



Report Type ...  
Date of Event ...  
Sex ..... M  
Authored by .....  
Hosp/Group .....  
Record Status .... FINAL

ICD-O-3

Carcinoma, squamous  
cell NOS 8070/3

Site Larynx NOS C32.9  
JW 5/10/13

## FINAL DIAGNOSIS:

PART 1: SKIN, STOMAL SITE, EXCISION  
SKIN WITH STOMA SITE RELATED INFLAMMATORY CHANGES, NO TUMOR  
PRESENT.

PART 2: LYMPH NODES, RIGHT NECK LEVELS 2-4, SELECTIVE DISSECTION  
A. METASTATIC SQUAMOUS CELL CARCINOMA IN TWO OF TWENTY-FIVE  
LYMPH  
NODES (2/25).  
B. POSITIVE LYMPH NODES ARE IN LEVELS 2 AND 4, WITH NO EXTRANODAL  
SPREAD.  
C. LARGEST METASTASIS IS IN LEVEL 4 (0.5 CM).

PART 3: LYMPH NODES, LEFT NECK LEVELS 2-4, SELECTIVE DISSECTION  
A. TWENTY LYMPH NODES, NO TUMOR PRESENT (0/20).  
B. UNREMARKABLE PAROTID GLAND TISSUE.

PART 4: LARYNX, TOTAL LARYNGECTOMY  
A. INVASIVE SQUAMOUS CELL CARCINOMA, MODERATELY TO POORLY  
DIFFERENTIATED (4.5 CM), RIGHT SUPRAGLOTTIC WITH MICROSCOPIC GLOTTIC  
EXTENSION  
(TRANSGLOTTIC).  
B. TUMOR INVOLVES BILATERAL EPIGLOTTIS, FALSE CORD, RIGHT  
ARYEPIGLOTTIC  
FOLD, AND MINIMAL RIGHT TRUE CORD.  
C. PARAGLOTTIC SPACE AND PRE-EPIGLOTTIC SPACE INVOLVEMENT PRESENT.  
D. ANGIOLYMPHATIC INVASION PRESENT; NO PERINEURAL INVASION.  
E. RESECTION MARGINS ARE FREE OF CARCINOMA (Also see Parts 5-  
9).  
F. PATHOLOGIC STAGE pT3 N2B.

PART 5: POST CRICOID MARGIN, EXCISION  
NO TUMOR PRESENT.

PART 6: LEFT LATERAL PHARYNGEAL MARGIN, EXCISION  
NO TUMOR PRESENT.

PART 7: RIGHT LATERAL PHARYNGEAL MARGIN, EXCISION  
NO TUMOR PRESENT.

PART 8: RIGHT BASE OF TONGUE MARGIN, EXCISION  
NO TUMOR PRESENT.

PART 9: LEFT BASE OF TONGUE MARGIN, EXCISION  
NO TUMOR PRESENT.

Pathologist:

\*\* Report Electronically Signed Out \*\*  
By Pathologist:

My signature is attestation that I have personally reviewed the  
submitted  
material(s) and the final diagnosis reflects that evaluation.

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GROSS DESCRIPTION:

The specimen is received in nine parts.  
Part 1 is received fresh labeled with the patient's name, initials XXX  
and  
"stomal skin". It consists of a 5.5 x 3.0 x 2.0 cm skin with  
subcutaneous  
tissue. No lesions are identified grossly. Representative section is  
submitted in cassette 1A.

Ink code:

Black deep margin

Time in formalin: 37 hours.

Part 2 is received fresh labeled with the patient's name, initials XXX  
and  
"right neck levels 2, 3, 4". It consists of an 11 x 8 x 2 cm yellow  
lobulated  
fibroadipose tissue. Lymph nodes are dissected out and submitted  
entirely as  
follows:

2A-2C level 2 lymph nodes

2D-2F level 3 lymph nodes

2G-2J level 4 lymph nodes.

Time in formalin: 37 hours.

Part 3 is received fresh labeled with the patient's name, initials XXX  
and  
"left neck levels 2, 3, 4". It consists of a 15 x 6 x 4 cm tan-yellow  
lobulated fibroadipose tissue. Lymph nodes are dissected out and  
submitted  
entirely as follows:

3A-3C level 2 lymph nodes

3D-3F level 3 lymph nodes

3G-3J level 4 lymph nodes.

Time in formalin: 37 hours.

Part 4 is received fresh labeled with the patient's name, initials XXX  
and  
"total laryngectomy". It consists of an 8 x 9 x 5.5 cm total  
laryngectomy  
specimen. There is pedunculated, filiform, friable and ulcerated tan-  
white  
firm mass at right supraglottic area (4.5 x 3.0 x 0.4 cm) that focally  
permeates the adjacent aryepiglottic fold submucosa with a pushing  
border.

