

SUPPLEMENTAL REPORT

This supplemental report is issued to provide findings following decalcification of sections of mandible from [REDACTED]

Sections of bone nearest the tumor show no involvement by carcinoma.

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

Report released by: [REDACTED]

SIGNATURE:

ENTTRE REPORT ELECTRONICALLY SIGNED BY: [REDACTED]

DIAGNOSIS

(A) RIGHT MANDIBULECTOMY, GLOSSECTOMY, PHARYNGECTOMY:
INVASIVE MODERATELY DIFFERENTIATED SQUAMOUS CELL CARCINOMA OF RIGHT
BASE OF TONGUE (3.5 CM, INVADING TO DEPTH OF 1.5 CM).
PERINEURAL INVASION IDENTIFIED.
No lymphovascular invasion identified.
Margins with focal mild atypia but free of tumor.
Examination of bone sections pending decalcification
(supplemental report to follow).

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

GROSS DESCRIPTION

(A) RIGHT MANDIBULECTOMY, GLOSSECTOMY, PHARYNGECTOMY - Portion of tongue,
(9.0 x 4.5 x 3.5 cm) attached to bone, (7.0 x 2.0 x 0.7 cm). The specimen is
oriented by the surgeon.

A centrally located 3.5 x 2.5 x 2.0 cm submucosal tumor is present. The
tumor is 2.0 cm from the anterior end of the specimen, 3.5 cm from the
posterior end of the specimen, 3.0 cm from the medial aspect of the specimen

[REDACTED]

and 0.6 cm from the lateral mucosal margin. The attached bone is not involved by the tumor and is grossly unremarkable. The mucosa overlying the tumor is grossly intact. The maximum depth of invasion is 1.5 cm. The closest deep margin is 1.8 cm away. No other lesion is grossly seen.

INK CODE: Deep and mucosal margins.

SECTION CODE: A1,A14, entire circumferential mucosal margin, en face; A15-A19, tumor. A20-A21, deep margin, en face; A22, section away from the tumor. A23, bone closest to the tumor (pending decalcification). [REDACTED]

*FS/DX: MILD SQUAMOUS ATYPIA IN A5, A7, A3. All other margins are free of tumor. [REDACTED]

[REDACTED]

[REDACTED]