



100-0-3

Path Adenocarcinoma, serous papil

8460/3 hr  
11/22/10

SURGICAL PATHOLOGY REPORT

Soc. Sec. No.:  
Location:

PATH #:

A/S:

Rec:

Col:

C QCF Adenocarcinoma,  
Serous, NOS  
8441/3

Site: Endometrium C54.1

Pathologist:  
Assistant:  
Attending MD:  
Ordering MD:  
Copies To:

DIAGNOSIS:

Endometrium/Uterus (hysterectomy)  
Adenocarcinoma  
-Serous papillary  
-High grade/Invasive  
-pT3a, N0, MX (IIIA)  
Cervix/Endocervix  
Squamous metaplasia  
Follicular cervicitis  
Metastatic/Secondary adenocarcinoma  
Parametrium, right  
Uterine serosa  
Cul de sac peritoneum  
Uterosacral ligament, right  
Lymph nodes, 11, right/left pelvic, periaortic  
Hyperplasia  
Omentum (biopsies, three)  
Adhesions  
Cervix  
Follicular cervicitis  
Ovaries/Fallopian tubes, bilateral  
Atrophy  
Appendix  
No pathologic diagnosis

HISTORY: Endometrial carcinoma

MICROSCOPIC:

Neoplasm (S-Z) is a high grade carcinoma with many areas of solid cell nests, focal papillary features, marked anisokaryosis and poikilokaryosis, and many mitoses. Scattered small tumor islands have clear cell features (T,W,Y).

STAGING:

At its deepest point (T) the tumor is about 0.2 cm from the uterine serosa, and a metastatic nodule is in the adjacent serosa (T). In one area (Y) the serosa is retracted in toward the invading tumor. Cul de sac (D,E) and right uterosacral ligament (F,G), and right parametrium (N) have metastatic tumor. In eleven lymph nodes from various areas (H-K) there is no tumor.

OTHER FEATURES:

Omentum (A-C), appendix (L,M), left parametrium (O), and lower uterus/endocervix (P-R) are free of tumor. Background endometrium (S,U,V,X) is thin and atrophic without hyperplasia or atypia. Small

mucus cysts and lymphoid aggregates with germinal centers in posterior cervix (Q). Many uterine serosa fibrovascular adhesions (S,X-Z). Right ovary (AA) has several small inclusion cysts. Left ovary (BB) and the two tubes (AA,BB) essentially normal.

GROSS:

1: OMENTUM BIOPSY NO.1

Labeled "omentum biopsy #1" and received in formalin is a 20 x 12 x 0.8 cm piece of yellow lobulated omentum that is soft and pliant with no palpable nodules. Serial cut surfaces show multiple areas of dark red hemorrhage and no neoplasm.

A. Representative sections - 4

2: OMENTUM NO.2

Labeled "omentum #2" and received in formalin is a 17 x 14 x 0.8 cm similar piece of omentum.

B. Representative sections - 4

3: OMENTUM NO.3

Labeled "omentum #3" and received in formalin is a 23 x 14 x 0.8 cm similar piece of omentum.

C. Representative sections - 4

4: BIOPSY, CUL DE SAC

Labeled "biopsy, cul de sac" and received in formalin are three white-tan tissue fragments measuring 0.3, 0.3, and 0.5 cm.

D. All embedded - 3

5: FROZEN SECTION NO.1, FROM SPECIMEN NO.4

Labeled "frozen section #1 from specimen #4" and fixed in Bouin solution is a 0.4 x 0.3 x 0.2 cm tissue disc.

E. All embedded - 1

6: BIOPSY, RIGHT UTEROSACRAL LIGAMENT

Labeled "biopsy, right uterosacral ligament" and fixed in formalin is a 0.5 x 0.5 x 0.2 cm tissue fragment.

F. All embedded - 1

7: FROZEN SECTION NO.2, FROM SPECIMEN NO.6

Labeled "frozen section #2 from specimen #6" is a 0.5 x 0.4 x 0.1 cm tissue disc in Bouin fluid.

