

**ROYAL MARSDEN NHS FOUNDATION TRUST - HISTOPATHOLOGY REPORT**  
**736259: [REDACTED] NHS Number: [REDACTED]**

<b>Lab No</b>	0604/20	<b>Reported</b>	20 Jan 2020	<b>Pathologist</b>	DR HALLIN / DR THWAY
	Internal	<b>Sample</b>			CRITICAL CARE UNIT
<b>Source</b>	Operation	<b>Received</b>	15 Jan 2020	<b>Ward</b>	(CHELSEA)
<b>Sex</b>	FEMALE	<b>Age</b>	58	<b>Branch</b>	FULHAM ROAD
<b>Clinical Diagnosis</b>		<b>Operation</b>	14 Jan 2020	<b>Consultant</b>	SMITH,MR M J F

<b>SITE</b>	<b>DIAGNOSIS</b>
SOFT TISSUE AND OTHER	MORPHOLOGIC DESCRIPTION ONLY / LIPOSARCOMA WELL
A CONNECTIVE TISSUE ( T1X005 )	DIFFERENTIATED (Malignant) ( M09350 / M88513 )
	MORPHOLOGIC DESCRIPTION ONLY / LIPOSARCOMA WELL
B RETROPERITONEUM ( TY4600 )	DIFFERENTIATED (Malignant) ( M09350 / M88513 )

CORE BIOPSY FROM RETROPERITONEAL MASS IN NOV 2019: WELL- DIFFERENTIATED LIPOSARCOMA (MDM2 AMPLIFIED). NO DEFINITE DEDIFFERENTIATION NOTED (14477/19). THIS SPECIMEN: EXCISION OF RETROPERITONEAL SARCOMA WITH PANCREAS, SPLEEN, LEFT ADRENAL, LEFT KIDNEY AND LEFT COLECTOMY

#### MACROSCOPY

##### Left retroperitoneal sarcoma

: Pot contains a large retroperitoneal mass measuring 230 x 200 x 115mm. On the outer surface there is attached colon which measures 225mm in length and 37mm in maximum diameter. The outer surface is partially covered in a thin layer of connective tissue with fragments of fibro fatty tissue and skeletal muscle on one surface. In the pot there is a separate spleen which weighs 75g and measures 62 x 53 x 24mm. The outer capsule of the spleen appears mildly ruptured, ?artefact. On opening the bowel the mucosa appears normal with no obvious tumour infiltration. There is a separate nodule, ?pancras, which appears unremarkable. On slicing the main specimen there is a macroscopically normal kidney measuring 120 x 47 x 43mm. Kidney is surrounded by tumour but no infiltration is identified. The tumour cut surface is heterogeneous with small focal cream areas and bland yellow fatty tissue. The tumour measures 195 x 200 x 69mm. There is also a sheet of omental tissue attached to the colon which measures 195 x 95 x 30mm. Necrosis is approximately 5%. On slicing, the spleen no focal nodules are seen. The tumour abuts the colonic mucosa and surrounds the kidney. On further slicing there is a small focal nodule seen towards the roughen resection margin the cut surface of which resembles pancreas / lymph node. This nodule measures 27 x 15 x 9mm. Blocks: 1) Spleen with area of rupture; 2) Spleen with attached fatty tissue; 3&4) Colonic resection margin; 5) Colonic mucosa to closest tumour; 6) renal vessels; 7) Renal hilum; 8) Renal cortex to tumour; 9) Tumour to smooth serosal resection margin; 10) Tumour to roughened resection margin; 11-13) Representative sections of tumour; 14) Representative section of ?pancreas. TR.

#### HISTOLOGY

Sections show differentiated adipocytic tumour, composed of sheets of adipocytes of largely mature type, with occasional lipoblasts (eg slide 9), with relatively minimal intersection by fibrous septa. Focally (eg slide 9) there are clusters of brown-fat/ hibernoma-like cells, likely representing hibernoma-like variant of well- differentiated liposarcoma. Marked cellular atypia is not seen, and mitotic figures, tumour necrosis and a dedifferentiated component are not identified. Focal fat necrosis is present. Small numbers of lymphoid aggregates are interspersed focally.

The features are consistent with predominantly lipoma-like well- differentiated liposarcoma, grade 1, with extends to the inked peripheral margin. No dedifferentiation is seen. The tumour is seen to abut the colonic muscularis propria, without infiltration. No tumour is seen at the colonic longitudinal margins; the colonic muscularis propria here shows surrounding mature adipose tissue. The colon appears focally mildly dilated, but otherwise unremarkable. Mild serositis is present. The kidney is abutted by well- differentiated liposarcoma without infiltration. No significant pathology is noted in the renal parenchyma. The section from the renal vessels shows unremarkable vessels surrounded by mature adipose tissue. Differentiated adipose tissue without discernible atypia abuts the spleen, without infiltration. No significant pathology is noted in the splenic parenchyma. The pancreas shows some focal autolytic changes, and is surrounded by mature-type adipocytic tissue with some septation, likely representing well-differentiated liposarcoma. There are small clusters of adipocytic tissue within the pancreas, but conclusive marked infiltration by well-differentiated liposarcoma is not noted. No significant pathology is seen in the pancreatic tissue.

Dr Magnus Hallin/Dr Khin Thway