

Results

Surgical Pathology

Result Data

ACCESSION

Entry Date

Component Results

Component

Lab

Clinical History

Tongue cancer.

Gross Examination

A. "Right lateral tongue lesion", received unfixed for frozen section and placed in formalin on [REDACTED] is a 0.9 x 0.4 x 0.2 cm tan-gray fragment of soft tissue submitted entirely for frozen section as AF1. The frozen section remnant is submitted in A1.

B. "Anterior gingival margin", received unfixed and placed in formalin on [REDACTED] is a 2.1 x 0.2 x 0.2 cm tan-gray, focally hemorrhagic fragment of soft tissue submitted entirely for frozen section BF1. The frozen section remnant is submitted in B1.

C. "Deep tongue margin", received unfixed for frozen section and placed in formalin on [REDACTED] is a 2.5 x 1.2 x 0.5 cm red-brown fragment of soft tissue. The specimen is entirely submitted for frozen section as CF1. The frozen section remnant is submitted in C1.

D. "Anterior tongue attachment", received unfixed for frozen section and placed in formalin on [REDACTED] is a 0.5 x 0.3 x 0.2 cm tan-red fragment of soft tissue submitted entirely for frozen section as DF1. The frozen section remnant is submitted in D1.

E. "Right floor of mouth", received unfixed and placed in formalin on [REDACTED] is a 2.5 x 0.5 x 0.3 cm tan, elongated, focally hemorrhagic fragment of mucosal tissue submitted entirely for frozen as EF1. The frozen section remnant is submitted in E1.

F. "Right posterior tongue margin", received unfixed for frozen section and placed in formalin on [REDACTED] is a 3.2 x 0.4 x 0.2 cm tan-red, focally hemorrhagic fragment of soft tissue submitted entirely for frozen section as FF1. The frozen section remnant is submitted in F1.

G. "Left floor of mouth", received unfixed for frozen section and placed in formalin on [REDACTED] is a 1.8 x 0.4 x 0.2 cm tan-red fragment of soft tissue submitted entirely for frozen section as GF1. The frozen section remnant is submitted in G1.

H. "Left posterior tongue margin", received fresh for frozen section and placed in formalin at [REDACTED] is a 2.2 x 0.2 x 0.2 cm tan, elongated strip of soft tissue submitted entirely for frozen section as HF1. The frozen section remnant is submitted in H1.

I. "Right hemiglossectomy, stitch at tip of tongue", received unfixed and placed in formalin on [REDACTED] is a right hemiglossectomy specimen, 6.5 x 4.5 x 3.2 cm in dimension. The surgeon has marked the tip of the tongue with a black suture. The right half of the deep aspect is marked with black ink, and the left half of the deep aspect is marked with blue ink. The

ICD 03
Carcinoma, squamous cell keratinizing NOS
Site: Tongue NOS C02.9
8/7/13
W 6/13/14

peripheral mucosal and tongue resection margins are shaved and submitted in a clockwise fashion.

Sectioning through the tongue reveals a tan-gray, well-circumscribed tumor mass which focally ulcerates the mucosal surface of the tongue. The tumor mass is 1.9 x 1.5 x 1.5 cm in dimension and extends into the attached floor of mouth. The central aspect displays a central hemorrhagic area. The tumor comes to 0.1 cm from the deep resection margin of the specimen. Representative sections are submitted as follows.

BLOCK SUMMARY

- I1 12-3:00 specimen margin, en face
- I2 3-6:00 specimen margin, en face
- I3 6-9:00 specimen margin, en face
- I4 9-12:00 specimen margin, en face
- I5-I6 tumor mass with relationship to deep resection margin
- I7-8 tumor mass with relationship to ulcerated tongue mucosa

J. "Bilateral level 1A", received unfixed and placed in formalin on [REDACTED] is a 4.5 x 2.1 x 1.5 cm fragment of adipose tissue. All lymph node candidates are submitted in J1.

BLOCK SUMMARY:

- J1- three intact lymph node candidates

K. "Right level 1B", received unfixed and placed in formalin on [REDACTED] is a 4.8 x 3.5 x 2.5 cm fragment of yellow adipose tissue. Sectioning reveals a central tan, firm and lobulated salivary gland. The surrounding adipose tissue is dissected for lymph nodes. Sections are submitted as follows.

