RADICAL PROSTATECTOMY SPECIMEN (Partial Submission)

Date Acquired: Date Submitted	:
Patient Name:	
Reg. Number:	
Specimen ID:	
GROSS DESCRIPTION:	
Grossed By:	
Size: (L x W x H) cm x cm x gm	
Inking: R=green, L=blue, B=yellow	
Seminal Vesicles (length)Right:cm V	
Left:cm	Left:cm
Nodule: none / single / multiple Site of Nodule(s) (Right/Left): Description of Nodule(s) (color):	
Sliced Base to Apex – No. of Sections:	
Tissue Procurement: Yes / No Sections submitted for procurement:	
Inked Margins Intact: Yes / No If no, which slice(s):	
COMMENTS:	
1C =Anterior RPUM (right proximal urethral margin) 1E =Posterior RPUM (right proximal urethral margin) 1F	B = LSV&LVD (left seminal vesicle & vas deferens) D = Anterior LPUM (left proximal urethral margin) = Posterior LPUM (left proximal urethral margin) = Anterior LDUM (left distal urethral margin) = Posterior LDUM (left distal urethral margin)
	M = LA1 (left anterior – section 1 near base) D = LP1 (left posterior – section 1 near base)
	Section 5 S=RA5 1U=LA5 V=RP5 1W=LP5
RECORD CIRCLED CASSETTES ONLY – DO NOT TRANSCRIBE UNCIRCLED DESIGNATIONS If additional tissue is required:	

Please contact Prostate Lab, GU Path Fellows, or Dr. Shah's secretary:

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