

**Pathology Report** [REDACTED] **FINAL**

**Report Type** ..... Pathology Report

**Date of Event** .... [REDACTED]

**Sex** ..... M

**Authored by** ..... [REDACTED]

**Hosp/Group** ..... [REDACTED]

**Record Status** .... FINAL

**FINAL DIAGNOSIS:**

PART 1: LYMPH NODES, RIGHT NECK LEVEL 1B, SELECTIVE DISSECTION

A. METASTATIC SQUAMOUS CELL CARCINOMA IN ONE OUT OF FIVE LYMPH NODES (1/5).

B. SIZE OF LARGEST METASTASIS: 0.3 CM.

C. EXTRACAPSULAR EXTENSION IS IDENTIFIED.

D. SUBMANDIBULAR GLAND WITH NO SIGNIFICANT PATHOLOGIC CHANGE.

PART 2: TONGUE, RIGHT, HEMIGLОСSECTOMY

A. INVASIVE SQUAMOUS CELL CARCINOMA, MODERATELY DIFFERENTIATED, 5 CM (see comment).

B. NO PERINEURAL INVASION IS SEEN.

C. ALL SURGICAL MARGINS ARE FREE OF CARCINOMA.

D. PATHOLOGIC STAGE (AJCC 7th EDITION): pT3 N2b.

PART 3: LYMPH NODES, MIDLINE NECK LEVEL 1A, SELECTIVE DISSECTION

ONE LYMPH NODE, NO TUMOR PRESENT (0/1).

PART 4: LYMPH NODES, RIGHT NECK LEVELS 2-4, SELECTIVE DISSECTION

A. METASTATIC SQUAMOUS CELL CARCINOMA IN ONE OUT OF TWENTY LYMPH NODES (1/20).

B. THE POSITIVE LYMPH NODE IS FROM LEVEL 2.

C. SIZE OF METASTASIS: 2.2 CM.

D. NO EXTRACAPSULAR EXTENSION IS SEEN.

**COMMENT:**

Additional studies to further evaluate this neoplasm have been ordered and the results will be reported in an addendum.

Pathologist: [REDACTED]

\*\* Report Electronically Signed Out \*\*

By Pathologist: [REDACTED]

My signature is attestation that I have personally reviewed the submitted material(s) and the final diagnosis reflects that evaluation.

**GROSS DESCRIPTION:**

The specimen is received fresh in four parts labeled with the patient's name, initials xx and medical record number.

Part 1 is designated "right level 1B neck dissection". It consists of a submandibular gland (3 x 2.5 x 2 cm) and attached fibroadipose tissue (6.5 x 4.5 x 2.5 cm). The cut surface of the gland is tan-white and multilobated.

Four lymph nodes are identified in the fibroadipose tissue varying in size from 1.2 x 1.0 x 0.6 cm to 0.5 x 0.5 x 0.4 cm. Representative sections are submitted as follows:

1A submandibular gland

1B one lymph node bisected

1C two lymph nodes

1D two lymph nodes.

Part 2 is designated "right hemiglосsectomy". The specimen measures 7 x 6 x

3.5 cm overall. The lateral surface shows two ulcers measuring 3.5 x 2.5 cm (ulcer #1) and 1.5 x 1 cm (ulcer #2), respectively. The larger ulcer is 1 cm from the anterior margin, 1.4 cm from the dorsal/deep margin and 1.1 cm away from the ventral/deep margin. The smaller ulcer is 0.5 cm away from the dorsal/deep margin and 2.5 cm away from the ventral/deep margin and 0.5 cm from the posterior margin. All the margins were evaluated intraoperatively. On serial sectioning, the larger ulcer shows a tan white mass (1.2 cm deep). The smaller ulcer also shows a tan white mass (0.2 cm in depth). The two masses grossly appear to be continuous with each other.

Ink code:

Blue ventral深深

Green dorsal深深

Yellow anterior

Orange soft palate/posterior

Red area banked.

Digital images are taken. Tumor was banked for head and neck [REDACTED] tissue bank.

Representative sections are submitted as follows:

2AFS anterior and posterior shave margins of tongue

2BFS ventral shave margin near ulcer #1

2CFS dorsal medial

2DFS posterior/uvula near ulcer

2EFS posterior/uvula near ulcer #2

2FFS deep (closest)

2G-2I tumor (ulcer #1)

2J tumor (ulcer #1 in relation to ulcer #2)

Part 3 is designated "level 1A". The specimen consists of fibroadipose tissue measuring 3.5 x 2.5 x 0.7 cm. One lymph node is identified measuring 0.8 x 0.7 x 0.7 cm. Representative sections are submitted as follows:

3A one lymph node

3B fibroadipose tissue.

Part 4 is designated "right neck levels 2-4, big nodes 2". It consists of fibroadipose tissue measuring 13 x 7 x 2 cm. An enlarged lymph node (4 x 3 x 3 cm) is identified at level 2. The cut surface is heterogeneous, tan-white and shows areas of softening and friability. Additional possible lymph nodes are identified at level 2, varying in size from 0.8 x 0.6 x 0.3 cm to 0.5 x 0.4 x 0.2 cm. Seven possible lymph nodes are identified at level 3, varying in size from 1.2 x 1 x 0.6 cm to 0.4 x 0.4 x 0.3 cm. Seven possible lymph nodes are identified in level 4 varying in size from 1 x 1 x 0.3 cm to 0.4 x 0.4 x 0.3 cm. Representative sections are submitted as follows:

4A two possible lymph nodes at level 2

4B-4D enlarged lymph node, level 2

4E two possible lymph nodes, level 3

4F two possible lymph nodes, level 3

4G three possible lymph nodes, level 3

4H one possible lymph node, level 4

4I two possible lymph nodes, level 4

4J two possible lymph nodes, level 4

4K two possible lymph nodes, level 4

4L possible lymph node, level 4

Dictated by: [REDACTED]

#### INTRAOPERATIVE CONSULTATION:

2AFS: ANTERIOR AND POSTERIOR TONGUE SHAVE MARGIN (frozen section)

A. SUFFICIENT FOR ANCILLARY STUDIES.

B. BENIGN.

C. NO TUMOR PRESENT [REDACTED]).

2BFS: VENTRAL MARGIN NEAR ULCER #1, SHAVE MARGIN (frozen section).