BLOCK SUMMARY:

- K1-2- eight intact lymph node candidates
- K3- one lymph node candidate, bisected
- K4-5- representative salivary gland

L. "Right level 4", received unfixed and placed in formalin on [REDACTED] is a 2.4 x 1.6 x 0.4 cm fragment of yellow adipose tissue. The specimen is dissected for lymph nodes. All lymph node candidates are submitted as follows.

BLOCK SUMMARY:

- L1- one lymph node candidate, bisected
- L2- two intact lymph node candidates

M. "Right level 2A", received unfixed and placed in formalin on [REDACTED] is a tan-gray firm portion of tissue measuring 4.8 x 3.5 x 1.5 cm. Sectioning reveals a large, gray-white indurated nodule which is 3 cm in greatest dimension. Sectioning of the nodule reveals tumor involvement. All lymph node candidates and a representative section of the nodule are submitted in blocks M1-3.

BLOCK SUMMARY:

- M1- three intact lymph node candidates
- M2- representative section of large nodular mass

M3- one lymph node, trisected

N. "Right level 3", received unfixed and placed in formalin on [REDACTED] is a 6.5 x 4.1 x 1.2 cm fragment of yellow adipose tissue. The specimen is dissected for lymph nodes. Sections are submitted as follows.

BLOCK SUMMARY:

N1- three intact lymph node candidates

N2- six intact lymph node candidates

O. "Right level 2B", received unfixed and placed in formalin on [REDACTED] is a 2.2 x 1.3 x 0.8 cm fragment of yellow adipose tissue. The specimen is entirely submitted in O1-2.

P. "Left level 1B", received unfixed and placed in formalin on [REDACTED] is a yellow lobulated firm portion of fatty tissue measuring 5.7 x 3.7 x 2.5 cm. Sectioning reveals a tan lobulated salivary gland. No nodules or masses are noted within the salivary gland. The remaining adipose tissue is dissected for lymph nodes. Sections are submitted as follows.

BLOCK SUMMARY:

P1- salivary gland

P2- one lymph node candidate, bisected

P3- three lymph node candidates, intact

P4-5- one lymph node, serially sectioned

Q. "Left level 4", received unfixed and placed in formalin on [REDACTED] is a 4 x 1 x 1 cm fragment of yellow adipose tissue. The specimen is entirely submitted in Q1-3.

R. "Right level 2A", received unfixed and placed in formalin on [REDACTED] is a 3.2 x 1.5 x 1.5 cm firm fragment of yellow adipose tissue. Sectioning reveals two tan firm lymph node candidates. The largest is 2 cm in greatest dimension. Both are bisected and entirely submitted in R1-2.

S. "Left level 3", received unfixed and placed in formalin on [REDACTED] is a 5.2 x 3 x 1 cm fragment of yellow adipose tissue. The specimen is dissected for lymph nodes. All lymph node candidates are submitted in S1-2.

T. "Left level 2B", received unfixed and placed in formalin on [REDACTED] is a fragment of yellow adipose tissue 2.8 x 1.5 x 0.5 cm. The specimen is entirely submitted in T1.

[REDACTED]
Intraoperative Consultation

A. "Right lateral tongue lesion": JF1 (total)-reactive lingual tonsillar tissue. No carcinoma or dysplasia seen (Dr. [REDACTED]).

B. "Anterior gingival margin": BF1 (total)-negative for carcinoma or high grade dysplasia (Dr. [REDACTED]).

C. "Deep tissue margin": CF1 (total)-negative for carcinoma (Dr. [REDACTED]).

D. "Anterior tongue attachment": DF1 (total)-negative for carcinoma (Dr. [REDACTED]).

E. "Right floor of mouth": EF1 (total)-negative for carcinoma (Dr. [REDACTED]).

F. "Right posterior tongue margin":FF1 (total)-negative for carcinoma
(Dr. [REDACTED]).

G. "Left floor of mouth":GF1 (total)-negative for carcinoma (Dr. [REDACTED]).

H. "Left posterior tongue margin":HF1 (total)-negative for carcinoma
(Dr. [REDACTED]).

Microscopic Examination

Microscopic examination is performed.

