1CB-0-3 adenocarcinoma endometrioid, vos 8380/3 Site: endometrium C54.1 for 4/21/11

Surgical Pathology Consultation Report

Gender:

UUID:DB7D72BC-F9C7-4726-98F4-A4F642B125C6

TCGA-EO-A22U-91A-PR

Specimen(s) Received

- 1. Ovary: bilateral, bilateral fallopian tubes, uterus and cervix
- 2. Omentum: Omental biopsy

Diagnosis

1. Uterus, cervix, bilateral ovaries and fallopian tubes:

Endometrial adenocarcinoma, endometriold type, FIGO grade 3/3 with:

- Maximum tumour dimension: 2.8 cm
- Invasion into the outer half of the myometrium
- Negative for involvement of cervix
- No evidence of lymphovascular space invasion
- Other: multiple intramural leiomyomata, adenomyosis

Right fallopian tube: paratubal cysts Left fallopian tube: paratubal cysts

Bilateral ovaries: no diagnostic pathology

PLEASE SEE COMMENT and SYNOPTIC REPORT

2. Omentum, biopsy: Fibroadipose tissue with no diagnostic pathology One lymph node, negative for carcinoma (0/1)

Synoptic Data

Specimen Type:

Total Hysterectomy

Tumor Site:

Fundus

Tumor Size:

Greatest dimension: 2.8 cm

Other Organs Present:

Right ovary

Left ovary

Right fallopian tube



Left fallopian tube

Omentum

------ MICROSCOPIC -------

Histologic Type:

Endometrioid adenocarcinoma, not otherwise characterized

Depth of invasion: 10 mm, Myometrial thickness: 12 mm

Histologic Grade:

G3: More than 50% nonsquamous solid growth

Myometrial Invasion:

Invasion Present

Cervix Involvement: No

None

LUS Involvement: Venous/Lymphatic Invasion:

Absent

Nodal Involvement:

No nodes submitted

Margins:

Uninvolved by invasive carcinoma

Distance of invasive carcinoma from closest margin: 2 mm

uterine serosa

Primary Tumor (pT):

pT1c (IC): Tumor invades one-half or more of the myometrium

Regional Lymph Nodes (pN):

pNX: Regional lymph nodes cannot be assessed

Number of regional lymph nodes examined: 0 Number of regional lymph nodes involved: 0

Distant Metatstais (pM):

pMX: Distant metastasis cannot be assessed Other: leiomyomata, adenomyosis

Additional Pathologic Findings: NeoAdjuvant Treatment:

No

Collaborative Staging Extension:

Not applicable

Comment

Tumor demonstrated two architectural pattern with glandular and papillary structures merging with solid sheets. The solid component occupies more than 50% of total. Focal squamous differentiation is identified. Focally tumor cells show very high-grade nuclei and bizarre nuclear morphology.

Immunohistochemistry staining shows glandular areas show positive staining with ER but weak focal staining with p53 and negative staining with p16. The solid areas show negative staining with ER but patchy positive staining with p53 and patchy positive staining with p16. The overall morphological and immunohistochemistry features of this tumour is consistent with grade 3/3 endometrioid adenocarcinoma of endometrium.

Electronically

verified hv:

Clinical History

endometrial Ca

Gross Description

1. The specimen labeled the patient's name and as "Ovary: bilateral, bilateral fallopian tubes, uterus and cervix", consists of a 74.3 g, 6.8 SI x 4.0 ML x 2.3 cm AP hysterectomy, bilateral salpingo-oophorectomy specimen, received fresh. Vaginal cuff is not present. The exocervix measures 2.4 cm in maximum diameter. The external os is round and measures 0.3 cm in diameter. The endocervical canal measures 3.4 cm in length and shows a 0.6 cm polyp attached to the posterior endocervical wall. The uterine cavity measures 2.8 x 2.8 cm. There is a large infiltrative mass occupying the entire uterine cavity (anterior and posterior), measuring 2.8 ML x 2.2 SI x 1.0 cm in thickness. The mass is white-tan and friable and is noted grossly to be invading the outer half of the myometrium. The endometrium measures 1.0 cm in thickness. The myometrium has a maximum thickness of 1.3 cm and has small firm white nodules in it

measuring 0.4 cm in maximum dimensions. The serosa is smooth and glistening with a 0.9 cm nodule noted on the posterior fundus. The right fallopian tube measures 5.0 cm in length x 0.5 cm in diameter and includes fimbriated end, and shows small paratubal cysts (0.2 cm). The right ovary measures 2.1 x 0.9 x 0.4 cm and is grossly unremarkable. The left fallopian tube measures 5.5 cm in length x 0.5 cm in diameter and includes fimbriated end. The left ovary measures 1.9 x 1.1 x 0.5 cm and is grossly unremarkable. Sections of both fallopian tubes and ovaries and endometrial tumour are sampled for tissue banking. Representative sections are submitted as follows:

- 1A L ovary and fallopian tube, submitted for Biobank
- 1B R ovary and fallopian tube, submitted for Biobank
- 1C Endometrial tumour section, submitted for Biobank
- 1D-1E R fallopian tube, submitted in toto (fimbriae in 1E)
- 1F R ovary, submitted in toto
- 1G-1H L fallopian tube, submitted in toto (fimbriae in 1G)
- 11 L ovary, submitted in toto
- 1J-1K anterior cervix to lower uterine segment
- 1L-1M posterior cervix to lower uterine segment, polyp in 1M
- 1N-1P anterior endo-myometrium with tumour (longitudinal section in 1P)
- 1Q-1T posterior endo-myometrium with tumour
- 2. The specimen labeled the patient's name and as "Omentum, omental biopsy", consists of a 12.3 g, 8.0 x 4.0 x 1.2 cm piece of omentum with no grossly identifiable lesion. Representative sections are submitted in blocks 2A-2D.