
PATIENT HISTORY:

CHIEF COMPLAINT/PRE-OP/POST-OP DIAGNOSIS: Malignant neoplasm mouth.
PROCEDURE: Partial glossectomy, right neck dissection.
SPECIFIC CLINICAL QUESTION: Not answered
OUTSIDE TISSUE DIAGNOSIS: Not answered.
PRIOR MALIGNANCY: Not answered.
CHEMOTHERAPY: Not answered.
ORGAN TRANSPLANT: Not answered.
IMMUNOSUPPRESSION: Not answered.
OTHER DISEASES: Not answered.

FINAL DIAGNOSIS:**PART 1: TONGUE, RIGHT, HEMIGLOSSECTOMY –**

- A. INVASIVE SQUAMOUS CELL CARCINOMA, MODERATELY DIFFERENTIATED (3.5 CM, 1.2 CM THICK).
- B. ANGIOLYMPHATIC INVASION AND PERINEURAL INVASION PRESENT.
- C. MARGINS FREE OF TUMOR (see Parts 2 through 6).
- D. PATHOLOGIC STAGE: pT2 N2b.

**PART 2: TONGUE, DORSAL ANTERIOR, EXCISION –
NO TUMOR PRESENT.**

**PART 3: TONGUE, DORSAL POSTERIOR, EXCISION –
NO TUMOR PRESENT.**

**PART 4: FLOOR OF MOUTH, POSTERIOR, EXCISION –
NO TUMOR PRESENT.**

**PART 5: FLOOR OF MOUTH, ANTERIOR, EXCISION –
NO TUMOR PRESENT.**

**PART 6: SOFT TISSUE, DEEP MARGIN, EXCISION –
NO TUMOR PRESENT.**

**PART 7: "LYMPH NODES", RIGHT NECK LEVEL 1B, SELECTIVE DISSECTION –
UNREMARKABLE SUBMANDIBULAR GLAND, NO TUMOR PRESENT; NO LYMPH NODES PRESENT.**

**PART 8: LYMPH NODE, RIGHT NECK LEVEL 1A, SELECTIVE DISSECTION –
TWO (2) LYMPH NODES, NO TUMOR PRESENT (0/2).**

PART 9: LYMPH NODES, RIGHT LEVELS 2-4, SELECTIVE DISSECTION –

- A. METASTATIC SQUAMOUS CELL CARCINOMA IN TWO (2) OF THIRTY-FOUR (34) LYMPH NODE, NO EXTRACAPSULAR SPREAD (2/34).
- B. LARGEST LYMPH NODE METASTASIS: 1.7 CM.

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COMMENT:

Ancillary studies will be performed and reported as an addendum.

My signature is attestation that I have personally reviewed the submitted material(s) and the final diagnosis reflects that evaluation.

GROSS DESCRIPTION:

The specimen is received in 9 parts.

Part 1 is received fresh with the patient's name, initials [REDACTED] and "right hemiglossectomy, stitch anterior". It consists of a partial hemiglossectomy, 5.5 x 3.8 x 2.0 cm, with a black suture identifying the anterior aspect. One half of the specimen surface is covered by tan-pink roughened mucosa and the opposite half is roughened tan brown due to cautery artifact.

On the mucosal surface, there is a 3.5 x 1.5 cm red tan-brown to gray white ulcerated granular lesion 0.3 cm from the nearest resection margin. Sectioning reveals a thickness of 1.2 cm with a firm white cut surface with central areas of hemorrhage and possible necrosis. The remaining tissue is yellow, lobulated, and unremarkable.

Ink code:

Red- where tumor is banked
Black- underlying soft tissue

Digital images are taken. A portion of the specimen is submitted for tissue banking.

Representative sections are submitted as follows:

1A-D- random sections of tumor and adjacent unininvolved tissue, anterior to posterior

Part 2 is received fresh with the patient's name, initials [REDACTED] and "dorsal anterior tongue". It consists of a 1.0 x 0.4 x 0.2 cm gray-white to yellow brown soft tissue fragment. The specimen is submitted in toto for frozen intraoperative consult and permanent embedding in cassette 2AFS.

Part 3 is received fresh with the patient's name, initials [REDACTED] and "dorsal posterior tongue". It consists of two pieces, 0.7 x 0.5 x 0.3 cm and 1.1 x 0.5 x 0.2 cm, of gray white to yellow soft tissue. The specimen is submitted in toto for frozen intraoperative consult and permanent embedding in cassette 3AFS.

Part 4 is received fresh with the patient's name, initials [REDACTED] and "posterior floor of mouth". It consists of a 1.0 x 0.3 x 0.2 cm tan-brown soft tissue fragment. The specimen is submitted in toto for frozen intraoperative consult and permanent embedding in cassette 4AFS.

Part 5 is received fresh with the patient's name, initials [REDACTED] and "anterior floor of mouth". It consists of a 1.3 x 0.5 x 0.3 cm tan-brown soft tissue fragment. The specimen is submitted in toto for frozen intraoperative consult and permanent embedding in cassette 5AFS.

Part 6 is received fresh with the patient's name, initials [REDACTED], and "deep margin". It consists of a 1.4 x 0.7 x 0.4 cm tan-brown soft tissue fragment. The specimen is submitted in toto for frozen intraoperative consult and permanent embedding in cassette 6AFS.

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Part 7 is received fresh with the patient's name, initials [REDACTED] and "right neck level 1B". It consists of a 4.0 x 3.0 x 1.5 cm yellow tan lobulated soft tissue fragment weighing 11g. Sectioning reveals an unremarkable yellow-tan to pink firm nodular cut surface (possible glandular tissue) with focal areas of hemorrhage. Digital images are taken. Representative sections are submitted in cassettes 7A-C.