Immunohistochemical Findings

An immunohistochemical stain for p16 was performed on block I5, and is negative.

The immunoperoxidase tests reported herein were developed and their performance characteristics were determined by the [REDACTED]. Some of them may not be cleared or approved by the U.S. Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. These tests are used for clinical purposes. They should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) as qualified to perform high complexity clinical testing.

Pathologic Stage

PATHOLOGIC STAGE (AJCC 7th Edition): pT2 pN2c pMX

NOTE: Information on pathology stage and the operative procedure is transmitted to this Institution's Cancer Registry as required for accreditation by the Commission on Cancer. Pathology stage is based solely upon the current tissue specimen being evaluated, and does not incorporate information on any specimens submitted separately to our Cytology section, past pathology information, imaging studies, or clinical or operative findings. Pathology stage is only a component to be considered in determining the clinical stage, and should not be confused with nor substituted for it. The exact operative procedure is available in the surgeon's operative report.

Diagnosis

A. "RIGHT LATERAL TONGUE LESION" (BIOPSY):

LINGUAL TONSILLAR TISSUE.
NEGATIVE FOR MALIGNANCY.

B. "ANTERIOR GINGIVAL MARGIN" (BIOPSY):

SQUAMOUS MUCOSA WITH NO EVIDENCE OF MALIGNANCY.

C. "DEEP TONGUE MARGIN" (BIOPSY):

SKELETAL MUSCLE AND FIBROADIPOSE TISSUE.
NEGATIVE FOR MALIGNANCY.

D. "ANTERIOR TONGUE ATTACHMENT" (BIOPSY):

FIBROADIPOSE AND VASCULAR TISSUE.
NEGATIVE FOR MALIGNANCY.

E. "RIGHT FLOOR OF MOUTH" (BIOPSY):

SQUAMOUS MUCOSA, SALIVARY TISSUE AND SKELETAL MUSCLE.
NEGATIVE FOR MALIGNANCY.

F. "RIGHT POSTERIOR TONGUE MARGIN" (BIOPSY):

SQUAMOUS MUCOSA AND SKELETAL MUSCLE.
NEGATIVE FOR MALIGNANCY.

G. "LEFT FLOOR OF MOUTH" (BIOPSY):

SQUAMOUS MUCOSA AND SKELETAL MUSCLE.
NEGATIVE FOR MALIGNANCY.

H. "LEFT POSTERIOR TONGUE MARGIN" (BIOPSY):

SQUAMOUS MUCOSA AND SKELETAL MUSCLE.
NEGATIVE FOR MALIGNANCY.

I. "RIGHT HEMIGLОСSECTOMY" (HEMIGLОСSECTOMY):

CARCINOMA OF ORAL CAVITY:

Specimen:

- Procedure: RIGHT HEMIGLОСSECTOMY
- Specimen size: 6.5 x 4.5 x 3.2 CM
- Specimen integrity: SINGLE, INTACT

Tumor features

- Histologic type: SQUAMOUS CELL CARCINOMA, KERATINIZING TYPE
- Grade: GRADE 2 (MODERATELY DIFFERENTIATED)

Tumor extent:

- Tumor size: 1.9 x 1.5 CM
- Invasion depth: 1.9 MILLIMETERS
- Tumor thickness: 0.8 MILLIMETERS
- Primary location: RIGHT TONGUE
- Focality: UNIFOCAL
- Contiguous invasion: LESS THAN 4 CM (pT2)

Accessory:

- Lymphvascular invasion: POSITIVE
- Perineural invasion: POSITIVE

HPV status: p16 NEGATIVE

Margins: SPECIMEN MARGINS NEGATIVE FOR TUMOR

J. "BILATERAL LEVEL 1A" (LYMPH NODE BIOPSY):

FIVE LYMPH NODES: NEGATIVE FOR CARCINOMA. (0/5)

K. "RIGHT LEVEL 1B" (LYMPH NODE BIOPSY):

FIVE LYMPH NODES: NEGATIVE FOR CARCINOMA. (0/5)
SALIVARY GLAND WITH CHRONIC SIALADENITIS.

