

DIAGNOSIS:

A. RIGHT OVARY, SALPINGO-OOPHORECTOMY:

- Ovary with mullerian type adenocarcinoma, high grade, with serous features, involving parenchyma and surface (Please see synoptic report)
- Fallopian tube epithelium, muscularis, and paratubal fat involved by high grade mullerian type adenocarcinoma

B. APPENDIX, APPENDECTOMY:

 High grade mullerian type adenocarcinoma, involving mesoappendix, muscularis and lamina propria

C., D., E. OMENTUM #1 #2, #3, PARTIAL OMENTECTOMY:

- Benign mature adipose tissue

F. BLADDER PERITONEUM BIOPSY:

 Mature adipose tissue with focus of organizing hemorrhage and atypical cells, favor reactive mesothelial hyperplasia

G. LEFT TUBE AND OVARY, SALPINGO-OOPHORECTOMY:

- Benign ovary with atrophic changes
- Fallopian tube with reactive paratubal mesothelial hyperplasia
- Detached aggregate of tumor cells

H. UTERUS AND CERVIX, TOTAL HYSTERECTOMY:

- Benign cervix with mild chronic cervicitis
- Benign inactive endometrium and endometrial polyp
- Myometrium with adenomyosis
- Serosa with no significant pathologic alteration

I. RIGHT PELVIC ADHESIONS, BIOPSY"

- Adhesions with mesothelial hyperplasia
- J. RIGHT PELVIC LYMPH NODES, DISSECTION:
 - Metastatic carcinoma to four of four lymph nodes (4/4)

K. LEFT OBTURATOR LYMPH NODES, DISSECTION:

- Metastatic carcinoma to three of three lymph nodes (3/3)

L. LEFT PRESACRAL LYMPH NODES, DISSECTION:

Metastatic carcinoma to three of three lymph nodes (3/3)

M. RIGHT COMMON ILIAC LYMPH NODE, DISSECTION:

Metastatic carcinoma to six of six lymph nodes (6/6)

Local

PATIENT NOTIFIED OF RESULTS
DR: NURSE: DATE

- N. PIGUT OPTUPATOR LYMPU NORFO PIGGEOTION.
- N. RIGHT OBTURATOR LYMPH NODES, DISSECTION:
 - Metastatic carcinoma to thirteen of fourteen lymph nodes (13/14)
- O. RIGHT PERIAORTIC LYMPH NODES, DISSECTION:
 - Metastatic carcinoma to twelve of thirteen lymph nodes (12/13)
- P. RIGHT LUMBAR LYMPH NODES, DISSECTION:
 - Metastatic carcinoma to two of two lymph nodes (2/2)
- Q. LEFT PERIAORTIC LYMPH NODES, DISSECTION:
 - Metastatic carcinoma to four of four lymph nodes (4/4)
- R. LEFT AORTIC LYMPH NODES, DISSECTION:
 - Metastatic carcinoma to four of four lymph nodes (4/4)
- S. TCGA A, RESEARCH:
 - Mullerian type adenocarcinoma, high grade, with serous features:
 - 85% tumor cell nuclei
 - Tumor cell necrosis: <5%
- T. TCGA B, RESEARCH:
 - Mullerian type adenocarcinoma, high grade, with serous features:
 - 45% tumor cell nuclei
 - Tumor cell necrosis: 65%
- U. TCGA C, RESEARCH:
 - Mullerian type adenocarcinoma, high grade, with serous features:
 - 65% tumor cell nuclei
 - Tumor cell necrosis: 25%

SYNOPTIC REPORT:

Applies To:

- A: RIGHT OVARY (FS)
- **B: APPENDIX**
- C: OMENTUM 1
- D: OMENTUM 2
- E: OMENTUM 3
- F: BLADDERN PERITONEUM BX
- G: LEFT TUBE & OVARY
- H: UTERUS, CERVIX
- I: RIGHT PELVIC ADHESIONS
- J: RIGHT PELVIC LYMPH NODES
- K: LEFT OBTURATOR LYMPH NODES
- L: LEFT PRE SACRAL LYMPH NODES
- M: RIGHT COMMON ILIAC LYMPH NODE
- N: RIGHT OBTURATOR LYMPH NODES
- O: RIGHT PERIAORTIC LYMPH NODES
- P: RIGHT LUMBAR LYMPH NODES
- Q: LEFT PERIAORTIC LYMPH NODES
- R: LEFT AORTIC LYMPH NODES

wacroscopic

Specimen Type:

