

**Pathology Report**

**FINAL**

Report Type ..... rt  
Date of Event ..... [REDACTED]  
Sex ..... [REDACTED]  
Authored by ..... [REDACTED]  
Hosp/Group ..... [REDACTED]  
Record Status ..... [REDACTED]

**PATIENT HISTORY:**

Laryngeal cancer

PRE-OP DIAGNOSIS: Laryngeal cancer.

POST-OP DIAGNOSIS: Same.

CEDURE: Right laryngoscopy; bilateral neck dissection.  
[REDACTED]

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**FINAL DIAGNOSIS:**

PART 1: SUPRAGLOTTIC LESION, RIGHT, BIOPSY  
INVASIVE SQUAMOUS CELL CARCINOMA.

PART 2: LYMPH NODE, RIGHT ZONE 2B, BIOPSY  
ONE BENIGN LYMPH NODE (0/1).

PART 3: NECK, RIGHT LEVELS 2,3 AND 4, DISSECTION  
TWENTY-NINE BENIGN LYMPH NODES (0/29).

PART 4: NECK, LEFT LEVELS 2,3 AND 4, DISSECTION  
TWENTY-FOUR BENIGN LYMPH NODES (0/24).

PART 5: LARYNX, TOTAL LARYNGECTOMY

A. SUPRAGLOTTIC INVASIVE MODERATELY DIFFERENTIATED SQUAMOUS  
CELL  
CARCINOMA, 4.8 CM, WITH INVASION OF PRE-EPIGLOTTIC AND PARAGLOTTIC  
SPACES AND  
INVASION THROUGH THYROID CARTILAGE AND INTO ANTERIOR SOFT TISSUE.

B. ANGIOLYMPHATIC INVASION IS PRESENT.

C. NO PERINEURAL INVASION IS SEEN.

D. ALL RESECTION MARGINS ARE FREE OF TUMOR.

E. RIGHT LOBE OF THYROID FREE OF TUMOR.

PATHOLOGIC STAGE; T4 N0 MX.

[REDACTED]  
t: [REDACTED]  
[REDACTED]

R [REDACTED], M.D. [REDACTED] [REDACTED]

\*\* Report [REDACTED] ut \*\*

M.D.

My signature statement 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 5 parts.

Part 1 is received fresh labeled with the patient's name, initials xx  
and

"right supraglottic lesion". Received are 2, irregular, soft to  
rubbery, tan,

tissue biopsies each measuring 0.7 x 0.5 x 0.4 cm. A touch prep is performed with an intraoperative diagnosis completed. The specimen is entirely submitted for processing in a cassette labeled 1A.

Part 2 is received fresh labeled with the patient's name, initials xx and "right zone 2B node". Received is a single, tan, oval, soft to rubbery, lymph node measuring 0.5 x 0.3 x 0.3 cm. The specimen is inked, bisected and entirely submitted for processing in a cassette labeled 2A.

Part 3 is received fresh labeled with the patient's name, initials xx and "right neck level 2, 3, and 4". Received is an irregular unoriented 13 x 4.5 x 1.3 cm right selective neck dissection, presumably lymph node levels 2 through 4 without an orienting suture. Neck dissection is divided equally into 3 segments. The measurements for the lymph node-containing soft tissue levels are as follows: Level A-4.2 x 3.5 x 1.5 cm, level B- 4.3 x 4 x 1.0 cm, and level C- 4 x 3.2 x 1.5 cm. Multiple lymph nodes, ranging from 0.2 to 2.0 cm in greatest dimension are identified. Several of the larger lymph nodes appear to be tumor involved and are present in greater numbers within level A.

Lymph nodes are entirely submitted in cassettes labeled:

3A - level A - six possible lymph nodes

3B - level A-six possible lymph nodes

3C - level A -single bisected lymph node

3D - level A single bisected lymph node

3E - level B- seven possible lymph nodes

3F - level C-9 possible lymph nodes

Part 4 is received fresh labeled with the patient's name, initials xx and "left neck level 2, 3 and 4". Received is an irregular unoriented 11.5 x 6 x 1.2 cm left selective neck dissection, presumably lymph node levels 2 through 4 without an orienting suture. Neck dissection is divided equally into 3 segments. The measurements for the lymph node-containing soft tissue levels are as follows: Level A-4.3 x 3.5 x 1.25 cm, level B- 5.5 x 3.1 x 0.8 cm, and level C- 4 x 3 x 1.2 cm. Multiple lymph nodes, ranging from 0.2 to 2.0 cm in greatest dimension are identified. Several of the larger lymph nodes appear to be tumor involved and are present in greater numbers within level A.

