

## Anat Path Reports

\* Final Report \*

Document Type: Anat Path Reports  
Document Date:  
Document Status: Auth (Verified)  
Document Title: Histoloav  
Performed By:  
Verified By:  
Encounter info:

ICD 6-3

Carcinoma, squamous  
cell NOS 08070/3  
Site Tongue C62.9  
<sup>edge</sup>  
<sup>path</sup> Border of tongue C62.1

JW 4/4/14

(Verified)

UUID:0F2D03F8-2B09-450E-B497-84AF7BEB4865  
TCGA-QK-A652-01A-PR Redacted



Patient Name:

MRN:

Location:

Client:

Submitting Phys:

DOB:

Gender: M

Collected:

Head and Neck

Received:

Reported:

## Final Surgical Pathology Report

### Final Pathologic Diagnosis

#### A. LATERAL TONGUE, LEFT, PARTIAL GLOSSECTOMY, A1FS:

- KERATINIZING SQUAMOUS CELL CARCINOMA, MODERATELY DIFFERENTIATED (1.5 X 1.4 X 0.9 CM) WITH AN INFILTRATIVE AND DISCONTINUOUS PATTERN OF GROWTH.
- CARCINOMA INVades SKELETAL MUSCLE BUNDLES.
- PERINEURAL AND LYMPHOVASCULAR INVASION ARE PRESENT.
- MUCOSAL (SEE PARTS B,C,E,F) AND SOFT TISSUE MARGINS NEGATIVE FOR CARCINOMA.
- SEE SYNOPTIC REPORT.

#### B. TONGUE, MEDIAL (DORSAL), EXCISION, B1FS:

- NEGATIVE FOR HIGH GRADE DYSPLASIA AND INVASIVE CARCINOMA.

#### C. TONGUE, LATERAL, EXCISION, C1FS:

- NEGATIVE FOR HIGH GRADE DYSPLASIA AND INVASIVE CARCINOMA.

#### D. TONGUE, ANTERIOR, EXCISION, D1FS:

- INVASIVE SQUAMOUS CELL CARCINOMA.
- SEE PART F FOR FINAL MARGIN STATUS.

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W 5/6/13

NOTE	Yes	No
QUALIFIED	DISQUALIFIED	
Date reviewed: 4/14/13		

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**E. TONGUE, POSTERIOR, EXCISION, E1FS:**

- NEGATIVE FOR HIGH GRADE DYSPLASIA AND INVASIVE CARCINOMA.

**F. TONGUE, ANTERIOR, EXCISION, F1FS:**

- NEGATIVE FOR HIGH GRADE DYSPLASIA AND INVASIVE CARCINOMA.

**G. LYMPH NODES, LEFT LEVEL I, NECK DISSECTION:**

- BENIGN SALIVARY GLAND.
- NINE LYMPH NODES NEGATIVE FOR CARCINOMA (0/9).

**H. LYMPH NODES, LEFT LEVEL II, NECK DISSECTION:**

- TWELVE LYMPH NODES NEGATIVE FOR CARCINOMA (0/12).

**I. LYMPH NODES, LEFT LEVEL III, LEFT,NECK DISSECTION:**

- ONE OF SEVEN LYMPH NODES POSITIVE FOR METASTATIC CARCINOMA (1/7).
- LARGEST FOCUS OF CARCINOMA MEASURES 1.5MM IN A 9MM LYMPH NODE.
- NO EXTRACAPSULAR SPREAD.

**J. LYMPH NODES, LEFT LEVEL IV, NECK DISSECTION:**

- ELEVEN LYMPH NODES NEGATIVE FOR CARCINOMA (0/11).

