

Pathology Report [REDACTED]

CORRECTED



PATIENT HISTORY:

CHIEF COMPLAINT/PRE-OP/POST-OP DIAGNOSIS: Larynx cancer.

PROCEDURE: Laryngectomy.

SPECIFIC CLINICAL QUESTION: Not answered.

OUTSIDE TISSUE DIAGNOSIS: Not answered.

PRIOR MALIGNANCY: Not answered.

CHEMORADIATION THERAPY: Not answered.

ORGAN TRANSPLANT: Not answered.

IMMUNOSUPPRESSION: Not answered.

OTHER DISEASES: Not answered.

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ADDENDA:

Addendum

PART 1 (LYMPH NODES, LEVELS 2-3, LEFT NECK DISSECTION (ADDITIONAL STUDIES FOR LYMPH NODE WITH SINGLE LAMINATED CALCIFICATION)-

A. PSAMMOMA BODY IN ONE LYMPH NODE.

B. IMMUNOHISTOCHEMICAL STAINS FOR TTF1 AND CAM 5.2 SHOW NO EVIDENCE OF ADDITIONAL METASTATIC PAPILLARY THYROID CARCINOMA.

PART 3 TOTAL LARYNGECTOMY, PARTIAL PHARYNGECTOMY WITH RIGHT THYROID LOBECTOMY

(ENTIRE RIGHT THYROID LOBE WAS SUBMITTED FOR MICROSCOPIC EVALUATION)

A. LESS THAN 0.1 CM FOCUS OF PAPILLARY THYROID MICROCARCINOMA, CONFINED TO THE RIGHT THYROID LOBE.

B. NO EVIDENCE OF VASCULAR INVASION.

C. MARGINS ARE FREE OF CARCINOMA.

SYNOPTIC DATA - PRIMARY THYROID TUMORS

SPECIMEN TYPE: Lobectomy

TUMOR SITE: Right Lobe

TUMOR FOCALITY: Unifocal

TUMOR SIZE (largest nodule): Greatest Dimension: 0.1 cm

HISTOLOGIC TYPE\*\*: Papillary carcinoma

PRIMARY TUMOR (pT): pT1a

REGIONAL LYMPH NODES (pN): pN1b

Number of regional lymph nodes examined: 31

Number of regional lymph nodes involved: 1

EXTRANODAL EXTENSION: Indeterminate

DISTANT METASTASIS (pM): Not applicable

EXTRATHYROIDAL EXTENSION: Not identified

MARGINS: Margins uninvolved by carcinoma

LYMPH-VASCULAR INVASION: Not identified

Comment: one lymph node with psammoma body

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[REDACTED]

[REDACTED]

[REDACTED]

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

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FINAL DIAGNOSIS:

PART 1: LYMPH NODES, LEVELS 2-4, LEFT NECK DISSECTION

A. METASTATIC SQUAMOUS CELL CARCINOMA, 0.5 CM, IN ONE LEVEL 3 LYMPH NODE (1/13).

B. NO EXTRACAPSULAR EXTENSION.

C. ONE LEVEL 3 LYMPH NODE WITH LAMINATED CALCIFICATION (See comment).

PART 2: LYMPH NODES, LEVELS 2-4, RIGHT NECK DISSECTION

A. METASTATIC SQUAMOUS CELL CARCINOMA, UP TO 2.7 CM, IN THREE LYMPH NODES (3/18; LEVELS 3 AND 4).

B. NO EXTRACAPSULAR EXTENSION.

C. FRAGMENT OF BENIGN CARTILAGE AND BONE WITH TRILINEAGE HEMATOPOIESIS.

PART 3: LARYNX, TOTAL LARYNGECTOMY WITH PARTIAL PHARYNGECTOMY

A. INVASIVE SQUAMOUS CELL CARCINOMA, NON-KERATINIZING, 4.6 CM, IN THE RIGHT PYRIFORM SINUS WITH EXTENSION TO PRE-EPIGLOTTIC SPACE. THYROID CARTILAGE IS FREE OF CARCINOMA.

B. PERINEURAL INVASION IS PRESENT.

C. TRACHEAL MARGIN IS FREE OF CARCINOMA. SEE OTHER PARTS FOR ADDITIONAL MARGINS.

D. RIGHT THYROID LOBE REPORT WILL FOLLOW (See comment).

E. PATHOLOGIC STAGE: pT3 N2c.

PART 4: RIGHT INFERIOR HYPOPHARYNGEAL MARGIN, BIOPSY

NO TUMOR SEEN.

PART 5: SUPERIOR RIGHT PHARYNGEAL MARGIN, BIOPSY

NO TUMOR SEEN.

PART 6: RIGHT ESOPHAGEAL INLET, BIOPSY

NO TUMOR SEEN.

PART 7: RIGHT BASE OF TONGUE, BIOPSY

NO TUMOR SEEN.

PART 8: LEFT HYPOPHARYNGEAL MARGIN, BIOPSY

NO TUMOR SEEN.

