Specimen Type: LOBECTOMY

Procedure:

Please note that as part of our research studies we are collecting fresh neoplasm for tissue banking. Please cooperate. Please make sure there is enough neoplasm for diagnostic evaluation. The rest may be collected for research studies.

1. Describe nature of the specimen (entire lung, lobe, wedge resection).
2. Weigh, measure to the mm and photograph.
3. Describe pleural surface, noting color, granularity, presence of adhesions, retraction, tumor. Describe state of inflation and consistency.
4. Inflate the specimen with 10% formaldehyde. Margins should be inked. After fixation, serially section the specimen.
5. Describe cut surface of lung, noting color and consistency and focal lesions. For tumors, describe size, color, consistency, location, relationship to bronchi and closest distance to pleura and margin or resection. Photograph all tumors.
6. Describe lymph nodes, noting location, range of sizes and appearance of cut surface.
7. Submit sections as follows:

   COMMENT: Please do not submit entire tumor specimen if possible. The wet tissue can be resubmitted for EM studies, if necessary or used for research.

   a) 3-4 sections of tumor or 1 section per centimeter if tumor is large
   b) One section demonstrating closest approach to pleura (order EMT stain on this section)
   c) One section demonstrating most central aspect.
   d) Bronchial margin of resection. If tumor is more than 2 cm from margin, take section of entire circumference. If tumor is less than 2 cm from margin, take one or more sections perpendicular to inked margin.
   e) Pulmonary vascular margins of resection.
   f) One section of uninvolved parenchyma (including bronchi).
   g) Sections of any other lesions.
   h) All lymph nodes.
Gross Template:
Labeled with the patient’s name (**), medical record number (**), designated “***”, and received [fresh/in formalin] is a *** gram, *** x *** x *** cm [intact/previously incised] [left/right] [upper, lower, middle] [lobectomy pneumonectomy]. The bronchus/bronchi measure(s) *** cm in length x *** cm in diameter. The vascular margin(s) measures *** cm in length x *** cm in diameter.

The pleura is [intact/ruptured/smooth/glistening/roughened/puckered]. There is a [minimal, moderate, extensive] amount of anthracotic pigmentation. Sectioning reveals [describe all lesions including size, color, involvement of pleura, and distance from margins- bronchovascular, stapled margin, and pleura]. The endothelium of the vasculature is [tan-yellow and smooth or remarkable for calcifications]. The mucosa of the bronchi is [tan-yellow, corrugated, and grossly unremarkable or remarkable for-describe presence of lesion].

The remaining lung parenchyma is [emphysematous/spongiform/fibrotic/unremarkable]. [Describe number/size of lymph nodes if identified- indicate if hilar or intraparenchymal- and color/consistency]. Gross photographs are taken. Representative sections are submitted [number of cassettes].

Ink key:
Blue-stapled resection margin
Green- puckered pleura overlying lesion

Cassette Submission: 10-15 cassettes

- Bronchial resection margin
  - Submit shave if tumor is greater than 2 cm away from the margin
  - Submit 1 or 2 perpendicular sections of margin if tumor is less than 2 cm away from the margin (often centrally located tumors such as SCC)
- Pulmonary vascular resection margins, shave
- 3-4 sections of tumor or 1 section per centimeter if tumor is large
- One section of pleura closest to tumor (if not previously submitted)
  - Order EMT stain on this section
- One cassette of uninvolved lung (including bronchi)
- Submit all lymph nodes
  - Indicate hilar vs intraparenchymal LN