

SURGICAL PATHOLOGY REPORT

Accession number: [REDACTED]

Final Report

DIAGNOSIS:

- 1) PALATE MARGIN, EXCISION: NEGATIVE FOR MALIGNANCY.
- 2) SOFT TISSUE, FLOOR OF MOUTH, EXCISION: NEGATIVE FOR MALIGNANCY.
- 3) MARGIN, BUCCAL MUCOSA, EXCISION: NEGATIVE FOR MALIGNANCY.
- 4) LEFT MANDIBLE, COMPOSITE RESECTION: MODERATELY DIFFERENTIATED INVASIVE SQUAMOUS CELL CARCINOMA, 3.0 CM IN GREATEST DIMENSION, WITH INVASION INTO BONE, AND EXTENDING TO THE INFERIOR SURGICAL MARGINS (SEE COMMENT).
- 5) LYMPH NODES, LEFT NECK, LEVEL 2, 3, & 4, EXCISION: 4 OF 20 LYMPH NODES INVOLVED BY METASTATIC SQUAMOUS CELL CARCINOMA (4/20), EXTRANODAL TUMOR IS PRESENT (SEE COMMENT).
- 6) LYMPH NODE, LEFT NECK, LEVEL 1A, EXCISION: 1 LYMPH NODE, NEGATIVE FOR MALIGNANCY (0/1).
- 7) LYMPH NODE, LEVEL 1B, EXCISION: 1 LYMPH NODE INVOLVED BY METASTATIC SQUAMOUS CELL CARCINOMA (1/1); SALIVARY GLAND WITH NO SIGNIFICANT HISTOPATHOLOGIC CHANGE (SEE COMMENT).

COMMENT: These findings correspond to AJCC [REDACTED] Edition pathologic Stage IVA (pT4a, pN2, pMn/a).

Upper Aerodigestive Tract-including Oral cavity Carcinoma: Summary of Findings:

Specimen Type: left mandible composite resection

Tumor Site: mandible region

Tumor Size: 3.0 x 2.5 x 2.0 cm

Laterality: Left

Margins: inferior margins positive for carcinoma on mandibular resection specimen (source 4); all other margins negative

Histologic Type: squamous cell carcinoma

Histologic Grade: moderately-differentiated

Pathologic Staging (pTMN)

Primary tumor (pT): pT4a

Regional Lymph Nodes (pN): pN2

Number examined: 22

Numbered involved: 5

Extracapsular extension: YES

Perineural invasion: absent

Bony/Cartilage Invasion: present

Lymph-Vascular invasion: absent

HPV testing ordered: YES (performed on oral cavity and oropharyngeal squamous cell carcinomas)

**Electronically Signed Out by

CLINICAL DATA

Clinical Features: Unspecified

Operator: Unspecified

Operation: Unspecified

Operative Findings: Unspecified

Operative Diagnosis: Unspecified

Tissue Submitted: 1)palate margin; 2)floor of mouth;
3)buccal mucosa margin; 4)left composite
mandibular resection; 5)left neck levels
2, 3, 4; 6)left level 1A; 7)left level 1B

GROSS DESCRIPTION:

1) SOURCE: Palate Margin

Received fresh for intraoperative frozen section evaluation in a container labeled correctly with the patient's name, medical record number, and "palate margin" are two fragments of soft tissue, one with grossly visible mucosa, measuring each 5 x 3 x 2 mm. The entire specimen is submitted for frozen section evaluation.

Summary of sections: 1AFSC, 2/1.

2) SOURCE: Floor of Mouth

Received fresh labeled with the patient's name, medical record number and "floor of mouth" is a 5.0 x 0.1 x 0.1 cm strip of pink-tan soft tissue. The specimen is entirely submitted for frozen section analysis and subsequently submitted for permanent sectioning.

Summary of sections: 2AFSC, 1/1.

