

## SURGICAL PATHOLOGY REPORT

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De-Identified Specimen Code: [REDACTED]

Patient Age/Sex [REDACTED] / M

### **SPECIMEN SUBMITTED:**

Part A: RIGHT UPPER LOBE WEDGE

Part B: RIGHT LOWER LOBE BRONCHIAL  
MARGIN

Part C: R9

Part D: RIGHT LOWER LOBE WEDGE

Part E: R-12

Part F: 4R

Part G: 7

### **Final Diagnosis**

1. Right lung, upper lobe, wedge excision (A) - Adenocarcinoma with acinar, micropapillary, and bronchioloalveolar cell carcinoma components (see comment).
  - Pulmonary parenchyma hamartoma.
  - Centrilobular emphysema.
2. Right lung, lower lobe, lobectomy (B) - Adenocarcinoma, with acinar, solid, micropapillary, and bronchioloalveolar cell carcinoma components (see comment).
  - Centrilobular emphysema.
  - Peribronchial lymph nodes, negative for neoplasm.
3. Lymph nodes, R9, R12, 4R, #7, excision (C, E-G) - Lymph nodes, negative for neoplasm.
4. Right lung, lower lobe, wedge excision (D) - Centrilobular emphysema with focal organizing pneumonia, chronic bronchiolitis and foreign body giant cell reaction consistent with chronic aspiration.
  - Focal atypical adenomatous hyperplasia.

## SURGICAL PATHOLOGY REPORT

### Diagnosis Comment:

1.

Tumor Location: Right upper lobe

Tumor Size: 1.4 x 1.2 x 1.0 cm.

Vascular Invasion: Negative

Lymphatic Invasion: present.

Bronchial Margin: Not applicable.

Vascular Margin: Not applicable.

Parenchymal Margins: Negative

Pleura/Soft Tissue Margin: The tumor invades into the visceral pleura.

2.

Tumor Location: Right lower lobe

Tumor Size: 2.3 x 2.1 x 1.3 cm.

Vascular Invasion: Negative.

Lymphatic Invasion: present.

Bronchial Margin: Negative

Vascular Margin: Negative

Parenchymal Margins: Negative.

Pleura/Soft Tissue Margin: Negative

Pathologic Stage (AJCC): The tumors are adenocarcinomas that show slight histologic different appearances. However, both tumors are predominantly invasive and as they are within different pulmonary lobes they are interpreted as p stage IIIA (T4 N0 MX).

Additional comment: EGFR mutation analysis will be performed and the results reported as an addendum.

### Intraoperative Diagnosis:

A. Adenocarcinoma.

### Clinical Diagnosis:

R LL NODULE

## SURGICAL PATHOLOGY REPORT

### Gross Description:

A. Received fresh at the frozen desk labeled "right upper lobe wedge" is a specimen consisting of a wedge of lung measuring 10 x 4 x 2.5 cm, and weighing 20.3 grams. The pleural surface of the lung is depressed and puckered by an underlying mass. Additionally there is an 11 cm staple line. There is a white superficial nodule on the pleura measuring 0.7 x 0.7 cm. The large nodule underlying the pleural puckering measures 1.4 x 1.2 x 1 cm. It is gray-brown-black and slightly lobular. It does appear to invade the pleura grossly. The nodule is 0.3 cm from the parenchymal margin. Sectioning of the secondary superficial white nodule on the pleural surface does not reveal any invasion. The parenchymal margin is inked orange, and the pleural surface is inked blue. Sections are submitted as follows: A1 frozen section, A2 mass with greatest extent of pleural involvement, A3 large nodule parenchymal margin, A4 additional small white nodule, A5 uninvolved lung parenchyma.

B. Received in formalin from the frozen desk labeled "right lower lobe" is a lung lobectomy specimen measuring 15 x 10 x 2 cm, and weighing 141.4 grams. An unremarkable segment of bronchus measuring 1.4 cm in diameter and 1.0 cm in length is identified. The pleural surface demonstrates a puckered area measuring 2 x 2 cm which is inked blue. Also, identified is a previous wedge resection staple line. It is removed and the wedge resection margin is inked orange. Sectioning reveals a spiculated tan-gray firm nodule measuring 2.3 x 2.1 x 1.3 cm which extends within 5.4 cm of the bronchial margin. It extends within 0.1 cm of the previous wedge resection margin. The mass abuts and retracts the overlying pleura. Central cavitation and focal anthracotic pigmentation are identified within the mass. Additional mass lesions are not identified. The remaining parenchyma is tan-brown and demonstrates mild atelectasis. Minimal lymph node tissue is identified. Representative sections are submitted as follows: B1 bronchial margin for frozen section diagnosis, B2 vascular margin, B3-B4 mass with overlying pleura, B5-B6 mass with previous wedge resection margin, B7-B9 random sections of mass, B10 uninvolved lung parenchyma adjacent to tumor, B11 uninvolved lung parenchyma faraway from tumor, B12 lymph nodes.

C. Received fresh labeled [REDACTED] is an irregular segment of tan-black soft tissue measuring 0.6 x 0.3 x 0.2 cm. Totally submitted in formalin in cassette C1.

D. Received fresh labeled "right lower lobe wedge" is a wedge of lung tissue measuring 6.2 x 5.5 x 1.2 cm, and weighs 6.4 grams. A staple line is present along two sides. The pleural surface demonstrates a white fibrous area measuring 0.6 x 0.3 cm. The parenchyma is tan-brown and unremarkable. No mass lesions are identified. The specimen is totally submitted as follows: D1-D2 pleural nodule, D3-D6 remainder of tissue.

E. Received fresh labeled [REDACTED] is an irregular segment of tan-pink soft tissue measuring 1.4 x 0.9 x 0.3 cm. The specimen is totally submitted in formalin in cassette E1.

F. Received fresh labeled [REDACTED] are two segments of yellow-black soft tissue aggregating to 0.7 x 0.4 x 0.2 cm. Totally submitted in formalin in cassette F1.

G. Received fresh labeled [REDACTED] is an irregular segment of red-black soft tissue measuring 1.8 x 1.2 x 0.5 cm. Totally submitted in formalin in cassette G1.