

UID:0EE4FD56-D08A-43E8-A434-CD86B21F21BF
TCGA-A5-A0GW-01A-PR

Redacted



100-0-3

Adenocarcinoma, Endometrioid, NOS

8380/3 hr

11/23/10

Site: Endometrium 0541

Acct#: GYNS Adm:

Ord #=
SURGICAL PATHOLOGY

ASAP/RESULTED

Collect D/T=

Modifiers:

(1 of 1)

SURGICAL PATHOLOGY:

CoPath Specimen

Source:

- A: Uterus \T\ Cervix
- B: Left Pelvic lymph node
- C: Left Peri-aortic lymph node
- D: Right Pelvic lymph node
- E: Right Peri-aortic lymph node

Final Diagnosis

- A. Uterus and cervix (hysterectomy, 85 gm):
 - Polypoid adenocarcinoma, endometrioid type, FIGO grade 2-3, 1.6 X 1.5 X 1.0 cm
 - Tumor shows superficial myometrial invasion involving 7% of myometrial wall thickness (0.1 cm /1.4 cm).
 - Tumor does not involve lower uterine segment or cervix.
 - Highly suspicious for lymphovascular invasion.
 - Left and right parametrial margins are negative for malignancy.
 - Background complex hyperplasia with atypia identified in lower uterine segment.
 - Unremarkable ectocervix and endocervix.
 - Follicular cyst of right ovary.
 - Hemorrhagic corpus luteum cyst of left ovary.
 - Unremarkable right and left fallopian tubes.
- B. Left pelvic lymph node (excision):
 - Four lymph nodes negative for malignancy (0/4).
- C. Left periaortic lymph node (excision):
 - Three lymph nodes negative for malignancy (0/3).
- D. Right pelvic lymph node (excision):
 - Fibroadipose tissue, no lymph nodes identified
- E. Right periaortic lymph node (excision):
 - Two lymph nodes negative for malignancy (0/2).

***Electronically Signed Out

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RESULTS FOR SELECTED GRID CELL, SUMMARY
PrintedNam
Loc

SURGICAL PATHOLOGY

(Continued)

Acct#: [REDACTED] GYNs Adm:

Clinical History

year-old female with endometrial cancer.

Pre Operative Diagnosis
Endometrial cancer.Operation Performed
LSC hysterectomy; BSO + BPPALND.

Gross Description

The specimen is received in 5 parts.

Part A is labeled "uterus and cervix" and consists of a uterus and cervix with attached adnexa, previously opened, laterally on the right side. The specimen weighs 85 grams and measures 10.5 X 7.5 X 4.5 cm in aggregate. The left fallopian tube measures 3.4 cm in length by 0.5 cm in diameter. The left ovary measures 2.6 X 2.4 X 1.5 cm and is tan-white with multiple, < 0.5 cm serous cysts. The right fallopian tube measures 3.2 cm in length by 0.4 cm in diameter. The right ovary measures 3.0 X 2.2 X 1.8 cm and is tan-white with multiple subcentimeter cystic lesions. The uterus measures 5.5 cm in width, 7.3 cm in length, and 3.5 cm anterior to posterior. The cervix measures 2.6 cm in diameter. The endometrial cavity contains a 1.6 X 1.5 X 1.0 cm, soft, partially necrotic lesion in the anterior half. The endometrial cavity measures 2.0 X 5.0 X 0.6 cm. The myometrium measures 1.3 cm in thickness and the endometrium measures 0.2 cm in thickness. The tumor is located 1.2 cm from the anterior margin and 1.2 cm from the posterior margin. The specimen is inked as follows: anterior=red, posterior=black, right parametrium=orange, left parametrium=green. Representative sections are submitted as follows:

Cassette Summary:

- A1 and A2 right ovary and fallopian tube, representative,
- A3 left ovary and fallopian tube, representative,
- A4 left parametrial margin,
- A5 right parametrial margin,
- A6 anterior cervix,
- A7 posterior cervix,
- A8 anterior lower uterine segment,
- A9 posterior lower uterine segment.

RESULTS FOR SELECTED GRID CELL, SUMMARY
Printed

Name [REDACTED]
Loc: [REDACTED]

SURGICAL PATHOLOGY

(Continued)

Acct#: [REDACTED] Adm: [REDACTED]

A11 thru A13 tumor and anterior endomyometrium,
A14 posterior endomyometrium and margin.

