

Redacted



ICD-0-3

Clinical Case Report

carcinoma, squamous cell NOS (For
8070/3

Site: Tongue, NOS C02.9

W 9/26/12

Informed Consent

I personally informed this patient that a specimen(s) would be collected to be used for research purposes. I reviewed the **RESEARCH SUBJECT INFORMATION AND CONSENT FORM** with the patient and answered any questions the patient had. The patient then signed the consent form as a free and voluntary act. A copy of this informed consent document will be retained at our institution.

Name of Physician or Study Coordinator

Signature

Date

Clinical Information

GENERAL INFORMATION				
Date of Birth (mm/dd/yyyy)	Height	Marital Status		Race
	5'3"	<input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow		VIETNAMESE
Gender	Weight			Blood Pressure
<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	56 kg			10/6
				Heart Rate

HISTORY OF PRESENT ILLNESS
Chief Complaints: An ulceration at the tongue; painful.
Symptoms: Fever.
Clinical Findings:
Performance Scale (Karnofsky Score): <input type="checkbox"/> 100 Asymptomatic <input type="checkbox"/> 80-90 Symptomatic but Fully Ambulatory <input checked="" type="checkbox"/> 60-70 Symptomatic, in bed less than 50% of day <input type="checkbox"/> 40-50 Symptomatic, in bed more than 50% of day, but not bed ridden <input type="checkbox"/> 20-30 Bed Ridden

CURRENT MEDICATIONS				
Drug	Dose	Route	Frequency	Date (mm/dd/yyyy)
				/ / To / /
				/ / To / /
				/ / To / /
				/ / To / /
				/ / To / /

PAST MEDICAL HISTORY			
Diagnosis/Disease/Disorder/Injury	Diagnosis Date	Treatment	Status

OB/GYN HISTORY			
Menopausal Status <input type="checkbox"/> Pre-menopausal <input type="checkbox"/> Peri-Menopausal <input checked="" type="checkbox"/> Post-menopausal	Date of First Menses _____		# of Pregnancies _____
	Date of Last Menses _____		# of Live Births _____
	Birth Control: <input type="checkbox"/> Condom <input type="checkbox"/> Oral Contraceptive <input checked="" type="checkbox"/> IUD <input type="checkbox"/> Other: _____		Hormone Replacement Therapy: _____

SOCIAL HISTORY				
Occupation: _____		Environmental Hazards: _____		
Smoking History				
Current Status	TYPE	Packs/day	Duration	When Quit
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			(yrs)	(yr)
Alcohol Consumption				
Current Status	TYPE	Drinks/day	Duration	When Quit
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			(yrs)	(yr)
Drug Use				
Current Status	TYPE	Frequency	Duration	When Quit
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			(yrs)	(yr)

FAMILY MEDICAL HISTORY		
Relative	Diagnosis	Age of Diagnosis

LAB DATA					
Test	Result	Date	Test	Result	Date
HIV	<input checked="" type="checkbox"/> Negative <input type="checkbox"/> Positive: _____		CEA	<input type="checkbox"/> Negative <input type="checkbox"/> Positive: _____	
Hep B	<input checked="" type="checkbox"/> Negative <input type="checkbox"/> Positive: _____		CA 15-3	<input type="checkbox"/> Negative <input type="checkbox"/> Positive: _____	
Hep C	<input checked="" type="checkbox"/> Negative <input type="checkbox"/> Positive: _____		CA 19-9	<input type="checkbox"/> Negative <input type="checkbox"/> Positive: _____	
AFP	<input type="checkbox"/> Negative <input type="checkbox"/> Positive: _____		PSA	<input type="checkbox"/> Negative <input type="checkbox"/> Positive: _____	
Other:	<input type="checkbox"/> Negative <input type="checkbox"/> Positive: _____		Other:	<input type="checkbox"/> Negative <input type="checkbox"/> Positive: _____	
B/T Cell Markers: _____					

DIAGNOSTIC STUDIES		
Study	Results	Date
Ultrasound		
X-Ray		
CT		
Endoscopy		
MRI		
Biopsy X		

CLINICAL DIAGNOSIS	
Preoperative Clinical Diagnosis	
Tongue Cancer	
Location of Suspected Involved Lymph Nodes	Location of Suspected Distant Metastasis
Clinical Staging	Date of Diagnosis
T2 N1 M0 Stage: III	

Treatment Information

SURGICAL TREATMENT		
Procedure	Date of Procedure	
Resection 1/3 part of the tongue		
Primary Tumor		
Organ	Detailed Location	Size
Tongue Tumor	Back of the Tongue	3.5 x 3 x 2 cm
Extension of Tumor		
Lymph Nodes		
Description	Location of Lymph Nodes	# of Lymph Nodes
Palpable, Non-Dissected Lymph Nodes		
Dissected Lymph Nodes		
Distant Metastasis		
Organ	Detailed Location	Size
Surgical Staging		
T2 N1 M0 Stage: III		

NEOADJUVANT THERAPY (Chemo, Radiation, Immuno, Hormonal, or Molecular)				
Drug/Treatment	Dose	Route	Frequency	Date (mm/dd/yyyy)
				/ / To / /
				/ / To / /
				/ / To / /
				/ / To / /
				/ / To / /

Pathology Form

Specimen Information

Collected by: ____

____ Date:

____ Time:____

Preserved by: ____

Date:

