

## VERMILIONECTOMY

1. A vermillionectomy specimen measuring XXX cm is received, oriented with X on the X aspect // unoriented specimen.
2. Externally, a lesion measuring XXX cm is identified, located X cm from the left lateral margin and X cm from the right lateral margin.
3. The lesion is flat / ulcerated / exophytic in appearance, with indurated / soft-elastic consistency, and whitish / brownish discoloration, etc.
4. The surgical margin is inked.
5. On sectioning, the lesion measures X cm in thickness and is located X cm from the deep margin.
6. The cut surface is homogeneous / heterogeneous, with well-defined / poorly defined borders, whitish / brownish discoloration, etc.
7. Representative sections are submitted.

### **1st Example (Vermilionectomy for squamous cell carcinoma):**

- A1: left lateral margin, cross-sectioned.
- A2: right lateral margin, cross-sectioned.
- A3 - A4: one complete section of the lesion.
- A5 - A6: second complete section of the lesion.

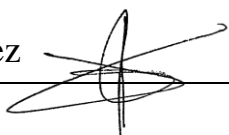
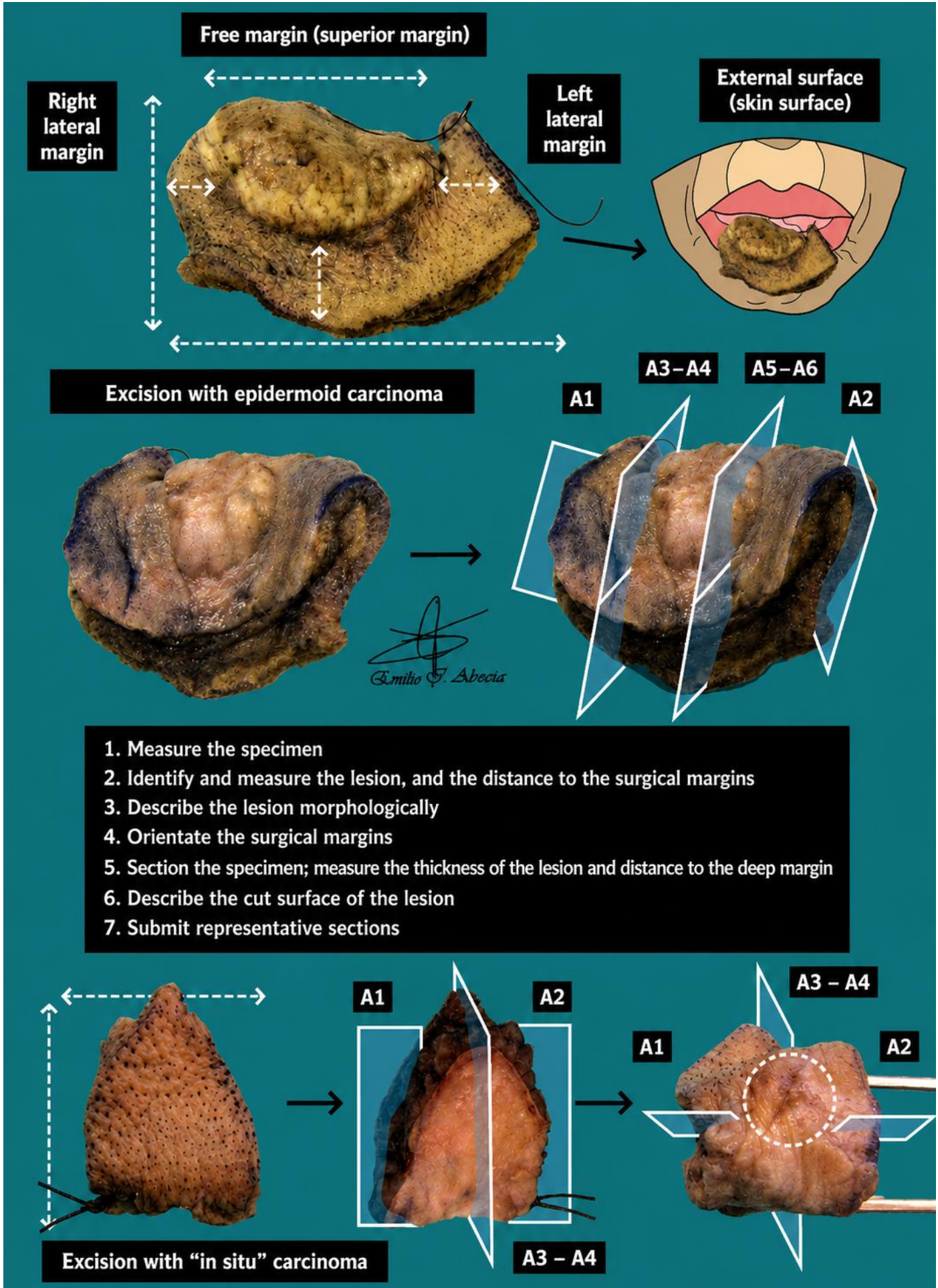
### **2nd Example (Vermilionectomy for squamous cell carcinoma in situ):**

- A1: left lateral margin, cross-sectioned.
- A2: right lateral margin, cross-sectioned.
- A3 - A4: one central section of the specimen.

## POINTS TO NOTE

- Surgical resections of the upper or lower lip, generally performed for neoplastic lesions (most commonly squamous cell carcinoma).
- Orient the specimen according to the surgical markers provided. Spatial orientation may also be inferred if the laterality of the specimen is known (upper versus lower), bearing in mind that the skin represents the external surface and the mucosa the internal surface.
- Measure and describe both the specimen and the lesion, including the distance to the resection margins.
- Ink the margins (the use of more than one colour or notches is recommended).
- Serially section the specimen along the short axis; measure tumour thickness and the distance to the deep margin.
- Submit representative sections:
  - Include the deep and lateral margins (left and right). The remaining edges correspond to the anatomical free border.
  - Include a couple of sections of the lesion (at least one section per centimetre of the greatest dimension of the lesion).





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## DISCLAIMER

The image and text are provided for illustrative purposes only. The tissue sections submitted and the description provided will depend on the individual specimen characteristics, the clinical diagnostic suspicion, the experience of the dissector, and the institutional guidelines of the laboratory.

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