[REDACTED]

[REDACTED]

[REDACTED]

COMMENT:

Parts 1 and 3: The capsule of one lymph node (left level 3) contains single laminated calcification suggestive of a psammoma body. Additional studies are pending. To address the possibility of papillary thyroid carcinoma, the remainder of the right thyroid lobe will be submitted for microscopic evaluation. Addendum will follow.

[REDACTED]

[REDACTED]

[REDACTED]

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 eight parts.

Part 1 is received fresh labeled with the patient's name, initials xxx, and designated "left neck, levels 2, 3 and 4". It consists of a 10.5 x 4.1 x 1.5

cm piece of soft tissue which includes muscle, adipose tissue and possible lymph nodes. There are also three unattached fragments -3.8 x 1.8 x 1.2 cm, 1.5 x 0.8 x 0.6 cm and 1.2 x 0.6 x 0.5 cm. The large fragment was divided into three levels 2, 3 and 4 arbitrarily, as the specimen was received unoriented. Level 2 has possible lymph nodes up to 2.1 cm. Level 3 has possible lymph nodes up to 1.8 cm. Level 4 has possible lymph nodes up to 1 cm.

Cassette summary:

- 1A - level 2, lymph node, bisected
- 1B - level 2, lymph node, bisected
- 1C - level 2, lymph node
- 1D - level 3, lymph node, bisected
- 1E - level 3, lymph node, bisected
- 1F - level 3, lymph node, bisected
- 1G - level 3, three remaining lymph nodes submitted entirely
- 1H - level 4, lymph node, bisected
- 1I - level 4, remaining two lymph nodes submitted entirely
- 1J - lymph node from the separate fragment bisected.

Part 2 is received fresh labeled with the patient's name, initials xxx, and designated "right neck dissection, levels 2, 3 and 4". The specimen consists of a piece of soft tissue consisting of adipose tissue, muscle and possible lymph nodes, 12.1 x 3.1 x 1.7 cm. It is received unoriented and divided into three levels.

Level 2 lymph nodes: Lymph node 1 1.0 x 0.8 x 0.6 cm. Three additional lymph nodes ranging from 0.6 x 0.5 x 0.5 cm to 0.4 x 0.3 x 0.3 cm.

Level 3 lymph nodes: Lymph node 1 2.7 x 1.5 x 1.3 cm. Upon sectioning has a firm white-yellow interior that is suspicious for metastasis. Also additional lymph nodes ranging from 1.4 x 0.8 x 0.6 cm to 0.5 x 0.5 x 0.5 cm are seen.

Level 4 lymph nodes: One lymph node measuring 2.7 x 2.0 x 1.6 cm. Upon sectioning, has a firm white-yellow interior that is suspicious for metastasis. Lymph node 2 1.8 x 1.5 x 1.2 cm. Upon sectioning has a firm white-yellow interior that is suspicious for metastasis. There are additional lymph nodes ranging in size from 0.7 x 0.7 x 0.6 cm to 0.2 x 0.2 x 0.2 cm.

Representative sections are submitted as follows:

- 2A - level 2, lymph node one, bisected
- 2B - level 2, three lymph nodes submitted in total
- 2C - level 3, lymph node one, bisected
- 2D - level 3 four lymph nodes submitted in total
- 2E-2F - level 4, lymph node one, trisected
- 2G - level 4, lymph node two, bisected
- 2H - level 4, six lymph nodes submitted in total.

Part 3 is received fresh labeled with the patient's name, initials xxxx, and designated "larynx". It consists of a total laryngectomy measuring 9.8 cm (superior to inferior), 6.8 cm (anterior to posterior) and 7.4 cm (medial to lateral). It consists of hyoid, epiglottis and two tracheal rings. There is a partial right pharyngectomy and right lobe of the thyroid are included.

There is no stoma or skin included. The anterior tissue is inked black. The hyoid is removed and the tissue posterior to the hyoid is inked in orange.

There is a tumor, 4.6 x 2.7 cm that is firm in texture and occupies right pyriform sinus involving the medial aspect of the aryepiglottic fold. It has been inked red and a portion of it has been removed for tissue bank. The tumor appears is 0.4 cm from the right pyriform tissue edge. The tumor does not extend into the tracheal cartilage. The tracheal cartilage is ossified.

Tissue has been banked. Digital images have been taken.

Representative sections submitted as follows:

- 3A - right pyriform tissue edge shave

3B - left pyriform tissue edge shave

3CDC, D - tracheal margin for decalcification

3E-3F - tumor in relation to epiglottis, base of tongue, vallecula, tissue edge shave

3G-3H - tumor and paraglottic soft tissue

3I - tumor in pre-epiglottic space

3J - representative section of tumor

3KDR - tumor and thyroid cartilage

3LDR - tumor and thyroid cartilage

3M - right glottis

3N - left glottis

3O - soft tissue

3P-3Q - representative sections of thyroid.

Grossed By [REDACTED] a

Part 4 is labeled with the patient's name, initials xxx and "right inferior hypopharyngeal margin." It consists of a 1.1 x 0.3 x 0.2 cm irregular tan tissue. The specimen is entirely frozen for intraoperative consultation and the remnant is submitted in cassette 4AFS.