Time:

SPECIMEN TYPE (# of samples provided)							
Frozen		Paraffin Block		Blood/Serum/Plasma		Slide	
Diseased	Normal	Diseased	Normal	Diseased	Normal	Diseased	Normal
4	0	4	0			4	0
Time to LN2		Time to Formalin		Time to LN2			
9 min		10 min					

PATHOLOGICAL DESCRIPTION			
Primary Tumor			
Organ	Size	Extension of Tumor	Distance to NAT
Tongue Tumor	3.5 x 3 x 2 cm	head of Tongue	cm
Lymph Nodes			
Location	# Examined	# Metastasized	
Distant Metastasis			
Organ	Detailed Location	Size	
Pathological Staging			
pT ₂ N ₁ M ₀ Stage: <u>III</u>			
Notes: Nodes 2 (positive 1, Negative 1)			

Microscopic Description

Histological Pattern											
Cell Distribution			+	-	Structural Pattern			+	-		
Diffuse			X		Streaming						
Mosaic					Storiform						
Necrosis					Fibrosis						
Lymphocytic Infiltration					Palisading						
Vascular Invasion					Cystic Degeneration						
Clusterized					Bleeding						
Alveolar Formation					Myxoid Change						
Indian File					Psammoma/Calcification						

Cellular Differentiation																			
Squamous			+	-	Adenomatous			+	-	Sarcomatous			+	-	Lymphomatous			+	-
Squamoid Cell			X		Glandular cell					Round Cell					Large Cell				
Spindle Cell					Cell Stratification					Fibroblast					Small Cell				
Keratin			X		Secretion					Osteoblast					RS Cell/RS Like				
Desmosome					Intracyt. Vacuole					Lipoblast					Inflam. Cell				
Pearl					Gland formation					Myoblast					Plasma Cell				

Cellular Differentiation:	X	Well	Moderate	Poor
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Nuclear Appearance				
Nuclear Atypia:	0	I	II	III
Aniso Nucleosis		X		
Hyperchromatism			X	
Nucleolar Prominent			X	
Multinucleated Giant Cell			X	
Mitotic Activity		X		

Nuclear Grade:				
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IHC Data			
Marker	Result	Value	Date
ER	<input type="checkbox"/> Negative <input type="checkbox"/> Positive		
PR	<input type="checkbox"/> Negative <input type="checkbox"/> Positive		
Her-2/neu	<input type="checkbox"/> Negative <input type="checkbox"/> Positive		
B-Cell Marker	<input type="checkbox"/> Negative <input type="checkbox"/> Positive		
T-Cell Marker	<input type="checkbox"/> Negative <input type="checkbox"/> Positive		
Other:	<input type="checkbox"/> Negative <input type="checkbox"/> Positive		
Other:	<input type="checkbox"/> Negative <input type="checkbox"/> Positive		

Final Pathology Report

Histological Diagnosis: Carcinoma of the Tongue
(Well differentiated) pT2N1M0 **Grade:** 1

Comments:

Principal Investigator
Pathologist
Date

CONSOLIDATED DIAGNOSTIC PATHOLOGY FORM*

Microscopic Appearance:

1. Histological pattern:

CELL DISTRIBUTION			STRUCTURAL PATTERN		
	+	-		+	-
Diffuse		X	Streaming		
Mosaic	X		Storiform		
Necrosis	X		Fibrosis		
Lymphocytic Infiltration	X		Palisading		
Vascular Invasion		X	Cystic Degeneration		
Clusterized	X		Bleeding		
Alveolar Formation		X	Myxoid Change		
Indian File		X	Psmmoma/Calcification		

2. Cellular features:

Squamous	+	-	Adenomatous	+	-	Sarcomatous	+	-	Lymphomatous	+	-
Squamous Cell	X		Glandular cell			Round Cell			Large Cell		
Spindle Cell	X		Cell Stratification			Fibroblast			Small Cell		
Keratin	X		Secretion			Osteoblast			RS Cell/RS Like		
Desmosome	X		Intracyt. Vacuole			Lipoblast			Inflam. Cell		
Pearl	X		Gland formation			Myoblast			Plasma Cell		

Otherwise Specified:

1, 50%, 2, 60%, 3, 50%, 4, 5%, Necrosis 12

2. Cellular Differentiation:

Well	Moderately	Poor
X		

3. Nuclear Atypia:

Nuclear Appearance	0	I	II	III
Aniso Nucleosis		X		
Hyperchromatism		X		
Nucleolar Prominent		X		
Multinucleated Giant Cell		X		
Mitotic Activity		X		
Nuclear Grade				
		X		

Histological Diagnosis: *Squamous Cell Carcinoma, G-1*

Comments: *M1: Carcinoma metastasized to LA
M2: Chronic Lymphadenitis*

Date

Director, Research pathology

***(INTEGRATED REPORT OF FINDINGS BY CONTRIBUTOR AND**

PATHOLOGIST STAFF FOR RESEARCH USE ONLY).

Criteria	Yes	No
Diagnosis Discrepancy		X
Primary Tumor Site Discrepancy		X
HIPAA Discrepancy		X
Prior Malignancy History		X
Dual/Synchronous Primary Notes		X
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewed Initials	Date Reviewed: 8/30/12	

8/30/12