Adenocaccinoma, indometrioid, NOS 8380/3 Site: Indometrium C54.1 2/25/11 he

Surg Path

CLINICAL HISTORY: Malignant neoplasm of corpus uteri

GROSS EXAMINATION:

A. "Uterus, cervix, bilateral tubes and ovaries", received fresh for frozen section and placed in formalin on is a 157 gm, $11.7 \times 6.5 \times 3.2$ cm hysterectomy specimen with attached right and left adnexa. The uterine serosa is tan-pink to red-brown and focally hemorrhagic. The cervix is 3.5 \times 2.7 cm. The ectocervical mucosa is gray-white, the cervical os is patent up to 1.2 cm. The endocervical canal is obliterated by a tan-yellow to red-brown necrotic fungating tumor mass which is 4.5×4 cm overall. The tumor mass involves both the anterior and posterior endocervical canal. A representative section of the anterior endocervical canal is submitted for frozen section as AF1, the frozen section remnant is submitted in block A1. The endometrial cavity is lined by tan granular endometrium which is 0.3 to 0.4 cm thick. The tumor is minimally involving the posterior lower aspect of the endometrial cavity. The endometrial cavity at the fundus displays a 3 \times 1.8 cm pedunculated polyp. Sectioning through the tumor reveals a tan-yellow to tan-gray gritty cut surface which is approximately 1.5 cm thick at the thickest myometrial region of up to 2 cm. The right ovary is $3.5 \times 1.2 \times 1$ cm. The external surface is remarkable for several red-brown to gray fibrous adhesions. The associated fallopian tube segment is 5 cm in length x 0.4 cm $\,$ in diameter. The serosal surface is remarkable for several intact paratubal cysts. The left adnexa is remarkable for an abundant amount of gray periadnexal soft tissue $4.8 \times 3.5 \times 2$ cm. There is a segment of fallopian tube which is 9 cm in length x 0.3 cm in diameter. Sectioning of the periadnexal soft tissue reveals no identifiable ovarian parenchyma. Representative sections submitted in blocks A1-A17.

BLOCK SUMMARY:

AI-	frozen section	remnant-anterior	lower utoring	segment-endocervical
	canal		TOWEL DIGITIE	segment-endocervical

A2anterior cervix

anterior lower uterine segment (longitudinal) A3-

A4posterior cervix

A5posterior lower uterine segment (longitudinal) A6-A7

anterior lower uterine segment adjacent to site of frozen section A8-A9

random sections of anterior endomyometrium

A10-A12 posterior endomyometrium full thickness

A13representative-posterior endomyometrium

A14endometrial polyp

A15right ovary and fallopian tube

A16-A17 left fallopian tube/questionable tissue/periadnexal soft tissue

INTRA OPERATIVE CONSULTATION:

A. "TAH and BSO": invasive adenocarcinoma into the deep muscle case discussed

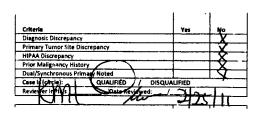
MICROSCOPIC EXAMINATION:

Microscopic examination is performed.

PATHOLOGIC STAGE:

PROCEDURE: Hysterectomy, bilateral salpingo-oophorectomy

PATHOLOGIC STAGE (AJCC 7th Edition): pT2 pNX pMX





NOTE: Information on pathology stage and the operative procedure is transmitted to this Institution's Cancer Registry as required for accreditation by the Commission on Cancer. Pathology stage is based solely upon the current tissue specimen being evaluated, and does not incorporate information on any specimens submitted separately to our Cytology section, past pathology information, imaging studies, or clinical or operative findings. Pathology stage is only a component to be considered in determining the clinical stage, and should not be confused with nor substituted for it. The exact operative procedure is available in the surgeon's operative report.

DIAGNOSIS:

A. "UTERUS, CERVIX, BILATERAL TUBES AND OVARIES" (HYSTERECTOMY, BILATERAL SALPINGO-OOPHORECTOMY):

ADENOCARCINOMA OF THE ENDOMETRIUM.

HISTOLOGIC TYPE: ENDOMETRIOID.

FIGO GRADE: 1 OF 3 (WELL DIFFERENTIATED). TUMOR SIZE: 4.5 X 4 CM.

DEPTH OF INVASION: 1.3 CM, IN A 1.5 CM THICK MYOMETRIUM.

LYMPHATIC/VASCULAR INVASION: ABSENT.

STATUS OF REMAINING ENDOMETRIUM: ENDOMETRIAL INTRAEPITHELIAL NEOPLASIA

(EIN).

MYOMETRIUM: NO PATHOLOGIC DIAGNOSIS.

CERVIX: POSITIVE FOR INVASIVE CARCINOMA.

SEROSA: ADHESIONS.

ALL SPECIMEN MARGINS ARE FREE OF TUMOR.

LEFT OVARY: ABSENT.

RIGHT OVARY: ADHESIONS, NO EVIDENCE OF MALIGNANCY.

RIGHT AND LEFT FALLOPIAN TUBES: NO EVIDENCE OF MALIGNANCY.

I certify that I personally conducted the diagnostic evaluation of the above specimen(s) and have rendered the above diagnosis(es).

