



RUN DATE: [REDACTED]  
RUN TIME: [REDACTED]  
RUN USER: [REDACTED]

Specimen Inquiry

PATIENT: [REDACTED]	ACCT #: [REDACTED]	LOC: [REDACTED]	U #: [REDACTED]
REG DR: [REDACTED]	AGE/SX: [REDACTED]	ROOM: [REDACTED]	REG: [REDACTED]
	DOB: [REDACTED]	BED: [REDACTED]	DIS: [REDACTED]
	STATUS: [REDACTED]	TLOC: [REDACTED]	

SPEC #: [REDACTED] COLL: [REDACTED] TIME IN FORMALIN: [REDACTED] hrs.

CLINICAL INFORMATION:

Pre-Op Diagnosis:

Remarks:

- Specimen(s):
- A. Uterus, tubes and ovaries
  - B. Left side parametria
  - C. Right parametria
  - D. Pelvic and low lymph node, right
  - E. Pelvic and low lymph node, left
  - F. Uterine surface

*ICD O-3*  
*Carcinoma, endometrioid NOS*  
*8380/3*  
*Site: Endometrium*  
*154.1*  
*JW 4/2/13*

MICROSCOPIC DIAGNOSIS

- A. UTERUS, TUBES AND OVARIES:
  - ENDOMETRIOID ADENOCARCINOMA
  - SEE COMMENT FOR DETAILS
- B. LEFT SIDE PARAMETRIA:
  - NO SIGNIFICANT HISTOPATHOLOGIC CHANGE
- C. RIGHT SIDE PARAMETRIA:
  - ONE REACTIVE LYMPH NODE
- D. RIGHT PELVIC LYMPH NODE DISSECTION:
  - THREE REACTIVE LYMPH NODES
- E. LEFT PELVIC LYMPH NODE DISSECTION:
  - THREE REACTIVE LYMPH NODES
- F. POSTERIOR UTERINE SURFACE:
  - ENDOMETRIOID ADENOCARCINOMA

COMMENT(S)

PROTOCOL FOR EXAMINATION OF SPECIMENS WITH CARCINOMA OF THE ENDOMETRIUM

BASED ON AJCC/UICC TNM, 7TH EDITION

The following classification should be adjusted based on clinical and operative findings.

SPECIMEN: Uterine corpus, cervix, right ovary, left ovary, right fallopian tube, left fallopian tube, left parametria, right parametria, lymph nodes, posterior uterine surface

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Specimen Inquiry

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SPEC #:

PATIENT:

(Continued)

COMMENT(S)

(Continued)

PROCEDURE: biopsy  
Robotic-assisted radical hysterectomy, bilateral  
salpingo-oophorectomy and pelvic lymphadenectomy

LYMPH NODE SAMPLING: Performed, pelvic lymph nodes

SPECIMEN INTEGRITY: Intact hysterectomy specimen

TUMOR SIZE: Greatest dimension: 4.0 cm

HISTOLOGIC TYPE: Endometrioid adenocarcinoma

HISTOLOGIC GRADE: FIGO grade 1

MYOMETRIAL INVASION: Present  
Depth of invasion: 2 mm  
Myometrial thickness: 19 mm  
(10% myometrial invasion)

INVOLVEMENT OF CERVIX: Not involved

EXTENT OF INVOLVEMENT OF  
OTHER ORGANS: Right ovary: not involved  
Left ovary: not involved  
Right fallopian tube: not involved  
Left fallopian tube: not involved  
Uterine surface biopsy: involved  
Right parametria: not involved  
Left parametria: not involved

LYMPH-VASCULAR INVASION: Not identified

PATHOLOGIC STAGING: Primary tumor: pT3a  
Regional lymph nodes: pN0  
Number of lymph nodes examined: 7  
Number of lymph nodes involved: 0

ADDITIONAL PATHOLOGIC FINDINGS: Cervicitis, leiomyomas, ovarian/fallopian tube adhesions

GROSS DESCRIPTION:

