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Ordering M.D.:

Site Indometrium 654.1

Date Age/Sex Location:

Assistant Date of Procedure Date Received

Copies To:

SURGICAL PATHOLOGY REPORT

****** Addendum - Please See End of Report *******

Reason for Addendum #1:

Additional information

SPECIMEN(S) SUBMITTED: A. HERNIA SAC, B. RIGHT OVARY FS, C. RIGHT FALLOPIAN TUBE FS, D. LEFT ADNEXA, E. UTERUS AND CERVIX, F. OMENTUM BIOPSY, G. OMENTUM BIOPSY, H. OMENTUM BIOPSY, I. LEFT PELVIC LYMPH NODE, J. LEFT PARAAORTIC LYMPH NODE, K. LEFT OBTURATOR, L. RIGTHPELVIC LYMPH NODE, M. RIGHT OBTURATOR, N. RIGHT PERIAORTIC, O. RIGHT GUTTER, P. LEFT GUTTER, Q. BLADDER BIOPSY, R. APPENDIX

DIAGNOSIS:

HERNIA SAC UMBILICAL, HERNIORRHAPHY WITH FROZEN SECTION:

- Fibroadipose and fibrovascular tissues with marked acute inflammation, abscess formation and reactive granulation tissue
- Negative for malignancy

RIGHT OVARY, OOPHORECTOMY:

- Clear cell carcinoma of ovary
- High-grade
- Portion of unremarkable fallopian tube

RIGHT FALLOPIAN TUBE, SALPINGECTOMY:

- Benign fallopian tube with paratubal cysts, minute (hydatid cysts of Morgagni and cystic Walthard nests)
- Focal organizing intraluminal thrombosis, mesosalpingeal blood vessel

LEFT ADNEXA, SALPINGO-OOPHORECTOMY:

- Follicle cysts, multiple, ovary
- Portion of adhesed fimbriated end of fallopian tube, ovarian surface
- Inclusion glands and cysts, ovarian cortex
- Involutional changes, remaining ovarian tissue
- Unremarkable fallopian tube

UTERUS AND CERVIX, [SALPINGO-OOPHORECTOMY]: _. E.

- Endometrial carcinoma (EC), endometrioid and clear cell features, well to moderately differentiated
 - EC is located in the lower uterine segment endometrium
 - EC is confined to endometrium involving only superficial myometrium
- Endometrial polyp, endometrial cavity, benign
- Contiguous benign, disordered proliferative-type endometrium, adjacent to carcinoma
- Chronic endocervicitis, sections of the cervix, mild
- Unremarkable myometrium

F-H. OMENTUM BIOPSIES:

Negative for metastatic carcinoma

Patient Case(s):

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- Benign, lobulated adipose omental tissue

I-L. LEFT PELVIC LYMPH NODE, LEFT PERIAORTIC LYMPH NODE, LEFT OBTURATOR LYMPH NODE, RIGHT PELVIC LYMPH NODE, BIOPSIES:

- Negative for metastatic carcinoma
- Benign lymph nodes

M,N. RIGHT OBTURATOR AND RIGHT PERIAORTIC LYMPH NODE, BIOPSY:

- Negative for metastatic carcinoma
- Benign lymph

O-Q. RIGHT GUTTER, LEFT GUTTER AND BLADDER BIOPSY:

- Negative for metastatic carcinoma
- Benign fibroadipose tissues with focal mesothelial lining and mild reactive and inflammatory changes

R. APPENDIX, APPENDECTOMY:

- Appendiceal fibrosis with luminal obliteration
- Negative for carcinoma

HISTORY: Pelvic mass

MICROSCOPIC: See diagnosis.

SPECIAL STAINS:

IMMUNOSTAINS:

GROSS:

A. HERNIA SAC (UMBILICAL) FS

Labeled with the patient's name, labeled "hernia sac", and received fresh in the Operating Room for intraoperative consultation and subsequently fixed in formalin is a portion of fibrofatty tissue measuring 9.0 x 4.5 x 1.2 cm. Upon serial sectioning, no mass or lesion is identified. Representative sections are submitted.

A1. Frozen section control #1 - 2

A2.

B. RIGHT OVARY FS

Labeled with the patient's name, labeled "right ovary", and received fresh in the Operating Room for intraoperative consultation and subsequently fixed in formalin is an oophorectomy specimen measuring $17.5 \times 15.0 \times 10.0$ cm. The entire ovary is replaced by a multiloculated cystic mass. A portion of the cyst is replaced by a solid, tan-pink-yellow, focally hemorrhagic, soft mass measuring $10.0 \times 10.0 \times 8.0$ cm. The remaining cyst is collapsed. The serosal surface is variegated from tan to red, focally hemorrhagic, partially smooth and partially rough. The internal lining of the cyst is mostly smooth and focally rough. Attached to the ovary, there is a segment of fallopian tube with fimbria at one end measuring 3.0 cm in maximum length and ranging in diameter from 0.5 up to 0.8 cm. Cut section through the fallopian tube reveals a patent lumen measuring up to 0.1 cm. The serosal surface is tan-pink, smooth and glistening without any tumor or lesions. Representative sections are submitted.

