

Criteria	Yes	No
Diagnosis Discrepancy		
Primary Tumor Site Discrepancy		
IPAA Discrepancy		
Prior Malignancy History		
Dual/Synchronous Primary Noted		
Case is (circle):		
Reviewer Initials		
Date Reviewed		
QUALIFIED		
DISQUALIFIED		

Surg Path

CLINICAL HISTORY:

Malignant neoplasm of the corpus uteri.

GROSS EXAMINATION:

A. "Uterus, cervix, bilateral tubes and ovaries (AF1)". Received fresh is a 55.5 gram, 8.6 x 5.5 x 2.5 cm uterus with bilateral adnexa. The opened specimen reveals a tan exophytic endometrial tumor (anterior and posterior endometrium) that diffusely involves the entire cavity and invades 1.2 cm into the 1.7 cm thick myometrium. Anteriorly the tumor extends to within 0.2 cm of the internal cervical os. The cervix and paracervical soft tissue are unremarkable. The remainder of the myometrium and cervical surface of the uterus are also unremarkable. The right ovary and fallopian tube (2.1/5 cm) contain a 0.6 cm ovarian surface nodule that has a white cut surface. The remainder of the right ovary contains multiple cysts. The fallopian tube is unremarkable. The left ovary and fallopian tube (1.5 cm/4 cm) are unremarkable.

BLOCK SUMMARY:

- A1- frozen section remnant AF1.
- A2- tumor with maximal depth of invasion (from anterior endomyometrium).
- A3- anterior cervix.
- A4-A5- posterior endomyometrium with tumor.
- A6- posterior cervix.
- A7- right fallopian tube and ovary.
- A8- left fallopian tube and ovary.

B. "Left pelvic node". Received fresh and placed in formalin is a 4 x 4 x 2 cm aggregate of tan fibrofatty tissue. Multiple lymph node candidates are dissected out (1.5 cm).

BLOCK SUMMARY:

- B1- three lymph node candidates.
- B2- two lymph node candidates.
- B3- two lymph node candidates.
- B4- two lymph node candidates, bisected (one blue).

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TCGA-B5-A11L-01A-PR

Redacted



C. "Right pelvic node". Received fresh and placed in formalin is a 5.5 x 4 x 2 cm aggregate of fibrofatty tissue. Multiple lymph node candidates are found up to 2 cm.

BLOCK SUMMARY:

- C1- two lymph node candidates.
- C2- two lymph node candidates.
- C3- one lymph node candidate.
- C4- one lymph node candidate.

D. "Omentum". Received fresh and placed in formalin is a 10 x 8 x 2 cm aggregate of adipose tissue. The specimen is grossly unremarkable. Representative sections are submitted in [redacted]

INTRA OPERATIVE CONSULTATION:

A. "Uterus, bilateral tubes and ovaries":

- AF1 (anterior endomyometrium, full thickness)-
adenocarcinoma, FIGO grade 2 & area suspicious for serous carcinoma
invades 0.5 cm in 2.2 cm thick myometrium (cervix neg) (Dr

MICROSCOPIC EXAMINATION:

Microscopic examination is performed.

PATHOLOGIC STAGE:

PROCEDURE: HYSTERECTOMY, OOPHORECTOMY & LYMPHADENECTOMY

PATHOLOGIC STAGE (AJCC 6th Edition): pT1c pN0 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: 56 GRAMS

ENDOMETRIUM:

TUMOR SITE: DIFFUSE

HISTOLOGIC TYPE: ENDOMETRIOID ADENOCARCINOMA.

FIGO GRADE: 2

TUMOR SIZE: 6 X 3.5 X 2 CM (INVOLVES ENTIRE CAVITY).

MAXIMUM DEPTH OF MYOMETRIAL INVASION: 1.7 CM, IN A 2 THICK WALL.

LYMPHATIC/VASCULAR INVASION: NOT IDENTIFIED

ADJACENT NON-NEOPLASTIC ENDOMETRIUM: NA

REMAINING MYOMETRIUM: NO PATHOLOGIC DIAGNOSIS

CERVIX: NO PATHOLOGIC DIAGNOSIS

SEROSA: NO PATHOLOGIC DIAGNOSIS

SPECIMEN MARGINS: NOT INVOLVED

SPECIMENS FREE OF TUMOR:

A. OVARIES AND FALLOPIAN TUBES, BILATERAL

B. LEFT PELVIC NODE: NO TUMOR IN 9 LYMPH NODES (0/9).

C. RIGHT PELVIC LYMPH NODE: FAT ONLY

D. OMENTUM: NO PATHOLOGIC DIAGNOSIS

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

[REDACTED]

[REDACTED]

ADDENDUM 1:

The remainder of the tissue in container C is submitted in block C5-C8. Because of prior dissection of this tissue, it is difficult to know exactly how many lymph nodes are present in these additional blocks, but there are four lymph node profiles without evidence of carcinoma. In addition, the original slides are reviewed from part C, C1-C4, are reviewed. In total, there are eight lymph nodes, with no evidence of metastatic carcinoma (0/8).

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

[REDACTED]

[REDACTED]

CI ADDENDUM 1:

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

[REDACTED]