

SURGICAL PATHOLOGY REPORT

Accession number: [REDACTED]

Final Report

DIAGNOSIS:

- 1) LEFT GINGIVAL MARGIN, EXCISION: NEGATIVE FOR NEOPLASIA.
- 2) LEFT MEDIAL PTERYGOID MARGIN, EXCISION: NEGATIVE FOR NEOPLASIA.
- 3) LEFT LINGUAL NERVE MARGIN, EXCISION: NEGATIVE FOR NEOPLASIA.
- 4) LEFT PHARYNGEAL MARGIN, EXCISION: NEGATIVE FOR NEOPLASIA.
- 5) LEFT BUCCAL MARGIN, EXCISION: NEGATIVE FOR NEOPLASIA.
- 6) LEFT LABIAL MARGIN, EXCISION: NEGATIVE FOR NEOPLASIA.
- 7) RIGHT LABIAL MARGIN, EXCISION: NEGATIVE FOR NEOPLASIA.
- 8) LYMPH NODE, LEFT EJ, EXCISION: 2 LYMPH NODES, NEGATIVE FOR MALIGNANCY (0/2).
- 9) LYMPH NODES, LEFT NECK LEVEL 2 & 3, EXCISION: 1 OF 35 LYMPH NODES INVOLVED BY METASTATIC SQUAMOUS CELL CARCINOMA, WITH FOCAL EXTRACAPSULAR EXTENSION (1/35).
- 10) LYMPH NODES, LEFT NECK LEVEL 1B, EXCISION: 1 OF 7 LYMPH NODES INVOLVED BY METASTATIC SQUAMOUS CELL CARCINOMA; NEGATIVE FOR EXTRACAPSULAR EXTENSION (1/7); BENIGN SALIVARY GLAND.
- 11) LYMPH NODES, LEVEL 1A, EXCISION: 2 LYMPH NODES, NEGATIVE FOR MALIGNANCY (0/2).
- 12) LYMPH NODES, RIGHT NECK LEVEL 1B, EXCISION: 3 LYMPH NODES, NEGATIVE FOR MALIGNANCY (0/3).
- 13) FLOOR OF MOUTH, RESECTION: MODERATELY DIFFERENTIATED SQUAMOUS CELL CARCINOMA OF THE FLOOR OF THE MOUTH, 3.5 CM IN GREATEST EXTENT, INVADING THE MANDIBLE, 0.1 CM TO THE CLOSEST SOFT TISSUE MARGIN (LEFT ANTERIOR); PERINEURAL INVASION PRESENT; NEGATIVE FOR LYMPHOVASCULAR INVASION; BONE AND SOFT TISSUE MARGINS NEGATIVE FOR MALIGNANCY, (SEE COMMENT).

COMMENT: These findings correspond to AJCC [REDACTED] Edition pathologic Stage IVA (pT4a, pN2b, pMn/a).

[REDACTED]

Upper Aerodigestive Tract Carcinoma: Summary of Findings:

Specimen Type: resection

Tumor Site: floor of the mouth

Tumor Size: 3.5 x 3.4 x 3.2 cm

Laterality: Left

Margin: uninvolved by invasive carcinoma: 0.1 cm to left anterior soft tissue margin

Histologic Type: squamous cell carcinoma

Histologic Grade: moderately differentiated

Pathologic Staging (pTMN) IVA

Primary tumor (pT): pT4a

Regional Lymph Nodes (pN): pN2b

Number examined: 49

Numbered involved: 2

Extracapsular extension: yes

Perineural invasion: Present

Bony/Cartilage Invasion: Present

Lymph-Vascular invasion: Absent

HPV testing ordered: Yes

**Electronically Signed Out by

CLINICAL DATA

Clinical Features: Unspecified

Operator: Unspecified

Operation: Unspecified

Operative Findings: Unspecified

Operative Diagnosis: Unspecified

Tissue Submitted: 1)left gingival margin, 2)left medial pterygoid margin, 3)left lingual nerve margin, 4)left pharyngeal margin, 5)left buccal margin, 6)left labial margin, 7)right labial margin, 8)left EJ lymph node, 9)left neck levels 2,3, 10)left neck level 1B, 11)level 1A, 12)right neck level 1B, 13)floor of mouth cancer

GROSS DESCRIPTION:

1) SOURCE: Left Gingival Margin

Received fresh in a container labeled with the patient's name, medical record number and "left gingival margin" and consists of a 2.0 x 1.0 x 1.0 cm piece of pink-red soft tissue with cartilage. The specimen is unoriented. The specimen is trisected and is submitted for frozen section analysis in cassette 1AFSC. Representative sections are submitted for frozen section analysis.

