# DERMATOPATHOLOGY GROSSING GUIDELINES

## **QI Project Potocol:**

- 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: LARGE or WIDE SKIN EXCISION

# **Procedure:**

- 1. Photograph specimen
- 2. Measure and orient, if applicable
  - a. You may re-designate a suture to a clockface orientation. However, if a suture is designated in a clockface pattern, you must keep provided orientation.
    - i. Suture on tip indicates superior. May be redesignated as 12:00.
    - ii. Suture on long edge indicates 12:00. This may NOT be redesignated as 3:00.
- 3. Describe epidermis and note presence of lesion and/or scar- describe size, shape, borders, and distance to margins.
  - a. If lesion is far from peripheral margins- take a thin shave of the peripheral margin and submit, en face. Designate clockface orientation in cassette summary.
  - b. If lesion is close to peripheral margin submit perpendicular sections to closest margin. Submit the remainder of the peripheral margin, en face.
- 4. Serially section and describe cut surface of lesion, measuring the maximum thickness of the lesion and the distance from the deep margin.

# **Gross Template**:

# **MMODAL COMMAND: INSERT SKIN EXCISION**

It consists of an oriented skin excision measuring [\*\*\*] cm (12:00-6:00) x [\*\*\*] cm (3:00-9:00), and excised to a depth of [\*\*\*] cm. There is a short suture designating [\*\*\*] and a long suture designating [\*\*\*]. The epidermis is remarkable for a [ $describe\ lesion/scar^{***}$ ]. The lesion is located [\*\*\*] from 12:00, [\*\*\*] from 3:00, [\*\*\*] from 9:00.

The specimen is serially sectioned to reveal a [describe cut surfaces\*\*\*] cut surface. The lesion has a depth of [\*\*\*] cm, and is located [\*\*\*] cm from the deep margin. [The specimen is entirely submitted/Representative sections are submitted\*\*\*\*].

#### **INK KEY:**

Blue 12-3:00 Red 3-6:00 Green 6-9:00

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Orange 9-12:00 Purple Deep

[insert cassette summary\*\*\*]

## **MMODAL COMMAND: INSERT UNORIENTED SKIN**

It consists of an unoriented skin excision measuring [measure in length x diameter\*\*\*] cm to a depth of [\*\*\*] cm. The epidermis is remarkable for a [describe lesion/scar, give measurement in two dimensions, unremarkable\*\*\*].

The specimen serially sectioned to reveal a [describe cut surfaces\*\*\*] cut surface. The lesion has a depth of [\*\*\*] cm, and is located [\*\*\*] cm from the deep margin. [The specimen is entirely submitted/Representative sections are submitted\*\*\*].

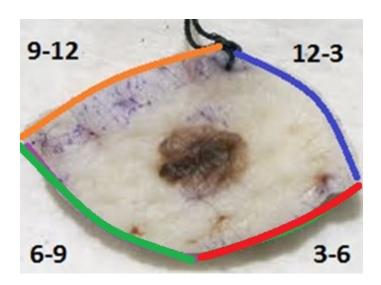
#### INK KEY:

Green resection margin

[Insert cassette summary\*\*\*]

<u>Cassette Submission</u>: up to 20 cassettes - <u>Please contact the attending <u>prior</u> to grossing in the specimen if you think that >20 cassettes will be necessary</u>

- Tips
- Melanoma- block out and submit entire scar/lesion and satellite nodules
- BCC/SCC- submit entirely, unless very large. You may consult with attending



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