Left and right ovaries

Left and right fallopian tubes

Uterus Omentum Peritoneum

Pelvic lymph nodes
Paraaortic lymph nodes
Common iliac lymph nodes
Uterus, cervix, appendix

Other Organs Present:

Obturator nodes, presacral nodes, right lumbar nodes,

bladder peritoneum,

Procedure:

Right salpingo-oophorectomy Left salpingo-oophorectomy

Hysterectomy
Omental biopsies
Peritoneal biopsies
Lymph node dissection

Specimen integrity, right ovary:

Specimen integrity, left ovary:

Not applicable

Not applicable

Microscopic

Histologic Type: Histologic Grade:

Serous adenocarcinoma G3: Poorly differentiated

Tumor Size:

Right ovarian tumor, greatest dimension: 11cm Right ovarian tumor, dimensions: 11 x 10 x 6cm

Ovarian surface involvement:

Present

Summary of Organs/Tissues Microscopically

Involved by Tumor:

One ovary

Fallopian tube(s)

Appendix, right pelvic lymph nodes, left and right obturator lymph nodes, left presacral lymph nodes, right common iliac lymph node, right and left periaortic lymph nodes, right lumbar lymph nodes,

left aortic lymph nodes

Primary Tumor (pT):

pT3c : Macroscopic peritoneal metastasis beyond pelvis

more than 2 cm in greatest dimension and/or regional

lymph node metastasis

Regional Lymph Nodes (pN):

pN1: Regional lymph node metastasis

Number of lymph nodes identified:

51

Number of lymph nodes involved:

53

Additional Pathologic Findings

None identified

HISTORY:

Ovarian cyst

SURGICAL PATHOLOGY REPORT



MICROSCOPIC FINDINGS: The transport of the second of the s

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A. RIGHT OVARY

Labeled with the patient's name, labeled "right ovary", and received fresh in the Operating Room for intraoperative frozen consultation and subsequently fixed in formalin is 300 gram, $11.0 \times 10.0 \times 6.0$ cm ovary with adhered fimbriated fallopian tube measuring 6.5 cm in length and 0.4 cm in with.

The external surface of the ovary is light tan-yellow, and fibrotic. There is a focal area of excrescences identified measuring 0.4 cm in greatest dimension. Sectioning of the ovary reveals the ovary is approximately 99% replaced by a poorly circumscribed hemorrhagic. tan-white, necrotic, mainly solid and focally papilliferous tumor measuring $11.0 \times 10.0 \times 5.8$ cm. The papillary appearing area constitutes 10% of the tumor. No cystic formation is grossly noted. No residual ovarian parenchyma can be grossly identified.

The serosa of the fallopian tube is dusky purple-red, congested and contains multiple minute paratubal cysts containing clear serous fluid. Cut section reveals no gross tumor and a stellate lumen measuring up to 0.1 cm in diameter.

A representative portion of tissue was submitted for frozen section analysis.

Ink Key: Blue- external surface of ovary

Representative sections are submitted.

Slide key:

A1. FSA remnant - 1

A2-A5. Representative sections of tumor - 3 each

A6. Fallopian tube, proximal, mid, distal and fimbriated end - 4

B. APPENDIX

Labeled with the patient's name, labeled "appendix", and received in formalin is an intact appendix measuring $5.3~\rm cm$ in length and ranging from $0.4~\rm to$ $1.5~\rm cm$ in width. There is a moderate amount of attached mesoappendix extending $1.5~\rm cm$ from the appendiceal wall. The serosa is focally tan-white, indurated and contains a $1.3~\rm x$ $1.0~\rm cm$ in surface area tan-white tumor implant. The remaining uninvolved serosa is light tan-pink, with prominent vascular. The tumor implant comes within $2.5~\rm cm$ of the proximal margin and is located within the mid appendix. On cut section this serosal implant correlates with a $1.7~\rm x$ $1.2~\rm x$ $1.4~\rm cm$ tan-white focally necrotic tan-pink papilliferous poorly circumscribed tumor which appears to invade from the serosa inward. This tumor involves the full thickness of the appendiceal wall and also appears to involve a portion of the tip.

Representative sections are submitted.

Ink key: Blue - proximal margin.

