GASTROINTESTINAL PATHOLOGY GROSSING GUIDELINES

Specimen Type: TRAUMA (*i.e.* gunshot wounds)

Procedure:

- 1. Measure the length, diameter or circumference and wall thickness of resected bowel.
- 2. Describe the presence or absence of perforation, and size and location (distance to the closest margin) of perforation if present.
- 3. Describe other findings, if present, such as hematoma, and their location and dimension.
- 4. Describe the dimension or width of mesentery.
- 5. Photograph the specimen and probe defects.

Gross Template:

Labeled with the patient's name (***), medical record number (***), designated ***, and received [fresh/in formalin] is a segment of [oriented-provide orientation/un-oriented] bowel measuring ***cm in length x *** to ***cm in open circumference with two stapled ends. [Mesenteric/Pericolic] fibroadipose tissue extends ***from the bowel wall.

The serosal surface is remarkable for [describe adhesions, plaques, absence of serosa, full-thickness defects (perforations or enterotomies)]. The mucosal surface is remarkable for a [describe areas of ischemia/discoloration- size and distance to margins]. Sectioning reveals [no gross evidence of perforation/ a perforation and/or abscess formation (describe location, size, and distance to nearest margin)].

The remainder of the bowel [describe any additional lesions]. Sectioning reveals a [white, hemorrhagic, etc] bowel wall with a thickness ranging from *** - *** cm. Representative sections of the specimen are submitted.

Cassette Submission: 2-3 cassettes

- Proximal and distal shave margins in one cassette
- 1-2 sections to include perforation or damaged area
- No lymph nodes are needed