A. SUFFICIENT FOR ANCILLARY STUDIES.

B. BENIGN.

C. NO TUMOR PRESENT [REDACTED]).

2CFS: DORSAL MEDIAL SHAVE MARGIN (frozen section)

A. SUFFICIENT FOR ANCILLARY STUDIES.

B. BENIGN.

C. NO TUMOR PRESENT [REDACTED])

2DFS: POSTERIOR/UVULA NEAR ULCER #2, PERPENDICULAR MARGIN (frozen section)

A. SUFFICIENT FOR ANCILLARY STUDIES.

B. MALIGNANT.

C. SQUAMOUS CELL CARCINOMA.

D. MARGIN FREE [REDACTED])

2EFS: POSTERIOR/UVULA NEAR ULCER #2, PERPENDICULAR MARGIN (frozen section)

A. SUFFICIENT FOR ANCILLARY STUDIES.

B. MALIGNANT.

C. SQUAMOUS CELL CARCINOMA.

D. MARGIN FREE [REDACTED]).

2FFS: DEEP MARGIN (CLOSEST), PERPENDICULAR MARGIN (frozen section)

A. SUFFICIENT FOR ANCILLARY STUDIES.

B. BENIGN.

C. NO TUMOR PRESENT [REDACTED])

**MICROSCOPIC:**

Microscopic examination substantiates the above diagnosis.

The following statement applies to all immunohistochemistry, Insitu Hybridization Assays (ISH & FISH), Molecular Anatomic Pathology, and Immunofluorescent Testing:

The testing was developed and its performance characteristics determined by the [REDACTED] Department of Pathology, as required by the CLIA [REDACTED] regulations. The testing has not been cleared or approved for the specific use by the U.S. Food and Drug Administration, but the FDA has determined such approval is not necessary for clinical use. Tissue fixation ranges from a minimum of 2 to a maximum of 84 hours.

This laboratory is certified under the Clinical Laboratory Improvement Amendments of [REDACTED] ("CLIA") as qualified to perform high-complexity clinical testing. Pursuant to the requirements of CLIA, ASR's used in this laboratory have been established and verified for accuracy and precision. Additional information about this type of test is available upon request.

**CASE SYNOPSIS:**

**SYNOPTIC DATA - PRIMARY UPPER AERODIGESTIVE TRACT AND SALIVARY GLAND TUMORS**

SPECIMEN TYPE: Resection: right hemiglossectomy

TUMOR SITE: Oral Cavity

TUMOR SIZE: Greatest dimension: 5 cm

Additional dimensions: 3.5 x 2.5 cm

HISTOLOGIC TYPE: Squamous cell carcinoma, conventional

HISTOLOGIC GRADE: G2

PRIMARY TUMOR (pT): pT3

REGIONAL LYMPH NODES (pN): pN2b

Number of regional lymph nodes examined: 26

Number of regional lymph nodes involved: 2

Extra-capsular extension of nodal tumor: Present

DISTANT METASTASIS (pM): pMX

MARGINS: Margins uninvolved by tumor

VENOUS/LYMPHATIC (LARGE/SMALL VESSEL) INVASION (V/L):

Absent

PERINEURAL INVASION: Absent

---

PATIENT HISTORY:

CHIEF COMPLAINT/ PRE-OP/ POST-OP DIAGNOSIS: Oral carcinoma.

PROCEDURE: Neck dissection/glossectomy.

SPECIFIC CLINICAL QUESTION: Not given.

OUTSIDE TISSUE DIAGNOSIS: Not answered.

PRIOR MALIGNANCY: Not answered.

CHEMORADIATION THERAPY: Not answered.

ORGAN TRANSPLANT: Not answered.

IMMUNOSUPPRESSION: Not answered.

OTHER DISEASES: Not answered.

DICTATED BY: [REDACTED]

HISTO TISSUE SUMMARY/SLIDES REVIEWED:

Part 1: Right Level 1B Neck Dissection

Taken: [REDACTED] Received: [REDACTED]

Stain/cnt Block

H&E x 1 A

H&E x 1 B

H&E x 1 C

H&E x 1 D

Part 2: Right Hemiglossectomy

Taken: [REDACTED] Received: [REDACTED]

Stain/cnt Block

ANEG x 1 G

H&E Recut x 1 G

IEGFR x 1 G

IBNKNC x 1 G

H&E x 1 G

HPV x 1 G

P16 x 1 G

V-EGFR x 1 G

H&E x 1 H

H&E x 1 I

H&E x 1 J

H&E x 1 AFS

H&E x 1 BFS

H&E x 1 CFS

H&E x 1 DFS

H&E x 1 EFS

H&E x 1 FFS

Part 3: Level 1A Midline

Taken: [REDACTED] Received: [REDACTED]

Stain/cnt Block

H&E x 1 A

H&E x 1 B

Part 4: Right Neck Level 2-4

Taken: [REDACTED]

Received: [REDACTED]

Stain/cnt Block

H&E x 1 A

H&E x 1 B

H&E x 1 C

H&E x 1 D

H&E x 1 E

H&E x 1 F

H&E x 1 G

H&E x 1 H

H&E x 1 I

H&E x 1 J

H&E x 1 K

H&E x 1 L

TC1