

UUID: B7760635-A828-4040-AA36-21FA18D4CD4F
TCGA-T2-A6WZ-01A-PR Redacted



MRN: [REDACTED]

Dept
Phone:
Encounter
#:

Description: Male DOB: [REDACTED]
Department:

Order

Surgical Pathology Request

(Order

Entry Date

Result Narrative

ADDENDUM

ADDENDUM REPORT): THIS ADDENDUM REPORT SUPERSEDES THE REPORT ISSUED
THE DIAGNOSIS IS UNCHANGED.

An immunohistochemical study for EGFR demonstrates moderate to strong labeling of nearly all tumor cells with an H score of 220 (5% at 0, 0% at 1+, 65% at 2+, 30% at 3+).

one of our pathologists, has also reviewed this additional study and she concurs with the above assessment.

FINAL DIAGNOSIS

A) Left tongue, pharynx and neck zones 1, 2 and 3 soft tissue, near total glossectomy, partial pharyngectomy, left neck dissection:

Left tongue and oral pharynx, glossectomy and pharyngectomy:

- Invasive well to moderately-differentiated squamous cell carcinoma (7 cm) involving the left posterolateral tongue, pharynx and soft palate; tumor extends to the right/midline lingual specimen margin (see parts B-F and J for separately submitted and final margins)

Left neck zones 1, 2, 3, dissection:

- Zone 1: Five lymph nodes, negative for carcinoma (0/5)
- Zone 2: One lymph node, negative for tumor (0/1)
- Zone 3: Metastatic squamous cell carcinoma (0.41 cm) involving one of six lymph nodes (1/6)
- Squamous cell carcinoma abutting but not invading the submandibular gland capsule

B) True midline tongue margin, excision:
- Negative for carcinoma

C) Left true vallecula margin, excision:
- Negative for carcinoma

D) True midline pharyngeal margin, excision:
- Negative for carcinoma

E) Left true superior tonsil margin, excision:
- Negative for carcinoma

ICD-O-3
Carcinoma, squamous cell NOS
8070/3

Site CSCF
Base of Tongue 801.9

Path
Overlapping lesion of lip, oral cavity
& pharynx 801.48
JW 8/13/13

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case Is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	JW	
Date Reviewed	7/26/13	11/4/13

F) Medial posterior mobile tongue, excision:

- Negative for carcinoma

G) Right neck soft tissue, dissection:

- Zone 1: Six lymph nodes, negative for carcinoma (0/6)
- Zone 2a Ten lymph nodes, negative for tumor (0/10)
- Zone 2b: Twenty lymph nodes, negative for carcinoma (0/20)
- Zone 3: Eight lymph nodes, negative for carcinoma (0/8)
- Zone 4: Six lymph nodes, negative for carcinoma (0/6)

H) Teeth, #22, 24 and 25, extractions:

- Three teeth without significant histopathologic changes

I) Additional left posterior neck, zones 2 and 3, dissection:

- Zone 2b: Nineteen lymph nodes, negative for carcinoma (0/19)
- Zone 3: Metastatic squamous cell carcinoma (0.46 cm) involving one of eight lymph nodes (1/8) with focal extranodal extension

J) Additional right anterior tongue margin, excision:

- Negative for carcinoma

COMMENTS

The results of studies for HPV and EGFR will be reported as an addendum.

one of our surgical pathologists, has also reviewed slides from this case and she concurs with the above diagnosis.

was notified of our findings by secure electronic mail.

CLINICAL HISTORY

The patient is a -year-old male with biopsy-proven left base of tongue squamous cell carcinoma.

DIAGNOSTIC SUMMARY

- Specimen: Portions of tongue, oropharynx and soft palate, left and right neck lymph nodes and teeth
- Procedure: Near total glossectomy, partial pharyngectomy, partial palatectomy, left neck dissection (1-3), right neck dissection (1-3) and teeth extractions
- Specimen Laterality: Left and midline tongue, right and left neck tissue
- Tumor Site: Oropharynx including left posterolateral tongue, posterior pharynx and soft palate
- Tumor Focality: Single focus
- Tumor Size: 7 cm
- Histologic Type: Squamous cell carcinoma
- Histologic Grade: G1-2 (Well to moderately-differentiated)
- Margins: Though carcinoma involves the midline/right lingual margin in the main resection specimen (part A), separately submitted lingual margins (parts B, F and J) are uninvolved by carcinoma
- Lymph-Vascular Invasion: Not identified
- Perineural Invasion: Present
- Lymph Nodes, Extranodal Extension: Focally present
- Pathologic Staging for Oropharynx Lesion (pTNM)
 - Primary Tumor: pT3 (Tumor > 4 cm in greatest dimension or extension to the lingual surface of epiglottis)

- - Regional Lymph Nodes: pN2b (Metastasis in multiple ipsilateral lymph nodes, none >6 cm)
- - 89 lymph nodes examined, 2 involved
- - Distant Metastasis (pM): Not applicable

