

***** Amendment *****

Case has been amended.

DIAGNOSIS

- (A) LEVEL IA NECK DISSECTION:
Two lymph nodes, no tumor present (0/2).
- (B) LEFT NECK DISSECTION, LEVEL IB:
Two lymph nodes, no tumor present (0/2).
Benign submandibular gland.
- (C) RIGHT NECK DISSECTION, LEVEL IB:
One lymph node, no tumor present (0/1).
Benign parotid gland.
- (D) LEFT NECK DISSECTION, LEVEL II:
Four lymph nodes, no tumor present (0/4).
- (E) LEFT NECK DISSECTION, LEVEL III:
Eight lymph nodes, no tumor present (0/8).
- (F) LEFT NECK DISSECTION, LEVEL IV:
Three lymph nodes, no tumor present (0/3).
- (G) RIGHT NECK DISSECTION, LEVEL II:
Four lymph nodes, no tumor present (0/4).
- (H) RIGHT NECK DISSECTION, LEVEL III:
Eleven lymph nodes, no tumor present (0/11).
- (I) RIGHT NECK DISSECTION, LEVEL IV:
Nine lymph nodes, no tumor present (0/9).
- (J) ANTERIOR PERIOSTEUM, MANDIBLE:
INVASIVE SQUAMOUS CARCINOMA PRESENT AT MARGIN.
- (K) MENTAL SOFT TISSUE:
INVASIVE SQUAMOUS CARCINOMA INVOLVING SKELETAL MUSCLE.
- (L) ANTERIOR GINGIVA:
Squamous mucosa and bone fragments, no tumor or dysplasia present.
- (M) LEFT INFERIOR ALVEOLAR NERVE:
Nerve, no tumor present.

- (N) LEFT PARAPHARYNGEAL MARGIN:
Scant fibroadipose tissue, no tumor present.
- (O) LEFT LATERAL PHARYNGEAL WALL:
Squamous mucosa, no tumor present.
- (P) LEFT MEDIAL SOFT PALATE:
Squamous mucosa and skeletal muscle with chronic inflammation, no tumor present.

- (Q) LEFT LATERAL SOFT PALATE:
Squamous mucosa, no tumor present.

- (R) TONGUE, LARYNX, FLOOR OF MOUTH:
INVASIVE SQUAMOUS CARCINOMA -- Poorly differentiated with basaloid features
Tumor Features:
Gross: Ulcerating
Size: 4.5 cm in largest dimension
Invasion: Present, depth 2.1 cm
Tumor Border: Infiltrative with thick cords > 4 cells
Perineural Invasion: Present, including large nerves (> 1mm)
Vascular Invasion: Absent

- (S) LEFT PARAPHARYNGEAL SPACE #2:
Fibromuscular tissue and nerve, no tumor present.

- (T) ANTERIOR MANDIBLE:
Pending decalcification, see addendum.


COMMENT

This case is amended to correct the specimen designation for Specimen C from "IIB" to "IB".


GROSS DESCRIPTION

- (A) LEVEL IA NECK DISSECTION – Received is a 3.0 x 2.5 x 1.0 cm portion of fibroadipose tissue. Three possible lymph nodes ranging from 0.4 to 0.6 cm in greatest dimension. The lymph nodes, are submitted entirely in A. 
(B) LEFT NECK DISSECTION, LEVEL IB - Received is a 3.0 x 2.5 x 1.5 cm submandibular gland with minimum attached fibroadipose tissue. The submandibular gland cut surface is lobulated tan-pink and unremarkable with no solid mass identified. Also identified are two possible lymph nodes measuring 0.6 and 1.0 cm in greatest dimension. Representative sections are submitted.

SECTION CODE: B1, B2, submandibular gland; B3, two lymph nodes. 