A. Received fresh for gross evaluation labeled with the patient's name and designated "uterus, tubes and ovaries" is a 141 gram, 8.0 x 5.5 x 3.5 cm uterus. The uterus is received with the attached bilateral fallopian tubes and ovaries and weighed with the tubes and ovaries removed. The serosa is smooth, and there is a right, pedunculated 4.5 x 4.5 x 4.0 cm subserosal mass near the adnexal attachment. The uterine serosa is otherwise smooth and unremarkable. There is focal ecchymotic hemorrhage on the ectocervix. The ectocervix has a 1.0 cm slit-like os. The uterus is bivalved to have a fungating, polypoid appearing tumor mass in the fundus. The mass is 4.0 x 4.0 x 1.0 cm and is predominantly posterior. The tumor comes to within 4.0 cm of the cervical os. The tumor appears superficial and does not appear to involve or invade the myometrium. The myometrium averages 2.0 cm both anterior and posterior, and there are multiple intramural submucosal circumscribed white whorled leiomyomata. The intramural leiomyomata range up to 1.5 cm and have focal peripheral calcifications. No areas of hemorrhage or necrosis are identified. The endometrium adjacent to the polypoid tumor area averages 0.1 to 0.2 cm. The right fallopian tube is fimbriated and is a tortuous 5.0 x 4.0 cm. The adjacent ovary is 2.8 x 1.4 x 1.4 cm and has superficial fibrous adhesions. The ovary is sectioned to have an unremarkable, yellow tan stroma with focal corpora albicantia. The left fallopian tube is fimbriated and is 5.0 x 0.5 cm. The left ovary is 2.0 x 1.4 x 1.3 cm and has focal

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Specimen Inquiry

SPEC #: [REDACTED] PATIENT: [REDACTED] (Continued)

GROSS DESCRIPTION: (Continued)

superficial adhesions. The ovary is sectioned to have a yellow tan fibrous stroma with multiple corpora albicantia. There is a focal clear 0.5 cm cyst at one pole. Representative sections are sampled as labeled:

- 1 - sections of cervix
- 2-3 - full thickness perpendicular cross sections of anterior and posterior endocervix
- 4-5 - full thickness sections of anterior endometrium to myometrium to include tumor
- 6-7 - posterior full thickness sections to include tumor sampled
- 8 - largest intramural, focally calcified leiomyoma sampled
- 9 - largest pedunculated subserosal leiomyoma sampled
- 10-11 - right and left fallopian tube and ovary sampled

Received in 5 additional parts. Each part is in formalin and labeled with the patient's name.

B. Part 2 labeled "left parametrium" is a 1.2 x 1.0 x 0.8 cm portion of yellow adipose. The biopsy is bisected and entirely submitted in cassette B1.

C. Part 3 labeled "right parametrium" is a 1.7 x 1.0 x 0.8 cm portion of fatty fibroconnective tissue. The specimen is bisected and entirely submitted cassette C1.

D. Part 4 labeled "right pelvic lymph node" is a 3.8 x 2.0 x 1.8 cm portion of yellow adipose. The adipose is trimmed to have three nodular, fatty lymph nodes. The two smaller lymph nodes will be submitted in toto cassette D1 with the larger, 2.0 cm lymph node trisected and entirely submitted in cassette D2.

E. Part 5 labeled "left pelvic lymph node" is a 3.0 x 2.0 x 1.8 cm aggregate of yellow, lobulated adipose. The adipose is sectioned to have three possible lymph nodes. The nodes range up to a flattened 1.4 cm. The two smaller lymph nodes are submitted in toto E1 with the largest node serially sectioned and entirely submitted E2.

F. Part 6 labeled "posterior uterine surface" are two friable fibroconnective tissue biopsies, which are 0.6 cm and 1.3 x 0.5 x 0.4 cm. The tissues are submitted in toto cassette F1.

INTRAOPERATIVE CONSULTATION:

- A. UTERUS, GROSS EXAM:
- Superficial polypoid thickening of the endometrium measuring approximately 4 x 4 cm
  - Tumorous tissue appears limited to the surface with no obvious invasion on gross exam
  - Findings reported in person to \_\_\_\_\_ at approximately \_\_\_\_\_

Signed \_\_\_\_\_ (signature on file) \_\_\_\_\_

\*\* END OF REPORT \*\*

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
HIPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case is (circle): QUALIFIED / DISQUALIFIED		
Reviewed: [Signature]	Date Reviewed: 3/15/13	