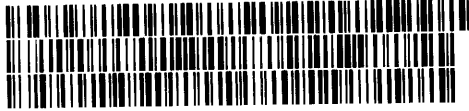


UUID:822BD117-8DF0-47FF-BE25-9FE2DA916DB6  
TCGA-XC-AA0X-01A-PR Redacted



MRN: [REDACTED]  
Patient: [REDACTED]  
Admission Date:  
Ordering Physician:

Sex/DOB: Female  
Discharge Date:

### Surgical Pathology Report

Collected Date/Time:  
Received Date/Time:

Accession Number: [REDACTED]

#### Final Diagnosis

**A. LUNG, RIGHT LOWER LOBE, LOBECTOMY:**

- INVASIVE AND IN SITU SQUAMOUS CELL CARCINOMA, 1.3 CM, SEE SYNOPTIC REPORT
- FOUR LYMPH NODES NEGATIVE FOR MALIGNANCY (0/4)

**B. LYMPH NODES, LEVEL 7, RESECTION:**

- THREE LYMPH NODES NEGATIVE FOR MALIGNANCY (0/3)

**C. LYMPH NODES, LEVEL 10, RESECTION:**

- FOUR LYMPH NODES NEGATIVE FOR MALIGNANCY (0/4)

**D. LUNG, RIGHT MIDDLE LOBE, WEDGE RESECTION:**

- LUNG WITH EMPHYSEMATOUS CHANGES, ALVEOLAR HEMORRHAGE

**E. LYMPH NODES, R4, RESECTION:**

- ONE LYMPH NODE NEGATIVE FOR MALIGNANCY (0/1)

**F. LYMPH NODE, R2, RESECTION:**

- ONE LYMPH NODE NEGATIVE FOR MALIGNANCY (0/1)

*ICD O-3  
Carcinoma, squamous cell  
Site: R Lung, lower lobe  
8070/3  
C84.3  
JW 2/24/14*

(Electronic signature)  
Verified:

#### Synoptic Report

SPECIMEN:

Lung

PROCEDURE:

Lobectomy

SPECIMEN INTEGRITY:

Intact

Printed by:  
Copied to:  
Distribute to:

Page 1 of 4

Print Date/Time:

Patient Locations:

MRN: [REDACTED]  
Patient: [REDACTED]

Sex/DOB: Female [REDACTED]

## Surgical Pathology Report

Collected Date/Time:  
Received Date/Time:

Accession Number: [REDACTED]

**SPECIMEN LATERALITY:**

Right

**TUMOR SITE:**

Lower lobe

**TUMOR SIZE:**

Greatest dimension: 1.3 cm

**TUMOR FOCALITY:**

Unifocal

**HISTOLOGIC TYPE:**

Squamous cell carcinoma

**HISTOLOGIC GRADE:**

G2: Moderately differentiated

**VISCERAL PLEURA INVASION:**

Not identified

**TUMOR EXTENSION:**

Tumor involves main bronchus 2 cm or more distal to the carina

**BRONCHIAL MARGIN:**

Cannot be assessed

**VASCULAR MARGIN:**

Cannot be assessed

**PARENCHYMAL MARGIN:**

Uninvolved by invasive carcinoma

**PARIETAL PLEURAL MARGIN:**

Not applicable

**CHEST WALL MARGIN:**

Not applicable

**TREATMENT EFFECT:**

Not applicable

**LYMPH-VASCULAR INVASION:**

Not identified

**PRIMARY TUMOR (pT):**

pT1a: Tumor 2 cm or less in greatest dimension, surrounded by lung or visceral pleura, without bronchoscopic evidence of invasion more proximal than the lobar bronchus (ie, not in the main bronchus); or

**REGIONAL LYMPH NODES (pN):**

pN0: No regional lymph node metastasis

Number examined: 13

Number involved: 0

**DISTANT METASTASIS (pM):**

Not applicable

**Source of Specimen**

- A Right Lower Lobe
- B Level 7
- C Level 10

MRN: [REDACTED]  
Patient: [REDACTED]