Part B is labeled "left pelvic lymph node" and consists of multiple fragments of fibroadipose tissue, measuring 1.2 X 1.0 X 0.3 cm in aggregate. The specimen is entirely submitted in cassettes B1 and B2.

Part C is labeled "left periaortic lymph node" and consists of multiple fragments of fibroadipose tissue, measuring 1.1 X 1.1 X 0.2 cm in aggregate. The specimen is entirely submitted in cassette C.

Part D is labeled "right pelvic lymph node" and consists of multiple fragments of fibroadipose tissue, measuring 1.1 X 1.0 X 0.2 cm in aggregate. The specimen is entirely submitted in cassette D.

Part E is labeled "right periaortic lymph node" and consists of multiple fragments of fibroadipose tissue, measuring 1.0 X 1.0 X 0.2 cm in aggregate. The specimen is entirely submitted in cassette E.

Microscopic Description

A microscopic examination was performed.

Admit Date

Discharge Date

FINAL REPORT

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Chief Complaint: vaginal cuff abscess/dehissence

Age:

LMP:

HPI: y/o G0 s/p laparoscopic hysterectomy, BSO, for
Stage IB, G 2-3 Endometrial adenoca. Patient reports occasional vaginal
spotting. Her pain is well controlled on PO pain medications. She denies
N/V/CP/SOB/F/C. On post-op exam in clinic today patient noted to have
opening at vaginal cuff draining copious amounts of purulent material.
Of note, the patient has a h/o DM and reports that she has not been
checking her BS at home

Past Medical History: DM, CHTN, Hypercholesterolemia

Past Surgical History:

: TLH, BSO, BPPALND

Past OB/GYN History:

- 1) G:0 P:0
- 2) OB History: n/a
- 3) Pap/STD History: no h/o abnormal Pap or STI
- 4) Menstrual: as above
- 5) Last Pap: as per HPI
- 6) Last Mammo: in benign
- 7) BCM: none

Social History:

Family History: no cancer

Medications:

Allergies: NKDA

ROS:

- 1) HEENT: negative
- 2) Cardiac: negative
- 3) Respiratory: negative
- 4) GI, Liver: negative
- 5) GU: see HPI / GYN Hx

LOC/SVC=/GYNs
FINAL REPORT

Admit Date:
Discharge Date:

- =====
- 6) Neuro: negative
 - 7) Skin: negative
 - 8) Bleeding Tendencies: negative
 - 9) Other: negative

Physical Examination:

- 1) HEENT: WNL
- 2) Breast: ND
- 3) Chest/Lungs: RRR. CTA bilaterally
- 4) Abdomen: soft. NT. ND. no masses. +BS. Steri-strips c/d/i.
- 5) Extremities: no edema
- 6) Neuro: nonfocal
- 7) Skin: WNL
- 8) LN: no LAD
- 9) Pelvic:
- 10) Vulva: WNL
- 11) Vagina: cuff open. copious amounts of purulent discharge. Cultures sent

Labs: ordered

Imaging: CT Abd/Pelvis ordered

Assessment and Plan:

- y/o G0 s/p TLH, BSO, PPALND for Stage Ib endometrial adenoCA, admitted to gyn service for cuff abscess/dehiscence
- UA, UCx, cultures of vaginal cuff sent from clinic today
 - Will order CT abdomen / pelvis with PO and IV contrast
 - CBC with dif
 - blood cultures x2; will start on IV Levaquin/Flagyl once blood cultrues drawn
 - DM: will start on diabetic diet with qAC accucheck
 - HTN: will re-start home meds of Atenolol and Benazepril
 - DVT PPx: patient to complete 2week outpatient course of prophylactic

Loc/Svc=/GYNS
FINAL REPORT

Admit Date=
Discharge Date=

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Lovenox during this admission

1 R1/ R4
DW Onc Fellow
PLEASE SEE ATTENDING ADDENDUM
DISCUSSED WITH DOCTOR:

Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
IPAA 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	Date Reviewed:	

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Dictated By= (MD)
Text Status=FINAL
Elec Signed By= (Electronic Signature)
(MD)