

## **Hematopathology Grossing Guidelines**

**Note:** Adequate fixation is essential for lymph node biopsies. If node is received late in the day (after 12PM) fix cassettes overnight in formalin before submitting. If the node is large a single cassette may be submitted the same day for provisional diagnosis. If you have any questions, please call the fellow or Hematopathologist on call.

**Note: For Pediatric nodal and extranodal neoplasms, review the Pediatric Grossing Guidelines**

### **Procedure:**

Each lymph node is different depending on the clinical situation. *Below serves as guidelines only.* Please contact Hempath (fellows, or attendings, or Dr. Said for details):

- 1) Measure and serially section node into thin slices.
- 2) Make touch preparations and air dry for a Giemsa stain.
- 3) Thin slices should be fixed each for formalin and B5 fixation, separately.
  - a. Tissue requires at least 12 hours in fixative before processing. If late in the day, hold overnight in formalin so the tissue can fix.
- 4) Decision and amount of tissue for cytogenetics to be determined by Hematopathology.
- 5) Decision and amount of tissue for flow to be determined by Hematopathology.

**Specimen Type:** BIOPSY (suspected lymphoproliferative disease)

### **Gross Template:**

Labeled with the patient's name (\*\*), medical record number (\*\*), designated "\*\*\*\*", and received [fresh/in formalin] is a [*tan/brown/nodular*] lymph node measuring \*\*\* x \*\*\* x \*\*\* cm. A portion of tissue is placed in RPMI and sent for flow cytometry studies. A portion of tissue is submitted in B5 for permanent sections in cassette \*\*. The remaining specimen is submitted for routine processing in cassette(s) [*describe cassette submission*].

**Cassette Submission:** All tissue submitted