

1CD-0-3

adenocarcinoma, endometrioid, NOS 8380/3

9196817048

p.1

Site: Endometrium c541

4/7/11 *fw*
 UVID:1EB80878-50FF-4E79-AF16-E809E6EE7DEC
 TCGA-B5-A0JU-01A-PR

Redacted



CLINICAL HISTORY:

Abnormal uterine bleeding, post menopausal. Malignant neoplasm corpus uteri.
 Per E-browser, EMB-endometrioid adenocarcinoma FIGO 1.

GROSS EXAMINATION:

A. "Uterus, cervix, bilateral tubes and ovaries (AF1-2)", received fresh for frozen section is a 194 gram, 12.2 x 17.6 x 4.3 cm uterus with attached bilateral ovaries. The anterior resection margin is inked blue and the posterior resection margin is inked black. The uterus (119 gram, 12.2 x 11.2 x 4.3 cm) has a tan-pink, smooth serosa and a 1.1 cm patent cervical os with grossly unremarkable mucosa. The uterus is opened to reveal a 7.2 x 4.9 x 2.5 cm polypoid, fungating, tan-brown mass with hemorrhage located primarily in the anterior endometrial cavity and extending approximately 1.5 cm into the posterior cavity. The mass involves the anterior lower uterine segment, however, is not grossly invasive. The maximum thickness of tumor is 2.2 cm and grossly invades the myometrium, 0.4 cm of 2.2 cm. The tumor does not appear to grossly invade the endocervical canal. The uninvolved endometrium is 0.1 cm thick, tan-brown, and grossly unremarkable. The remainder of the myometrium is grossly unremarkable. A full-thickness representative section of the anterior endomyometrial mass is bisected and frozen as AF1-2. The frozen section remnants are submitted in blocks A1-2, respectively.

BLOCK SUMMARY:

- A3- anterior cervix
- A4- posterior cervix
- A5-6- full-thickness mass anterior lower uterine segment, bisected
- A7- full-thickness posterior lower uterine segment
- A8-9- full-thickness mass
- A10- additional full-thickness section posterior endomyometrium

Also received is a 5 x 0.5-1 cm right fallopian tube with attached mesentery and 2.2 x 1.6 x 0.5 cm tan-yellow, cerebriform ovary. The fallopian tube has a tan-brown, glistening serosa, and sectioning reveals a complete, patent lumen. The cut surface of the ovary is grossly unremarkable without masses. Representative sections of fallopian tube and ovary are submitted in block A11.

The left fallopian tube measures 6 x 0.6-1.2 cm and has attached mesentery and a 2.9 x 2.5 x 0.8 cm, tan-yellow, cerebriform ovary. Sectioning the fallopian tube reveals a markedly dilated lumen (1.2 cm) with yellow-red fluid. Sectioning of the ovary reveals a grossly unremarkable cut surface without masses. Representative sections of the fallopian tube and ovary is submitted in block A12.

B. "Left pelvic lymph node", received fresh and placed in formalin is a 7.2 x 2.8 x 2.4 cm aggregate of pink-yellow soft tissue that is dissected for lymph node candidates. Lymph node candidates are submitted as follows:

BLOCK SUMMARY:

- B1- two lymph node candidates, one inked blue
- B2-3- one lymph node candidate, cut into four sections
- B4-5- one lymph node candidate, cut into four sections
- B6- two lymph node candidates, one inked blue and bisected
- B7- one lymph node candidate, bisected
- B8- one lymph node candidate, bisected
- B9- one lymph node candidate, bisected

Criteria	Yes	No
Diagnosis Discrepancy		<input checked="" type="checkbox"/>
Primary Tumor Site Discrepancy		<input checked="" type="checkbox"/>
HIPAA Discrepancy		<input checked="" type="checkbox"/>
Prior Malignancy History		<input checked="" type="checkbox"/>
Dual/Synchronous Primary Tumor		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewer Initials	<i>Kmt</i>	
Date Reviewed	4/7/11	

B10- one lymph node candidate, trisected

C. "Right pelvic lymph nodes", received fresh and placed in formalin is a 5.5 x 2.7 x 1.9 cm aggregate of pink-yellow soft tissue. The soft tissue is dissected for lymph node candidates, five lymph node candidates are identified and submitted as follows:

- C1-2- one lymph node candidate, cut into four sections
- C3- one lymph node candidate, cut into four sections
- C4- lymph node candidates
- C5- lymph node candidates
- C6-8- one lymph node candidate, cut into four sections

INTRA OPERATIVE CONSULTATION:

A. "Uterus, cervix, bilateral tubes and ovaries": AF1-2- (anterior endomyometrial tumor)-
1- endometrioid
adenocarcinoma, 2- FIGO
grade 2, 3- invasion 0.5
cm of 2.7 cm

MICROSCOPIC EXAMINATION:

Microscopic examination is performed.

DIAGNOSIS:

A. "UTERUS, CERVIX, TUBES, AND OVARIES (AF1-2):

UTERUS: 119 GRAMS

ENDOMETRIUM:

TUMOR SITE: DIFFUSE (LARGEST MASS ANTERIOR)

HISTOLOGIC TYPE: ENDOMETRIOID ADENOCARCINOMA.

FIGO GRADE: 2

TUMOR SIZE: 7.2 X 4.9 X 2.5 CM.

MAXIMUM DEPTH OF MYOMETRIAL INVASION: 0.5 CM, IN A 2.7 THICK WALL.

LYMPHATIC/VASCULAR INVASION: NEGATIVE

ADJACENT NON-NEOPLASTIC ENDOMETRIUM: ATROPHIC

REMAINING MYOMETRIUM: ADENOMIOSIS

CERVIX: NO EVIDENCE OF INVASION

SEROSA: FREE OF TUMOR.

SPECIMEN MARGINS: NOT INVOLVED

RIGHT AND LEFT OVARIES: NO PATHOLOGIC DIAGNOSIS, AND NO EVIDENCE OF MALIGNANCY.

RIGHT AND LEFT FALLOPIAN TUBES: CHRONIC SALPINGITIS AND HEMATO-HYDROSALPINX, NO EVIDENCE OF MALIGNANCY.

B. "LEFT PELVIC LYMPH NODES":

TEN LYMPH NODES, NEGATIVE FOR CARCINOMA (0/10)

C. "RIGHT PELVIC LYMPH NODES":

SEVEN LYMPH NODES. NEGATIVE FOR CARCINOMA (0/7)

COMMENT: The pathologic stage of tumor is pT1b, pN0, pMx.

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

CI ADDENDUM 1:

Please see Image Cytometry Report [REDACTED] results of supplementary tests.

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

Performed by: [REDACTED]

Ordering MD: [REDACTED]