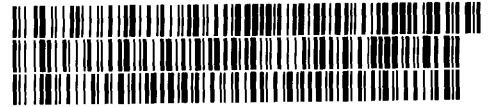


Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HPA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary Noted		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials: RB	Date Reviewed: 8/16/12	

UUID: 0EBA5D54-65AC-4F79-ACE9-29FB1F924E3A  
TCGA-FI-A3PV-01A-PR Redacted



## Surgical Pathology Report

Final

SURGICAL PATHOLOGY REPORT

Service: Gynecology

(Age:

Patient Type:

Reported:

Other Related Clinical Data:

DIAGNOSIS:

UTERUS, ENDOMETRIUM, TOTAL ABDOMINAL HYSTERECTOMY

- PAPILLARY SEROUS ADENOCARCINOMA
- ADENOCARCINOMA IS CONFINED TO THE ENDOMETRIUM
- NO LYMPHVASCULAR SPACE INVASION IS IDENTIFIED

UTERUS, CERVIX, TOTAL ABDOMINAL HYSTERECTOMY

- PAPILLARY SEROUS ADENOCARCINOMA INVOLVING ENDOCERVICAL GLANDS

UTERUS, MYOMETRIUM, TOTAL ABDOMINAL HYSTERECTOMY

- LEIOMYOMATA WITH CALCIFICATION AND HYALINIZATION. LARGEST 6.2 CM

OVARY, RIGHT, OOPHORECTOMY

- NO HISTOPATHOLOGIC ABNORMALITY
- PARAOVARIAN SOFT TISSUE WITH ORGANIZING THROMBUS
- NO FALLOPIAN TUBE IDENTIFIED

LYMPH NODES, RIGHT PELVIC, EXCISION

- NO CARCINOMA IDENTIFIED IN FIVE LYMPH NODES (0/5)

LYMPH NODES, LEFT PELVIC, EXCISION

- NO CARCINOMA IDENTIFIED IN FIVE LYMPH NODES (0/5)

LYMPH NODES, LEFT PERIAORTIC, EXCISION

- NO CARCINOMA IDENTIFIED IN FOUR LYMPH NODES (0/4)

LYMPH NODES, RIGHT PERIAORTIC, EXCISION

- NO CARCINOMA IDENTIFIED IN TWO LYMPH NODES (0/2)

ICD-O-3

adenocarcinoma,  
serous, NOS

8441/3

Site: endometrium

C54.1

Intraoperative Consultation:

An intraoperative non-microscopic consultation was obtained and interpreted as: "called to pick-up 'uterus, cervix, right ovary and tube' consisting of a 600 gram uterus, measuring 15 cm (from fundus to os) x 8 cm (cornu to cornu) x 10 cm (anterior to posterior). The right ovary is attached and no definitive tube is identified intraoperatively. opened to show a 5 cm wide x 7 cm long endometrial cavity with tumor in the fundic area. Tumor and normal (serosa) taken for

4/28/12 RP

Shown to surgeon. Remainder for permanents,"  
Microscopic Description and Comment:  
Microscopic examination substantiates the above cited diagnosis.

History:

The patient is a      year old woman with endometrial cancer. Operative procedure: Total abdominal hysterectomy with right salpingo-oophorectomy and pelvic lymph node dissection.

Specimen(s) Received:

- A: CERVIX, UTERUS, AND RIGHT TUBE AND OVARY.
- B: RIGHT PELVIC LYMPH NODE
- C: LEFT PELVIC LYMPH NODE
- D: LEFT PERI AORTIC LYMPH NODE
- E: RIGHT PERI AORTIC LYMPH NODE

Gross Description

The specimens are received in five containers of formalin, each labeled "The first container is labeled 'cervix, uterus, right tube and ovary.'" It contains a 600 gram, 15 x 10 x 8 cm previously opened uterus which has a shiny light brown serosal surface without focal lesions and is obviously distorted by abundant myometrial nodules. The cervix measures 2.0 x 1.9 cm and has a shiny white-tan ectocervical mucosa without focal lesions. The transformation zone is grossly unremarkable and the endocervical canal measures 3.8 cm in length and also has a shiny brown, unremarkable mucosa. The endometrial cavity measures 7.0 cm long x 5 cm wide x 0.5 cm in depth and has a finely folded light brown endometrium with a fungating, soft and irregular tan mass over the most superior aspect of the posterior wall and over the fundus and most superior aspect of the anterior wall. There is no gross involvement of the lower uterine segment. Numerous sections through the tumor show it to be exophytic without obvious invasion into the underlying myometrium which is markedly distorted. It has a maximal thickness of 3.6 cm and has numerous white whorled nodules (> 10) throughout with several underlying the endometrial tumor mass and ranging from 0.4 up to 6.2 cm in maximum dimension. On sectioning there is no evidence of necrosis, hemorrhage, or cystic change. Several of these nodules have yellow-brown gritty apparent calcification. The attached right ovary is lobulated and light tan and measures 3.4 x 2.5 x 1.5 cm. It has a variegated tan cut surface without masses or focal lesions. Examination and numerous sections through the surrounding lobulated broad ligament soft tissue show dilated veins with central brown thrombi but no obvious fallopian tube. Labeled A1, A2 - anterior cervix and lower uterine segment, respectively; A3 - anterior endomyometrium with tumor (partial thickness); A4, A5 - posterior cervix and lower uterine segment, respectively; A6 - posterior endometrium tumor (partial thickness); A7 - full thickness posterior endometrium with tumor; A8, A9 - continuous full thickness sections over posterior endomyometrium with tumor (top to bottom); A10 - full thickness anterior endometrium with tumor; A11, A12 - myometrial nodules; A13 - right ovary; A14 - paraovarian soft tissue. Jar 3. The second container is labeled "#2, right pelvic lymph node." It contains four pieces of lobulated yellow fibroadipose tissue, measuring 9.5 x 6.5 x 3.8 cm in aggregate which are dissected to show numerous large and fat replaced tan-brown lymph nodes ranging from 0.4 up to 3.5 cm. Labeled B1 to B3 - single lymph node in each cassette, sectioned; B4 - two small lymph nodes; B5 to B7 - entire largest single lymph node. Jar 1. The third container is labeled "#3, left pelvic lymph node." It contains four pieces of lobulated yellow and tan fibroadipose tissue which is dissected to show numerous tan-brown lymph nodes without gross sclerosis, some of which are quite large, measuring from 0.4 up to 2.4 cm in maximum dimension. Labeled C1 - four small lymph nodes; C2, C3 - a single large node, sectioned; C4, C5 - another single large node, sectioned; C6 - single smaller node, bisected. Jar 1. The fourth container is labeled "#4, left peri-aortic lymph node." It contains