Part 8 is received fresh with the patient's name, initials [REDACTED] and "right neck level 1A." It consists of a 5.8 x 3.7 x 1.0 cm tan-yellow lobulated glistening soft tissue fragment. Sectioning reveals a few possible tan-pink lymph nodes, 0.3 to 0.5 cm in greatest dimension. The possible lymph nodes are submitted in cassettes 8A-B.

Part 9 is received fresh with the patient's name, initials [REDACTED], and "right neck levels 2 through 4". It consists of four, 1.5 x 1.0 x 0.5 cm to 14.0 x 4.0 x 1.0 cm, un-oriented tan yellow lobulated glistening soft tissue fragments randomly divided into three equal parts designated I, II, and III.

Sectioning part I reveals a few possible tan-pink lymph nodes, 0.2 to 0.7 cm in greatest dimension.

Sectioning part II reveals a few possible tan-pink lymph nodes, 0.5 to 1.9 cm in greatest dimension.

Sectioning part III reveals a few possible tan-pink lymph nodes, 0.5 to 1.7 cm in greatest dimension.

Representative sections are submitted as follows:

9A-B- part I, possible lymph nodes

9C-D- part II, possible lymph nodes

9E-I- part III, possible lymph nodes

INTRAOPERATIVE CONSULTATION:

2AFS: DORSAL ANTERIOR TONGUE, MARGIN, SHAVE (frozen section)

A. BENIGN

B. NO TUMOR PRESENT [REDACTED]

3AFS: DORSAL POSTERIOR TONGUE, MARGIN, SHAVE (frozen section)

A. BENIGN

B. NO TUMOR PRESENT [REDACTED]

4AFS: POSTERIOR FLOOR OF MOUTH, MARGIN, SHAVE (frozen section)

A. BENIGN

B. NO TUMOR PRESENT [REDACTED]

5AFS: ANTERIOR FLOOR OF MOUTH, MARGIN, SHAVE (frozen section)

A. BENIGN

B. NO TUMOR PRESENT [REDACTED]

6AFS: DEEP MARGIN, SHAVE (frozen section)

A. BENIGN

B. NO TUMOR PRESENT [REDACTED]

MICROSCOPIC:

Microscopic examination substantiates the above diagnosis.

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The following statement applies to all immunohistochemistry, insitu hybridization (ISH & FISH), molecular anatomic pathology, and immunofluorescence testing:

The testing was developed and its performance characteristics determined by the [REDACTED] Department of Pathology, as required by the [REDACTED] regulations. The testing has not been cleared or approved for the specific use by the U.S. Food and Drug Administration, but the FDA has determined such approval is not necessary for clinical use. Tissue fixation ranges from a minimum of 2 to a maximum of 84 hours.

This laboratory is certified under the Clinical Laboratory Improvement Amendments of [REDACTED] ("CLIA") as qualified to perform high-complexity clinical testing. Pursuant to the requirements of CLIA, ASR's used in this laboratory have been established and verified for accuracy and precision. Additional information about this type of test is available upon request.

CASE SYNOPSIS:

SYNOPTIC DATA - PRIMARY UPPER AERODIGESTIVE TRACT AND SALIVARY GLAND TUMORS

SPECIMEN TYPE: Resection: hemiglossectomy

TUMOR SITE: Oral Cavity

TUMOR SIZE: Greatest dimension: 3.5 cm

HISTOLOGIC TYPE: Additional dimensions: 1.2 thick cm

HISTOLOGIC GRADE: Squamous cell carcinoma, conventional

PRIMARY TUMOR (pT): G2

REGIONAL LYMPH NODES (pN): pT2

Number of regional lymph nodes examined: 2

Number of regional lymph nodes involved: 36

Extra-capsular extension of nodal tumor: Absent

DISTANT METASTASIS (pM): pMX

MARGINS: Margins uninvolved by tumor

VENOUS/LYMPHATIC (LARGE/SMALL VESSEL) INVASION (V/L): Present

PERINEURAL INVASION: Present

HISTO TISSUE SUMMARY/SLIDES REVIEWED:

Part 1: Right Hemi-Glossectomy, Sttch Anterior

Stain/cnt Block

H&E x 1 A

H&E x 1 B

H&E x 1 C

H&E Recut x 1 D

IHPV x 1 D

cmet x 1 D

IEGFR x 1 D

IBNKNC x 1 D

H&E x 1 D

P16 x 1 D

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V-EGFR x 1 D

Part 2: Dorsal Anterior Tongue

Stain/cnt Block
H&E x 1 AFS

Part 3: Dorsal Posterior Tongue

Stain/cnt Block
H&E x 1 AFS

Part 4: Posterior Floor of Mouth

Stain/cnt Block
H&E x 1 AFS

Part 5: Anterior Floor of Mouth

Stain/cnt Block
H&E x 1 AFS

Part 6: Deep Margin

Stain/cnt Block
H&E x 1 AFS

Part 7: Right Neck Level 1B

Stain/cnt Block
H&E x 1 A
H&E x 1 B
H&E x 1 C

Part 8: Right Neck Level 1A

Stain/cnt Block
H&E x 1 A
H&E x 1 B

Part 9: Right Neck Levels 2 through 4

Stain/cnt Block
H&E x 1 A
H&E x 1 B
H&E x 1 C
H&E x 1 D
H&E x 1 E
H&E x 1 F
H&E x 1 G
H&E x 1 H
H&E x 1 I

[REDACTED]

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[REDACTED]

ICD-9 Diagnosis Codes: {None Entered}

[REDACTED]