Oral Tongue Cancer

INITIAL WORK-UP

Outside pathology material reviewed
- History:
  - Chief Complaint
  - History of present illness & previous treatment
- Past Medical History:
  - Medical Illnesses
  - Surgeries
  - Medication allergies
  - Family history
  - Social history (including tobacco and alcohol use)
  - Medications
- Review of systems
- Physical Examination:
  - Full head & neck exam
  - General medical examination
  - Stage T N (AJCC)
- Imaging studies:
  - Panorex mandible - optional
  - CXR

CONSULTATIONS

Dental Oncology for dentulous patients if XRT may be used
Radiation Oncology if patient not eligible for surgery or as an alternative therapy or adjuvant post-operative treatment
Speech Pathology for patients whose treatment may impact swallowing and/or speech
Plastic Surgery for patients who will require major reconstruction
Pre-operative Internal Medicine consult (see conditions in note below)
Nutrition
Consider smoking cessation program
Quality of life questionnaire (optional)

INITIAL TREATMENT

Surgery: glossectomy with or without mandibulectomy with neck dissection

ADJUVANT THERAPY

Indications for adjuvant post-op XRT based on path report:
- Close (<5mm) and/or microscopic positive margins
- Perineural involvement
- Tumor in lymphatic vessels
- Positive lymph nodes with extracapsular extension
- Tumor in connective tissue
- >2 positive lymph nodes

FOLLOW-UP

H & N history and physical exam every 3 mo for 1 yr., then every 4 mo for 1 yr., then annually
CXR annually
Barium swallow (optional) annually
TSH annually if radiated
Liver function tests annually (optional)
Quality of life questionnaire (optional)

Patients with advanced stage disease (T3, T4, N2 or N3) should be considered for clinical trials on neo-adjuvant or adjuvant therapy.

INITIAL TREATMENT

Conditions for Pre-Op Internal Medicine Consult:
Hypertension
1. Uncontrolled or newly diagnosed
2. Poorly compliant patient
3. Multi-drug regimen for control
Cardiac Disease
1. History of MI or angina
2. History of cardiac or vascular surgery
3. Cardiac murmur or valvular heart disease
4. CHF
Pulmonary Disease
1. >20 pack year smoking history
2. Moderate to severe COPD <2 flight exercise tolerance
3. Reactive airways disease
4. Previous lung resection
5. Multiple history of pneumonias
6. History of TB
Cerebrovascular Disease
1. Previous CVA
2. History of TIA
3. Carotid bruit or known stenosis
Hepatic Disease
1. History of cirrhosis
2. Laboratory of hepatic dysfunction
Diabetes
1. Type I
2. Type II

Medical Oncology: Chemoprevention trials optional

Patient information presented at Planning Conference

T1,T2 NO

Treatment options discussed with patient/family

T1,T2 NO or N+

Surgery: glossectomy with neck dissection

Reconstruction as needed: soft tissue and/or bone; mandible plate

Surgery: glossectomy with or without mandibulectomy with neck dissection

Medical Oncology: Chemoprevention trials optional