four pieces of lobulated yellow and brown fibroadipose tissue which are dissected to show several tan-brown lymph nodes without gross sclerosis ranging from 0.4 up to 1.2 cm in maximum dimension. Labeled D1 - three individual lymph nodes; D2 - single larger node, bisected. Jar 1  
The fifth container is labeled "#5, right periaortic lymph node." It contains four pieces of lobulated yellow and tan fibroadipose tissue measuring 3.8 x 3.1 x 0.9 cm in aggregate which are dissected to show two tan lymph nodes without gross sclerosis measuring 0.5 and 1.1 cm, respectively. Labeled E1 - single smaller node; E2 - single larger node, bisected. Jar 1.

Synopsis

SYNOPTIC REPORTING FORM FOR MALIGNANT ENDOMETRIAL TUMORS

1. A NEOPLASM IS: Present
2. THE HISTOLOGIC DIAGNOSIS IS:  
Adenocarcinoma, serous papillary type
3. THE MAXIMUM TUMOR SIZE IS 3.6 cm
4. THE LENGTH OF THE UTERINE CAVITY IS 7.0 cm
6. THE NUCLEAR GRADE OF THE TUMOR IS:  
NIII
7. INVASIVE TUMOR IS:  
Absent (intraendometrial tumor only)
8. THE TUMOR INVADES TO A DEPTH OF 0 mm , WITH  
A MYOMETRIAL THICKNESS OF 20 mm .
9. THE ENDOCERVIX IS:  
Involved by tumor in its mucosal aspect only
10. LYMPHATIC INVASION BY TUMOR IS:  
Absent
11. VASCULAR INVASION BY TUMOR IS:  
Absent
12. RESIDUAL NON-NEOPLASTIC ENDOMETRIAL TISSUE:  
Shows atrophy
13. THE MYOMETRIUM:  
Shows the presence of leiomyomas
14. THE RIGHT OVARY:  
Is free of tumor
15. THE LEFT OVARY:  
Is not evaluable
16. THE RIGHT FALLOPIAN TUBE:  
Is not evaluable
17. THE LEFT FALLOPIAN TUBE:  
Is not evaluable
18. THE VAGINAL CUFF OF EXCISION IS:  
Not evaluable
19. TUMOR INVASION OF ADJACENT STRUCTURES IS:  
Absent

20. METASTASIS TO THE OMENTUM AND PERITONEUM IS:  
Not evaluable
21. "T" DATA-- THE TUMOR IS:  
TNM Categories FIGO Stages  
2a IIA Endocervical glandular involvement only
22. THE REGIONAL LYMPH NODES:  
Are free of tumor in 16 nodes
23. "N" DATA-- THE REGIONAL LYMPH NODES ARE:  
NO (Free of metastases)
24. "M" DATA-- DISTANT METASTASES ARE:  
MX (Not evaluable)
25. THE OVERALL PATHOLOGIC AJCC STAGE OF THE TUMOR IS:  
Stage X Insufficient data to assign a stage.

The pathologic stage assigned here should be regarded as provisional, and may change after integration of clinical data not provided with this specimen.

# Surgical Pathology Report

Final

SURGICAL PATHOLOGY REPORT - CONSULT

Service: Inside/Outside

(Age:

Patient Type:

Reported:

Other Related Clinical Data:

## DIAGNOSIS

UTERUS, ENDOCERVIX, CURETTINGS (

- DETACHED CLUSTERS OF CARCINOMA CELLS

- ENDOCERVICAL EPITHELIUM WITH NO HISTOPATHOLOGIC ABNORMALITY

UTERUS, ENDOMETRIUM, CURETTINGS

- PREDOMINANTLY BLOOD CLOT WITH DETACHED CLUSTERS OF CARCINOMA CELLS

UTERUS, CERVIX, BIOPSY (

- BLOOD CLOT WITH DETACHED ATYPICAL CELLS

- ACUTE AND CHRONIC CERVICITIS, MILD

UTERUS, CERVIX, THIN PREPARATION

- POSITIVE FOR MALIGNANCY, CONSISTENT WITH CARCINOMA

## Microscopic Description and Comment

The cytologic features are consistent with a poorly differentiated adenocarcinoma. The site of origin, endometrial, endocervical or extrauterine cannot be ascertained in these samples.

## History

The patient is a . year old woman with postmenopausal bleeding. Operative procedure: Pap smear as well as endocervical and endometrial curettings, and cervical biopsies.

Material(s) Received

Received are seven slides labeled . (6) and (1) accompanied by a corresponding pathology report.