

Report Type rt
Date of Event
Sex
Authored by
Hosp/Group
Record Status

PATIENT HISTORY:

Laryngeal cancer

PRE-OP DIAGNOSIS: Laryngeal cancer.

POST-OP DIAGNOSIS: Same.

CEDURE: Right laryngoscopy; bilateral neck dissection.

FINAL DIAGNOSIS:

PART 1: SUPRAGLOTTIC LESION, RIGHT, BIOPSY
INVASIVE SQUAMOUS CELL CARCINOMA.PART 2: LYMPH NODE, RIGHT ZONE 2B, BIOPSY
ONE BENIGN LYMPH NODE (0/1).PART 3: NECK, RIGHT LEVELS 2,3 AND 4, DISSECTION
TWENTY-NINE BENIGN LYMPH NODES (0/29).PART 4: NECK, LEFT LEVELS 2,3 AND 4, DISSECTION
TWENTY-FOUR BENIGN LYMPH NODES (0/24).

PART 5: LARYNX, TOTAL LARYNGECTOMY

A. SUPRAGLOTTIC INVASIVE MODERATELY DIFFERENTIATED SQUAMOUS
CELLCARCINOMA, 4.8 CM, WITH INVASION OF PRE-EPIGLOTTIC AND PARAGLOTTIC
SPACES AND

INVASION THROUGH THYROID CARTILAGE AND INTO ANTERIOR SOFT TISSUE.

B. ANGIOLYMPHATIC INVASION IS PRESENT.

C. NO PERINEURAL INVASION IS SEEN.

D. ALL RESECTION MARGINS ARE FREE OF TUMOR.

E. RIGHT LOBE OF THYROID FREE OF TUMOR.

PATHOLOGIC STAGE; T4 N0 MX.

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, M.D.

** Report

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M.D.

My si tation that I have personally reviewed the
submitted
material(s) and the final diagnosis reflects that evaluation.

GROSS DESCRIPTION:

The specimen is received in 5 parts.

Part 1 is received fresh labeled with the patient's name, initials xx
and"right supraglottic lesion". Received are 2, irregular, soft to
rubbery, tan,

tissue biopsies each measuring 0.7 x 0.5 x 0.4 cm. A touch prep is performed with an intraoperative diagnosis completed. The specimen is entirely submitted for processing in a cassette labeled 1A.

Part 2 is received fresh labeled with the patient's name, initials xx and "right zone 2B node". Received is a single, tan, oval, soft to rubbery, lymph node measuring 0.5 x 0.3 x 0.3 cm. The specimen is inked, bisected and entirely submitted for processing in a cassette labeled 2A.

Part 3 is received fresh labeled with the patient's name, initials xx and "right neck level 2, 3, and 4". Received is an irregular unoriented 13 x 4.5 x 1.3 cm right selective neck dissection, presumably lymph node levels 2 through 4 without an orienting suture. Neck dissection is divided equally into 3 segments. The measurements for the lymph node-containing soft tissue levels are as follows: Level A-4.2 X 3.5 X 1.5 cm, level B- 4.3 x 4 x 1.0 cm, and level C- 4 x 3.2 x 1.5 cm. Multiple lymph nodes, ranging from 0.2 to 2.0 cm in greatest dimension are identified. Several of the larger lymph nodes appear to be tumor involved and are present in greater numbers within level A.

Lymph nodes are entirely submitted in cassettes labeled:

- 3A - level A - six possible lymph nodes
- 3B - level A-six possible lymph nodes
- 3C - level A -single bisected lymph node
- 3D - level A single bisected lymph node
- 3E - level B- seven possible lymph nodes
- 3F - level C-9 possible lymph nodes

Part 4 is received fresh labeled with the patient's name, initials xx and "left neck level 2, 3 and 4". Received is an irregular unoriented 11.5 x 6 x 1.2 cm left selective neck dissection, presumably lymph node levels 2 through 4 without an orienting suture. Neck dissection is divided equally into 3 segments. The measurements for the lymph node-containing soft tissue levels are as follows: Level A-4.3 X 3.5 X 1.25 cm, level B- 5.5 x 3.1 x 0.8 cm, and level C- 4 x 3 x 1.2 cm. Multiple lymph nodes, ranging from 0.2 to 2.0 cm in greatest dimension are identified. Several of the larger lymph nodes appear to be tumor involved and are present in greater numbers within level A. Lymph nodes are entirely submitted in cassettes labeled:

- 4A - level A - four possible lymph nodes
- 4B - level A- single possible lymph node
- 4C level B- seven lymph node

4D level B - one lymph node

4E - level C- eight possible lymph nodes

4F - level C-three possible lymph nodes

Part 5 is received fresh labeled with the patient's name, initials xx and

"larynx". The specimen consists of total laryngectomy measuring 8.5 cm

(superior to inferior), by 4.2 cm (anterior to posterior), by 5.8 cm (width)

when reconstructed. The specimen includes the hyoid bone which is removed.