Summary of sections: 1AFSC, 2/1. The remaining specimen is submitted in cassette 1B, 1/1.

2) SOURCE: Left Medial Pterygoid Margin

Received fresh for frozen and labeled "left medial pterygoid margin" consists of an irregular fragment of red-tan tissue, measuring 1.1 x 1.0 x 0.5 cm, submitted entirely as frozen section residual labeled 2AFSC.

Summary of sections: 2AFSC, 1/1.

3) SOURCE: Left Lingual Nerve Margin

Received fresh for frozen labeled "left lingual nerve margin" is an irregular fragment of red-tan tissue, measuring 0.5 x 0.5 x 0.3 cm, submitted entirely as frozen section residual labeled 3AFSC.

Summary of sections: 3AFSC, 1/1.

4) SOURCE: Left Pharyngeal Margin

Received fresh for frozen section consultation labeled with the patient's name, medical record number and "left pharyngeal margin" is a single fragment of pink-tan soft tissue with overlying mucosa measuring 3 x 0.1 x 0.1 cm. The specimen is entirely submitted for frozen section evaluation.

Summary of sections: 4AFSC, 1/1.

5) SOURCE: Left Buccal Margin

Received fresh labeled with the patient's name, medical record number and "left buccal margin" is a single fragment of pink-tan soft tissue with overall mucosa measuring 5 x 0.1 x 0.1 cm. The specimen is entirely submitted for frozen section evaluation.

Summary of sections: 5AFSC, 1/1 each.

6) SOURCE: Left Labial Margin

Received fresh in a container labeled with the patient's name and "left labial margin" is a single unoriented fragment of pink-tan soft tissue measuring 4.0 x 0.2 x 0.2 cm. The specimen is submitted entirely for frozen section evaluation.

Summary of sections: 6AFSC, 1/1.

7) SOURCE: Right Labial Margin

Received fresh for frozen section labeled with the patient's name, medical record number and "right labial margin" is a segment of soft tissue that is 1.2 x 0.5 x 0.2 cm. The specimen is entirely submitted for frozen section.

Summary of sections: 7AFC, 1/1.

8) SOURCE: Left EJ Lymph Node

Received in saline labeled with the patient's name, MR#, and "left EJ lymph node" is a fragment of yellow-pink fibrofatty tissue that is 2.5 x 1.5 x 0.7 cm and partially cauterized. One possible lymph node is identified and is 0.9 cm in greatest extent. It is bisected from the surrounding fatty tissue and entirely submitted along with the remainder of the soft tissue. Summary of sections: 8A, M/1.

9) SOURCE: Left Neck Levels 2 & 3

Received in saline labeled with the patient's name, MR#, and "left neck levels 2 & 3" is a fragment of yellow-pink fibrofatty tissue that is 7.5 x 4.5 x 0.9 cm. The specimen is comprised of dense fibrous tissue involving lymph nodes that range in size from 0.3-2.3 cm in greatest extent. The specimen is entirely submitted.

Summary of sections: 9A, two possibly contiguous lymph nodes bisected, 2/1; 9B, 1 bisected lymph node, 2/1; 9C, node candidates, M/1; 9D, node candidates, M/1; 9E, fatty tissue with possible small lymph nodes, 1/1; 9F, fatty tissue with small lymph node, 1/1; 9G-9K, remainder of the specimen, 1/1 each.

10) SOURCE: Left Neck Level 1B

Received in saline labeled with the patient's name, MR#, and "left neck level 1B" is a fragment of fibrofatty tissue that is 6.5 x 4.0 x 2.3 cm. A partially disrupted, lobulated, tan tissue is attached that appears to possibly be a parotid gland. The surface of this possible gland is inked black. It is serially sectioned to reveal a homogenous, lobulated, tan-pink cut surface. The gland is possibly an enlarged lymph node. The possible gland is entirely submitted. The lymph nodes identified within the fatty tissue range in size from 0.5-2.2 cm in greatest extent.

Summary of sections: 10A, gland, 2/1; 10B, 1 lymph node trisected, 3/1; 10C, gland sections, 2/1; 10D, lymph nodes, 2/1; 10E, possible gland, 2/1; 10F, fibrofatty tissue, 1/1; 10G-10J, fatty tissue, 1/1 each; 10K-10M, possible gland, 2/1 each.

