**Purpose**

To establish a procedure on how to gross nephrectomies for benign diseases such as chronic pyelonephritis, obstructive or reflux nephropathy, cystic diseases, and failed transplants.

**Procedure**

* Photograph external surface
* Weigh
* Measure kidney and hilar margins (ureter, renal vein, and renal artery)
* Describe the capsule (intact?) hilum, margins
* Bivalve the kidney, sagittal plane
* Photograph cut surfaces
* Section along sagittal plane
* Describe the cortex (thin? Cyst? Normal?) medulla, pelvis and calyces
* Search for lymph nodes near hilum

**Sections for Histology**

* Representative (3-4) sections of parenchyma parallel to cut surfaces including cortex to pelvis including lesions if present
* Cross sections of ureter
* Hilar margins, shaved (ureter, renal artery, renal vein)
* Lymph nodes or other findings

**Sample Dictation**

“right nephrectomy” received in formalin in a large container is a 100 g, 18.5 x 6 x 3.8 cm nephrectomy specimen with attached 3.8 x 0.6 cm segment of ureter, 0.6 x 1.2 cm segment of renal vein and 1.1 x 0.5 cm segment of renal artery. The ureter is markedly narrowed at the proximal ureter. The hilar vascular margins and hilum are unremarkable. The capsule is intact, thick tan granular. The specimen is bivalved revealing dilated renal pelvis and calyces lined by tan unremarkable urothelium. The cortex is irregularly narrowed, red-tan with an average thickness of 0.3 cm. The corticomedullary junction is ill defined. The medullary pyramids are unremarkable.   
Cassette Summary:  
A1- hilar margins, shave (3, NS)

A2-cross sections of proximal ureter. (5ss)  
A3-4 corticomedullary junction (1 ss each)  
A5- renal pelvis (1, SS)



**Sample Diagram**