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- (C) RIGHT NECK DISSECTION, LEVEL IB – Received is a 4.0 x 2.2 x 1.3 cm submandibular gland. The cut surface is lobulated tan-pink and unremarkable with no solid mass identified. Representative sections are submitted in C1-C3. [REDACTED]
- (D) LEFT NECK DISSECTION, LEVEL II – Received is a 3.8 x 2.0 x 1.0 cm portion of fibroadipose tissue which yields multiple possible lymph nodes ranging from 0.2 to 0.5 cm in greatest dimension. The lymph nodes are submitted entirely.
SECTION CODE: D1, four possible lymph nodes; D2, three possible lymph nodes. [REDACTED]
- (E) LEFT NECK DISSECTION, LEVEL III – Received is a 3.5 x 2.0 x 1.0 cm portion of fibroadipose tissue which yield multiple possible lymph nodes ranging from 0.3 to 1.0 cm. The lymph nodes are submitted entirely.
SECTION CODE: E1, four possible lymph nodes; E2, four possible lymph nodes. [REDACTED]
- (F) LEFT NECK DISSECTION, LEVEL IV – Received is a 3.5 x 3.0 x 1.5 cm portion of fibroadipose tissue which yields multiple possible lymph nodes; ranging from 0.3 to 0.6 cm in greatest dimension. The lymph nodes are submitted entirely in F. [REDACTED]
- (G) RIGHT NECK DISSECTION, LEVEL II – Received is a 3.0 x 3.0 x 1.5 cm portion of fibroadipose tissue. The specimen is dissected to reveal four possible lymph nodes ranging from 0.5 up to 1.2 cm in greatest dimension. Representative sections are submitted.
SECTION CODE: G, four possible lymph nodes. [REDACTED]
- (H) RIGHT NECK DISSECTION, LEVEL III – Received is a 3.5 x 3.5 x 1.8 cm portion of fibroadipose tissue. The specimen is dissected to reveal fourteen possible lymph nodes ranging from 0.2 up to 1.3 cm in greatest dimension. Representative sections are submitted.
SECTION CODE: H1, nine possible lymph nodes; H2, four possible lymph nodes; H3, three possible lymph nodes; H4, two possible lymph nodes. [REDACTED]
- (I) RIGHT NECK DISSECTION, LEVEL IV – Received is a 3.5 x 3.3 x 1.7 cm portion of fibroadipose tissue. The specimen is dissected to reveal nine possible lymph nodes ranging from 0.2 up to 1.3 cm in greatest dimension. Representative sections.
SECTION CODE: I1, five possible lymph nodes; I2, four possible lymph nodes. [REDACTED]
- *FS/DX: NO TUMOR PRESENT. [REDACTED]
- (J) ANTERIOR PERIOSTEUM, MANDIBLE, TRUE MARGIN INKED – A 0.6 x 0.4 x 0.3 cm fragment of tan soft tissue with ink along one surface. The specimen is submitted perpendicularly for frozen as J. [REDACTED]
*FS/DX: INVASIVE SQUAMOUS CARCINOMA. [REDACTED]
- (K) MENTAL SOFT TISSUE – Received one fragment of dark brown soft tissue (2.5 x 1.0 x 0.7 cm). The specimen is serially sectioned and submitted entirely in two cassettes. K1, K2. [REDACTED]
*FS/DX: POSITIVE FOR MALIGNANCY. [REDACTED]
- (L) ANTERIOR GINGIVA, TRUE MARGIN INKED – A 1.0 x 0.5 x 0.3 cm fragment of mucosa with ink on one surface. The specimen is re-inked and submitted en face for frozen as L. [REDACTED]
*FS/DX: NO TUMOR PRESENT. [REDACTED]
- (M) LEFT INFERIOR ALVEOLAR NERVE, DEEP MARGIN MARKED – A 0.5 x 0.4 x 0.2 cm cylindrical fragment of tan soft tissue with ink at one side. The inked tip is reinked and submitted entirely for frozen as M. [REDACTED]
*FS/DX: NERVE, NO TUMOR PRESENT. [REDACTED]
- (N) LEFT PARAPHARYNGEAL MARGIN – A 0.4 x 0.3 x 0.3 cm fragment of fatty soft tissue submitted entirely for frozen as N. [REDACTED]
*FS/DX: NO TUMOR PRESENT. [REDACTED]
- (O) LEFT LATERAL PHARYNGEAL WALL – A 1.8 x 0.2 x 0.2 cm strip of mucosa submitted entirely for frozen as O. [REDACTED]
*FS/DX: NO TUMOR PRESENT. [REDACTED]
- (P) LEFT MEDIAL SOFT PALATE – A 1.5 x 0.2 x 0.1 cm strip of mucosa submitted entirely for frozen as P. [REDACTED]
*FS/DX: NO TUMOR PRESENT. [REDACTED]
- (Q) LEFT LATERAL SOFT PALATE – A 1.5 x 0.2 x 0.2 cm strip of mucosa submitted entirely for frozen as Q. [REDACTED]
*FS/DX: NO TUMOR PRESENT. [REDACTED]
- (R) TONGUE, LARYNX, FLOOR OF MOUTH – A glossectomy specimen with attached larynx and anterior soft tissue measuring 11.5 x 6.5 x 5.0 cm. The tongue measures 7.0 x 5.0 x 4.0 cm. The larynx measures 7.0 x 5.0 x 3.0 cm.

