**Procedure**

* Measure the diameter and excision depth.
* Describe any lesions present and distance of the lesion to the margin.
* If the specimen is 4 mm or larger in diameter, ink and bisect vertically slightly off center. If the specimen is less than 4 mm in diameter, ink and submit whole. Alternate the colors of ink you apply from specimen to specimen and state in the dictation which color is being used.
* If the punch biopsy is for alopecia, give the specimen to a PA to gross. Be aware that alopecia areata may be abbreviated “AA” on the requisition.
* If you receive a scalp biopsy which is not indicated to be for alopecia, contact a dermatopathology attending for grossing instructions if the differential diagnosis includes an inflammatory condition. If the biopsy is for a neoplasm (e.g. blue nevus) then follow the protocol for standard punch biopsies as given above.

**Sections for Histology**   
  
Complete submission of specimen in 1 cassette

**Sample Dictation**

Labeled “Left lower leg", received in formalin in a small container is a 0.5 cm tan skin punch biopsy excised to a depth of 0.4 cm. It is remarkable for a 0.2 x 0.2 cm brown well defined centric lesion that is less than 0.1 cm from the margin. The specimen is inked blue and bisected.  
  
Cassette 1 skin punch biopsy 2 ns.