Adenicarcinoma, Endometrioid, NOS 8380/3 12/9/10

Surgical Pathology Site Code, Endonetruum.

## TISSUE DESCRIPTION:

A1 J1 K1 L1 M1 M2 N1 O1 P1 P2 P3 Q1 Q2 R1 S1 B1 C1 C2 C3

C4 C5 C6 C7 C8 C9 C10 D1 D2 D3 D4 D5 D6 D7 D8 D9 D10 D11 E1 E2 E3 E4

E5 E6 E7 E8 E9 E10 E11 E12 F1 F2 G1 H1 I1

Uterus, right ovary (3.0 x 1.1 x 1.0 cm) with 9.0 cm segment of

right fallopian tube, and 4.2 cm segment of left fallopian tube

together weighing 120.0 grams; tissue from the bladder peritoneum

(2.0 x 0.6 x 0.3 cm); tissue from the left bladder peritoneum (0.8 x

 $0.5 \times 0.3$  cm); right and left pelvic lymph nodes; portion of omentum

 $(30.0 \times 18.0 \times 3.0 \text{ cm})$ ; separately submitted specimens from the

right colic gutter [No. 1 (0.6 x 0.4 x 0.2 cm), No. 2 (0.3 x 0.3 x

0.3 cm)], separately submitted specimens from the right diaphragm  $\,$ 

[No. 1 (0.3 x 0.3 x 0.2 cm), No. 2 (0.3 x 0.3 x 0.2 cm)]; right

gonadal vessels (8.2 cm in length); right para-aortic lymph nodes

above and below the inferior mesenteric artery; tissue from the left

colic gutter (1.5 x .11 x 0.4 cm); left gonadal vessels (9.0 cm in

length); left para-aortic lymph nodes above and below the inferior

mesenteric artery; and tissue from the small bowel mesentery (0.2 x 0.1 x 0.1 cm).

## DIAGNOSIS:

Uterus, hysterectomy: FIGO grade II (of III) endometrial adenocarcinoma, endometrioid type, forming a polypoid mass (6.0 x)

 $5.1 \times 1.2 \text{ cm}$ ) involving the entire uterine cavity and extending to

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the lower uterine cavity. The tumor invades 0.5 cm into the

myometrium (total myometrial thickness, 1.1 cm). A single intramural leiomyoma (0.2 cm in greatest dimension) is also

identified. The endocervical canal and ectocervix are negative for

tumor. The right ovary and bilateral fallopian tubes show

diagnostic abnormalities.

Peritoneum, bladder, biopsy: Positive for metastatic adenocarcinoma, consistent with endometrial primary.

Peritoneum, left bladder, biopsy: Negative for tumor.

Lymph nodes, right pelvic, excision: Multiple right pelvic lymph

nodes (4 external iliac, 2 common iliac, 3 obturator) are negative

for tumor. Specimen submitted as "right internal iliac lymph nodes"

did not contain nodal tissue

Lymph nodes, left pelvic, excision: Multiple left pelvic lymph

nodes (5 external iliac, 1 internal iliac, 4 common iliac,

obturator) are negative for tumor

Omentum, omentectomy: Fibroadipose tissue, negative for tumor

Soft tissue, right colic gutter Nos. 1 and 2, biopsies: Fibroadipose tissue, negative for tumor, both specimens

Soft tissue, right diaphragm Nos. 1 and 2, biopsies: Fibroconnective tissue, negative for tumor, both specimens (

Lymph nodes, left and right para-aortic above and below the inferior

mesenteric artery, excision: Multiple para-aortic lymph nodes above

the inferior mesenteric artery (7 left, 4 right) are negative for  $\frac{1}{2}$ 

tumor. Multiple para-aortic lymph nodes below the inferior

mesenteric artery (7 left, 5 right) are negative for tumor

Gonadal vessels, left and right, excision: The left and right

gonadal vessels are negative for tumor

Soft tissue, left colic gutter, biopsy: Fibroadipose tissue,

negative for tumor

Small bowel, mesentery, biopsy: Negative for tumor (

Small bowel, serosa, biopsy: Positive for metastatic adenocarcinoma

consistent with endometrial primary

Immunohistochemical studies for mismatch repair will be reported in an addendum.

## ADDENDUM:

Immunoperoxidase stains were performed on paraffinembedded tumor

sections (block C10). The neoplasm epithelial cells show intact

expression of DNA mismatch repair enzymes hMLH1, hMSH2, hMSH6 and  $\,$ 

hPMS2. These findings do not suggest defective DNA mismatch repair.

