

## Genitourinary Grossing Guidelines

**Specimen Type:** ORCHIECTOMY (non-neoplastic)

**Note:** A simple orchiectomy may be performed for hormonal treatment of prostate cancer, for trauma, for torsion, or for rare infectious disorders.

**Procedure:**

1. Weigh and measure the specimen.
2. Measure testis and the length and diameter of spermatic cord.
3. Make sagittal slices through the testis and epididymis, and describe the parenchyma, the presence or absence of fine thin tubules (stringy in normal consistency), and any focal abnormalities.

**Gross Template:**

Labeled with the patient's name (\*\*\*), medical record number (\*\*\*), designated "\*\*\*\*", and received [fresh/in formalin] is a(n) \*\*\*gram, \*\*\* x \*\*\* x \*\*\* cm [*intact/disrupted*] orchiectomy. The spermatic cord measures \*\*\* cm in length x \*\*\* cm in diameter. The tunica vaginalis is [*present/absent*].

The tunica vaginalis is opened. The tunica albuginea is [*smooth and white or describe lesions present*]. The testis measures \*\*\* x \*\*\* x \*\*\* cm and the epididymis measures \*\*\* x \*\*\* x \*\*\* cm.

Sectioning reveals [*describe cut surface, fibrosis, necrosis, lesions*]. Representative sections are submitted [*describe cassette submission*].

**Cassette Submission:** 5-6 cassettes

- Spermatic cord, representative
- Sample all lesions (periphery and center)
  - o Sample lesion with relationship to rete testis, tunica albuginea, and epididymis
- If no lesions are identified – submit two cassettes (2-4 sections) of testicular parenchyma to include rete testis and epididymis.