Lymph nodes are entirely submitted in cassettes labeled:

4A - level A - four possible lymph nodes

4B - level A- single possible lymph node

4C level B- seven lymph node

4D level B - one lymph node  
4E - level C- eight possible lymph nodes  
4F - level C-three possible lymph nodes

Part 5 is received fresh labeled with the patient's name, initials xx and "larynx". The specimen consists of total laryngectomy measuring 8.5 cm (superior to inferior), by 4.2 cm (anterior to posterior), by 5.8 cm (width) when reconstructed. The specimen includes the hyoid bone which is removed. The hyoid bone measures 8.2 cm in length by 0.3 x 0.3 cm in greatest dimension. One tracheal ring is identified. There is a supraglottic irregular exophytic ulcerated mass measuring at least 2.8 x 2.2 cm in maximal dimension. The tumor is centered at the level of the supraglottis and more prominent and cavitary toward the right side. The tumor appears to compress/invoke the right and left false vocal cords as well as the anterior pyriform sinus. The tumor is grossly located at 1.3 cm from the right arytenoid mucosal margin, 1.8 cm from the left arytenoid margin, 3.0 cm from the epiglottic margin and at 3.2 cm from the jugular margin (inferior). The anterior soft tissue margin appears intact and no gross lesion is identified.

Upon sectioning the tumor measures 4.8 cm superior to inferior by 3.2 cm anterior to posterior, by 4.5 cm in width. It involves the pre-epiglottic space, paraglottic space and anterior soft tissue. The tumor appears to superficially invade the thyroid cartilage as well as epiglottic cartilage. The anterior soft tissue margin including muscle and fibroadipose tissue appears uninvolved by tumor. The right thyroid lobe is identified measuring 3.2 x 2.5 x 0.8 cm in greatest dimension. No parathyroid tissue is identified. On section no discrete, well circumscribed or ill defined lesions en. A section of the tumor was selected and [REDACTED] [REDACTED]

[REDACTED] [REDACTED] red and banked. The specimen is submitted in fourteen cassettes as follows:

5A epiglottic margin, perpendicular  
5B tracheal (deep) margin, shaved  
5C right arytenoid margin, perpendicular  
5D left arytenoid margin, perpendicular  
5E right anterior soft tissue margin (area inked blue is not a margin)  
5F tumor and thyroid cartilage right side  
5G supraglottic tumor area right side  
5H - ventricle tumor area right side  
5I anterior soft tissue margin left side

5J tumor and epiglottic cartilage  
5K ventricle tumor area left side  
5L tumor and thyroid cartilage left side  
5M 5N representative section of thyroid gland.  
On Part 5 cassettes A, B, F, H, J and L will be placed in decalcifying  
solution.

[REDACTED]  
[REDACTED]

[REDACTED] CONSULTATION:  
1AFS: RIGHT SUPRAGLOTTIC LESION, BIOPSY (touch prep )-  
A. MALIGNANT  
SQUAMOUS CELL CARCINOMA (NO CONCLUSIVE INVASION) ([REDACTED],  
[REDACTED])

Microscopic examination substantiates the above diagnosis.

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 [REDACTED], Department of Pathology, as required by

[REDACTED] 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 [REDACTED] to a maximum of [REDACTED] hours.

This laboratory certified under the Clinical Laboratory Improvement Amendments of [REDACTED] ("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 LARNGECTOMY: Total

TUMOR LOCATION: Bilateral

ATTACHED STRUCTURES: Thyroid

TUMOR LOCATION/SEGMENT: Supraglottic

TUMOR SIZE: Maximum dimension: 4.8 cm

HISTOLOGIC TYPE OF TUMOR: Squamous cell carcinoma

HISTOLOGIC GRADE: Moderately differentiated

STRUCTURES INVOLVED BY TUMOR: False cord, Epiglottis, Thyroid cartilage,  
Pre-epiglottic space, Paraglottic space

LYMPH NODES POSITIVE: Number of lymph nodes positive:: 0

LYMPH NODES EXAMINED: Total number of lymph nodes examined: 54

#### METASTASES

INTRAPERINEURAL INVASION: Absent

VASCULAR INVASION: Yes

SURGICAL MARGIN INVOLVEMENT: Free (2 mm or more)

T STAGE, PATHOLOGIC: Supraglottis, pT4a