GROSS DESCRIPTION

A) Received fresh, labeled [REDACTED] and designated "left near-total glossectomy and partial pharyngectomy left neck dissection zones 1, 2, 3", is a glossectomy, pharyngectomy, neck dissection specimen. The tongue is 9.5 cm anterior to posterior, 4.5 cm left to right and 3.4 cm superior to inferior. The pharyngectomy specimen is 6.8 cm anterior to posterior, 3.0 cm left to right and 3.9 cm superior to inferior. The neck dissection is 8.0 x 6.1 x 3.4 cm. The specimen is oriented per the specimen container as follows:

Single stitch superior tonsil margin, double long stitch left vallecula, double short stitch neck dissection zone 3. There is another single stitch that is oriented in person by a member of the surgical team as a prominent lymph node in zone 1A on the left side. The specimen is inked as follows:

Right side of tongue margin = red
 Base of tongue margin = blue
 Inferior portion of tongue margin = black
 Vallecula margin = orange
 Posterolateral oropharynx margin = green
 Superior tonsillar margin = yellow
 Floor of mouth margin = orange
 Lateral oropharynx margin = black
 Gross photographs are taken.

The neck dissection tissue is removed and the resultant exposed tissue is inked yellow. The tongue, left floor of mouth and left oropharynx contain a large ulcerated mass with deep furrows and papillary structures. This irregular ulcerated mass measures 7 x 4.5 cm. The ulcerations extend 1.8 cm into the tongue from the surface. The lesion is 1.4 cm from the right tongue margin, 0.8 cm from the anterior floor of mouth margin, 0.9 cm from the superior tonsillar margin, 2.3 cm from the posterolateral oral pharynx margin, 1.6 cm from the vallecula margin, and 1.4 cm from the base of tongue margin. Small portions of tissue have been taken from the lesion as well as uninvolved tongue for tissue banking. The tongue is serially sectioned to reveal a white, fibrotic, spiculated lesion that extends to within 0.4 cm of the deep margin.

Representative sections are submitted as follows:

- (A1) Tumor to right tongue margin
- (A2) Tumor to base of tongue margin
- (A3) Tumor to vallecula margin
- (A4) Tumor to posterolateral oral pharynx margin
- (A5) Tumor to superior tonsillar margin
- (A6) Tumor to anterior floor of mouth margin, includes inked surface denoting where the neck dissection was removed (yellow ink not a surgical margin)
- (A7-A10) Right side of tongue shave margin from anterior to posterior (en face)
- (A11) Remaining inferior portion of right side of tongue shave margin (en face)
- (A12-A13) Tumor
- (A14) Tumor to deep margin
- (A15) Sutured 1A left lymph node, bisected
- (A16) Remaining tissue of zone 1a
- (A17) Remaining tissue of zone 1a
- (A18) Two candidate lymph nodes, zone 1b

(A19) Zone 1b after removing from oropharynx, trisected (yellow ink not a surgical margin)

(A20-A23) Remaining tissue, zone 1b

(A24) Submandibular gland

(A25-A30) Anterior zone 2, anterior to posterior

Zone 3:

(A31) One lymph node, bisected

(A32) One lymph node, bisected

(A33) One lymph node, bisected

(A34) One lymph node, bisected

(A35-A50) Remaining tissue

Received fresh for frozen section diagnosis, labeled [REDACTED] are five specimens.

B) Designated "true midline tongue margin," is a portion of red-brown tissue measuring 1.2 x 0.8 x 0.3 cm. The specimen is submitted entirely for frozen section diagnosis and resubmitted for permanent section diagnosis in cassette (FSB1).

C) Designated "left true vallecula margin," is a portion of red-brown soft tissue measuring 1.9 x 0.6 x 0.3 cm. The specimen is submitted entirely for frozen section diagnosis and resubmitted for permanent section diagnosis in cassette (FSC1).

D) Designated "true midline pharyngeal margin," is a portion of red-brown soft tissue measuring 1.6 x 1.4 x 0.3 cm. The specimen is submitted entirely for frozen section diagnosis and resubmitted for permanent section diagnosis in cassette (FSD1).

E) Designated "left true superior tonsil margin," is a portion of pink-white soft tissue measuring 2.2 x 1 x 0.3 cm. The specimen is submitted entirely for frozen section diagnosis and resubmitted for permanent section diagnosis in cassette (FSE1).

F) Designated "medial posterior mobile tongue," is a portion of pink-white soft muscular tissue measuring 1.4 x 0.7 x 0.4 cm. The specimen is submitted entirely for frozen section diagnosis and resubmitted for permanent section diagnosis in cassette (FSF1).

In formalin, labeled [REDACTED] are four specimens.

G) Designated "right neck dissection," is a 12.5 x 7.0 x 3.0 cm neck dissection, which is oriented per the specimen container as follows: single stitch = zone 1, double long stitch = zone 2b, double short stitch = zone 4.

