Salivary gland lesions are relatively uncommon and fine needle aspiration (FNA) is routinely performed to evaluate these lesions. Although it is possible to reach a definitive diagnosis in some cases, there are a considerable number of remaining problematic cases. The issues precluding a definitive diagnosis on aspirated material of salivary gland lesions are as follows: scant cellularity, poorly preserved cells, cellular heterogeneity, squamous metaplasia, variable ratio of the cells and the matrix, uncommon presentation of common entities and finally, rare neoplasms. Therefore, rendering a definitive diagnosis on aspirated material can be a diagnostic challenge. Moreover, the clinicians and surgeons rely heavily on diagnosis of salivary gland FNAs for their patient care and management. The Milan salivary gland reporting system is introduced to provide a classification scheme for salivary gland FNA to improve the rendering of diagnoses of these cases. This workshop will review the Milan system and its application on routine daily practices for pathologists.

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