

[REDACTED]  
Report Type ..... Pathology [REDACTED]

Sex ..... [REDACTED]

Authored by ..... [REDACTED]

Hosp/Group ..... [REDACTED]

Record Status .... FINAL

PATIENT HISTORY:

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

PROCEDURE: Mandibulectomy, left neck dissection.

SPECIFIC CLINICAL QUESTION: Not answered

OUTSIDE TISSUE DIAGNOSIS: Not answered.

PRIOR MALIGNANCY: Not answered.

CHEMOTHERAPY: Not answered.

ORGAN TRANSPLANT: Not answered.

IMMUNOSUPPRESSION: Not answered.

OTHER DISEASES: Not answered.

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FINAL DIAGNOSIS:

PART 1: LYMPH NODE, LEFT NECK LEVEL 1A, EXCISION

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

PART 2: LYMPH NODE, LEFT NECK LEVEL 1B, SELECTIVE DISSECTION

A. SIX LYMPH NODES, NO TUMOR PRESENT (0/6).

B. BENIGN SUBMANDIBULAR SALIVARY GLAND.

PART 3: TEETH, LEFT MANDIBULAR, EXTRACTION

A. FIVE INCISORS, ONE CANINE, ONE MOLAR TOOTH.

B. EXTENSIVE CAVITIES.

C. GROSS EXAMINATION ONLY (see comment).

PART 4: LYMPH NODES, LEFT NECK LEVELS 2 THROUGH 4, SELECTIVE DISSECTION

THIRTY-SEVEN LYMPH NODES, NO TUMOR PRESENT (0/37).

PART 5: "MEDIAL MARGIN", EXCISION

NO TUMOR PRESENT.

PART 6: BONE, LEFT MANDIBLE, COMPOSITE RESECTION

A. INVASIVE SQUAMOUS CELL CARCINOMA, KERATINIZING, POORLY DIFFERENTIATED, EXOPHYTIC PATTERN (3.0 CM).

B. NO ANGIOLYMPHATIC OR PERINEURAL INVASION.

C. ALL MARGINS ARE FREE OF TUMOR.

D. BONE INVASION PRESENT.

E. PATHOLOGIC STAGE: pT4a N0.

[REDACTED]  
COMMENT:

The specimen (part number) labeled as "teeth" has been subjected to a gross examination only. If it is desired that this specimen be processed for additional studies, particularly microscopic examination, it is suggested that the case pathologist be notified within two weeks of the sign-out date of this report. This is particularly important as specimens are routinely discarded after a prescribed period of time.

[REDACTED]

material(s) and the final diagnosis reflects that evaluation.

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#### GROSS DESCRIPTION:

The specimen is received in 6 parts.

Part 1 is received unfixed with the patient's name, initials [REDACTED] and "left neck level 1A". It consists of a 4.0 x 1.7 x 0.3 cm tan yellow fibrofatty soft tissue fragment that when sectioned reveal a few possible lymph nodes, up to 1.2 cm in greatest dimension. The specimen is submitted in toto in cassette 1A.

Part 2 is received unfixed with the patient's name, initials [REDACTED] and "left neck level 1B". It consists of a 5.2 x 4.5 x 2.0 cm tan yellow fibrofatty soft tissue fragment. Sectioning reveals a few possible tan-brown lymph nodes, up to 1.8 cm in greatest dimension, and a 4.0 x 2.5 x 1.2 cm salivary gland which has a tan brown focally hemorrhagic, nodular cut surface. No discrete lesions are identified.

Representative sections are submitted as follows:

2A-B- possible lymph nodes

2C-D- salivary gland

Part 3 is received unfixed with the patient's name, initials [REDACTED] and "teeth". It consists of five incisor teeth, one canine tooth, and one molar tooth all with attached root. The teeth show extensive cavities with decayed debris with no attached soft tissue. No sections are submitted; the specimen is a gross only.

Part 4 is received unfixed with the patient's name, initials [REDACTED] and "left neck levels 2-4". It consists of a 9.5 x 5.0 x 1.5 cm tan yellow lobulated fibrofatty soft tissue fragment. It is randomly designated into levels II, III, and IV which are serially sectioned for potential lymph nodes.

