

SURGICAL PATHOLOGY:

PROCEDURE DATE: RECEIVED DATE: REPORT DATE:

COPY TO:

Pre-Op Diagnosis
Grade III endometrial cancer
Post-Op Diagnosis
Same as above
Clinical History
Nothing indicated
Gross Description:
Five parts

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		<input checked="" type="checkbox"/>
Case is (circle):	QUALIFIED	DISQUALIFIED
Reviewed by:	10/31/11	10/31/11

Container labeled "1 - uterus, cervix, bilateral tubes and ovaries" has a previously laterally opened, moderately distorted uterus with attached cervix and bilateral adnexa. The uterus and cervix together weigh 75 grams and on reconstruction measure approximately 7.4 x 5.0 x 3.2 cm. The cervix has a wrinkled gray-tan ectocervical mucosa. The os is patent. The uterine canal sounds to a depth of approximately 5.5 cm. The endocervical canal is lined by trabeculated gray-brown mucosa. The uterine serosa is smooth and tan-brown. The myometrium measures up to 2.0 cm and is gray-pink and fibrotic with a few intramural well defined tan-white fibrous nodules with bulging whorled tan-white fibrotic cut surfaces measuring up to 0.5 cm. The endometrial canal is lined by less than 0.1 cm of smooth brown mucosa. Noted in the left cornual region, extending onto the fundus in the posterior aspect, over an area of approximately 2.2 x 1.5 cm, is a gray-tan slightly lobulated plaque-like area of discoloration. On sectioning, in the cornual region this plaque measures focally up to 0.6 cm. This grossly

1CD-0-3

adenocarcinoma, endometroid, NOS 8380/3
Site: endometrium C54.1 10/31/11

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TCGA-AJ-A3EM-01A-PR



Redacted

extends into the myometrium w/ it is seen at its nearest point 0.9 cm from the nearest posterior fundic serosa. The parametrial soft tissue on each side shows no nodularity or gross lesion. The left fallopian tube measures 6.5 x 1.1 x 1.1 cm and has a smooth tense outer surface with closed rounded distal end. The wall is gray-tan and fibrotic with the proximal portion of the tube having a pinpoint lumen. In the mid and distal half the lumen dilates and contains gray-tan papilliferous tissue which does not grossly appear to extend into the wall. There is a small amount of transparent viscid fluid associated with this region. The left ovary is 2.4 x 1.8 x 1.0 cm and has a lobular tan-yellow outer surface with a mottled tan-gray fibrotic cut surface. The right fallopian tube measures 4.5 x 1.0 x 1.0 cm and has a smooth gray-tan serosa with a closed rounded distal end. On sectioning, there is a tan wall with a pinpoint lumen near the proximal end. In the mid and distal areas there is gray-tan papilliferous tissue with a small amount of viscid clear fluid. The right ovary measures 2.2 x 2.0 x 1.4 cm and has a lobular gray-tan outer surface with a mottled gray-tan fibrotic cut surface. Also received in the same container are three tissue cassettes each labeled "Representative sections are submitted labeled as follows: A - anterior cervix; B - posterior cervix; C - lower uterine segment shaved posterior serosa; D-H - anterior endomyometrium; I-M - posterior endomyometrium; N-O - left lateral endomyometrium; P-Q - right lateral endomyometrium; R-V - fundic endomyometrium; W - left parametrium; X - right parametrium; Y - left fallopian tube; Z - left ovary; AA-BB - right fallopian tube from proximal to distal; CC - right ovary.

Container labeled "[REDACTED] 2 - right aortic lymph nodes" has 4.0 x 3.1 x 0.9 cm of tan-yellow fibroadipose tissue fragments which on palpation and sectioning reveal several poorly defined tan-yellow nodules up to 1.8 cm. On sectioning, the largest nodule has a fleshy cut surface. The largest nodule is bisected and submitted labeled A. Remaining nodules are submitted labeled B.

Container labeled "[REDACTED] 3 - left common iliac nodes" has 3.1 x 2.2 x 0.6 cm of tan-yellow fibroadipose tissue fragments which on palpation and sectioning reveal a few poorly defined tan-yellow nodules up to 0.7 cm. The nodules are entirely submitted in a single cassette.

Container labeled "[REDACTED] 4 - right pelvic lymph nodes" has 8.0 x 4.5 x 2.4 cm of tan-yellow fibroadipose tissue fragments which on palpation and sectioning reveal two poorly defined tan-yellow nodules, 3.0 and 4.2 cm. On sectioning, these have fleshy tan-pink cut surfaces with a large amount of intervening yellow adipose tissue. The smaller portion is bisected and submitted labeled A-B. The larger portion is sectioned and submitted labeled C-G.

Container labeled "[REDACTED] 5 - left pelvic lymph nodes" has 7.6 x 6.0 x 2.8 cm of tan-yellow fibroadipose tissue fragments which on palpation and sectioning reveal four poorly defined tan-yellow nodules, from 2.5 to 4.6 cm in greatest dimension each. On sectioning, these have fleshy tan-gray cut surfaces with a large amount of intervening yellow adipose tissue. The smallest portion is bisected and submitted labeled A. The next largest portion is sectioned and submitted labeled B-C. The second largest portion is sectioned and submitted labeled D-F. The largest portion is sectioned and submitted labeled G-J.

Microscopic Description:
See diagnosis.

Final Diagnosis

Uterus, tubes, and ovaries, radical hysterectomy:

Tumor characteristics:

Histologic type: Endometrioid carcinoma.

Grade: 3 (high grade).

Location: Endometrial cavity and superficial myometrium.

Malignancy extends up to 5 mm into an 18 mm thick myometrium.

Extension of tumor: No involvement of endocervical canal or lower uterine segment is identified.

Lymphovascular space invasion: Not identified.

Surgical margin status:

Cervix: Negative.

Left parametrial: Negative.

Right parametrial: Negative.

Lymph node status (specified sites):

See parts 2 through 5.

Number of lymph nodes examined (total): 18.

Number of lymph nodes containing metastatic carcinoma: 0.

Other:

Vagina:

Not resected.

Cervix:

Squamous metaplasia, negative for malignancy.

Endocervix:

No pathologic diagnosis, negative for malignancy.

Endometrium:

Background hyperplasia is present.

Myometrium:

Adenomyosis is present.

Leiomyomata.

Uterine serosa:

Endometriosis, focal, negative for malignancy.

Ovaries:

Endometriosis, focal, left ovary, negative for malignancy.

Fallopian tubes:

Changes consistent with remote bilateral tubal ligation, negative for malignancy.

pTN stage: pT1b, N0

Lymph nodes, right aortic, excision:

Negative for malignancy, eight nodes.

Lymph nodes, left common iliac, excision:

Negative for malignancy, four nodes.

Lymph nodes, right pelvic, excision:

Negative for malignancy, two nodes.

Lymph nodes, left pelvic, excision:

Negative for malignancy, four nodes. PAS 9

CPT:

Comments

No prior material is identified in our files for review and comparison. The malignancy would be classified as grade 2 based on the growth pattern. There is, however, marked nuclear pleomorphism and a high mitotic rate raising the classification to grade 3.

At the request of the undersigned pathologist, these slides have

been additionally reviewed by D [REDACTED] who concurs with the diagnosis.

This report has been finalized at the [REDACTED]

<Sign Out Dr. Signature>