

SURGICAL PATHOLOGY REPORT



Accession Number: [REDACTED] Final Report

DIAGNOSIS:

- 1) VOCAL CORD, LEFT TRUE, BIOPSY: MINUTE FRAGMENTS OF KERATIN DEBRIS WITH ACUTE AND CHRONIC INFLAMMATION, NEGATIVE FOR MALIGNANCY;
- 2) MENTAL NERVE, BIOPSY: FIBROUS TISSUE AND SKELETAL MUSCLE, NEGATIVE FOR MALIGNANCY.
- 3) MARGIN, POSTERIOR BUCCAL, BIOPSY: SQUAMOUS MUCOSA WITH CHRONIC INFLAMMATION, NEGATIVE FOR MALIGNANCY.
- 4) MARGIN, ANTERIOR BUCCAL, BIOPSY: SQUAMOUS MUCOSA WITH CHRONIC INFLAMMATION; NEGATIVE FOR MALIGNANCY.
- 5) NERVE, INFERIOR ALVEOLAR, BIOPSY: BENIGN NERVE, NEGATIVE FOR MALIGNANCY.
- 6) PARAPHARYNGEAL FAT, BIOPSY: SALIVARY GLAND AND ADIPOSE TISSUE, NEGATIVE FOR MALIGNANCY.
- 7) NERVE, RIGHT PROXIMAL LINGUAL, BIOPSY: NERVE AND FIBROUS TISSUE, NEGATIVE FOR MALIGNANCY.
- 8) MAXILLARY TUBEROSITY, BIOPSY: SQUAMOUS MUCOSA, SKELETAL MUSCLE, FIBROUS AND GLANDULAR TISSUE, NEGATIVE FOR MALIGNANCY.
- 9) SOFT PALATE, BIOPSY: SQUAMOUS MUCOSA, NEGATIVE FOR MALIGNANCY.
- 10) PROXIMAL PERIOSTEUM, BIOPSY: FIBROUS AND ADIPOSE TISSUE WITH ACUTE INFLAMMATION; MINUTE FRAGMENT OF BONE, NEGATIVE FOR MALIGNANCY.
- 11) MARGIN, DEEP TONGUE, BIOPSY: SKELETAL MUSCLE AND ADIPOSE TISSUE, NEGATIVE FOR MALIGNANCY.
- 12) TONGUE, DEEP, EXCISION: ORAL MUCOSA AND SKELETAL MUSCLE, NEGATIVE FOR MALIGNANCY.
- 13) MANDIBLE, RIGHT, PARTIAL RESECTION: INVASIVE MODERATELY-DIFFERENTIATED SQUAMOUS CELL CARCINOMA, 4.2 CM IN GREATEST EXTENT, INVASIVE INTO THE MANDIBLE; PERINEURAL INVASION IS IDENTIFIED; THE TUMOR INVOLVES THE POSTERIOR AND ANTERIOR BONE MARGINS, THE POSTERIOR SOFT TISSUE MARGIN, AND THE SUPERIOR MUCOSAL MARGIN; THE TUMOR EXTENDS TO WITHIN 0.1 CM OF MEDIAL SOFT TISSUE MARGIN AND TO WITHIN 0.4

CM OF THE LATERAL SOFT TISSUE MARGIN; 45 LYMPH NODES, NEGATIVE FOR MALIGNANCY (0/45) (SEE COMMENT).

14) LYMPH NODE, RIGHT LEVEL 2B, EXCISION: ONE LYMPH NODE, NEGATIVE FOR MALIGNANCY (0/1).

15) LYMPH NODE, RIGHT NECK, EXCISION: 5 LYMPH NODES, NEGATIVE FOR MALIGNANCY (0/5).

16) SOFT TISSUE, NERVE, V3, NEUROVASCULAR BUNDLE, BIOPSY: FOCALLY INVOLVED BY CARCINOMA WITHIN SOFT TISSUE AND BONE; NERVE PRESENT AND UNINVOLVED.

COMMENT: This corresponds to AJCC stage IVA (pT4a,pN0,pMx)

Electronically signed by: [REDACTED]

CLINICAL DATA

Clinical Features/Dx: unspecified

Operator: [REDACTED]

Operation: unspecified

Operative Findings: unspecified

Operative Diagnosis: unspecified

Tissue Submitted: 1) left true vocal cord, 2) mental nerve, 3) posterior buccal, 4) anterior buccal, 5) inferior alveolar nerve, 6) parapharyngeal fat, 7) right proximal lingual nerve, 8) maxillary tuberosity, 9) soft palate, 10) proximal periosteum, 11) deep tongue margin, 12) deep tongue specimen 13) composite resection 14) right level 2 B 15) right selective neck 16) V-3 neurovascular bundle

GROSS DESCRIPTION:

1) SOURCE: Left True Vocal cord

Received fresh are two minute fragments of soft tissue, measuring 0.2 x 0.1 x 0.1 cm. These fragments are inked and entirely submitted for frozen section evaluation.