B1-8. Sections from the tumor - 2 each

B9. Sections from fallopian tube - 3

• See End of Report ******** PATH #:

B10. Frozen section #2 - 1

C. RIGHT FALLOPIAN TUBE

Labeled with the patient's name, labeled "right fallopian tube", and received in formalin is a small segment of fallopian tube measuring 2.0 cm in length and ranging in diameter from 0.3 up to 0.5 cm. A cut section through the fallopian tube reveals a patent lumen measuring less than 0.1 cm. Attached to the fallopian tube there is a portion of fibroconnective tissue along with vessels measuring 4.0 x 3.0 x 0.8 cm. Representative sections of fibroconnective tissue and entire tube are submitted.

C1. 4

D. LEFT ADNEXA

Labeled with the patient's name, labeled "left adnexa", and received in formalin is a salpingo-oophorectomy specimen. The ovary is 3.2 x 2.8 x 1.2 cm. The serosal surface is tan to yellow and bosselated. A cut section made through the ovary reveals multiple cysts ranging from 0.2 up to 0.8 cm. The remaining cortical stroma is grossly unremarkable. The fallopian tube with fimbria at one end has a total length of 5.0 cm and ranges in diameter from 0.4 up to 0.7 cm. Representative sections are submitted.

D1. Ovary - 1

D2. Fallopian tube - 4

E. UTERUS AND CERVIX

Labeled with the patient's name, labeled "uterus and cervix", and received in formalin is a 140 gram total hysterectomy specimen measuring 11.0 cm from fundus to ectocervix, 5.0 cm from cornu to cornu and 5.2 cm from anterior to posterior surface. The serosal surface is tan-pink, smooth and glistening without any remarkable findings. The cervix is 3.5 cm long and has a 3.2 cm maximum diameter in the ectocervical region. Attached to the ectocervix, there is vaginal mucosa measuring 0.7 cm in maximum width and is grossly unremarkable. The mucosa of the ectocervix is tan-pink and focally hemorrhagic. The external os is 0.9 cm in maximum diameter and is patent. The uterus is symmetric in shape. The uterus is already incised on both sides. The cervical canal is 3.5 cm long and has a 1.7 cm maximum width. The mucosa lining the cervical canal is tan to light yellow with rugal folds. There is a polypoid, papillary-appearing mass in the lower uterine segment, both anterior and posterior, measuring 3.0 x 1.7 x 1.2 cm. There is another polyp in the uterine fundus measuring 1.5 x 1.2 x 0.5 cm. The uterine cavity measures 6.0 cm in length and has a 1.7 cm maximum width. The width of the endometrial lining ranges in between 0.1 up to 0.2 cm. The muscular uterine wall appears trabeculated and measures 2.2 cm in maximum width. Representative sections are submitted.

E1. Right parametrial tissue - 1

E2. Left parametrial tissue - 2

E3. Anterior cervix - 1

E4. Posterior cervix - 1

E5-6. Anterior lower uterine segment, bisected - 1 each

E7. Posterior lower uterine segment - 1

E8-9. Posterior uterine segment, bisected - 1 each

E10. Anterior uterine corpus with polyp - 1

E11. Anterior uterine fundus - 1

E12-13. Posterior uterine corpus with polyp, bisected - 1 each

E14-15. Posterior uterine fundus with polyp, bisected - 1 each

F. OMENTUM BIOPSY

Labeled with the patient's name, labeled "omentum", and received in formalin is a portion of omentum measuring 24.0 x 15.0 x 1.3 cm. The entire specimen is composed of yellow, soft, lobulated adipose tissue. Upon serial sectioning, no gross mass or lesion is identified. Representative sections are submitted.

G. OMENTUM BIOPSY

See End of Report ******** PATH #:

Labeled with the patient's name, labeled "omentum", and received in formalin is a portion of yellow, soft, lobulated omental adipose tissue measuring 45.0 x 15.0 x 1.0 cm. Upon serial sectioning, no gross mass or lesions is identified. Representative sections are submitted.

G1. 3

H. OMENTUM BIOPSY

Labeled with the patient's name, labeled "omentum", and received in formalin is a portion of soft, yellow, lobulated omental adipose tissue measuring 36.0 x 8.5 x 1.0 cm. Upon serial sectioning, no gross mass or lesions is identified. Representative sections are submitted.