Slide key:

B1. Proximal portion of appendix - 2

B2. Portion of appendix with tumor - 2

B3. Distal tips, bisected - 2

C. OMENTUM #1

Labeled with the patient's name, labeled "omentum #1", and received in formalin is 9.6 x 7.2 x 0.5 cm tanyellow irregular portion of lobulated fibrofatty omental tissue. Sectioning reveals no gross tumor. Representative sections are submitted.





C1, 3

D. OMENTUM #2

Labeled with the patient's name, labeled "omentum #2", and received in formalin is a 15.3 x 14.5 x 0.3 cm tan-yellow lobulated portion of fibrofatty omental tissue. Sectioning reveals no gross tumor. Representative sections are submitted.

D1. 3

E. OMENTUM #3

Labeled with the patient's name, labeled "omentum #3", and received in formalin are two tan-yellow fibrofatty portions of lobulated omental tissue measuring $9.2 \times 6.7 \times 1.4$ cm and $13.5 \times 7.0 \times 0.4$ cm. Sectioning reveals no gross tumor. Representative sections are submitted. E1. 3

F. BLADDER PERITONEUM BIOPSY

Labeled with the patient's name, labeled "bladder peritoneum biopsy", and received in formalin is a 1.0 x 0.8 x 0.2 cm tan-red to tan-yellow soft tissue fragment. No gross tumor is identified. Entirely embedded. F1. 1

G. LEFT TUBE AND OVARY

Labeled with the patient's name, labeled "left tube and ovary", and received in formalin is a salpingooophorectomy specimen consisting of a 2.0 x 0.9 x 0.5 cm ovary with adhered fimbriated fallopian tube measuring 3.2 cm in length and 0.5 cm in diameter.

The serosal surface of the ovary is light tan-yellow, cerebriform. There are two tan-white, well circumscribed, ovoid, firm, and homogenous subcapsular nodules measuring $0.1 \times 0.1 \times 0.1 \times 0.1$ cm and $0.3 \times 0.3 \times 0.2$ cm. Cut section reveals no other gross lesions. The parenchyma is tan-pink, focally congested.

The serosa of the fallopian tube is dusky purple with multiple adhesions. Cut section reveals a stellate lumen measuring up to 0.1 cm in diameter and does not contain any gross tumor. Representative sections are submitted. Entire ovary is embedded.

Slide key:

G1-G3. Ovary - 1 each

G4. Fallopian tube proximal, mid, distal and fimbriated end - 4

H. UTERUS AND CERVIX

Labeled with the patient's name, labeled "uterus, cervix", and received in formalin is a 40 gram, $6.7 \times 4.5 \times 2.3$ cm total hysterectomy specimen without attached bilateral adnexa. The cervix is 3.0 cm in length and up to 2.1 cm in width. The endometrial cavity is 3.5 cm in length and 2.0 cm in width. The endometrial thickness ranges from is 0.1 to 0.4 cm. The myometrial thickness averages 1.3 cm in greatest dimension.

Within the posterior uterine corpus there is a 0.3×0.3 cm firm tan-white polypoid lesion located within the endometrial cavity. On cut section this lesion does not appear to have any gross invasion present.

No other gross lesions are identified within the endometrium. The myometrium, and cervix are grossly unremarkable. The serosa is focally congested with multiple adhesions.

Representative sections are submitted.

Slide key:

H1. Anterior cervix - 1

H2. Anterior lower uterine segment - 1

H3. Anterior uterus - 1





- H4. Posterior cervix 1
- H5. Posterior lower uterine segment 1
- H6. Posterior uterus with lesion 1

I. RIGHT PELVIC ADHESIONS

Labeled with the patient's name, labeled "right pelvic adhesions", and received in formalin is a $2.5 \times 1.7 \times 0.4$ cm hemorrhagic purple-red and yellow soft tissue fragment. The specimen is sectioned to reveal no gross lesions. Entirely embedded.

J. RIGHT PELVIC LYMPH NODES

Labeled with the patient's name, labeled "right pelvic lymph nodes", and received in formalin are tanwhite firm lymph nodes ranging from 0.8 to 4.1 cm in greatest dimension. The larger nodes are sectioned to reveal tan-white firm and focally necrotic cut surfaces. The four lymph nodes are entirely embedded. Representative sections of the larger grossly positive lymph nodes are submitted.