Summary of sections: 1AFSC, (sectioning has cut through most of the tissue), 2/1.

2) SOURCE: Mental Nerve

Received in saline is a fragment of soft tissue, measuring 0.7 x 0.2 x 0.2 cm. The specimen is entirely submitted for frozen section evaluation.

Summary of sections: 2AFSC, 1/1.

3) SOURCE: Posterior Buccal

Received fresh is one fragment of light pink soft tissue, measuring 1.6 x 0.6 x 0.4 cm. The specimen is entirely submitted for frozen section evaluation.

Summary of sections: 3AFSC, posterior buccal margin, 1/1.

4) SOURCE: Anterior Buccal

Received fresh is a fragment of light tan soft tissue, measuring 3.0 x 0.5 x 0.5 cm. The specimen is inked black and is entirely submitted for frozen section evaluation.

Summary of sections: 4AFSC, anterior buccal margin, 1/1.

5) SOURCE: Inferior Alveolar Nerve

Received fresh is a fragment of pale white soft tissue, measuring 0.4 x 0.3 x 0.3 cm. The specimen is entirely submitted for frozen section evaluation.

Summary of sections: 5AFSC, 1/1.

6) SOURCE: Parapharyngeal Fat

Received fresh is a fragment of soft tissue and salivary gland tissue, measuring 2.7 x 2.5 x 0.8 cm. The specimen is entirely submitted for frozen section evaluation.

Summary of sections: 6AFSC, 1/1.

7) SOURCE: Right Proximal Lingual Nerve

Received fresh is a fragment of pale white soft tissue, measuring 0.4 x 0.3 x 0.3 cm. The specimen is inked black. The specimen is entirely submitted for frozen section evaluation.

Summary of sections: 7AFSC, 1/1.

8) SOURCE: Maxillary Tuberosity

Received fresh is a fragment of light pink soft tissue, measuring 1.2 x 0.4 x 0.4 cm. The specimen is entirely submitted for frozen section evaluation.

Summary of sections: 8AFSC, 1/1.

9) SOURCE: Palate, Soft

Received fresh is a fragment of white-red soft tissue, measuring 1.6 x 0.3 x 0.5 cm. The outer surface of the specimen is inked black. The specimen is entirely submitted for frozen section evaluation.

Summary of sections: 9AFSC, 1/1.

10) SOURCE: Proximal Periosteum

Received fresh is a fragment of light red soft tissue, measuring 1.3 x 0.3 x 0.4 cm. The specimen is entirely submitted for frozen section evaluation.

Summary of sections: 10AFSC, 1/1.

11) SOURCE: Deep Tongue Margin

Received fresh is a fragment of light brown soft tissue, measuring 0.8 x 0.6 x 0.4 cm. The outer surface of the specimen is inked black. The specimen is entirely submitted for frozen section evaluation.

Summary of sections: 11AFSC, 1/1.

12) SOURCE: Deep Tongue Specimen

Received in saline is a fragment of soft tissue, measuring 2.3 x 1.7 x 1.5 cm. One edge of the specimen contains a mucosal surface, measuring 2.2 x 0.6 cm in horizontal dimension. A metallic staple is present, clamping off a portion of the specimen. The remaining surfaces of the specimen show cauterization artifact. The mucosal surface contains no grossly apparent lesions. The specimen is serially sectioned to reveal muscular tissue with no grossly apparent areas of firmness. No lesions are identified. The specimen is entirely submitted.

Summary of sections: 12A-B, deep tongue, 12A, 3/1, 12B, 2/1.

13) SOURCE: Composite Resection

"Composite resection" is received fresh and consists of a partial mandibulectomy specimen that is 10.0 cm from anterior to posterior, 9.0 cm from superior to inferior, and 5.0 cm from medial to lateral. The specimen contains a rectangular fragment of fibroadipose tissue (neck dissection) which measures 12.0 x 4.0 x 1.6 cm. The specimen is inked in the following manner: the superior surface is inked yellow, the inferior surface is inked black, the medial surface is inked orange, the lateral surface is inked green, the anterior surface is inked red, and the posterior surface is inked blue. The specimen is serially sectioned to reveal an irregular, lobulated, firm tan-gray lesion that measures 4.2 x 2.8 x 2.3 x cm. This lesion appears to arise from the mucosa of the floor of the mouth and is eroding the submucosal surface down to the mandible. The lesion grossly abuts the mandible but invasion cannot be identified grossly. This lesion abuts the medial soft tissue margin. The lesion appears to be 1.9 cm from the anterior margin, appears grossly to abut the superior margin, 0.5 cm from the lateral margin, 0.6 cm from the posterior margin, and 0.3 cm from the inferior margin. Bony shave margins are taken of the ramus (posterior) and the mandibular bony resection margin (anterior margin, shaved). A portion of the tumor is saved in RPMI, saved in the -80 freezer, saved in glutaraldehyde, and a small portion given to research. Bony shaved margins, soft tissue margins, and representative sections of tumor are submitted for evaluation following decalcification as follows:

