**Purpose**

To establish a procedure on how to triage and process temporal lobes for epilepsy.

These specimens usually come as 2 separate parts: A. Temporal lobe and B.  Hippocampus. They are received fresh and oriented on Telfa pads. It is imperative that the resident/fellow photograph these specimens in the fresh state to document orientation. They must be photographed and placed in a sealed formalin filled container with printed patient labels and fixed overnight. These specimens are to be shipped to NCRC the following morning.

Note: you may receive a 3rd specimen; “Amygdala” or “Uncus.”  As the latter are the biopsies, there is no orientation and photographs are not needed.

**Procedure**

**“Temporal lobe”:**

* Fix overnight in formalin. (Pour over the specimen carefully not to dislodge it and loose the orientation.)
* Slice the specimen from anterior to posterior margin in precise coronal sections 3-4-5 mm thick, labeling sequentially A1, A2, A3… if there are no clinically known or visible lesions, place every other section in a separate cassette (about 4-6).  The remaining slices should go back to the jar with formalin.
* Take additional photographs of cut surfaces all laid out in sequential order.

**“Hippocampus”:**

* Fix overnight in formalin (do not dislodge the orientation).
* Slice this specimen **from posterior to anterior margin**.  When first coronal section cut precisely from the posterior margin, you will see the image of a “ram’s horn”.  Continue slicing the anterior margin at 3-4-5 mm.  Process the entire specimen.
* Take additional photographs of cut surfaces all laid out in sequential order.