- J1. Two lymph nodes 2
- J2. One smaller lymph node bisected 2
- J3. Largest lymph node 2

K. LEFT OBTURATOR LYMPH NODES

Labeled with the patient's name, labeled "left obturator lymph nodes", and received in formalin are three tan-white firm lymph nodes ranging from 1.2 to 4.7 cm in greatest dimension. Cut section reveals that these lymph nodes are tan-white, homogenous consistent with three grossly positive lymph nodes. Representative sections are submitted from each node.

- K1. Largest lymph node and smallest lymph node 2
- K2. One lymph node representative section 1

L. LEFT PRESACRAL LYMPH NODES

Labeled with the patient's name, labeled "left presacral lymph nodes", and received in formalin are three tan-white firm lymph nodes ranging from 0.5 to 1.7 cm in greatest dimension. Cut section of the lymph nodes reveal a tan-white firm and homogenous cut surface. Lymph nodes entirely embedded.

Slide kev:

- L1. One lymph node bisected 2
- L2. One lymph node bisected 2
- L3. One lymph node bisected 3

M. RIGHT COMMON ILIAC LYMPH NODE

Labeled with the patient's name, labeled "right common iliac lymph node", and received in formalin is a single 3.2 cm in greatest dimension tan-white firm lymph node. Cut section reveals a tan-white to focally yellow cut surface. Representative sections submitted.

M1, M2. 1 each

N. RIGHT OBTURATOR LYMPH NODES

Labeled with the patient's name, labeled "right obturator lymph nodes", and received in formalin are 21 tan-white firm lymph nodes ranging from 0.2 to 3.1 cm in greatest dimension. Cut section of the lymph nodes reveal tan-white firm cut surfaces.

Lymph nodes are entirely embedded with the exception of the largest lymph node which representative sections are submitted.

- N1. Six lymph nodes 6
- N2. Four lymph nodes 4
- N3. One lymph node bisected 2
- N4. One lymph node bisected 2
- N5. One lymph node bisected 2





- N6. One lymph node bisected 2
- N7. One lymph node bisected 2
- N8. One lymph node bisected 2
- N9. Representative section one lymph node 1
- N10. Representative section one lymph node 1
- N11. Representative section one lymph node 1
- N12. Representative section one lymph node 1
- N13. Representative section largest lymph node 1

O. RIGHT PERIAORTIC LYMPH NODES

Labeled with the patient's name, labeled "right periaortic lymph nodes", and received in formalin are 13 tan-white firm lymph nodes ranging from 0.4 to 3.7 cm in greatest dimension. The larger lymph nodes are sectioned to reveal tan-white firm cut surfaces. Representative sections are submitted of the grossly positive lymph nodes.

- O1. Seven lymph nodes 7
- O2. Three representative sections of three grossly positive lymph nodes 3
- O3. One grossly positive lymph node 1
- O4. One grossly positive lymph node 1
- O5, O6. Representative section of largest grossly positive lymph node 1 each

P. RIGHT LUMBAR LYMPH NODES

Labeled with the patient's name, labeled "right lumbar lymph nodes", and received in formalin are two tan-white firm lymph nodes measuring 0.6 and 2.1 cm in greatest dimension. Cut section reveals tan-white homogenous cut surface. Entirely embedded.

- P1. Smaller lymph node bisected 2
- P2. Larger lymph node bisected 2

Q. LEFT PERIAORTIC LYMPH NODES

Labeled with the patient's name, labeled "left periaortic lymph nodes", and received in formalin are four tan-white firm lymph nodes ranging from 0.4 to 3.2 cm in greatest dimension. Cut section of the largest lymph node reveals a tan-white firm and homogenous cut section. It possible that there are two lymph nodes matted together. Representative sections are submitted.

- Q1. Three lymph nodes 3
- Q2. Portion of largest lymph node 1

R. LEFT AORTIC LYMPH NODES

Labeled with the patient's name, labeled "left aortic lymph nodes", and received in formalin are four tanwhite firm and congested lymph nodes ranging from 0.8 to 3.2 cm in greatest dimension. Cut section reveals a tan-white firm cut surface. Representative sections are submitted of each node.

Slide key:

- R1. Two grossly positive lymph nodes 2
- R2. One grossly positive lymph node 1
- R3. Largest grossly positive lymph node 1

Please note the larger lymph nodes may represent matted lymph nodes.

- S. TCGA RESEARCH
- S1. 2
- T. TCGA RESEARCH
- T1. 2
- U. TCGA RESEARCH
- U1. 2

