

DERMATOPATHOLOGY GROSSING GUIDELINES

QI Project Protocol:

- Process margins separately as **RUSH**
 - For larger excisions which require consulting with attending still **RUSH** en face sampled margins or any margin sampled
- Use a case flag for cases that a HN surgeon performs the skin excision

RUSH CASES:

For all RUSH cases, the dermpath fellows AND the skin service resident should be notified via email about the case.

Specimen Type: SKIN EXCISION

Gross Template:

Labeled with the patient's name (***), medical record number (***), designated "****", and received [fresh/in formalin] is an [*oriented/unoriented*] skin ellipse measuring *** x *** cm, excised to a depth of *** cm. [*Describe orientation if provided*]. The epidermis [*Describe any lesions – including size, type, borders, color, shape, distance to all margins*].

The specimen is serially sectioned to reveal [*describe depth of invasion*]. [*Describe remaining cut surface and presence of satellite lesion(s)*]. The specimen is entirely submitted in [*describe cassette submission*].

INK KEY (if oriented):

Blue- 12-3 o'clock

Red- 3-6 o'clock

Green- 6-9 o'clock

Orange- 9-12 o'clock

Deep -Purple

INK KEY (if unoriented):

Green- resection margin

Cassette Submission: All tissue submitted

- If oriented-submit tips in separate cassettes. Up to 3 central sections can be submitted in the remaining cassettes
- If unoriented-both tips can go in the same cassette

Sample Cassette Submission:

Oriented

A1 12 o'clock tip

A2-A4 Central sections, submitted from 12 to 6 o'clock

A5 6 o'clock tip

Unoriented

A1 Tips

A2-A4 Central sections, submitted from 12 to 6 o'clock

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