There is an ulcerated white-tan partially-necrotic tumor (4.5 x 2.5 x depth of 2.1 cm below the ulcerated surface) located at the left base of tongue abutting the left floor of mouth mucosa. Tumor extends into the right tongue and is within 0.1 cm of the mandibular mucosa. The tumor also involves the posterior pharynx. The tumor also extends into the anterior deep soft tissue edges. The tumor does not involve the larynx, and is 8.0 cm from the tracheal margin. The tumor surrounds the hyoid bone, but does not appear to invade it grossly. The specimen will be submitted to the bone lab for assessment of the thyroid bone. The larynx is grossly unremarkable.

SECTION CODE: R1, tumor with relationship to left floor of mouth and mandibular mucosa; R2, tumor at base of tongue; R3, tumor with relation to anterior deep soft tissue edges; R4, tumor to pharynx; R5, tumor at epiglottis; R6-R8, representative sections of tumor with surrounding normal tissues; R9, representative normal right glottis; R10, representative normal left glottis. [REDACTED]

(S) LEFT PARAPHARYNGEAL SPACE #2 – A soft tissue excision (1.7 x 1.3 x 0.8 cm). The true margin, designated by the surgeon with ink, is reinked black. Perpendicularly sectioned and submitted in toto for frozen section in S1-S2. [REDACTED]

*FS/DX: NO TUMOR PRESENT. [REDACTED]

(T) ANTERIOR MANDIBLE - Received is a middle portion of mandible (9.5 x 3 x 1.2 cm). Grossly no tumor is seen on the specimen. Specimen is forwarded to the bone lab for the processing. [REDACTED]

INK CODE: Black – right resection margin, blue – left resection margin. [REDACTED]

SECTION CODE: T1, right resection margin, inked side down; T2, left resection margin, inked side down; T3-T5, representative cross section of mandible (T3 is in the midline). [REDACTED]

CLINICAL HISTORY

Squamous cell carcinoma

SNOMED CODES

T-51200, T-53000, T-24100, T-11180, M-80703,

"Some tests reported here may have been developed and performance characteristics determined by [REDACTED] Pathology and Laboratory Medicine. These tests have not been specifically cleared or approved by the U.S. Food and Drug Administration."

Entire report and diagnosis completed by [REDACTED]

ADDENDUM

This modified report is being issued to provide additional information/results.

Addendum completed by [REDACTED].

DIAGNOSIS

(T) ANTERIOR MANDIBLE:
SQUAMOUS CARCINOMA PRESENT INVADING BONE.
Bone margins negative for tumor

COMMENT

Additional sections reviewed following decalcification from part R are negative for invasion of bone and cartilage.

GROSS DESCRIPTION

(R) TONGUE, LARYNX, FLOOR OF MOUTH:
ADDITIONAL SECTION CODE: R11, representative section of the hyoid bone close to the tumor; R12-R14,
representative sections of cartilage for decalcification. [REDACTED]

[REDACTED]
Entire report and diagnosis completed by: [REDACTED]

Entire report and diagnosis completed by: [REDACTED]