date :**05/01/2016 |  |  | | --- | | **ProgressNotes :** | | Fistula currettage and primary closure under GA on 5.1.2016 Procedure: under GA , under all aseptic precautions , fistula currettage done and intra oral opening of the fistula was opened via midline lip split incision and cheek flap approach and granulations removed and tongue mucosal flap was raised and sutured and primarily closed the opening of the chest site was debrided, granulations removed and primarily closed . Post procedure uneventful | | | |  | | | |