



PREVIOUS DIAGNOSIS INQUIRY

REPORT DATE:

PAGE #:

1

BIRTHDATE:

PAT TYPE:

SEX: M

ADM DATE:

OPER DATE:

REQ DOC:

PROCEDURE: SPHS

VERIFIED BY:

Thyroid cancer. Biopsy of left thyroid nodule revealed papillary carcinoma. Operative Procedure/Tissue Submitted: Total thyroidectomy with central neck dissection. (Note: Stitches on thyroid mark left lobe, long double lateral, short single superior.)

PROCEDURE: SPGD

VERIFIED BY:

1. "Total thyroid." A 23.5 gm, 8 x 4.5 x 2 cm total thyroid with an attached, 4 x 1.5 x 0.8 cm left anterior skeletal muscle and a 0.4 x 0.4 x 0.2 cm attached left superior ligament of Berry. The left lobe is inked blue, isthmus inked orange, right lobe inked green. Specimen is serially sectioned to reveal an ill-defined, 1.5 x 1.5 x 1.3 cm lesion with predominantly tan, granular cut surface and focal areas of white-pink streaks, likely involving the peripheral margin. Additionally, a 0.4 cm white nodule is present in the superior aspect of the isthmus. The remaining parenchyma is unremarkable red-brown. The specimen is submitted as follows:
 - 1A. Superior left lobe to ligament of Berry.
 - 1B-E. Representative sections of left lobe nodule.
 - 1F. Representative sections of anterior overlying muscle on left.
 - 1G. Isthmus.
 - 1H. Representative sections of right superior and inferior lobes.
 - 1I. Representative section of right mid.
2. "Right central neck contents." Received are two, 1.1 and 1.4 cm, yellow-pink, fibroadipose tissue fragments. Two lymph nodes are identified, 0.2 and 0.3 cm.
 - 2A. Two nodes and three suspicious fibroadipose tissue fragments.
3. "Left central neck contents." Received in formalin in a small container is a 2.5 x 2 x 1.5 cm, yellow-tan, fibroadipose tissue fragment and a 2.5 x 0.4 x 0.3 cm possible segment of vessel. Six lymph nodes are identified, 0.3 to 0.6 cm.
 - 3A. Six nodes.

ICD-0-3

carcinoma, papillary, thyroid 8260/3
Site: thyroid, NOS C73.9

PROCEDURE: SPMI

VERIFIED BY:

PAPILLARY THYROID CARCINOMA

Size of largest primary tumor: 1.5 cm.

Location(s): Left upper lobe.

Capsular Invasion: N/A (unencapsulated).

hw
10/1/12

PREVIOUS DIAGNOSIS INQUIRY

REPORT DATE: [REDACTED]

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PATIENT NBR: [REDACTED]

PAT TYPE: [REDACTED]

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2

SEX: M

ADM DATE: [REDACTED]

ACCESSION: [REDACTED]

OPER DATE: [REDACTED]

REQ DOC: [REDACTED]

Vascular Invasion: No.

Margins: Positive.

Extrathyroidal extension: Yes.

Lymph node metastases: Yes.

Extranodal extension: No.

SIDE	LEVEL	#POSITIVE NODES	#TOTAL NODES
Right	Central neck contents	4	4
Left	Central neck contents	3	3
Isthmus	Perithyroidal	1	1

PROCEDURE: SPDX

VERIFIED BY: [REDACTED]

1. Thyroid, total thyroidectomy: Well-differentiated papillary thyroid carcinoma, classical type (1.5 cm), with extrathyroidal extension, and focally involving margins. Please see TEMPLATE for details. Metastatic papillary thyroid carcinoma in one of one lymph nodes at isthmus (1/1).

2. Lymph nodes, right central neck, excision: Metastatic papillary thyroid carcinoma in four of four lymph nodes (4/4).

3. Lymph nodes, left central neck, excision: Metastatic papillary thyroid carcinoma in three of three lymph nodes (3/3).

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

Code:

FC

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HIPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case Is (Circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	[Signature]	[Signature]
Date Reviewed:	7/16/12	9/19/12