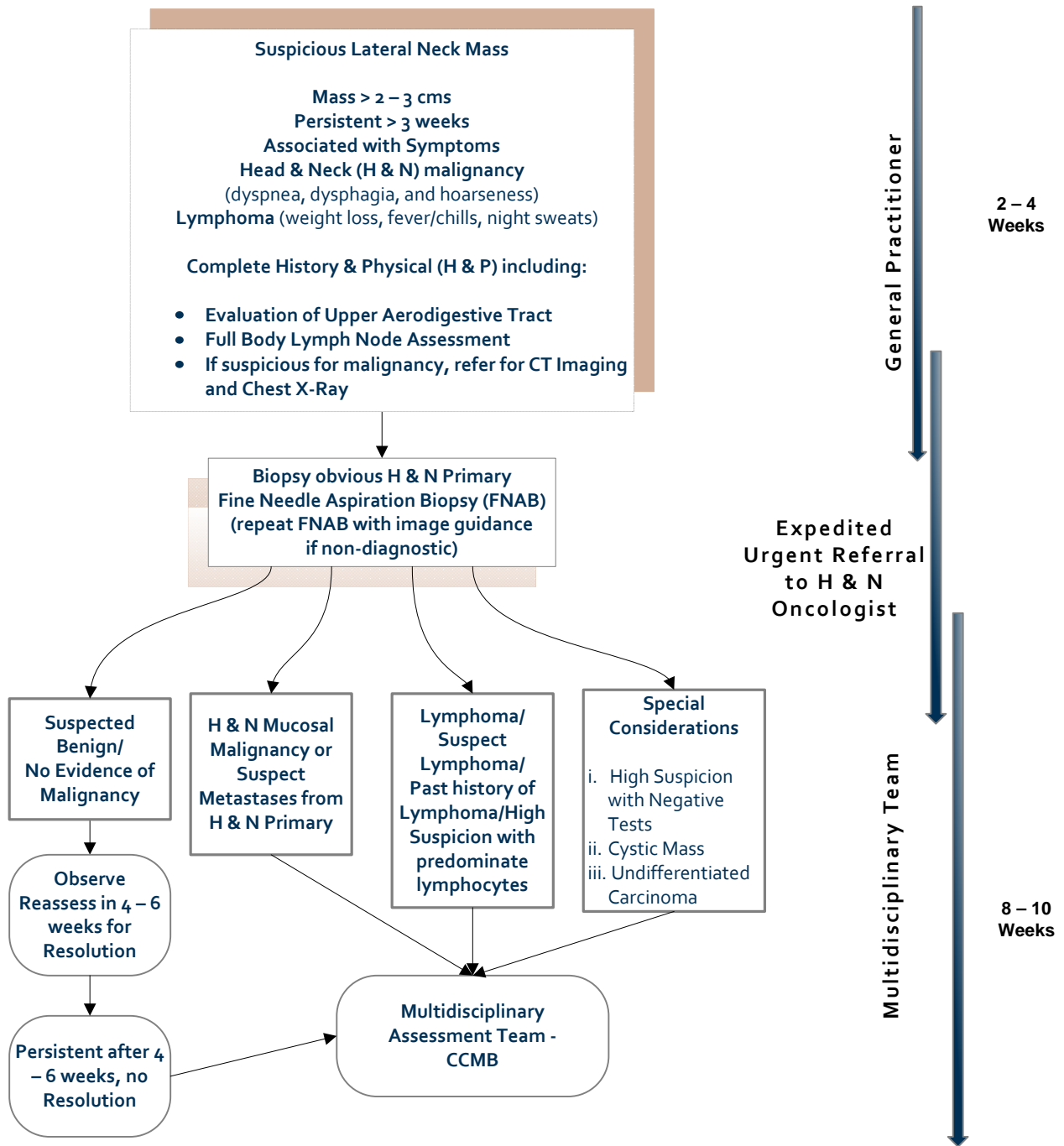


APPROACH TO AN ADULT WITH A LATERAL NECK MASS



NOTES

Clinical Examination:

1. History – upper aerodigestive tract symptoms; constitutional symptoms; risk factors
2. Physical exam – cranial nerve exam; otoscopy; upper aero digestive tract; neck palpation including lymph node palpation above and below the clavicle.
3. Fiberoptic Nasendoscopy
4. FNAB
5. When referring, include all relevant physical findings.
6. Referral to occur if multiple lymph node groups are involved.

Indications for Open biopsy*:

- i. Most cases of lymphoma
- ii. Further evaluation of undifferentiated malignancy
- iii. Cystic neck mass with no obvious primary
- iv. Non diagnostic FNAB (following 2nd biopsy under image guidance)
- v. Patient's condition indicates high suspicion for malignancy with negative investigations

* May be done in conjunction with EUA and panendoscopy in selected instances. Biopsy performed by or in consultation with member of multidisciplinary team

Special Considerations:

- i. Patients with known HIV, solid organ transplant, autoimmune disease, significant lymphadenopathy/splenomegaly, past history of lymphoma
- ii. Presence of lymphocytes is a red flag for Lymphoma