L. "RIGHT LEVEL 4" (LYMPH NODE BIOPSY):

THREE LYMPH NODES: NEGATIVE FOR CARCINOMA. (0/3)

M. "RIGHT LEVEL 2A" (LYMPH NODE BIOPSY):

ONE OF SEVEN LYMPH NODES: POSITIVE FOR METASTATIC CARCINOMA. (1/7)
3 CM, EXTRACAPSULAR EXTENSION IS PRESENT.

N. "RIGHT LEVEL 3" (LYMPH NODE BIOPSY):

ONE OF EIGHT LYMPH NODES: POSITIVE FOR METASTATIC CARCINOMA. (1/8)
0.7 CM, EQUIVOCAL FOR EXTRACAPSULAR EXTENSION.

O. "RIGHT LEVEL 2B" (LYMPH NODE BIOPSY):

FOUR LYMPH NODES: NEGATIVE FOR CARCINOMA. (0/4)

P. "LEFT LEVEL 1B" (LYMPH NODE BIOPSY):

TWO OF THREE LYMPH NODES: POSITIVE FOR METASTATIC CARCINOMA. (2/3)
0.8 AND 0.9 CM, EXTRACAPSULAR EXTENSION IS PRESENT IN ONE LYMPH NODE.

Q. "LEFT LEVEL 4" (LYMPH NODE BIOPSY):

TWO LYMPH NODES: NEGATIVE FOR CARCINOMA. (0/2)

R. "RIGHT LEVEL 2A" (LYMPH NODE BIOPSY):

TWO LYMPH NODES: NEGATIVE FOR CARCINOMA. (0/2)

S. "LEFT LEVEL 3" (LYMPH NODE BIOPSY):

TWO OF FIVE LYMPH NODES: POSITIVE FOR METASTATIC CARCINOMA. (2/5)
0.9 AND 1.2 CM, EXTRACAPSULAR EXTENSION IS PRESENT IN ONE LYMPH NODE.

T. "LEFT LEVEL 2B" (LYMPH NODE BIOPSY):

FOUR LYMPH NODES: NEGATIVE FOR CARCINOMA. (0/4)

Comment:

I certify that I personally conducted the diagnostic evaluation of the above specimen(s) and have rendered the above diagnosis(es).

Dr. [REDACTED] M.D

Electronically signed: [REDACTED]

Testing Performed By

Lab - Abbreviation	Name	Director	Address	Valid Date Range
		[REDACTED]		

Lab and Collection

Surgical Pathology on [REDACTED]

Result Information

Abnormality	Status	Priority	Source
	Final result [REDACTED]	Routine	

Authorizing Provider Information

Name: [REDACTED]	Fax: [REDACTED]
Phone: [REDACTED]	Pager: [REDACTED]

Surgical Pathology (Order

[REDACTED]	Authorizing: [REDACTED]	Date: [REDACTED]
Pathology and Cytology	MD	
Order: [REDACTED]	Department: [REDACTED]	Released By: [REDACTED]
	General	
	Surgery	

Order Information

Order Date/Time	Release Date/Time	Start Date/Time	End Date/Time
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

Order Details

Frequency	Duration	Priority
Once	1 occurrence	Routine

Encounter

[View Encounter](#)

Reprint Requisition

[Surgical Pathology \(Order # \[REDACTED\] on \[REDACTED\]](#)

Original Order

Ordered On [REDACTED]	Ordered By Lab
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Collection Information

Collection Date [REDACTED]	Resulting Agency [REDACTED]
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Order Provider Info

Ordering User	Office phone	Pager/beeper	E-mail
Authorizing Provider	[REDACTED]	[REDACTED]	[REDACTED]
MD	[REDACTED]	[REDACTED]	[REDACTED]

Order-Level Documents:

There are no order-level documents.

No order transmittal information available.

Order may not have completed order transmittal.

Criteria	11/18/14	Yes	No
Diagnosis Discrepancy	/	/	/
Primary Tumor Site Discrepancy	/	/	/
HIPAA Discrepancy	/	/	/
Prior Malignancy History	/	/	/
Dual/Synchronous Primary	Not Yet Determined		
Case Is (circle):	QUALIFIED / DISQUALIFIED		
Reviewer Initials	DMW	Date Reviewed:	12/10/13