H1. 3

I. LEFT PELVIC LYMPH NODE

Labeled with the patient's name, labeled "left pelvic lymph node", and received in formalin is a portion of fibroadipose tissue measuring $5.0 \times 3.2 \times 0.6$ cm. Dissection of the adipose tissue reveals two lymph nodes measuring $2.0 \times 0.7 \times 0.5$ cm and $2.0 \times 1.6 \times 0.7$ cm. All lymph nodes are embedded.

- One lymph node bisected 2
- I2. One lymph node bisected 2

J. LEFT PERIAORTIC LYMPH NODE

Labeled with the patient's name, labeled "left periaortic lymph node", and received in formalin are three portions of fibroadipose tissue ranging in between 1.5 up to 2.0 cm. Dissection of the adipose tissue reveals one possible lymph node measuring $0.5 \times 0.4 \times 0.3$ cm.

- J1. One possible lymph node 1
- J2. Rest of the specimen Multiple

K. LEFT OBTURATOR

Labeled with the patient's name, labeled "left obturator", and received in formalin are two soft, yellow, lobulated portions of adipose tissue measuring $1.7 \times 1.2 \times 0.4$ cm and $2.0 \times 1.5 \times 0.7$ cm. Dissection of the adipose tissue reveals one fragmented, possible lymph node. The entire specimen is submitted.

- K1. One lymph node Multiple
- K2. Rest of the specimen Multiple

L. RIGHT PELVIC LYMPH NODE

Labeled with the patient's name, labeled "right pelvic lymph node", and received in formalin is a portion of yellow, soft, lobulated adipose tissue measuring $7.0 \times 4.0 \times 1.0$ cm. Dissection of the adipose tissue reveals two lymph nodes measuring $1.8 \times 1.0 \times 0.5$ cm and $3.5 \times 1.0 \times 0.5$ cm. All lymph nodes are embedded.

- L1. One lymph node bisected 2
- L2-3. One lymph node bisected 1 each

M. RIGHT OBTURATOR

Labeled with the patient's name, labeled "right obturator", and received in formalin is a portion of fibroadipose tissue measuring 2.7 x 1.5 x 0.5 cm. Dissection of the adipose tissue reveals seven lymph nodes ranging in between 0.3 up to 1.2 cm. All lymph nodes are embedded.

M1. Five lymph nodes - 5

M2. Two lymph nodes - 2

N. RIGHT PERIAORTIC

Labeled with the patient's name, labeled "right periaortic", and received in formalin are four portions of yellow, lobulated, soft adipose tissue ranging in between 1.2 up to 1.7 cm. Dissection of the adipose tissue reveals two lymph nodes measuring 0.8 x 0.5 x 0.3 cm and 1.2 x 1.2 x 0.7 cm. All lymph nodes are embedded.

N1. Two lymph nodes, one bisected - 3

O. RIGHT GUTTER



See End of Report ********* PATH #:

Labeled with the patient's name, labeled "right gutter biopsy", and received in formalin is a portion of fibroadipose tissue measuring 1.2 cm x 1.0 x 0.4 cm. The entire specimen is submitted.

O1. 2

P. LEFT GUTTER

Labeled with the patient's name, labeled "left gutter biopsy", and received in formalin is a portion of fibroadipose tissue measuring 1.0 x 0.8 x 0.5 cm. The entire specimen is submitted.

P1. 2

Q. BLADDER BIOPSY

Labeled with the patient's name, labeled "bladder biopsy", and received in formalin is a tan-pink, soft, irregular portion of fibroadipose tissue measuring 0.8 x 0.6 x 0.5 cm. The entire specimen is submitted.

O1. 2

R. APPENDIX

Labeled with the patient's name, labeled "appendix", and received in formalin is an appendectomy specimen measuring 4.3 x 0.7 x 0.6 cm with attached fibroadipose tissue measuring 2.0 cm in width. A cut section through the appendix reveals a patent lumen measuring up to 0.1 cm. Representative sections are submitted.

R1. End, mid and tip - 3

Gross dictated by

OPERATIVE CALL OPERATIVE CONSULT (FROZEN):

A. HERNIA SAC (UMBILICAL, FS #1):

- Acute and chronic inflammation, with foci of fibropurulent exudate and focal papillary epithelial clusters, favor mesothelial hyperplasia

B. RIGHT OVARY (FS #2):

- Adenocarcinoma; portion of tumor taken by !

I have personally examined the specimen, interpreted the results, reviewed the report and signed it electronically.

Addendum (🗀): A	At the request of Dr.	, immunostains for
, and	were performed on a representative section of the tumor in the right ovary		
(block B4) and a representative section of the tumor in the uterus (block E5). Immunostains for			
	and	are positive in tumor	cells in both blocks indicating no loss of
the above DNA n	nismatch repai	r proteins.	_

I have personally examined the specimen, interpreted the results, reviewed the report and signed it electronically.

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