Sex/DOB: Female [REDACTED]

## Surgical Pathology Report

Collected Date/Time:  
Received Date/Time:

Accession Number: [REDACTED]

D Right Middle Lobe  
E R4  
F R2

### Clinical Information

PRE-OP DIAGNOSIS: Lung cancer

POST-OP DIAGNOSIS: Same

TYPE OF PROCEDURE: Bronchoscopy, right VATS. Removal right lower lobe

### Gross Description

Specimen is received in 6 parts:

A. The specimen is labeled "RIGHT LOWER LOBE" and is received unfixed. It consists of a lobe of the lung measuring 15 x 12 x 8 cm and weighing 280 g. The pleural surface is pink-purple and smooth and shows multiple anthracotic markings. The bronchial and vascular margins are stapled shut. The soft tissue margin of resection measuring 2 cm, 4 cm, 4.5 cm and 5 cm.

A 1.3 x 1.2 x 1.2 cm an ill-defined gray-tan mass is identified 2 cm away from the bronchial margin of resection and 3 cm away from the closest pleural surface. Pleural surface closest to the mass is covered with smooth surface without any papillary excrescences and is inked. Remaining portion of the lung shows dark red tan congested parenchyma without other lesions. At the hilum 0.7 x 0.7 x 0.5 cm and 0.6 x 0.6 x 0.5 cm lymph nodes are identified. Representative sections are submitted as follows:

A1 = bronchial and vascular margin of resection

A2 = soft tissue margin of resection

A3-A5 = mass, entirely submitted

A 6 = random section of the lung

A7 = 2 lymph nodes

A8 = closest pleural surface to the mass.

B. The specimen is labeled "LEVEL VII" and is received in formalin. It consists of 3 black tan lymph nodes ranging from 0.5 x 0.5 x 0.3 - 0.6 x 0.5 x 0.3 cm. Entirely submitted in cassette B1.

C. The specimen is labeled "LEVEL X" and is received in formalin. It consists of 4 black tan lymph nodes measuring 0.5 x 0.4 x 0.2-0.8 x 0.5 x 0.3 cm. Entirely submitted in cassette C1

D. The specimen is labeled "RIGHT MIDDLE LOBE" and is received in formalin. It consists of a wedge shaped piece of lung tissue measuring 3.5 x 1 x 0.7 cm which 3.5 cm stapled margin of resection. In the center portion 1 x 0.7 x 0.5 cm irregular fragmented area is noted which is 0.3 cm away from the stapled margin of resection which is inked red. Entirely submitted in cassettes D1-D2.

E. The specimen is labeled "R4" and is received in formalin. It consists of a single black lymph node measuring 2 x 0.7 x 0.6 cm. Sectioned and entirely submitted in cassette E1.

F. The specimen is labeled "R2" and is received in formalin. It consists of a single black tan lymph node measuring 0.7 x 0.5 x 0.5

MRN: [REDACTED]  
Patient: [REDACTED]

Sex/DOB: Female [REDACTED]

### Surgical Pathology Report

Collected Date/Time:  
Received Date/Time:

Accession Number: [REDACTED]

cm. Sectioned and entirely submitted in cassette F1.

Dictated by:

#### Special Stains / Slides

TTF-1: negative in tumor cells.

Napsin A: negative in tumor cells.

p63: positive in tumor cells.

INTERPRETATION: Squamous cell carcinoma.

Immunohistochemical studies were performed on formalin fixed, paraffin-embedded tissue (Block A3) with adequate positive and negative control sections.

The performance characteristics of these antibodies were determined by the

They have not been cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. These tests are used for clinical purposes. They should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA-88) as qualified to perform high-complexity clinical laboratory testing.

14 H&E, 3ihc

#### Tissue Code

Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HIPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary Noted		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	BTB	Date Reviewed: 12/11/13