Specimen Type: EMR (Endoscopic Mucosal Resection) or ESD (Endoscopic Submucosal Resection)

Note: Please page/notify the GI biopsy fellow on service to review the gross specimen

Procedure:

1. Measure and provide orientation.
   a. If unoriented -- ink should be applied on the peripheral and deep margins (1 color only)
   b. If oriented, ink peripheral margins differentially (similar to skin specimen; e.g., 12-3:00 blue, 3-6:00 green, 6-9:00 purple, 9-12:00 orange, deep black) and indicate orientation in the cassette summary

2. Section at 2mm intervals
   a. If a gross lesion is identified- section along the axis to allow for evaluation of the lesion to the nearest peripheral margin:

   ![Diagram of sectioning with lesion identified](image)

   b. If no gross lesion is identified OR if the lesion appears to completely involve all margins, section along the long axis. Take perpendicular sections of the first and last slices to allow for complete evaluation of the margins:

   ![Diagram of sectioning with no lesion identified](image)
GROSS TEMPLATE: Labeled with the patient’s name (**), medical record number (**), designated **, and received [fresh/in formalin] is an [oriented/unoriented] EMR measuring *** x *** cm, excised to a depth of *** cm. [Describe orientation]. [Describe any lesions – including size, type, borders, color, shape, distance to all margins]. The specimen is sectioned [provide orientation if applicable] to reveal [describe cut surface]. The specimen is entirely submitted in [describe cassette submission].

CASSETTE SUBMISSION: 5-10 cassettes
- Submit levels sequentially into cassettes
  o End margins are in separate cassettes and perpendicularly sectioned (see diagram)
- Multiple levels can be placed into the same cassette
- The cassette key should clearly indicate what is submitted (ie, A1: level one, perpendicularly, A2: next 3 serial slices, A3: Next 2 serial slices, A4: last slice, perpendicularly sectioned)

SAMPLE CASSETTE SUBMISSION:
A1    One end, perpendicular
A2- A4 Central sections (lesion: A3 - A4)
A5    Opposite end, perpendicular