-			.p.o. appt			
	8BBE-D458-44B2-8F7C-0185DD16D961 -AJ-A30K-01A-PR Redact	ed	p. D. appt 1 1CB-0-3 Carcinoma, serous, NOS 8441/3 Site indometrium CS4.1 Weg/2/12			
NAME DOB: SEX: AGE: ROOM	F		MR#: ACCT#: PT CLASS: CLINIC CODE: ADMIT DATE: DISCH DATE: RPT:			
	DING PHYSICIAN: TING PHYSICIAN: P		SURGERY CASE #:			
SURG	GERY CASE #:	INAL	Reviewed			
DATE	OF SURGERY:	=	2 V compoundation			
SURC	GEON:		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
?EC	IMEN:	A. B. C. D. E.	Pelvic washing with 1000 units of Heparin. Uterus, cervix, tubes and ovaries. Right pelvic lymph nodes. Right periaortic lymph nodes. Left pelvic lymph nodes.			
FROZEN SECTION DIAGNOSIS:		B.	Endometrioid adenocarcinoma. No definite myometrial invasion on frozen section. Endocervix grossly benign.			
OPEF	RATIVE PROCEDURE:		laparoscopic hysterectomy, bilateral salpingo-oophorectomy, lymph			
PREOPERATIVE DIAGNOSIS:		Endo	dissection/staging. ometrial cancer. ling pathology.			
****** E,	*****DIAGNOSIS********					
——,E. 1.	Type of Specimen and Procedure: Uterus, cervix, right and left fallopian tubes and ovaries, regional lymph nodes, and pelvic washings; Total laparoscopic hysterectomy, bilateral salpingo-oophorectomy and staging lymph node dissection.					
2.	Tumor Type: Serous papillary carcinon	na of er	ndometrium.			
3.	Grade: High grade by defini	tion				
4.	Depth of Invasion: The tumor invades the myo. A. The thickness of the		n to a depth of 2 mm, etrium in the area of maximum tumor invasion is 10 mm.			
5.	Lymphovascular Space Inve	olvemei	nt:Not identified.			
-	·	Surç	gical Pathology Consultation Page 1 of 4 PHYSICIAN COPY PHYSICIAN COPY Physician Malignancy History Prior Malignancy History			
			Jual/Synchronaus Primary Roted ase is faircle): QUATIEFD / ISQUALINE:: teview admitted Date-Reviewell 3///			

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NAME		MR#: PT CLASS:	ACCT#:
SEX: AGE: ROOM:	F. ************************************	CLINIC CODE: ADMIT DATE: DISCH DATE:	RPT:
	DING PHYSICIAN:	SURGERY CASE #	:
6.	Extent: A. Endocervical involvement: negative. B. Paracervical tissue involvement: neg C. Uterine serosa: negative. D. Fallopian tubes and ovaries: negative		
}	Margins: Negative.		
8.	Lymph Nodes: Negative. 14 right pelvic lymph nodes, no malignancy f 3 right periaortic lymph nodes, no malignancy 7 left pelvic lymph nodes, no malignancy fou Total 0/24.	y found (0/3).	
9.	Other Sites of Neoplastic Involvement: None.		
10.	Tissue Submitted for Estrogen and Progeste by (Block B5).	rone Receptor Assay; F	Results to be Reported Separately
11.	Tumor Size: The tumor measures 3 x 2 cm.		
12.	Tumor Site: Anterior and posterior endometrium.		
13.	 Additional Findings: Cervix with atrophy. (entire cervix exections) Cervix with endometriosis. Ovarian fibromas bilateral. Fallopian tubes with paratubal cysts. Pelvic washings: negative. 	amined and intradepart	mental consultation obtained.)
14.	Tumor Immunohistochemical Stains: P53: Diffuse strong nuclear staining.		
15.	TNM STAGING: pT1a: Tumor involves less than one-half pN0: No regional lymph node metastasis		
	Surgical Pall	nology Consultation	

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NAME DOB: SEX: AGE: ROOM:	F	MR#: PT CLASS: CLINIC CODE: ADMIT DATE: DISCH DATE:	ACCT#;			
	DING PHYSICIAN:	SURGERY CASE #:	·			
•	pMX: The metastasis cannot be as	sessed.				
A. B. C. D.	· · · · · · · · · · · · · · · · · · ·					
MICR	OSCOPIC EXAMINATION:					
A-E.	A microscopic examination was perfor	med to render the above diagn	osis.			
GROS	S:					
Α.	The specimen is received fresh in a single container, labeled with the patient's name and number, and marked as "pelvic washing with 1000 units of Heparin." It consists of approximately 25 cc of yellow watery fluid. Two cytospins are obtained.					
В,	The specimen is received fresh in a single container, labeled with the patient's name and number, and marked as "uterus, cervix, tubes and ovaries." It consists of a hysterectomy and bilateral salpingo-ophorectomy specimen weighing 62 grams. The uterus measures $6.8 \times 5 \times 2.5$ cm and is in continuity with the right $2.5 \times 1.5 \times 1$ cm, and left, $3 \times 1.3 \times 1$ cm ovaries, and the fimbriated right and left fallopian tubes, each 8×0.5 cm.					
	The entire anterior endometrial cavity up to 1.6 cm above the flat endometric endocervical canal. Further, there is nendocervical stroma. There is suggest which measures 1.1 cm in thickness, measuring up to 0.8 cm in largest diarcysts are present bilaterally.	al surface. Detached aggregate to grossly apparent extension ir stion of minimal superficial inva- The adnexa are grossly free of	s of tumor are found within the ito mucosa or underlying sion into underlying myometrium tumor. Solid fibrous nodules			
	Sections: #1 - Endometrium myometrium with to preparations are obtained. #2 - Paracervical tissue and ectocervi #3 through #6 - Tumor, full thickness, #7 - Random posterior endometrium rough #8 and #9 - Endocervical canal, anter	cal margins. myometrium. nyometrium.				

4	.					
NAME DOB: SEX: AGE: ROOM:	t.	MR#: PT CLASS: CLINIC CODE: ADMIT DATE: DISCH DATE:	ACCT#:			
	DING PHYSICIAN:	SURGERY CASE #:				
	#10 and #11 - Right and left adnexa, res	spectively.				
·:	Sections: +1 - Tangential ectocervical margins. +2 through +8 - Remainder of the cervix	k, submitted in its entirety.				
C.	The specimen is received fresh in a sing marked as "right pelvic lymph nodes." I aggregate 6.9 x 6.1 x 1.3 cm. The lympunremarkable. The lymph nodes are su	It consists of fibroadipose tissue for the nodes range in size from 0.2 to	agments with lymph nodes, in			
D,	The specimen is received fresh in a sing marked as "right periaortic lymph nodes nodes, in aggregate 3.8 x 4.2 x 1.3 cm. grossly unremarkable. The lymph node	s." It consists of fibroadipose tissu The lymph nodes range in size fi	ue fragments with lymph from 0.9 to 3.4 cm and appear			
E	The specimen is received fresh in a single container, labeled with the patient's name and number, and marked as "left pelvic lymph nodes." It consists of fibroadipose tissue fragments with lymph nodes, in aggregate 7.3 x 5.2 x 1.4 cm. The lymph nodes range in size from 0.4 to 3.3 cm and appear grossly unremarkable. The lymph nodes are submitted in two cassettes.					
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Distributi	ion: - · · · · · · · · · · · · · · · · · ·	Dictating Physician: Dictating Physician: Dictated: Job # Transcribed:				