



Collection Date:

FINAL DIAGNOSIS:

PART 1: THYROID, TOTAL THYROIDECTOMY (27 GRAMS) - $\geq 99\%$ per TSS.

- A. PAPILLARY THYROID CARCINOMA, ENCAPSULATED FOLLICULAR VARIANT (2.5 CM) WITH EXTENSIVE POST ASPIRATE DEGENERATIVE CHANGES, CONFINED TO THE ISTHMUS.
- B. NO (tumoral-) CAPSULAR OR TRUE ANGIOLYMPHATIC INVASION (see comment).
- C. ONE (1) ISTHMIC LYMPH NODE, NO TUMOR PRESENT (0/1).
- D. PATHOLOGIC STAGE pT2 N0.

PART 2: PARATHYROID, LEFT INFERIOR, PARATHYROIDECTOMY (143 MG) - SLIGHTLY ENLARGED BUT NORMOCELLULAR PARATHYROID.

COMMENT:

There is a fragment of degenerated hemorrhagic tumor in a vessel that appears to have been displaced by the fine needle aspiration. Foci such as these are generally not regarded as true vascular invasion.

CASE SYNOPSIS:

SYNOPTIC DATA - PRIMARY THYROID TUMORS

SPECIMEN TYPE:	Total Thyroidectomy
TUMOR SITE:	Isthmus
TUMOR FOCALITY:	Unifocal
TUMOR SIZE (largest nodule):	Greatest Dimension: 2.5 cm
HISTOLOGIC TYPE**:	Papillary carcinoma, encapsulated follicular variant
PRIMARY TUMOR (pT):	pT2
REGIONAL LYMPH NODES (pN):	pN0
	Number of regional lymph nodes examined: 1
	Number of regional lymph nodes involved: 0
DISTANT METASTASIS (pM):	Not applicable
EXTRATHYROIDAL EXTENSION:	Not identified
MARGINS:	Margins uninvolved by carcinoma
LYMPH-VASCULAR INVASION:	Indeterminate

1CD-0-3

Carcinoma, papillary, follicular variant 8340/3
Site: thyroid, NOS c73.9

lw
9/29/12

Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
ICD/A Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary Malignancy		<input checked="" type="checkbox"/>
Case is (circle): QUALIFIED / DISQUALIFIED		<input checked="" type="checkbox"/>
Reviewer Initials	Date Reviewed: 8/29/2012	