3) SOURCE: Buccal Mucosa Margin

Received fresh in a container labeled with the patient's name, medical record number, and "buccal mucosa margin-frozen 3" is a 5 x 0.2 x 0.1 cm strip of mucosa that is not oriented. The specimen is trisected and submitted entirely for frozen section.

Summary of sections: 3AFSC, 3/1.

4) SOURCE: Left Composite Mandibular Resection

Received fresh in a container labeled with the patient's name, medical record number, and "left composite mandibular resection" is a left mandible which measures overall 11 x 2.5 x 2.5 cm. A small portion of normal and tumor tissue are taken for research. The specimen is inked as follows: superior blue, inferior black, lateral red, medial (lingual side) orange, proximal green, and distal yellow. There is a 3.0 x 2.5 x 2.0 cm tumor located along the alveolar ridge in close proximity to the remaining teeth. This lesion is 1.5 cm from the proximal margin and 5.0 cm from the distal margin. The lesion approaches focally within 1 mm of multiple mucosal margins. It appears to involve the teeth and the mandible. Representative portions are submitted after decalcification.

Summary of sections: 4A, proximal bony margin, 1/1; 4B, mucosal margin from the medial surface, 3/1; 4C, mucosal margin from the red margin, 2/1; 4D-4E, full thickness section of tumor in relationship to medial, lateral, and deep margins, submitted in two cassettes, 1/1 each; 4F-4G, full thickness section through alveolar ridge in relationship to deep margin showing tooth in relationship to tumor, 1/1 each; 4H-4I, similar section, 1/1 each.

5) SOURCE: Left Neck Levels 2, 3, 4

Received fresh in a container labeled correctly with the patient's name, medical record number, and "left neck" is an aggregate of fibroadipose and lymphoid tissue measuring 7 x 6 x 1.3 cm. After the fat is dissected away, all candidate lymph nodes are submitted in their entirety.

Summary of sections: 5A-5D, candidate lymph nodes, M/1 each; 5E, candidate lymph node, 1/1; 5F, candidate lymph nodes, M/1.

6) SOURCE: Left Level 1A

Received fresh in a container labeled correctly with the patient's name, medical record number, and "level 1A" are two fragments of fibroadipose tissue, which in aggregate measure 3.8 x 2.0 x 0.7 cm. The larger fragment is serially sectioned to reveal grossly unremarkable fat. Both specimens are submitted in their entirety.

Summary of sections: 6A, smaller fragment, 1/1; 6B-6C, larger fragment, 1/1 each.

7) SOURCE: Level 1B

Received fresh in a container labeled correctly with the patient's name, medical record number, and "left level 1B" is a fragment of fibroadipose and lymphoid and salivary gland tissue, measuring 5.5 x 3.0 x 1.5 cm. The salivary gland is serially sectioned to reveal grossly unremarkable lobular

parenchyma. The fat is dissected and all candidate lymph nodes are submitted in their entirety.
Summary of sections: 7A, 1 candidate lymph node bisected, 2/1; 7B-7C, sections of unremarkable salivary gland, 1/1 each.

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SURGICAL PATHOLOGY INTRAOPERATIVE CONSULTATION

1) SOURCE: Palate Margin

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

2) SOURCE: Floor of Mouth

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

3) SOURCE: Buccal Mucosa Margin

FROZEN SECTION DIAGNOSIS: BENIGN. [REDACTED]

Electronically signed by: [REDACTED] Attending Pathologist

The following special studies were performed on this case and the interpretation is incorporated in the diagnostic report above:
1xDECALCIFICATION, 1xPAPILLOMA VIRUS

In some tests, analyte specific reagents (ASRs) are used. In the case of an ASR, this test was developed and its performance characteristics determined by this laboratory. It has not been cleared or approved by the US Food and Drug Administration. The FDA has determined that such clearance or approval is not necessary. This test is used for clinical purposes. It should not be regarded as investigational or for research. This laboratory is certified under the Clinical Laboratory Improvement Amendments of [REDACTED] (CLIA [REDACTED]) as qualified to perform high complexity clinical laboratory testing.

[REDACTED]