

FINAL DIAGNOSIS:

PART 1: LYMPH NODES, RIGHT PELVIC, EXCISION -
ELEVEN LYMPH NODES, NEGATIVE FOR METASTATIC TUMOR (0/11).

PART 2: LYMPH NODES, RIGHT PERIAORTIC, EXCISION -
TWO LYMPH NODES, NEGATIVE FOR METASTATIC TUMOR (0/2).

PART 3: LYMPH NODE, LEFT PELVIC, EXCISION -
ONE LYMPH NODE, NEGATIVE FOR METASTATIC TUMOR (0/1).

PART 4: UTERUS WITH BILATERAL ADNEXA, TOTAL LAPAROSCOPIC HYSTERECTOMY AND BILAT
SALPINGO-OOPHORECTOMY -
A. ADENOCARCINOMA OF ENDOMETRIUM.
B. FIGO GRADE III.
C. THE TUMOR INVADES 12% OF THE MYOMETRIAL THICKNESS (0.3 CM INVASION OF 2.51 THICK
MYOMETRIUM).
D. THE TUMOR INVOLVES APPROXIMATELY 70% OF THE ENDOMETRIAL CAVITY SURFACE.
E. THE TUMOR FOCALLY INVOLVES THE CERVICAL STROMA.
F. LYMPHOVASCULAR SPACE INVASION IS IDENTIFIED (WITHIN THE CERVICAL STROMAL
4M).
G. THE BACKGROUND ENDOMETRIUM SHOWS COMPLEX ATYPICAL HYPERPLASIA.
H. ALL ADNEXAE ARE NEGATIVE FOR TUMOR.

COMMENT:

The recent endometrial curettage was interpreted as moderately differentiated adenocarcinoma
a few glands are identified in this tumor, more than 50% of the tumor shows solid growth pattern, and therefore graded
as FIGO grade III.

The companion pelvic wash cytology specimen is negative for malignancy.

MICROSCOPIC:

Microscopic examination substantiates the above diagnosis.

Antibody/Antigen	Result
CD31	Highlights endothelium and supports IHSI.
D2-40	Highlights lymphatic endothelium and supports lymphatic space invasion.
AE1/AE3	Highlights tumor cells within vessels.

Utilizing formalin-fixed (8-96 hour range), paraffin embedded tissue, immunohistochemistry is
performed with the following selected antibodies and designated antibody clone(s), tested
against the following antigenic target(s), with adequate positive and negative internal and
external controls. Antibodies are optimized appropriate for fixation times.

ANTIBODY	CLONE	TARGET ANTIGEN
CD 31	JC70	endothelium
D2-40	D2-40	Lymphatic Endothelium
AE1/AE3	AE1/AE3	carcinomas
Microsystems		
RB/ncs		

CASE SYNOPSIS:

SYNOPTIC - PRIMARY UTERINE ENDOMETRIAL CARCINOMA & CARCINOSARCOMA: HYSTERECTOMY

	SPECIMENS
TUMOR TYPE:	Endometrioid adenocarcinoma, NOS
HISTOLOGIC GRADE (epithelial neoplasm) [combined architectural and nuclear]:	Poorly differentiated (FIGO 3)
ARCHITECTURAL GRADE:	Poorly differentiated
NUCLEAR GRADE:	Grade 2
TUMOR SIZE:	Maximum dimension: 25 mm
PERCENT OF ENDOMETRIAL SURFACE INVOLVEMENT:	Anterior endomyometrium: 70 %, Posterior endomyometrium: 70 %
DEPTH OF INVASION:	Less than 1/2 thickness of myometrium
STRUCTURES INVOLVED:	Cervical stroma
ANGIOLYMPHATIC INVASION:	Yes
PRE-NEOPLASTIC CONDITIONS:	Complex endometrial hyperplasia with atypia
LYMPH NODES POSITIVE:	Number of lymph nodes positive: 0
LYMPH NODES EXAMINED:	Total number of lymph nodes examined: 14
T STAGE, PATHOLOGIC:	pT2
N STAGE, PATHOLOGIC:	pN0
M STAGE, PATHOLOGIC:	Not applicable
FIGO STAGE:	II

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case is (clinically) QUALIFIED / DISQUALIFIED		
Reviewer Initials	11/4/11	

PATIENT HISTORY:

CHIEF COMPLAINT/ PRE-OP/ POST-OP DIAGNOSIS: Endometrial cancer.

LMP DATE: Not provided

PROCEDURE: Total laparoscopic hysterectomy, bilateral salpingo-oophorectomy, pelvic and periaortic lymph node dissection,
cystoscopy.

SPECIFIC CLINICAL QUESTION: Not provided.

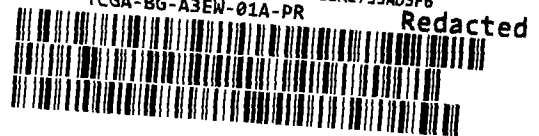
OUTSIDE TISSUE DIAGNOSIS: Not provided.

PRIOR MALIGNANCY: Not provided.

CHEMORADIATION THERAPY: Not provided.

OTHER DISEASES: Not provided.

UID: 8463CA05-339C-4AB9-A236-CEAE733A05F6
TCGA-BG-A3EW-01A-PR



ICD-0-3
Adenocarcinoma, Endometrioid, NOS
Site: Endometrium
CS 1
11/4/11
8380/3