G. All embedded - 1

8: UTERUS, TUBES, OVARIES

Labeled "uterus, tubes, ovaries", received fresh in surgery and then fixed in formalin, is a small uterus including cervix, fallopian tubes and ovaries weighing 66 grams. The uterus measures 5.5 cm fundus to ectocervix, 4.5 cm lateral to lateral, and 2.5 cm anterior to posterior. The parametria are marked with blue dye and all embedded. The serosa is smooth and pink-tan with focal hemorrhage. The exocervix measures 2.5 x 2.0 cm, has a 0.2 cm slit-shaped os, and is covered with smooth gray-tan mucosa. The endocervical canal measures 2.5 cm in length and has a variegated gray-tan mucosa. The endometrial cavity measures 3 cm cornu to cornu and 2.5 cm fundus to lower uterus. A large tan polypoid mass in the posterior superior fundus wall and left cornu measures 3.5 x 3.0 x 2.5 cm. It has several areas of necrosis and hemorrhage. The tumor extends into the right posterior myometrium to within 0.5 cm of the serosa. The anterior endomyometrial wall averages 1.4 cm and the posterior 1.5 cm. Endometrium away from the tumor is smooth and averages 0.1 cm. Each fallopian tube measures about 4.5 x 0.5 cm, includes the fimbria, and has a smooth serosa. Each ovary is grey-tan, atrophic, and cerebroid and measures about 2 x 1.5 x 0.8 cm. Small clear fluid-filled cysts in the right vary from 0.2 to 0.4 cm.

Representative sections.

N. Right parametrium - 1

O. Left parametrium - 1

P. Anterior cervix - 1

- Q. Posterior cervix - 1
- R. Lower uterus cross section - 1
- S. Anterior endomyometrium - 1
- T. Right posterior endomyometrium with polyp - 1
- U. Endomyometrium with yellow nodule - 1)
- V. Endomyometrium with tumor - 1) Posterior
- W. Endomyometrium with tumor - 1)
- X. Left cornu - 1
- Y. Right cornu with polyp - 1
- Z. Left cornu - 1
- AA. Right ovary and tube - 2
- BB. Left ovary and tube - 2

9: RIGHT PELVIC LYMPH NODE

Labeled "right pelvic lymph node" and received in formalin are multiple tan soft tissue fragments aggregating to 2.5 x 2.0 x 0.3 cm.

- H. All embedded - Multiple

10: RIGHT PERIAORTIC LYMPH NODE

Labeled "right periaortic lymph node" and received in formalin is a 1 x 1 x 0.4 cm portion of yellow-tan adipose tissue.

- I. All embedded - 1

11: LEFT PELVIC LYMPH NODE

Labeled "left pelvic lymph node" and received in formalin are two portions of yellow-tan fibroadipose tissue measuring 2 x 1 x 0.5 cm and 3 x 1 x 0.4 cm.

- J. All embedded - 2

12: LEFT PERIAORTIC LYMPH NODE

Labeled "left periaortic lymph node" and received in formalin are two tissue fragments measuring 1 x 0.5 x 0.3 cm and 1.5 x 0.8 x 0.2 cm.

- K. All embedded - 2

13: APPENDIX

Labeled "appendix" and received in formalin is a 7 x 0.6 cm appendix with soft yellow fatty mesoappendix and a smooth pink-tan serosa.

All embedded.

- L. Distal appendix - 2
- M. Appendix - 11

Gross dictated by

OPERATIVE CONSULT (FROZEN):

FS #1,2: Metastatic carcinoma, high grade  
Peritoneum, cul de sac  
Uterosacral ligament, right

Special Studies: Frozen Sections x2  
SNOMED Code:

See Also: None

DATE:

Pathologist

I, \_\_\_\_\_, the pathologist of record, have personally examined the specimen, interpreted the results, reviewed this report and signed it electronically  
Date Finalled:

Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HIPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual, Synchronous Primary Noted		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials:	WJ	7/10/10