



## SURGICAL PATHOLOGY REPORT

Patient Name: [REDACTED]  
Med. Rec. #: [REDACTED] Visit #: [REDACTED]  
DOB: [REDACTED] Sex: Male  
Soc. Sec. #: [REDACTED] Location: [REDACTED]  
Physician(s): [REDACTED]

Accession #: [REDACTED]  
Service Date: [REDACTED]  
Received: [REDACTED]  
Client: [REDACTED]

### FINAL PATHOLOGIC DIAGNOSIS

#### Kidney and adrenal:

1. Renal cell carcinoma, papillary (chromophil) type, Fuhrman grade 2, 10 cm in diameter, closest approach to anterior superior fascial inked margin >0.1 cm.
2. Distal ureteral and vascular resection margins, free of tumor.
3. Adrenal gland, no tumor seen.

#### COMMENT:

##### Kidney tumor *Kidney Tumor Synoptic Comment*

- Histologic type: Renal cell carcinoma, papillary (chromophil) type
- Grade: Fuhrman grade 2.
- Maximum tumor diameter: 10 cm.
- Site within kidney: Upper pole.
- Renal pelvis: Normal.
- Ureter: Normal
- Renal sinus: Normal, no tumor.
- Hilar renal veins: Normal, no tumor
- Intrarenal veins and lymphatics: Normal, no tumor
- Adrenal gland: Normal.
- Capsule/perirenal fat: Tumor penetrates capsule with gross tumor in perirenal fat.
- Hilar lymph nodes (number positive/number of nodes): 0/0.
- Resection margins: No tumor identified.
- Proximity to nearest margin: > 0.1 cm at anterior superior fascial inked margin [slide A4].
- Stage: pT<sub>2</sub>N<sub>x</sub>M<sub>x</sub>.

ICD-O-3

Carcinoma, papillary  
renal cell 82603

Site @ Kidney NOS C64.9  
9/28/2014

Specimen(s) Received  
A: Kidney and adrenal

## Clinical History

The patient is a [REDACTED]-year-old man with a left renal mass.

## Gross Description

The specimen is received in formalin in one part, labeled with the patient's name, medical record number, and "left kidney." It consists of a nephrectomy specimen, weighing 1078 gm and measuring 19.0 cm from superior to inferior, 13.0 cm from medial to lateral, and 7.0 cm from anterior to posterior. The specimen is received bisected, with the external fatty surface marked with black ink. Additional sagittal sections of the specimen are also noted upon manipulation. The cut surface of the sectioned specimen shows a ragged, soft, yellow, necrotic tumor, measuring 10.0 cm, which appears to be circumscribed; this is situated at the superior pole of the kidney. On further inspection, the tumor appears to abut on the renal cortex and does not involve the adjacent renal medulla, renal pelvis or calices. Cut section of the renal pelvis and renal sinus shows no tumor involvement in this area. Search for lymph nodes is performed within the renal hilum/renal sinus area, and no lymph nodes are identified. Gross inspection of the sagittal sections of this tumor shows that the nearest approach to the external inked surface of the perirenal adipose tissue is 0.3 cm at the superior-anterior region. The ureter is identified and measures approximately 3.5 cm in length and 0.5 cm in diameter. The renal vessels are also identified. The ureter and vascular resection margins are grossly free of tumor. The adrenal gland is identified and measures 5.0 x 2.0 x 1.0 cm. The tumor does not involve the adrenal gland grossly. The kidney is red-brown and normal in shape; it measures 12.0 x 5.0 x 3.0 cm and the renal capsule strips with ease. Additional transverse sections of the specimen shows no other tumor lesions. Representative sections of the specimen are submitted as follows:

- Cassette A1: Ureteral margin (en face).
- Cassette A2: Vein and artery surgical resection margins (en face).
- Cassette A3: Adrenal gland.
- Cassette A4: Tumor at its nearest approach to the perirenal fat at the anterior-superior area.
- Cassettes A5-A6: Sections of tumor in relation to the kidney cortex, medulla, and calices.
- Cassette A7: Superficial cortex and tumor interface.
- Cassette A8: Additional cortex and tumor interface at mid kidney.
- Cassettes A9, A10: Full thickness section of kidney with tumor interface (bisected)
- Cassette A11: Full thickness section of kidney with tumor interface (bisected)

Diagnosis based on gross and microscopic examinations. Final diagnosis made by attending pathologist following review of all pathology slides.

[REDACTED] Pathology Resident

Electronically signed out on [REDACTED] pathologist

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	Jhe	Date Reviewed: 12/24/2013