

Case Scenario 1

Final Diagnosis:

Left Kidney – radical nephrectomy

Multifocal renal cell carcinoma: Clear cell (conventional) type, with sarcomatoid features

- Fuhrman Grade 4/4
- Tumor Size: 7.8 cm
- Multifocal with satellite nodules up to 1.1 cm
- Extension: Carcinoma focally extends through renal capsule into perisinus adipose tissue at hilum
- Renal vein invasion is noted
- Margins: Carcinoma is present at soft tissue surgical margin adjacent to hilar vessel
- No adrenal gland identified

Left periaortic lymph node chain: One of four para-aortic lymph nodes demonstrates a 4mm focus of metastatic renal cell carcinoma.

Left Tibia, Biopsy: Clear cell carcinoma, consistent with metastasis from the patient's known renal cell carcinoma primary.

Case Scenario 2

Clinical History:

This 45 year old woman was found to have a left renal mass. CT revealed a 2.5 cm lateral mass in the lower pole of the left kidney. No lymphadenopathy or metastasis noted. Patient went on to have a laparoscopic nephron-sparing surgery using the da Vinci® robotic system.

Surgical Pathology

Specimen: Left renal mass

Gross Description:

- Received is a specimen labeled “left renal mass” and consisting of a portion of renal parenchyma measuring 4 x 5 x 4 cm. Noted on the surface is a 2.6 x 2.4-cm whitish mass. The renal parenchyma surface is inked black. This specimen is serially sectioned revealing a cystic lesion that is at least 1 mm. from the nephrectomy margin.
- Intraoperative Diagnosis:
 - Kidney, left, partial nephrectomy: Renal cell carcinoma, margins negative.

Final Diagnosis:

- Kidney, left, partial nephrectomy: Mucinous, tubular and clear cell carcinoma, forming a 2.6-cm mass. Fuhrman grade 2/4. Margins of excision are negative.

Quiz 1

Case Scenario 1

1. How many primaries are present in Scenario 1? Please explain how you determined this using the 2007 MP/H rules.

2. What histology would be assigned to this/these primary (ies). Please explain how you determined the histology using the 2007 MP/H Rules.

3. Code the following treatment items for scenario 1 (Use slides handouts if you do not have your 2010 FORDS Manual).
 - a. Surgical procedure of primary site _____
 - b. Approach-Surgical Procedure of the Primary Site at this Facility _____
 - c. RX SUMM-TREATMENT STATUS _____

Case Scenario 2

4. How many primaries are present in Scenario 2? Please explain how you determined this using the 2007 MP/H rules.

5. What histology would be assigned to this/these primary (ies). Please explain how you determined the histology using the 2007 MP/H Rules.

6. Code the following treatment items for scenario 2 (Use slides handouts if you do not have your 2010 FORDS Manual).
 - a. Surgical procedure of primary site _____
 - b. Approach-Surgical Procedure of the Primary Site at this Facility _____
 - c. RX SUMM-TREATMENT STATUS _____

Quiz 2

Complete the following data items for case scenario 1

Grade/Differentiation	_____	Grade Path System	_____
		Grade Path Value	_____
CS Tumor Size	_____	SSF 1 Invasion Beyond Capsule	_____
CS Ext	_____	SSF2 Vein Involvement	_____
CS TS/Ext Eval	_____	SSF3 Ipsilateral Adrenal Gland Involvement	_____
CS Lymph Nodes	_____	SSF4 Sarcomatoid Features	_____
CS LN Eval	_____	SSF5 Histologic Tumor Necrosis	_____
CS Mets	_____	SSF6 Fuhrman Nuclear Grade	_____
CS Mets Eval	_____	SSF7 Size of Metastasis in Lymph Nodes	_____
		SSF8 Extranodal Extension of Regional LN	_____

Complete the following data items for case scenario 2

Grade/Differentiation	_____	Grade Path System	_____
		Grade Path Value	_____
CS Tumor Size	_____	SSF 1 Invasion Beyond Capsule	_____
CS Ext	_____	SSF2 Vein Involvement	_____
CS TS/Ext Eval	_____	SSF3 Ipsilateral Adrenal Gland Involvement	_____
CS Lymph Nodes	_____	SSF4 Sarcomatoid Features	_____
CS LN Eval	_____	SSF5 Histologic Tumor Necrosis	_____
CS Mets	_____	SSF6 Fuhrman Nuclear Grade	_____
CS Mets Eval	_____	SSF7 Size of Metastasis in Lymph Nodes	_____
		SSF8 Extranodal Extension of Regional LN	_____