**Electronically Signed by**

Assisted by:

**Synoptic Worksheet**

**A. Left lateral tongue single stitch - medial:**

Clinical History:	No neoadjuvant therapy
Specimen:	Lateral border of tongue
Received:	Fresh
Procedure:	Glossectomy: partial glossectomy, left Neck (lymph node) dissection: Selective, left, level I-IV
Specimen Integrity:	Intact
Specimen Size:	Greatest dimension: 4.2 cm Additional dimension: 2.7 cm Additional dimension: 2.7 cm
Specimen Laterality:	Left
Tumor Site:	Lateral border of tongue
Tumor Focality:	Single focus
Tumor Size:	Greatest dimension: 1.5 cm Additional dimension: 1.4 cm Additional dimension: 0.9 cm
Tumor Thickness (pT1 and pT2 tumors):	

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Tumor Description:	Tumor thickness: 9 mm Measured from intact surface mucosa
Macroscopic Extent of Tumor:	Endophytic
Histologic Type:	Skeletal muscle bundles
Histologic Grade:	Squamous cell carcinoma, conventional
Microscopic Tumor Extension:	G2: Moderately differentiated
Margins:	Skeletal muscle bundles
Treatment Effect:	Margins uninvolved by invasive carcinoma
Lymph-Vascular Invasion:	Margins uninvolved by carcinoma in situ (includes moderate and severe dysplasia)
Perineural Invasion:	Not identified
Lymph Nodes, Extranodal Extension:	Present
Pathologic Staging (pTNM):	Present
TNM Descriptors:	Not identified
Primary Tumor (pT):	Not applicable
Regional Lymph Nodes (pN):	pT1: Tumor 2 cm or less in greatest dimension pN1: Metastasis in a single ipsilateral lymph node, 3 cm or less in greatest dimension Number of regional lymph nodes examined: 39 Number of regional lymph nodes involved: 1 Size (greatest dimension) of the largest positive lymph node: 0.15 cm
Distant Metastasis (pM):	Not applicable
Additional Pathologic Findings:	Other: Discontiguous spread of tumor

### Clinical History

Tongue lesion. Glossectomy/neck dissection.

### Specimen(s) Received

- A: Left lateral tongue single stitch - medial
- B: Medial margin
- C: Lateral margin
- D: Anterior margin
- E: Posterior margin
- F: Anterior margin #2
- G: Left neck level 1
- H: Left neck level 2
- I: Left neck level 3
- J: Left neck level 4

### Gross Description

Specimen A is received fresh for intraoperative consultation in a container labeled with the patient's name, medical record number and designated "left lateral tongue." Received is an oriented portion of tongue measuring 4.2 x 2.7 x 2.7 cm. Single stitch medial/dorsal tongue. There is a mucosal surface measuring 2.5 x 2.4 cm. On the mucosal surface there is an ulcer measuring 1.2 x 0.7 cm.

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Underlying the ulcerative lesion there is a white firm mass measuring 1.5 x 1.4 cm and 0.9 cm deep. The mass is located approximately 1.1 cm from the deep margin, 0.5 cm from anterior, and 1.5 cm from the posterior margin. The remainder of the parenchyma has focal areas of hemorrhage. The specimen is submitted for Tumor Banking. The specimen is inked as follows: anterior, orange; posterior, green; medial, blue; lateral, yellow and deep, black. Representative sections are submitted as stated below. (Dictated by Dr [REDACTED])

Specimen B is received fresh for intraoperative consultation in a container labeled with the patient's name, medical record number and designated "medial margin." Received is a portion of tissue measuring 4.7 x 0.6 x 0.4 cm. The specimen is submitted entirely for frozen section as "B1FS." (Dictated by Dr [REDACTED]).

Specimen C is received fresh for intraoperative consultation in a container labeled with the patient's name, medical record number and designated "lateral margin." Received is a portion of tissue measuring 3.5 x 0.3 x 0.2 cm. The specimen is submitted entirely for frozen section in cassette "C1FS." (Dictated by Dr [REDACTED]).

Specimen D is received fresh for intraoperative consultation in a container labeled with the patient's name, medical record number and designated "anterior margin." Received is a portion of tissue measuring 1.7 x 0.7 cm and being 0.9 cm deep. The specimen is bisected and submitted entirely as "D1FS." (Dictated by Dr [REDACTED]).

