

## DERMATOPATHOLOGY GROSSING GUIDELINES

### RUSH CASES:

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

**Specimen Type:** MOH'S MARGIN RE-EXCISION

### **Gross Template:**

**Cassette Submission:** All tissue submitted

- Do NOT section, ink deep & peripheral margin red and place skin up in cassette
- If the tissue is too thick, consult with a pathologist
- **Add embedding case flag for histology**

### **Gross Description:**

#### **MMODAL COMMAND:** INSERT MOH'S RE-EXCISION

It consists of an oriented semilunar-shaped hair-bearing skin excision [*describe orientation\*\*\**]. The specimen measures [*measure in two dimensions\*\*\**], and is excised to the depth of [*\*\*\**] cm. The epidermis is [*describe lesion/scar/unremarkable\*\*\**]. The specimen is entirely submitted, unsectioned, for Mohs processing in cassette [*describe cassette submission\*\*\**].

#### **INK KEY:**

Blue 12 o'clock  
Green 3 o'clock  
Red Deep (for embedding orientation)

Labeled with the patient's name, medical record number and "right medial shin, stage 2 excision" is an un-oriented elliptically-shaped hair-bearing skin excision specimen measuring 3.0 cm long x 0.4 cm wide. The specimen is excised to a maximum depth of 0.2 cm. The new margin is differentially inked with blue and green surgical ink with no provided orientation. The epidermal surface is pink-tan and grossly unremarkable. A definitive lesion or mass is not grossly identified. The specimen is entirely submitted, un-sectioned, for Moh's processing.

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### INK KEY:

Blue – one half of new margin

Green – opposite half of new margin

Red- deep (for embedding orientation)

### Notes:

- The new margin (**red**) is often more smooth than the old margin (**black arrow**).
- The old margin may look slightly ulcerated or jagged. If orientation is ever unclear consult with another PA or Dermatopathologist before proceeding.
- These specimens may come from the clinic pre-inked. If so, indicate this in the gross (even though we may not have been provided with the color designations) and do not change the color of the ink!
- If the specimen is large, as in the photo below, and the margin will be difficult for histology to embed in one plane → grosser may cut the specimen in half (**dashed line**) and place each half into a separate cassette. The grosser **MUST** indicate what portion is in which cassette if the specimen is orientated and ensure they are inking the entire peripheral margin!

