**Purpose**

In certain clinical situations, treatment of melanoma and Merkel cell carcinoma (and occasionally squamous cell or adnexal carcinoma) dictates intra-operative sentinel lymph node mapping and biopsy (IOLM). These require special handling (see below). Immunostains are now ordered at the time of accessioning (by default), and therefore grossers should not re-order immunostains. Please double check to make sure the SLN parts were ordered correctly in SoftPathDx (i.e. Melanoma should be ordered as SLN MEL).

\*Melanoma, Merkel Cell Carcinoma, Squamous Cell Carcinoma, and Adnexal Carcinoma

**Procedure**

* In the gross description, include any IOLM detail information from the specimen container label (SLN #, location, count, blue/not blue, Hot) in the specimen introduction dictation.
* Grossly separate out each node, if possible, from any attached adipose; also if possible, identify the lymph node hilum.
* Slice each node thinly parallel to the long axis at 0.2-0.3 intervals to include sections through the hilum. Note: All lymph nodes over 0.3 cm should be sectioned accordingly!
* If a frozen section is requested, freeze all the slices.
* If multiple lymph nodes are present in a single container, ink each a different color. This is especially important for counting lymph nodes that are small and placed in the same cassette. Again, the first slice should be through the hilum as this is the most critical site to evaluate metastasis.