

SPECIMEN

Extended right hemicolectomy

CLINICAL NOTES

PRE-OP DIAGNOSIS: Hepatic flexure cancer.

POST-OP DIAGNOSIS: Same.

GROSS DESCRIPTION

Received unfixed for tissue procurement, labeled "extended right hemicolectomy" is a portion of the ileum that is 9.5 cm in length, and 3 cm in circumference. There is an attached portion of colon that is 22 cm, which includes the cecum and ileocecal valve. The average circumference of the colonic portion of the specimen is 7.3 cm. Wall thickness is, on average, 0.4 cm. In the distal end of the colonic segment is a tumor that is circumferential, with raised, rolled edges and central ulceration, 9 x 4.2 cm in cross sectional area. The tumor mass is 5.7 cm from the distal margin, and 24 cm from the proximal ileal margin. The mass is 1 cm from the ileocecal valve. A portion of tumor and normal tissue is submitted for tissue procurement. Sectioning through the tumor shows subserosal invasion, but the mass does not reach the serosal surface. Representative sections submitted in 13 blocks as labeled. RS-13

BLOCK SUMMARY: 1 - proximal and distal margins; 2-4 - tumor full thickness to inked free radial serosal surface; 5 - tumor to normal mucosa; 6 - ICV; 7 and 8 - random colon; 9-11 - 9 whole lymph nodes per cassette; 12 - 8 whole lymph nodes; 13 - 1 bisected lymph node.

MICROSCOPIC DESCRIPTION

Histologic type: Adenocarcinoma

Histologic grade: Moderately-differentiated

Primary tumor (pT3): carcinoma invades through the muscularis propria into the subserosa.

Proximal/distal/circumferential margin: Negative

Distance of tumor from closest margin: 5.7 from distal margin

Vascular invasion: Not identified

Regional lymph nodes (pN0): 34 negative lymph nodes (0/34)

Non-lymph node pericolic tumor: not identified.

Comment: There is a small nodule of surface tumor submitted with lymph nodes; slide also reviewed by [REDACTED], who agrees with this interpretation.

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DIAGNOSIS

Colon, hepatic flexure, extended hemicolectomy:

Adenocarcinoma, moderately-differentiated, with invasion through the muscularis propria into the subserosa (pT3).

Margins of excision negative.

Angiolymphatic invasion not identified.

Thirty-four negative lymph nodes (0/34).