Anterior commissure is involved. Tumor is 2 cm deep, abuts thyroid  
cartilage,  
but does not involve it. The tumor grossly extends to pre-epiglottic  
space.

Right vocal cord is not involved. The tumor crosses midline to left  
supraglottic region, within 0.5 cm from left aryepiglottic fold. The  
tumor

involves right pyriform sinus. The surface of the epiglottis appears  
ulcerated and the ulceration is within 0.3 cm from superior mucosal  
edge of

epiglottis. The tumor is within 4.5 cm from inferior tracheal margin  
and  
within 2 cm from stoma site. The mucosa and area of the stoma appears  
slightly nodular. The mucosa is unininvolved by the tumor. No thyroid  
tissue

is grossly identified. Photographs are taken.

Ink code:

Red tissue banked

Blue- pre-epiglottic space

Black anterior soft tissue margin

Orange hyoid bone area.

Cassette code:

4A anterior soft tissue, shaved

4B - vertical epiglottis and pre-epiglottis space

4C - vertical left aryepiglottic fold with tumor

4D - vertical right aryepiglottic fold with tumor

4E inferior tracheal margin

4F mucosa stoma area

4G representative soft tissue around stoma area

4H left vocal cord

4I representative section of tumor

4J tumor in relation to right vocal fold

4K potential lymph nodes in anterior soft tissue

4LDR tumor and thyroid cartilage.

Time in formalin: 37 hours.

Part 5 is received fresh labeled with the patient' s name, initials XXX and

"post cricoid margin". It consists of a 2.5 x 0.3 x 0.4 cm tan soft tissue

for intraoperative consultation. The remainder of the frozen section specimen

is submitted in cassette 5AFS.

Time in formalin: 37 hours.

Part 6 is received fresh labeled with the patient' s name, initials XXX and

"left lateral pharyngeal margin". It consist s of a 4.0 x 0.8 x 0.4 cm tan

soft tissue for intraoperative consultation. The remainder of the frozen

section specimen is entirely submitted in cassette 6AFS.

Time in formalin: 37 hours.

Part 7 is received fresh labeled with the patient' s name, initials XXX and

"right lateral pharyngeal margin". It consists of a 2.2 x 0.3 x 0.3 cm tan

soft tissue for intraoperative consultation. The remainder of the frozen

section specimen is entirely submitted in cassette 7AFS.

Time in formalin: 37 hours.

Part 8 is received fresh labeled with the patient' s name, initials XXX and

"right base of tongue margin". It consists of a 2.3 x 0.2 x 0.3 cm tan soft

tissue for intraoperative consultation. The remainder of the frozen section

specimen is entirely submitted in cassettes 8AFS.

Time in formalin: 37 hours.

Part 9 is received fresh labeled with the patient' s name, initials XXX and

"left base of tongue margin". It consists of a 2 x 0.3 x 0.4 cm tan soft

tissue for intraoperative consultation. The remainder of the frozen section specimen is entirely submitted in cassette 9AFS.  
Time in formalin: 37 hours.

INTRAOPERATIVE CONSULTATION:

5AFS: POST CRICOID MARGIN (frozen section)  
A. SUFFICIENT FOR ANCILLARY STUDIES.

B. BENIGN.

C. NO TUMOR SEEN

6AFS: LEFT LATERAL PHARYNGEAL MARGIN (frozen section)  
A. SUFFICIENT FOR ANCILLARY STUDIES.

B. BENIGN

C. NO TUMOR SEEN

7AFS: RIGHT LATERAL PHARYNGAL MARGIN (frozen section)  
A. SUFFICIENT FOR ANCILLARY STUDIES.

B. BENIGN.

C. NO TUMOR SEEN

8AFS: RIGHT BASE OF TONGUE (frozen section)  
A. SUFFICIENT FOR ANCILLARY STUDIES.

B. BENIGN.

C. NO TUMOR SEEN

9AFS: LEFT BASE OF TONGUE (frozen section)  
A. SUFFICIENT FOR ANCILLARY STUDIES.

B. BENIGN.

C. NO TUMOR SEEN

MICROSCOPIC:

Microscopic examination substantiates the above diagnoses.

The following statement applies to all immunohistochemistry, Insitu Hybridization Assays (ISH & FISH), Molecular Anatomic Pathology, and Immunofluorescent Testing:

The testing was developed and its performance characteristics determined by

the Department of Pathology, as required by the CLIA

'88 regulations. The testing has not been cleared or approved for the specific use by the U.S. Food and Drug Administration, but the FDA has determined such approval is not necessary for clinical use. Tissue fixation

ranges from a minimum of 2 to a maximum of 84 hours.