Level II contains a few possible tan-pink lymph nodes, up to 0.7 cm in greatest dimension. Level III contains a few possible tan-brown lymph nodes, up to 2.5 cm greatest dimension. Level IV contains a few possible tan-brown lymph nodes, up to 1 cm greatest dimension.

Representative sections are submitted as follows:

4A-C- level II, possible lymph nodes

4D- level III, possible lymph nodes

4E- level III possible lymph node, bisected, half submitted

4F-G- level IV, possible lymph nodes

Part 5 is received fresh with the patient's name, initials [REDACTED] and "medial margin". It consists of a 1.9 x 0.4 by less than 0.1 cm fragment of tan yellow to gray white glistening soft tissue with a suture identifying anterior (inked blue). The specimen is submitted in toto for frozen intraoperative consult and permanent embedding in cassette 5AFS.

Part 6 is received fresh with the patient's name, initials [REDACTED] and "composite resection left mandible". It consists of a portion of left mandible (6.5 cm from superior (ramus) to the angle and 5.0 cm from the angle to the body with a thickness of 0.3-0.7 cm) and attached mucosal soft tissue (4.0 x 4.0 x 1.8 cm).

The mucosal surface is gray-white and glistening with a 3.0 x 2.5 cm gray-white to tan-brown nodular mass (0.2 cm from the posterior and medial margins, 0.4 cm from the lateral margin, and 1.7 cm from the anterior margin). The mass has a gray white to tan-brown focally hemorrhagic firm cut surface which grossly appears to abut the underlying bone. The posterior and laryngeal nerve margins are submitted for frozen intraoperative consult (medial margin submitted in part 5).

The remaining bone and soft tissue are grossly unremarkable.

Ink Code-

Blue- lateral

Orange- anterior

Black- true soft tissue medial

Digital images are taken.

Representative sections are submitted as follows:

6AFS- frozen section, resubmitted, posterior margin

6BFS- frozen section, resubmitted, laryngeal nerve

6C- lateral mucosal margin, shave

6D- anterior mucosal margin, shave

6E- tumor and medial margin

6FDR- anterior bone, margin, shave following decalcification

6GDR- posterior bone, margin, shave following decalcification

6H-I- random tumor

6JDR- tumor and underlying bone

INTRAOPERATIVE CONSULTATION:

5AFS: MEDIAL MARGIN (frozen section)

A. BENIGN

B. MUCOSITIS WITH REACTIVE ATYPIA

6AFS: LEFT MANDIBLE, POSTERIOR MARGIN, SHAVE (frozen section)

A. BENIGN

B. NO TUMOR

6BFS: LARYNGEAL NERVE, MARGIN, SHAVE (frozen section)

A. BENIGN

B. NERVE

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 [REDACTED] as required by the CLIA

'88 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 1988 ("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: Composite resection of left mandible

TUMOR SITE: Oral Cavity

TUMOR SIZE: Greatest dimension: 3.0 cm

HISTOLOGIC TYPE: Squamous cell carcinoma, conventional

HISTOLOGIC GRADE: G3

PRIMARY TUMOR (pT): pT4a

REGIONAL LYMPH NODES (pN): pN0

Number of regional lymph nodes examined: 44

Number of regional lymph nodes involved: 0

DISTANT METASTASIS (pM): pMX

MARGINS: Margins uninvolved by tumor

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

Absent

PERINEURAL INVASION: Absent

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HISTO TISSUE SUMMARY/SLIDES REVIEWED:

Part 1: Left Neck Level 1A

[REDACTED] Stain/cnt Block

H&E x 1 A

Part 2: Left Neck Level 1B

[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 3: Teeth

[REDACTED] Part 4: Left Neck Level 2-4

[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

Part 5: Medial Margin

[REDACTED] Stain/cnt Block

H&E x 1 AFS

Part 6: Composite Resection Left Mandible

[REDACTED] Stain/cnt Block

H&E x 1 C

H&E x 1 D

H&E x 1 E

H&E x 1 H

H&E x 1

H&E x 1

H&E x 1

Decal x 1

H&E x 1

Decal x 1

H&E x 1

Decal x 1

H&E x 1

TC1