**Genitourinary Grossing Guidelines**

**Specimen Type:** ORCHIECTOMY (for TUMOR)

Note: Prior to sectioning the testis, it is best to obtain sections of the spermatic cord to avoid contamination by testicular tumor, which is often loose and friable. Serially section the spermatic cord along its length and submit shave of cord margin and representative cross-sections of proximal, middle, and distal cord (be clear in cassette summary as to the designation of location on cord, such as “base of cord [nearest testis proper]”).

**Gross Template:**
Labeled with the patient’s name (***) medical record number (***) designated “***”, and received [fresh/in formalin] is a(n) *** gram, *** x *** x *** cm [intact/disrupted] orchiectomy. The spermatic cord measures *** cm in length x *** cm in diameter. The tunica vaginalis is [disrupted/intact/partial/etc.].

Sectioning reveals *** x *** x *** cm lesion. The lesion has a [describe cut surface, circumscription, necrosis, hemorrhage, focality]. The lesion [is confined to the testicular parenchyma, invades hilar soft tissue, invades the tunica albuginea, invades the tunica vaginalis, invades rete testis, invades epididymis].

The remaining parnechyma is [tan-brown and unremarkable, fibrotic or describe additional lesions]. No additional lesions are grossly identified. Gross photographs are taken. Representative sections are submitted [describe cassette submission].

**Cassette Submission:** 8-10 cassettes
- Include sections of spermatic cord
  - One cassette with en face margin
  - One cassette sampling proximal, mid, distal spermatic cord
- Submit entire tumor if you can fit in 10 cassettes or fewer (CAP protocol)
  - If tumor is greater than 10cm, submit 1 block per 1cm of maximum tumor dimension
  - If tumor is multifocal, sample the additional nodules
  - Ensure sections contain tumor with interface of unremarkable testis and tunica albuginea (even away from tumor) to best appreciate lymphatic invasion
    - Sample hemorrhagic and necrotic areas
    - Sample solid/fleshy/cystic areas
- Epididymis
- Testicular hilum/mediastinum testis