Specimen Type: THYMECTOMY

Gross Template:
Labeled with the patient’s name (last name, first name), medical record number (#), designated “***”, and received [fresh/in formalin] is a ***gram, *** x *** x *** cm [partial/total] thymectomy. [Describe orientation if provided]. Sectioning reveals [describe any lesions present including size, color, external appearance, relationship to capsule, calcification, necrosis, relationship to uninvolved thymus]. The remaining cut surfaces are [yellow, smooth, lobulated, fatty, unremarkable]. The adherent adipose tissue is dissected through for lymph nodes. [Describe number/size of lymph nodes identified]. Representative sections are submitted [describe cassette submission].

Ink Key:
Black- external surface (if un-oriented and for tumor)
[Additional ink may be required if oriented for margin assessment]

Cassette Submission: 10-12 cassettes
- One cassette if incidentally removed
- One cassette per 1 cm of lesion/tumor
  o Show relationship to capsule
  o Show relationship to unremarkable parenchyma
- One cassette of unremarkable parenchyma
- Submit all lymph nodes identified
- Submit representative sections of other structures present (pleura, pericardium, etc.)