

## DIAGNOSIS

Patient ID

| Criteria                       | Yes       | No           |
|--------------------------------|-----------|--------------|
| Diagnosis Discrepancy          |           | X            |
| Primary Tumor Site Discrepancy |           | X            |
| HPA Discrepancy                |           | X            |
| Prior Malignancy History       |           | X            |
| Dual/Synchronous Primary Noted |           | X            |
| Case is (circle):              | QUALIFIED | DISQUALIFIED |
| Reviewer Initials              | 7/24/11   | 7/24/11      |

### (A) RIGHT BACK, INFERIOR FLAP, EXCISION:

MELANOMA INVOLVING SUBCUTANEOUS TISSUE AND PRESENT AT INKED TISSUE EDGE.  
THE TUMOR MEASURES 3.3 X 2 MM (AS MEASURED ON THE SLIDE).

### (B) WIDE LOCAL EXCISION SOFT TISSUE RIGHT BACK, EN BLOC RESECTION AND AXILLARY DISSECTION: MULTIFOCAL MELANOMA IN FIBROADIPOSE TISSUE AND SKELETAL MUSCLE (POSSIBLY REPRESENTING COMPLETELY REPLACED BY TUMOR LYMPH NODES) AND METASTATIC MELANOMA IN AT LEAST NINE OF TWELVE LYMPH NODES (9/12).

LARGEST TUMOR DEPOSIT SIZE, 13 X 11 MM.  
LOCATION, SUBCAPSULAR AND INTRAPARENCHYMAL.  
EXTRACAPSULAR EXTENSION PRESENT, EXTENSIVE.

### (C) RIGHT AXILLA, ADDITIONAL AXILLARY CONTENTS, EXCISION: Fibroadipose tissue; no tumor present.

ICD-0-3

Melanoma, NOS 8720/3

Site: subcutaneous tissue

C49.4

lw 7/24/11

## GROSS DESCRIPTION

(A) SOFT TISSUE MASS, INFERIOR FLAP, RIGHT BACK – Received is a 4.5 x 2.5 x 1.0 cm piece of unoriented fibroadipose tissue. The cut surfaces are predominantly yellow unremarkable adipose tissue with firm foci of possible fat necrosis. The resection margin is inked blue. The specimen is serially sectioned and submitted entirely in A1-A5.

(B) WIDE LOCAL EXCISION SOFT TISSUE, RIGHT BACK, EN BLOC AND AXILLARY DISSECTION – Received is a 35.0 x 15.0 x 6.0 cm portion of fibroadipose tissue, partially surfaced by a 29.0 x 15.0 cm elongated skin ellipse oriented with a short stitch at medial and long stitch at inferior. Multiple lymph nodes are identified ranging from 0.5 to 3.5 cm in greatest dimension. The majority of the lymph nodes have a soft hemorrhagic to necrotic tan-yellow cut surfaces, suggestive of metastases. The lymph nodes are as follows.

SECTION CODE: B1, five possible lymph nodes; B2, four possible lymph nodes; B3, five possible lymph nodes; B4, two possible lymph nodes; B5, two possible lymph nodes; B6, three possible lymph nodes; B7, two possible lymph nodes; B8, two possible lymph nodes; B9, one possible lymph node; B10, skin- representative section.

(C) ADDITIONAL AXILLARY CONTENTS RIGHT AXILLA – Received is a 6.5 x 4.5 x 2.0 cm portion of fibroadipose tissue. The cut surfaces are predominantly yellow lobulated unremarkable adipose tissue. No lymph nodes are identified. Representative sections are submitted in C1-C5 for possible lymph nodes.

## CLINICAL HISTORY

None given.

## SNOMED CODES

"Some tests reported here may have been developed and performance characteristics determined by specifically cleared or approved by the U.S. Food and Drug Administration."  
Entire report and diagnosis completed by:

These tests have not been

-----END OF REPORT-----

UUID: 06022361-4A6B-41E4-BEE8-222596939BD3

TCGA-D3-A2JH-06A-PR

Redacted