Summary of sections: 13A-13B, posterior ramus bony shave margins, 13A, 1/1; 13B, 2/1; 13C, anterior shave margin (mandible margin), 1/1; 13D, cross section of anterior most lesion, 1/1; 13E, anterior aspect of lesion in cross section, 1/1; 13F, lesion approaching medial resection margin, 2/1; 13G, cross section of lesion superior/lateral aspect, 1/1; 13H, cross section of lesion, 1/1; 13I, lesion as it approaches mandible, 1/1; 13J, lesion approaching medial margin, 2/1; 13K, cross section of lesion adjacent to mandible, 1/1; 13L, cross section of lesion (medial to lateral), 1/1; 13M, lesion approaching inferior margin, 1/1;

13N, lesion approaching soft tissue aspect of lateral margin, 1/1; 13O, lesion approaching medial resection margin, 1/1; 13P, lesion approaching posterior resection margin, 1/1; 13Q, inferior soft tissue resection margin, 1/1; 13R-AA, lymph node dissection, submitted in order from most proximal to lesion to most distal to lesion (superior to inferior): 13T, three lymph nodes, largest bisected and inked blue, 4/1; 13S, three candidate lymph nodes, 3/1; 13P, one candidate lymph node, bisected, 2/1; 13U, three candidate lymph nodes, largest inked black and bisected, 4/1; 13V, five candidate lymph nodes, 5/1; 13W, one candidate lymph node serially sectioned, 4/1; 13X, four candidate lymph nodes, 4/1; 13Y, six candidate lymph nodes, 6/1; 13Z, six candidate lymph nodes, 6/1; 13AA, six candidate lymph nodes, 6/1.

14) SOURCE: Right Level 2B

The specimen is received in a container labeled, "right level 2B." The specimen is composed of fibroadipose tissue with lymph nodes and measures 3.5 x 2.0 x 0.2 cm in aggregate. Candidate lymph nodes are identified and dissected and submitted.

Summary of sections: 1A, candidate lymph nodes, 3/1.

15) SOURCE: Right Selective Neck

"Right selective neck" is received fresh and consists of a segment of fibroadipose tissue that is 4.7 x 2.1 x 0.7 cm. The specimen is carefully examined and candidate lymph nodes are submitted for evaluation as follows (approximately 50% of the specimen is submitted):
Summary of sections: 15A, large candidate lymph node trisected, 3/1; 15B, five candidate lymph nodes, 5/1.

16) SOURCE: V-3 Neurovascular Bundle

"V-3 neurovascular bundle" is received fresh and consists of a fragment of fibromuscular tissue containing two cylindrical vessels that is 2.7 x 1.5 x 0.6 cm. The specimen is serially sectioned and submitted in its entirety for evaluation as follows:

Summary of sections: 16A, neurovascular bundle, 5/1; 16B, remainder of specimen, 2/1.

Dictated by [REDACTED] 4.
Dictated by [REDACTED]
Dictated by [REDACTED]
source 14.
Dictated by [REDACTED]

Slides and report reviewed by Attending Pathologist.

SURGICAL PATHOLOGY INTRAOPERATIVE CONSULTATION

1) SOURCE: Left True Vocal cord

FROZEN SECTION DIAGNOSIS: INFLAMMATION, KERATINIZED DEBRIS AND BACTERIA.
[REDACTED]

2) SOURCE: Mental Nerve

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

3) SOURCE: Posterior Buccal

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

4) SOURCE: Anterior Buccal

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

5) SOURCE: right alveolar nerve

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

6) SOURCE: ParaPharyngeal Fat

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

7) SOURCE: Right Proximal Lingual Nerve

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

8) SOURCE: Maxillary Tuberosity

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

9) SOURCE: Palate , Soft

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

10) SOURCE: Proximal Periosteum

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

11) SOURCE: Deep Tongue Margin

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

Electronically signed by: [REDACTED]

SNOMED: T-11180,M-80703,