

1CD-0-3
uderoearcinema, endometrioid, NOS 8380/3
Site: Indometrium C54.1 hw 9/3/4

### SPECIMEN

- A. Uterus, bilateral tubes and ovaries, cervix
- B. Right pelvic lymph node
- C. Right periaortic lymph node
- D. Left pelvic lymph node
- E. Left periaortic lymph node

## CLINICAL NOTES

PRE-OP DIAGNOSIS: Endometrial carcinoma

#### GROSS DESCRIPTION

A. Received fresh for tissue procurement labelled "uterus, bilateral tubes and ovaries, cervix" is a 119 gram, 5.5 x 4.5 x 4.5 cm symmetrical uterine corpus with attached 2.8 cm cervix and bilateral adnexa. The serosa is smooth tan-pink-red. The circular 3.7 cm white-pink ectocervix surrounds a 0.4 x 0.3 cm evoid

patent os. Endocervical mucosa is moderately trabecular tan-pink with a moderate amount of adherent blood-tinged mucus. The triangular, 4.5  $\times$  3.9 cm uterine cavity contains a copious amount

ectophytic soft pale tan tumor. The tumor dominates within the anterior uterine cavity extending to the anterior lower uterine segment. A portion of tumor and a portion of normal endometrium

submitted for tissue procurement as requested. On sectioning, the tumor has a maximal thickness of 2.5 cm, grossly involving the upper

one-third of the myometrium anteriorly. The scanty normal-appearing

endometrium is flat, tan-pink with an average thickness of 0.2 cm.
The myometrium is smooth to mildly trabecular tan-pink and measures up to 2.9 cm in thickness. A few well-circumscribed rubbery

tan-white-pink intramural leiomyomata measuring up to 1.3 cm in greatest dimension are present. Bilaterally, the tan-pink-gold ovaries average 2.3 x 1.4 x 0.9 cm. The stroma of both ovaries is tan-pink with identifiable corpora albicantia. The fimbriated tan-pink right and left fallopian tubes average 6.3 cm in length

0.5 cm in diameter with pinpoint to stellate lumina on sectioning.

#### GROSS DESCRIPTION

in

Representative sections are submitted in 14 blocks as labelled. RS-14.

BLOCK SUMMARY: 1 - anterior cervix; 2 - anterior LUS (point of continuity with cervix inked blue); 3-6 - representative anterior endomyometrium including lesion full-thickness sequentially from fundus to LUS; 7 - posterior cervix; 8 - posterior LUS (point of continuity with cervix inked black); 9-12 - representative posterior

endomyometrium including lesion full-thickness sequentially from fundus to LUS; 13 - right tube and ovary; 14 - left tube and ovary.

- B. Received fresh labelled "right pelvic lymph node" is a 5.4 x 3.6 x 1.9 cm aggregate of fragmented soft lobulated gold and yellow adipose tissue. Several soft to slightly rubbery tan-pink-gold tissues in keeping with lymph nodes measuring up to 1.6 cm in greatest dimension are recovered. The lymphoid tissues are entirely submitted in four blocks as labelled. RS-4. BLOCK SUMMARY: 1 five whole nodes; 2 two whole nodes; 3-4 one bisected node per cassette.
  - C. Received fresh labelled "right periaortic lymph node"

is a 2.4 x 2.0 x 1.3 cm aggregate of soft, lobulated gold and yellow adipose tissue. Two slightly rubbery tan-pink-red tissues

keeping with lymph nodes measuring 0.3 and 0.6 cm in greatest dimension are recovered. The lymphoid tissues are entirely submitted in one block. AS-1.

- D. Received fresh labelled "left pelvic lymph node" is a 5.2 x 4.2 x 1.7 cm aggregate of soft, lobulated gold and yellow adipose tissue. Several soft tan-pink-gold tissues in keeping with lymph nodes measuring up to 2.9 cm in greatest dimension are recovered. The lymphoid tissues are entirely submitted in three blocks as labelled. RS-3.

  BLOCK SUMMARY: 1 three whole nodes; 2 five whole nodes; 3 bisected largest node.
  - E. Received fresh labelled "left periaortic lymph node" is

## GROSS DESCRIPTION

a  $2.3 \times 1.9 \times 0.6$  cm aggregate of soft, lobulated gold and yellow adipose tissue. Three soft tan-red tissues in keeping with lymph nodes measuring up to 0.6 cm in greatest dimension are recovered. The lymphoid tissues are submitted in toto in one block.

RS-1.

## MICROSCOPIC DESCRIPTION

Histologic type: Endometroid adenocarcinoma with squamous differentiation.

Histologic grade: Well differentiated (FIGO grade 1).

Myometrial invasion:

1 cm. depth of invasion

2.5 cm. depth of myometrial thickness

40% of myometrial wall

Cervix: Free of involvement by tumor.

Primary tumor (pT) TNM (FIGO): Tumor involves less than one half

the myometrium (pTlb) (IB).

Margins of resection: Negative.

Vascular invasion: Negative.

Regional lymph nodes (pN): Right and left pelvic lymph nodes and right and left periaortic lymph nodes are negative for metastatic carcinoma (pN0).

Distant metastasis (pM): Can not be assessed. (pMx).

Other findings: Leiomyomata.

5, 4x4

# DIAGNOSIS

A. Uterus, bilateral fallopian tubes and ovaries, hysterectomy and bilateral salpingo-oophorectomy:

Invasive well differentiated endometrioid adenocarcinoma with

## DIAGNOSIS

squamous differentiation involving the inner 40% of the myometrium.

The uterine cervix, both fallopian tubes and ovaries are free of involvement by tumor. Leiomyomata.

- B. Lymph nodes, right pelvic, resection: Nine lymph nodes negative for metastatic carcinoma (0/9).
- C. Lymph nodes, right periaortic, resection: Two lymph nodes negative for metastatic carcinoma (0/2).
- D. Lymph nodes, left pelvic, resection: Nine lymph nodes negative for metastatic carcinoma (0/9).
- E. Lymph nodes, left periaortic, resection: Two lymph nodes negative for metastatic carcinoma (0/2).

M.D. (Electronic Signature)

--- End Of Report ---

Criteria

Diagnosis Discrepancy

Primary Tumor Site Discrepancy

HiPAA Discrepancy

HiPAA Discrepancy

Dual/Synchronous Primary Noted

Case is (circle):

CHALISTED

Discrepancy

Discrepancy

Dual/Synchronous Primary Noted

Data Bandana Dual/Sinchronous Primary Noted

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