[redacted]

SPECIMEN INF[redacted]

Collected:
Received:
Reported:

Acct / Reg [redacted]

SURGICAL PATHOLOGY REPORT

DIAGNOSIS

DIAGNOSIS:
Lung, right upper lobe; lobectomy:

Tumor Characteristics:

1. Histologic type: Predominantly squamous cell carcinoma with focal glandular differentiation, see comment.
2. Histologic grade: Moderately to poorly differentiated.
3. Tumor site: Right upper lobe.
4. Tumor focality: Unifocal.
5. Tumor size: 4.2 x 4.0 x 2.3 cm.
6. Visceral pleural invasion: Present.
7. Lymphovascular space invasion: Present.
8. Tumor extension: Tumor is limited to the pulmonary parenchyma.
9. Treatment effect: Not identified

Surgical Margin Status:

1. Tumor distance from bronchial margin: 7.0 cm.
2. Tumor distance from parenchymal (stapled) margin: 4.0 cm.
3. Tumor distance from pleural surface: Tumor invades the pleura.

Lymph Node Status:

1. Total number of lymph nodes received: 1 peribronchial node.
2. Total number of lymph nodes containing metastatic carcinoma: 0 (0/1).

Other:

1. Emphysematous changes.
2. pTNM stage: pT2a N0.

Electronic Signature: [redacted]

COMMENTS:
Histologic sections show large mass in the right upper lobe which has predominantly squamous differentiation. Focal areas are poorly differentiated, and other areas suggest a glandular morphology consistent with a mixed adenosquamous component, however majority of the tumor is a squamous cell carcinoma.

CLINICAL INFORMATION

CLINICAL HISTORY:
Preoperative Diagnosis: [redacted] year old male with spontaneous pneumothorax, right upper lobe lung cancer
Postoperative Diagnosis:
Symptoms/Radiologic Findings:

SPECIMENS:
Right upper lobe lung

SPECIMEN DATA

GROSS DESCRIPTION:
The specimen is received in a single formalin-filled container labeled with the patient's name, [redacted] "right upper lobe," and consists of a 15.0 x 10.0 x 4.0 cm, lung lobe. The pleura is purple-gray and smooth to shaggy. A 2.0 x 2.0 cm, area of umbilication is present. This area is inked blue. Located on the opposite aspect of the specimen from the umbilication is a 6.5 x 4.0 cm area of exposed beefy red parenchyma, which bears multiple exposed segments of vasculature and bronchi. The largest bronchus is 1.0 cm in length by 0.7 cm in diameter. The bronchial and vascular margins are taken en face, and the exposed parenchyma is inked black. The bronchi are opened to reveal a pink-tan, striated endothelium. No discrete endobronchial masses are identified. A 1.0 cm black, anthracotic nodule is identified, consistent with peribronchial lymph node. Extending from one edge of the exposed parenchyma and involving one edge of the specimen is an 11.0 cm in length serpiginous stapled parenchymal margin. The staple line is removed and the underlying parenchyma is inked black. The specimen is serially sectioned to reveal a 4.2 x 4.0 x 2.3 cm, ill-defined, yellow-gray mass that abuts the pleura at the site of umbilication. Additionally, this mass approaches to within 4.0 cm of the serpiginous stapled margin, 5.5 cm of the exposed parenchyma, and 7.0 cm from the closest exposed bronchial margin. The remainder of the cut surface is beefy red and congested with areas of emphysematous change. No additional masses are identified. Representative sections are submitted in cassettes 1-8, labeled designated as follows: 1-2 – bronchial and vascular margins, en face; 3 – bisected possible lymph node and exposed parenchyma, perpendicular; 4 – stapled parenchymal margin, perpendicular; 5-6 – mass to include pleura umbilication, perpendicular; 7 – mass to normal; 8 – areas of emphysematous change.

Additionally, a yellow, a green, and a blue cassette are submitted for genomics research, each labeled [redacted]