Part 5 is labeled with the patient's name, initials xxx and "superior right pharyngeal margin." It consists of a 0.6 x 0.2 x 0.2 cm irregular tan tissue.

The specimen is entirely frozen for intraoperative consultation and the remnant is submitted in cassette 5AFS.

Part 6 is labeled with the patient's name, initials xxx and "right esophageal inlet." It consists of a 1.5 x 0.3 x 0.2 cm irregular tan tissue. The specimen is entirely frozen for intraoperative consultation and the remnant is submitted in cassette 6AFS.

Part 7 is labeled with the patient's name, initials xxx and "right base of tongue." It consists of a 1.3 x 0.4 x 0.2 cm irregular tan tissue. The specimen is entirely frozen for intraoperative consultation and the remnant is submitted in cassette 7AFS.

Part 8 is labeled with the patient's name, initials xxx and "left hypopharyngeal margin." It consists of a 0.9 x 0.8 x 0.2 cm irregular tan tissue. The specimen is entirely frozen for intraoperative consultation and the remnant is submitted in cassette 8AFS.

[REDACTED] A

#### INTRAOPERATIVE CONSULTATION:

4AFS: RIGHT INFERIOR HYPOPHARYNGEAL MARGIN, SHAVE, EXCISION (frozen section)

A. BENIGN

B. NO TUMOR PRESENT [REDACTED]

5AFS: RIGHT SUPERIOR PHARYNGEAL MARGIN, SHAVE, EXCISION (frozen section)

A. BENIGN

B. NO TUMOR PRESENT [REDACTED]

6AFS: RIGHT ESOPHAGEAL INLET, SHAVE, EXCISION (frozen section)

A. BENIGN

B. NO TUMOR PRESENT [REDACTED]

7AFS: RIGHT BASE OF TONGUE, SHAVE, EXCISION (frozen section)

A. BENIGN

B. NO TUMOR PRESENT [REDACTED]

8AFS: LEFT HYPOPHARYNGEAL MARGIN, SHAVE, EXCISION (frozen section)

A. BENIGN

B. NO TUMOR PRESENT [REDACTED]

#### MICROSCOPIC:

Microscopic examination substantiates the above diagnosis. 1F digital image obtained and stored in [REDACTED]

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 the CLIA [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 is 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 - PRIMARY UPPER AERODIGESTIVE TRACT AND SALIVARY GLAND TUMORS

SPECIMEN TYPE: Resection: Total laryngectomy with partial pharyngectomy

TUMOR SITE: Other: Right pyriform sinus

TUMOR SIZE: Greatest dimension: 4.6 cm

HISTOLOGIC TYPE: Squamous cell carcinoma, conventional

HISTOLOGIC GRADE: Not applicable

PRIMARY TUMOR (pT): pT3

REGIONAL LYMPH NODES (pN): pN2c

Number of regional lymph nodes examined: 31

Number of regional lymph nodes involved: 4

Extra-capsular extension of nodal tumor: Absent

DISTANT METASTASIS (pM): pMX

MARGINS: Cannot be assessed

VENOUS/LYMPHATIC (LARGE/SMALL VESSEL) INVASION (V/L):

Present

PERINEURAL INVASION: Present

ADDITIONAL PATHOLOGIC FINDINGS: None identified

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HISTO TISSUE SUMMARY/SLIDES REVIEWED:

Part 1: Left Neck Level 2-4

Taken: [REDACTED] [REDACTED]

Stain/cnt 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

ATTF x 1 F

CAM 5.2 x 1 F

ANEG x 1 F

H&E Recut x 1 F

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 2: Right Neck Dissection Levels 2-4

Taken: [REDACTED] [REDACTED]

Stain/cnt 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

Part 3: Larynx

Taken: [REDACTED] [REDACTED]

Stain/cnt 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 M  
H&E x 1 N  
H&E x 1 O  
H&E x 1 P  
H&E x 1 Q  
H&E x 1 R  
H&E x 1 S  
H&E x 1 T  
H&E x 1 U  
H&E x 1 V  
H&E x 1 W  
H&E x 1 X  
H&E x 1 Y  
H&E x 1 Z

H&E x 1 [REDACTED]  
H&E x 1 [REDACTED]  
H&E x 1 [REDACTED]

Part 4: Right Inferior Hypopharyngeal Margin

Taken: [REDACTED] [REDACTED]

Stain/cnt Block

H&E x 1 AFS

Part 5: Superior Right Pharyngeal Margin

Taken: [REDACTED] [REDACTED]

Stain/cnt Block

H&E x 1 AFS

Part 6: Right Esophageal Inlet

Taken: [REDACTED] [REDACTED]

Stain/cnt Block

H&E x 1 AFS

Part 7: Right Base of Tongue

Taken: [REDACTED] [REDACTED]

Stain/cnt Block

HHE x 1 AFS

H&E x 1 AFS

Part 8: Left Hypopharyngeal Margin

Taken: [REDACTED] [REDACTED]  
Stain/cnt Block  
H&E x 1 AFS  
[REDACTED]