This laboratory is certified under the Clinical Laboratory Improvement Amendments of 1988 ("CLIA") as qualified to perform high-complexity

clinical testing. Pursuant to the requirements of CLIA, ASR's used in this laboratory

have been established and verified for accuracy and precision.

Additional

information about this type of test is available upon request.

CASE SYNOPSIS:

SYNOPTIC DATA - LARYNX RESECTIONS

TYPE OF LARYNGECTOMY: Total

TUMOR LATERALITY: Bilateral

ATTACHED STRUCTURES: Pyriform sinus  
TUMOR LOCATION/SEGMENT: Transglottic  
TUMOR SIZE: Maximum dimension: 4.5 cm  
HISTOLOGIC TYPE OF TUMOR: Squamous cell carcinoma  
HISTOLOGIC GRADE: Moderately differentiated  
STRUCTURES INVOLVED BY TUMOR: True cord, Anterior commissure, False cord, Epiglottis, A-E Fold - Medial surface, Pre-epiglottic space, Paraglottic space  
LYMPH NODES: Lymph nodes positive, Right: 2  
Total number of right sided lymph nodes examined: 25  
Lymph nodes positive, Left: 0  
Total number of left sided lymph nodes examined: 20  
EXTRACAPSULAR SPREAD OF LYMPH NODE METASTASES  
No  
INTRA-PERINEURAL INVASION: Absent  
VASCULAR INVASION: Yes  
SURGICAL MARGIN INVOLVEMENT: Free (2 mm or more)  
T STAGE, PATHOLOGIC: Supraglottis, pT3  
N STAGE, PATHOLOGIC: pN2b  
M STAGE, PATHOLOGIC: pMX

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PATIENT HISTORY:

CHIEF COMPLAINT/ PRE-OP/ POST-OP DIAGNOSIS: Laryngeal cancer.  
PROCEDURE: Total laryngectomy, bilateral neck dissection.  
SPECIFIC CLINICAL QUESTION: Margins.  
OUTSIDE TISSUE DIAGNOSIS: No.  
PRIOR MALIGNANCY: No.  
CHEMORADIATION THERAPY: No.  
ORGAN TRANSPLANT: No.  
IMMUNOSUPPRESSION: No.  
OTHER DISEASES: No.  
CYTOGENETIC TESTS: No.

HISTO TISSUE SUMMARY/SLIDES REVIEWED:

Part 1: Stomal Skin

Taken:

Stain/ Block

H&E x 1 A

Part 2: Right Levels 2-4

Taken:

Stain Block

H&E x 1 A

H&E x 1 B

H&E x 1 C

H&E x 1 D

H&E x 1 E

H&E x 1 F

H&E x 1 G

H&E x 1 H

H&E x 1 I

H&E x 1 J

Part 3: Left Neck Level 2-4

Taken:

Stain/ Block

H&E x 1 A

H&E x 1 B  
H&E x 1 C  
H&E x 1 D  
H&E x 1 E  
H&E x 1 F  
H&E x 1 G  
H&E x 1 H  
H&E x 1 I  
H&E x 1 J

Part 4: Total Laryngectomy

Taken:

Stain Block

H&E x 1 A  
H&E x 1 B  
H&E x 1 C  
H&E x 1 D  
H&E x 1 E  
H&E x 1 F  
H&E x 1 G  
H&E x 1 H  
H&E x 1 I  
H&E x 1 J  
H&E x 1 K  
H&E x 1 M  
H&E x 1 N

Decal x 1

H&E Recut x 1

H&E x 1

Part 5: Post Cricoid Margin

Taken:

Stain/ Block

H&E x 1 AFS

Part 6: Left Lateral Pharyngeal Margin

Taken:

Stain/ Block

H&E x 1 AFS

Part 7: Right Lateral Pharyngeal Margin

Stain, Block

H&E x 1 AFS

Part 8: Right Base of Tongue Margin

Stain/ Block

H&E x 1 AFS

Part 9: Left Base of Tongue Margin

Stain/ Block

H&E x 1 AFS

Criteria	1/12/13	Yes	No
Diagnosis Discrepancy		✓	
Primary Tumor Site Discrepancy		✓	
HIPAA Discrepancy		✓	
Prior Malignancy History			✓
Dual/Synchronous Primary Lesion			
Case is (circle):	QUALIFIED / DISQUALIFIED		
Reviewer Initials	BTB	Date Reviewed:	3/28/13