(G1) Lymph node, bisected, zone 1

(G2) Lymph node, bisected, zone 1

(G3) Four candidate lymph nodes, zone 1

(G4) Three candidate lymph nodes, zone 1

(G5-G6) Representative sections of submandibular gland, zone 1

(G7-G10) Remaining tissue, zone 1

(G11-G12) Two candidate lymph nodes, bisected; a larger and a smaller, zone 2a

(G13) Five candidate lymph nodes, zone 2a

(G14-G18) Residual tissue, zone 2a

(G19) One lymph node, bisected, zone 2b

(G20) Three candidate lymph nodes, zone 2b

- (G21-G24) Remaining tissue, zone 2b
 (G25) One lymph node bisected and inked black, and two candidate lymph nodes, zone 3
 (G26) Remaining tissue, zone 3
 (G27) Four candidate lymph nodes, zone 4
 (G28) Remaining tissues, zone 4

H) Designated "teeth #22, 24 and 25," are three teeth, ranging from 1.8 x 0.6 x 0.6 cm to 2.0 x 0.6 x 0.3 cm. The smallest tooth is fractured longitudinally with a pink, firm material in the core of the tooth. The specimen is submitted in its entirety, after decalcification, as follows:

- (H1) Previously fractured tooth
 (H2-H3) Remaining two teeth

I) Designated "additional left posterior neck dissection, zones 2 and 3," is a 0.8 x 6.5 x 1.5 cm neck dissection. It is oriented per the specimen container as follows: single stitch = zone 2b, double stitch = zone 3. The specimen is submitted in its entirety as follows:

- (I1-I2) Lymph node, bisected, zone 2b
 (I3-I4) Remaining tissue, zone 2b
 (I5-I6) Two lymph nodes bisected, the larger and a smaller, zone 2b
 (I7-I8) One lymph node bisected, zone 2b
 (I9) Four candidate lymph nodes, zone 2b
 (I10) Five candidate lymph nodes, zone 2b
 (I11-I12) Remaining tissues, zone 2b
 (I13) Three lymph nodes, the largest is bisected, zone 3
 (I14) Three lymph nodes, the largest is bisected, zone 3
 (I15-I16) Remaining tissues, zone 3

J) Designated "additional right anterior tongue margin," is a 3.5 x 0.8 x 0.6 cm tongue tissue. No orientation is provided. The specimen is submitted in its entirety in cassettes (J1-J2).

INTRAOPERATIVE DIAGNOSIS

FSB1: Negative for malignancy
 FSC1: Negative for malignancy
 FSD1: Negative for malignancy
 FSE1: Negative for malignancy
 FSF1: Negative for malignancy

Intra-Operative Diagnosis Reviewed and Interpreted By:

'I certify that (1) all services on this form were rendered and are hereby approved for billing, (2) all specimens/slides have been examined / reviewed, (3) the medical record has been documented for these services, and (4) the rendering of the services and the documentation in the medical record are in accordance with guidelines.

Final Diagnosis Reviewed and Interpreted by:

ELECTRONICALLY SIGNED

Pathologist Pathology Resident

Date:

Some tests used in this case were developed in and their performance characteristics determined by the

The procedures and reagents have been validated by evaluation of both negative and positive controls. This testing has not been cleared or approved by the U.S. Food and Drug Administration (FDA). The FDA has determined that such clearance or approval is not necessary. Test results are used for clinical purposes. They should not be regarded as investigational or for research. The is accredited by the College of American Pathologists and is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA-88) as qualified to perform high complexity clinical laboratory testing.

"I certify that (1) all services on this form were rendered and are hereby approved for billing, (2) all specimens/slides have been examined / reviewed, (3) the medical record has been documented for these services, and (4) the rendering of the services and the documentation in the medical record are in accordance with guidelines."

Lab and CollectionSurgical Pathology Request on**Result History**SURGICAL PATHOLOGY REQUEST on**Specimen Information**

Specimen #	Collection Date and Time	Received Date and Time
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Resulting Agency

Surgical Pathology Request

Ordering Physician	year old Provider Not In System
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Result Information

Status Final result	Provider Status Ordered
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Surgery Report**Lab Printout**

<u>Open Hard Copy Result Report</u>	<u>Surgical Pathology Request</u>
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Order ReportView Order Information

MRN : [REDACTED]

 Dept
 Phone:
 Encounter
 #:

 Description: Male DOB: [REDACTED]
 Department:
Lab Collection Information**Lab IDs**

Collection Date and Time

Specimen #

Surgical Pathology Request

Lab

 Authorizing: System, Provider
 Not In
 Department:

 Date and
 Time:
 Electronically
 Signed By:
Diagnoses

Oral-mouth cancer	145.9
Smoking hx	V15.82
Alcohol abuse	305.00
Squamous cell carcinoma of lateral tongue	141.2
Squamous cell cancer of retromolar trigone	145.6

Order Information

Order Date/Time	Release Date/Time	Start Date/Time	End Date/Time
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Comments

Ordered by an unspecified provider

Order Details

Frequency	Duration	Priority	Order Class
ONCE	1 occurrence	Routine	Normal

Provider Information

Ordering User	Ordering Provider System, Provider Not In	Authorizing Provider System, Provider Not In
Attending Provider(s)	Admitting Provider	

Collection Information

Collection Date	Collection Time	Resulting Agency
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Order Report[View Order Information](#)

There are no specimens.

Reprint Requisitions

Surgical Pathology Request