11) SOURCE: Level 1A

Received in saline labeled with the patient's name, MR#, and "level 1A" is a resection of fibrofatty tissue that is 6.0 x 4.2 x 0.9 cm. Multiple possible lymph nodes are identified that range in size from 0.6-0.8 cm in greatest extent. The specimen is entirely submitted.

Summary of sections: 11A-11F, lymph node candidates, M/1 each.

12) SOURCE: Right Neck Level 1B

Received in saline labeled with the patient's name, MR#, and "right neck level 1B" are fragments of tan, lobulated, possibly glandular tissue that in aggregate measures 6.0 x 3.9 x 1.2 cm. The specimen is soft and homogenous. It is similar to previously identified possible glandular tissue. Lymph nodes are also identified within the fibrous tissue surrounding this possible gland. The specimen is entirely submitted.

Summary of sections: 12A, 2 bisected lymph nodes, 1 inked black, 4/1; 12B-12G, entirely submitted possible lymph nodes/gland, 1/1 each.

13) SOURCE: Floor of Mouth Cancer

Received fresh labeled with patient's name, medical record number and "floor of mouth cancer" is a complex resection of the mandible with bone that is 5.5 cm posterior to anterior, 8.5 cm transversely, 8 cm from superficial to deep. The specimen is inked as follows: Posterior green, anterior at the midline orange strip, left blue, right black (left and right anterior), and deep purple. There is a deep ulcer between two teeth on the left floor of the mouth that is 2.0 x 2.0 x 1.5 cm and limited anteriorly by left anterior soft tissue and the left mandible, posteriorly by the tongue, and by the molar tooth and incisors medially and laterally. The left anterior surface of the mandible is resected off the mandible bone. The cut surface shows an ill defined hemorrhagic tissue right underneath the ulcer. This comprises less than 5% of the section. The inner portion of the mouth (floor of the mouth) is also resected off the bone to reveal a well delineated soft white lesion that rises from the ulcer and invades deeply and is 3.4 x 3.2 x 3.5 cm. This lesion is 1 cm approximately from deep margin (is shaved and entirely submitted) purple; 0.6 cm from the left bone and soft tissue margin (blue, shaved and entirely submitted); approximately 2.5 cm from the right bone and soft tissue margin (shaved and entirely submitted; less than 0.1 cm from posterior soft tissue margin inked green; 0.5 cm from the overlying tongue. Representative sections are submitted following decalcification.

The mandible is sectioned to reveal normal cortical bone and bone marrow. The tumor does not appear to be infiltrating the bone. Mid section represents the mandible in relation to tumor is submitted. The left and right bone margins are submitted.

Summary of sections: 13A-13B, left soft tissue margin, 3/1 and 2/1; 13C-13E, deep margin, M/1 each; 13F-13G, right soft tissue margin, M/1; 13H-13K, left anterior soft tissue margin adjacent to ulcer, 1/1 each; 13L-13T, tumor, floor of the mouth in relation to ulcer and posterior margin, 1/1 each; 13U, left bone margin, 1/1; 13V, shaved right bone margin, 1/1; 13W-13X, section of tumor and bone, 1/1 each.

[REDACTED]

Slides and report reviewed by Attending Pathologist.

1) SOURCE: Left Gingival Margin

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED] [REDACTED]

2) SOURCE: Left Medial Pterygoid Margin

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED] [REDACTED]

3) SOURCE: Left Lingual Nerve Margin

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED] [REDACTED]

4) SOURCE: Left Pharyngeal Margin

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED] [REDACTED]

5) SOURCE: Left Buccal Margin

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED] [REDACTED]

6) SOURCE: Left Labial Margin

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED] [REDACTED]

7) SOURCE: Right Labial Margin

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED] [REDACTED]

Electronically signed by: [REDACTED]

The following special studies were performed on this case and the interpretation is incorporated in the diagnostic report above:
1xDECALCIFICATION

In some tests, analyte specific reagents (ASRs) are used. In the case of an ASR, this test was developed and its performance characteristics determined by this laboratory. It has not been cleared or approved by the US Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. This test is used for clinical purposes. It should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of [REDACTED] (CLIA [REDACTED]) as qualified to perform high complexity clinical laboratory testing.
SNOMED: T-51000,T-51000,M-80413,

[REDACTED]

[REDACTED]

[REDACTED]