

History Case Pathology Report

DOB:
Physician:

Sex: M

Received:

Pathologist:

Accession:

Case type: Surgical History

**** Case imported from legacy computer system. The format of this report does not match the original case. ****

**** For cases prior to the section "SPECIMEN" may have been added. ****

SUPPLEMENTAL REPORT

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DIAGNOSIS:

(B) WIDEFIELD LARYNGECTOMY:

DECALCIFIED SECTIONS DEMONSTRATE INVASIVE MODERATELY DIFFERENTIATED
CARCINOMA INVADING THROUGH THE THYROID CARTILAGE INTO PRELARYNGEAL
SOFT TISSUE. (SEE COMMENT)

COMMENT: This supplemental report is being issued to give the results of
section submitted for decalcification. This report does not alter the
previously issued diagnosis.

DIAGNOSIS

(A) ANTERIOR COMMISSURE:

INVASIVE MODERATELY DIFFERENTIATED SQUAMOUS CELL CARCINOMA.

((B)) WIDEFIELD LARYNGECTOMY:

INVASIVE MODERATELY DIFFERENTIATED SQUAMOUS CELL CARCINOMA INVOLVING
ANTERIOR COMMISSURE, RIGHT AND LEFT TRUE AND FALSE VOCAL CORDS WITH
INVASION OF THYROID CARTILAGE AND EXTENSION INTO PRE-LARYNGEAL SOFT
TISSUE AND SUBGLOTTIC EXTENSION. (SEE COMMENT)

Tracheal, mucosal and anterior soft tissue margins, no tumor present.
Right and left aryepiglottic folds, pyriform sinuses, and epiglottis,
no tumor present.

Eleven lymph nodes, no tumor present.

Right neck dissection; six lymph nodes, no tumor present (0/6
subdiaphragmatic).

Left neck dissection; three lymph nodes, no tumor present (0/3
subdiaphragmatic).

Two lymph nodes anterior midline, no tumor present.

Lymphocytic thyroiditis.

One parathyroid gland, no tumor present.

Sections of bone pending decalcification. A supplemental report to
follow.

COMMENT

The tumor (3.0 x 2.6 x 1.5 cm) appears to arise in the anterior
commissure with extension through the thyroid cartilage into the anterior
soft tissues and with extensive submucosal extension into the right and left
true and false vocal cords.

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SPECIMEN

(A) ANTERIOR COMMISSURE:

(B) WIDEFIELD LARYNGECTOMY:

SNOMED CODES

T-24100, M-80703