The hyoid bone measures 8.2 cm in length by 0.3 x 0.3 cm in greatest dimension. One tracheal ring is identified. There is a supraglottic irregular exophytic ulcerated mass measuring at least 2.8 x 2.2 cm in maximal

dimension. The tumor is centered at the level of the supraglottis and more

prominent and cavitary toward the right side. The tumor appears to compress/invade the right and left false vocal cords as well as the anterior

pyriform sinus. The tumor is grossly located at 1.3 cm from the right arytenoid mucosal margin, 1.8 cm from the left arytenoid margin, 3.0 cm from

the epiglottic margin and at 3.2 cm from the jugular margin (inferior). The

anterior soft tissue margin appears intact and no gross lesion is identified.

Upon sectioning the tumor measures 4.8 cm superior to inferior by 3.2 cm

anterior to posterior, by 4.5 cm in width. It involves the pre-epiglottic

space, paraglottic space and anterior soft tissue. The tumor appears to

superficially invade the thyroid cartilage as well as epiglottic cartilage.

The anterior soft tissue margin including muscle and fibroadipose tissue

appears uninvolved by tumor. The right thyroid lobe is identified measuring

3.2 x 2.5 x 0.8 cm in greatest dimension. No parathyroid tissue is identified. On section no discrete, well circumscribed or ill defined lesions

en. A section of the tumor was selected and [REDACTED] [REDACTED]

[REDACTED] red and banked. The specimen is submitted in fourteen cassettes as

follows:

5A epiglottic margin, perpendicular

5B tracheal (deep) margin, shaved

5C right arytenoid margin, perpendicular

5D left arytenoid margin, perpendicular

5E right anterior soft tissue margin (area inked blue is not a margin)

5F tumor and thyroid cartilage right side

5G supraglottic tumor area right side

5H - ventricle tumor area right side

5I anterior soft tissue margin left side

5J tumor and epiglottic cartilage
5K ventricle tumor area left side
5L tumor and thyroid cartilage left side
5M 5N representative section of thyroid gland.
On Part 5 cassettes A, B, F, H, J and L will be placed in decalcifying
ion.

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CONSULTATION:

1AFS: RIGHT SUPRAGLOTTIC LESION, BIOPSY (touch prep)-

A. MALIGNANT

SQUAMOUS CELL CARCINOMA (NO CONCLUSIVE INVASION) (,

Microscopic examination substantiates the above diagnosis.

The following statement applies to all immunohistochemistry, Insitu Hybridization Assays (ISH & FISH), Molecular Anatomic Pathology, and Immunofluorescent Testing:

The testing was developed and its performance characteristics

dete

the , Department of Pathology, as required by t

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 to a maximum of hours.

This laboratory certified under the Clinical Laboratory Improvement Amendments of ("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 - LARYNX RESECTIONS

TYPE OF LARYNGECTOMY: Total

TUMOR LOCATION: Bilateral

ATTACHED STRUCTURES: Thyroid

TUMOR LOCATION/SEGMENT: Supraglottic

TUMOR SIZE: Maximum dimension: 4.8 cm

HISTOLOGIC TYPE OF TUMOR: Squamous cell carcinoma

HISTOLOGIC GRADE: Moderately differentiated

STRUCTURES INVOLVED BY TUMOR: False cord, Epiglottis, Thyroid cartilage,

Pre-epiglottic space, Paraglottic space

LYMPH NODES POSITIVE: Number of lymph nodes positive:: 0

LYMPH NODES EXAMINED: Total number of lymph nodes examined: 54

METASTASES

INTRA-PERINEURAL INVASION: Absent

VASCULAR INVASION: Yes

SURGICAL MARGIN INVOLVEMENT: Free (2 mm or more)

T STAGE, PATHOLOGIC: Supraglottis, pT4a

N STAGE, PATHOLOGIC: pN0
M STAGE, PATHOLOGIC: pMX

HISTO TISSUE SUMMARY/SLIDES REVIEWED:

Part 1: tic lesion

Taken: Received:

Stain/c

H&E x 1 A

Part 2: ode

Taken: Received:

Stain/c

H&E x 1 A

Part 3: l 2,3 & 4

Taken: Received:

Stain/ch

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

Part 4: 2, 3 & 4

Taken: Received:

Stain/ch

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

Part 5: aryngectomy

Taken: Received:

Stain/ch

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

H&E x 1 J

H&E x 1 K

H&E x 1 L

H&E x 1 M

 x 1 N

