

Hepatobiliary Pathology Grossing Guidelines

Specimen Type: WEDGE BIOPSY

Gross Template:

The specimen is received [*fresh/in formalin*] in a container labeled with the patient's name (***), medical record number (***), and as "****." The specimen consists of a wedge resection measuring *** x *** x *** cm and weighing *** g. [*Measure and describe any adherent organs or structures (adrenal gland, portion of diaphragm, etc.).*] The capsule is smooth, glistening, and unremarkable [*or is remarkable for a *** x *** cm area of disruption or describe size, shape, color, consistency of lesions (plaques/nodules, hemorrhage, subcapsular hematoma, etc.).*] The hepatic resection surface measures *** x *** cm. Serial sectioning reveals *** [*masses/prominent nodules*]. [***For specimens with multiple masses/lesions, state how many are noted, and assign each lesion/mass a designation (such as "mass #1" or "nodule #4"). Duplicate the paragraph below as many times as necessary to document the characteristics of each lesion/mass.***]

[*Mass/nodule #:*

[*Location: (segment #)*

[*Necrosis: (none or %)*

[*Description: (circumscription, shape, color, consistency)*

[*Distance from capsule: (*** cm)*

[*Distance to nearest margin: (*** cm) from (parenchymal, hepatic artery/vein, portal vein, bile duct) margin*

[*(For cholangiocarcinoma, additionally specifically mention the distance to the bile duct margin.)*

[*Distance from other masses/nodules: (e.g., 2.0 cm from nodule #1 and 4.5 cm from nodule #2)*

[*Vascular invasion: Not identified (or describe and identify the vessel, if known/orientable)*

[*(If gross invasion of bile ducts is identified, describe)]*

The remaining parenchyma is [*firm, red, homogeneous, and unremarkable or fibrotic or micronodular (nearly all nodules <3 mm) or macronodular (most nodules >3 mm) or with variably-sized nodules (highly variable size with nodules both < and > 3 mm)*].

[*Describe any additional pathology (cysts, hematomas, thrombi, etc.). For cysts, describe #, location(s), cyst lining (specifically mention the relationship of any cyst to the biliary system [does/does not communicate], loculation (uni-/multiloculated), quantity of fluid within (*** mL), quality of fluid within (serous, mucinous, hemorrhagic, purulent), presence or absence of papillary excrescences or solid nodules.)*] *** possible lymph nodes are identified, ranging from *** to *** cm in greatest dimension.

Ink key:

Black – parenchymal resection margin

Blue – capsule overlying tumor

[Additional inking description for additional margins (e.g., diaphragmatic margin, bile duct margin) as necessary]

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All identified possible lymph nodes are entirely submitted. [The lesion/mass is entirely submitted (if applicable, otherwise skip to next sentence)] Representative sections are otherwise submitted as follows:

Cassette Submission:

All tissue submitted

- Submit entirely
- Add the appropriate histology order