

Reg#: [REDACTED] Name: [REDACTED] DOB: [REDACTED] Sex: [REDACTED] Age: [REDACTED] User Name: [REDACTED]

ACCN Number	Order Test Code	Order Test Name	Last Updated
ACCN [REDACTED] Collected [REDACTED]	SPF	SP FINAL REPORT	Updated [REDACTED] Source: [REDACTED]

HISTORY:

History of case: Right neck swelling, dysphagia and odynophagia and bilateral otalgia. Fine needle aspiration shows squamous cell carcinoma.

GROSS:

1. "Left tongue base" Received in formalin in a small container is a 2.5 x 1.7 x 0.5 cm aggregate of pink, glistening and friable soft tissue fragments. (1 cassette, ns)
2. "Left A-E fold" Received in formalin in a small container is a 2.6 x 1.6 x 0.4 cm aggregate of pink-red, friable soft tissue fragments. (1 cassette, ns)

MICROSCOPIC DIAGNOSIS:

1. Left tongue base, biopsy: Invasive basaloid squamous cell carcinoma.
2. Left aryepiglottic fold, biopsy: Invasive basaloid squamous cell carcinoma.

I [REDACTED] the signing staff pathologist, have personally examined and interpreted the slides from this case.

[REDACTED]
(electronic signature)

Close