Specimen E is received fresh for intraoperative consultation in a container labeled with the patient's name, medical record number and designated "posterior margin." Received is a portion of soft tissue measuring 1.5 x 0.4 x 0.3 cm. The specimen is submitted entirely for frozen section as "E1FS." (Dictated by Dr [REDACTED]).

Specimen F is received fresh for intraoperative consultation in a container labeled with the patient's name, medical record number and designated "anterior margin #2." Received is a portion of tissue measuring 3.8 x 0.7 x 0.5 cm. The specimen is submitted entirely for frozen section as "F1FS." (Dictated by Dr [REDACTED]).

Specimen G is received in fixative in a container labeled with the patient's name, medical record number and designated "left neck, level 1." Received is a portion of fibroadipose tissue measuring 4.9 x 4.2 x 2.4 cm. Salivary gland is unremarkable. Ten possible lymph nodes are identified ranging from 0.2 to 1.0 cm in greatest dimension. Representative sections are submitted as stated below. (Dictated by Dr [REDACTED]).

Specimen H is received in fixative in a container labeled with the patient's name, medical record number and designated "left neck, level 2." Received is a portion of soft tissue measuring 4.2 x 3.1 x 2.0 cm. Thirteen possible lymph nodes are identified ranging from 0.2 to 2.5 cm in greatest dimension. Representative sections are submitted as stated below. (Dictated by Dr [REDACTED]).

Specimen I is received in fixative in a container labeled with the patient's name, medical record number and designated "left neck, level 3." Received is a portion of fibrofatty tissue measuring 3.6 x 2.3 x 0.9 cm. Five possible lymph nodes are identified ranging from 0.3 to 1.3 cm in greatest dimension. Representative sections are submitted as stated below. (Dictated by Dr [REDACTED]).

Specimen J is received in fixative in a container labeled with the patient's name, medical record number and designated "left neck, level 4." Received is a portion of fibroadipose tissue measuring 4.4 x 2.8 x 2.1 cm. Thirteen possible lymph nodes are identified ranging from 0.2 to 1.8 cm. Representative sections are submitted as stated below. (Dictated by Dr [REDACTED]).

### CASSETTE SUMMARY:

A1FS: Shaved of deep margin  
A2-4: Remainder of mass  
A5-8: Remainder of mucosa and underlying parenchyma  
G1: Representative section of salivary gland

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G2:	Three possible lymph nodes
G3:	Four possible lymph nodes
G4:	Three possible lymph nodes
H1,2:	One lymph node, bisected
H3:	Two lymph nodes, one bisected and inked blue
H4:	Two possible lymph nodes
H5:	Four possible lymph nodes
H6:	Four possible lymph nodes
I1:	Two possible lymph nodes
I2:	Three possible lymph nodes
J1:	Two possible lymph nodes
J2:	Three possible lymph nodes
J3:	Two possible lymph nodes
J4:	Three possible lymph nodes
J5:	Three possible lymph nodes

### **Intraoperative Consult Diagnosis**

A1FS: SHAVE OF DEEP MARGIN, (FROZEN SECTION): NEGATIVE FOR INVASIVE CARCINOMA.  
Frozen section results were communicated to the surgical team and were repeated back by Dr.

B1FS: MEDIAL (DORSAL) MARGIN SHAVE, (FROZEN SECTION): NEGATIVE FOR CARCINOMA.

C1FS: LATERAL MARGIN SHAVE, (FROZEN SECTION): NEGATIVE FOR CARCINOMA.

D1FS: ANTERIOR MARGIN SHAVE (FROZEN SECTION): INVASIVE SQUAMOUS CELL CARCINOMA/POSITIVE

E1FS: POSTERIOR MARGIN SHAVE, (FROZEN SECTION): NEGATIVE FOR CARCINOMA.

Frozen section results were communicated to the surgical team and were repeated back by Dr.

F1FS: ANTERIOR MARGIN #2, (FROZEN SECTION): NEGATIVE FOR CARCINOMA.  
Frozen section results were communicated to the surgical team and were repeated back by Dr.

Pathologist:

### **Microscopic Description**

Microscopic examination performed.

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